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TRAINING MANUAL ON  
HEALTH MANPOWER MANAGEMENT  
(HMM)

GENERAL MANAGEMENT MODULE B :  
ORGANIZATIONAL CHANGE

For a 2<sup>1</sup>/<sub>2</sub> to 3-day workshop to promote better  
Health Manpower Management

Division of Health Manpower Development  
World Health Organization  
Geneva  
1988

This document is part of a Training Manual on Health Manpower Management (HMM). The following Modules are available from the World Health Organization:

Introductory Module

Health Manpower Management for Health For All WHO/EDUC/88.195

Functional Modules

1. Leadership in HMM	WHO/EDUC/88.195 Add.1
2. Employment Practices in HMM	WHO/EDUC/88.195 Add.2
3. Staff Development in HMM	WHO/EDUC/88.195 Add.3
4. Management/Staff Relations in HMM	WHO/EDUC/88.195 Add.4

General Management Modules

A. Problem-Solving	WHO/EDUC/88.195 Add.5
B. Organizational Change	WHO/EDUC/88.195 Add.6
C. Evaluation	WHO/EDUC/88.195 Add.7

They may be obtained from:

The Responsible Officer  
Health Manpower Management  
World Health Organization  
1211 Geneva 27, Switzerland

General Introduction  
to  
THE TRAINING MANUAL ON  
HEALTH MANPOWER MANAGEMENT

The complete Training Manual on Health Manpower Management (HMM) is designed to assist middle and senior health managers of all professions to raise the quality of HMM as a vital contribution to the worldwide achievement of Health for All.<sup>1</sup>

This assistance is offered through a series of training modules primarily for use in regional, national and local workshops. These comprise:

An Introductory Module on Health Manpower Management for Health for All, with a General Guide for Tutors;

Functional Modules on:

1. Leadership in HMM
2. Employment Practices in HMM
3. Staff Development in HMM
4. Management/Staff Relations in HMM

which include the principal elements involved in managing people within these four broad functions; and

General Management Modules on:

- A. Problem-Solving
- B. Organizational Change
- C. Evaluation

which are of general application in management as a whole, rather than specific to manpower management.

See Table 1 for the framework of links between Introductory, Functional and General Modules in this Training Manual on HMM.

See Table 2 for a list of typical HMM problems discussed at the Interregional Consultation on Strengthening Health Manpower Management (at Bangalore, India (1983) and Tashkent, USSR (1985)), where the need for this Manual was first identified. Each of the numbered problems illustrates just one aspect of the corresponding elements which form the four HMM functions of Table 1.

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<sup>1</sup> Global Strategy for Health for All by the Year 2000, launched by the World Health Organization in 1979, Resolution WHA32.30, was formally adopted by the World Health Assembly in 1981, Resolution WHA34.36.

The HMM Training Manual's overall objectives are to enable participants to:

1. explain the role of HMM, as a major part of health manpower development (HMD), both in relation to the Global Strategy for Health for All and in its potential contribution to their own countries' national health development;
2. give a clear account of current ideas and trends in manpower management - within and outside the health sector - as they relate to health system problems;
3. show a significant increase in practical ability in the HMM functions of Leadership, Employment Practices, Staff Development and Management/Staff Relations; and in the various elements which comprise each of these four functions;
4. identify key opportunities for actions aimed at solving HMM problems;
5. show familiarity with problem-solving techniques which could be used for analyzing current situations, generating and selecting options for solving problems, and planning and evaluating the necessary action for implementing necessary change in HMM functioning;
6. explain and justify their intentions for seeking a higher standard of HMM at their own places of work.

Within this framework each of the modules has its own specific learning objectives and all necessary materials for the preparation, conduct and follow-up of 1-day to 4-day workshops, including session plans, tutor's notes, a variety of case studies and practical exercises, lecture/reading notes, visual aids and evaluation instruments; all in a health care context.

The aim is to combine detailed practical help in holding such training events with wide flexibility for local choices to be made about their content and duration in response to local needs and opportunities.

Throughout the HMM Training Manual there is a special emphasis on planning and taking action for improved performance in the management of people so that when participants return to work they can apply what they have learned to real tasks and problems in continuation of their practice during the training.

#### Notes on this Manual

This General Introduction is repeated in every module of the HMM Training Manual for ease of reference to the framework and objectives of the Manual as a whole.

The word manual is used to identify the complete HMM training package or series. This comprises one introductory, four functional (specific to manpower management functions) and three general management training modules, which are linked but self-contained collections of learning materials with associated objectives and notes for organizers and tutors. Guidance is given for the use of each module in workshops, which are short, intensive, participative, work-related training events. They are likely to have an early and substantial impact on the quality of HMM; but the modular materials are capable of being used selectively and with necessary adaptation, in other settings orientated to HMM such as study days, self-instruction, general management training, correspondence teaching and qualification courses.

Throughout the manual, "he" and "his" should be taken to include "she" and "her".

TABLE 1: The Framework linking HMM Functional Modules with the Introductory and General Modules

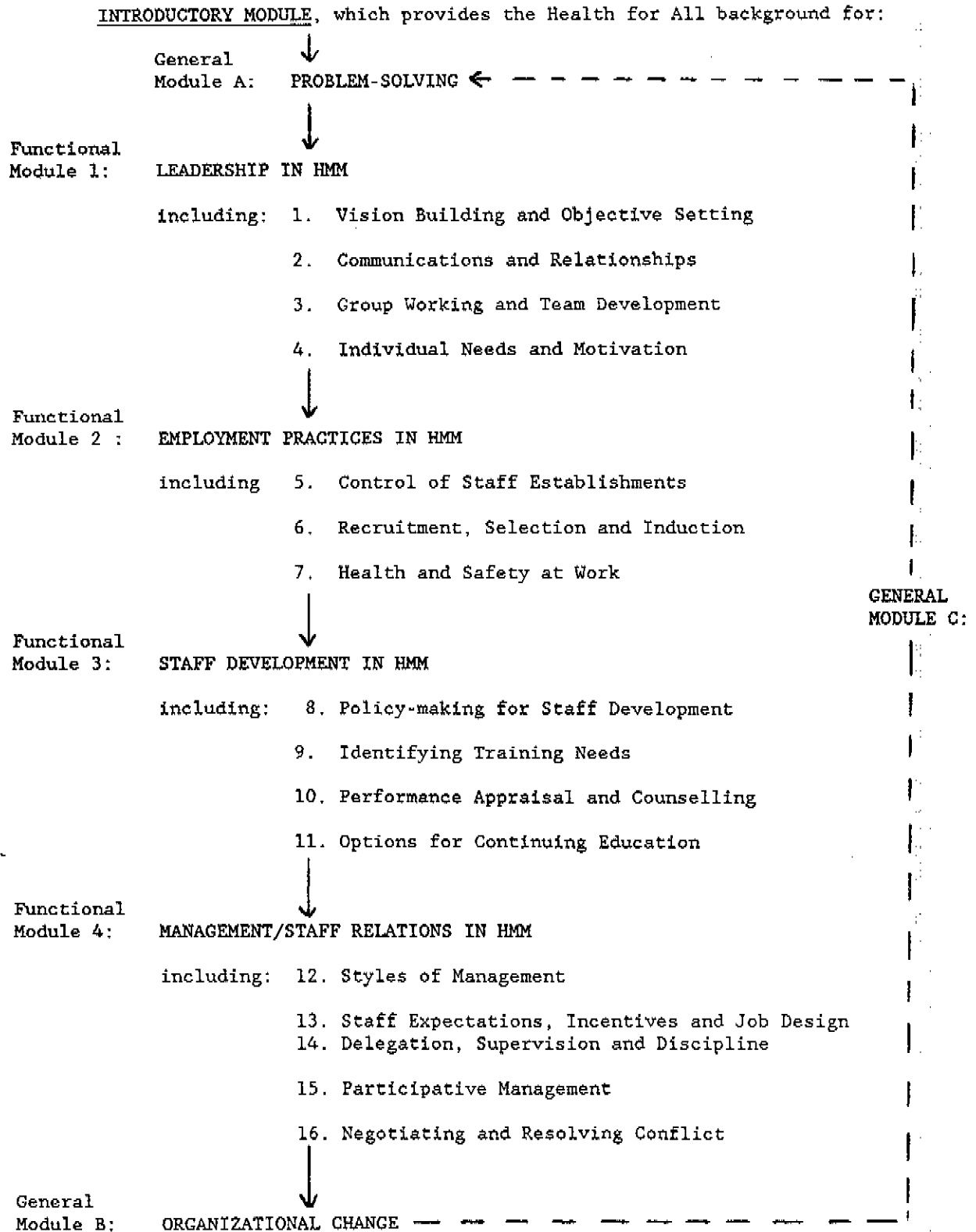


TABLE 2: Typical Problems in Health Manpower Management

1. Absence of a clear view by managers of the purpose and future of the organization
2. Staff who are uncertain what their work is expected to contribute to the organization's objectives
3. Staff who need to work together closely, yet do not form a real team
4. Staff who are often absent or late and have little personal commitment to the work of the organization
5. Inadequate arrangements for maintaining the necessary numbers and types of staff within available funds
6. Unsatisfactory procedures for selecting new staff and familiarizing them with their work
7. Little attention to the health and safety of staff at their place of work
8. Absence of a clear policy in the organization for the training and development of its staff
9. No systematic way of identifying the needs of staff for further training in the light of the organization's plans and problems
10. No realistic assessment of the performance of staff in a way that encourages good work and helps to remedy weaknesses
11. Limited or unfairly distributed opportunities for the continuing education and training of staff
12. Styles of management which fail to encourage good relations between management and staff
13. Inability to match the work to be done with the reasonable expectations of staff for job satisfaction
14. Difficulties that prevent managers from remedying low standards of work amongst their staff
15. No effective arrangement for involving staff in the making of decisions that affect the way the organization works
16. Damaging conflict between individuals and departments without recognized means of resolving such disputes.

# TRAINING MANUAL ON HEALTH MANPOWER MANAGEMENT

## General Management Module B:

### ORGANIZATIONAL CHANGE

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#### Notes on the Module

For background and notes affecting the complete Training Manual on Health Manpower Management (HMM) please see the preceding pages.

Organizational change is required most often in taking action to remedy problem situations, or to achieve desirable planned improvements such as those arising from a study of the HMM functional modules. It is therefore concerned principally with the implementation, within the organization, of action found to be necessary, and should consequently follow after one or more of the functional modules, just as problem-solving should normally precede them. In fact it is designed to be used many times to assist in taking effective action, using a different problem or plan each time.

Throughout the module 'he' and 'him' should be taken to include 'she' and 'her'.

## WHO TRAINING MANUAL ON HMM

### ORGANIZATIONAL CHANGE

#### SECTION 1. INTRODUCTION

The overall aim of this module is to introduce health manpower managers to some ideas and techniques for effective organizational change, which may be generally defined as:

|| the process of planned transition from a present unsatisfactory situation ||  
|| in the organization towards an improved future. ||

There is a great deal of such change needing to be successfully managed in health organizations. Some changes make their impact from outside, such as trends in the age structure and health risks of the community served; or in the population's greater expectations of the health services; or in the health and financial policies of governments or aid agencies; or in the possibilities for treatment offered by new medical technology or computers. Other pressures for change arise from the aspirations of people within the organization itself, such as in hospital medical staff attitudes towards Primary Health Care (PHC) or the desire of community health workers for greater recognition; or more generally from the efforts of health professionals and managers to find better ways of caring - and organizing that care - for patients and communities; or from plans in particular situations for new services or buildings or equipment or techniques. Other changes are required simply to solve the numerous problems that prevent the health organization from functioning properly and improving its standards. And there is the largest and most urgent pressure of all for change, implied in the international community's commitment to Health for All.

Consequently the health manager, at any level, who cannot successfully manage change in his organization, or his portion of it, has no power to play his part in adapting it to meet changing needs and circumstances. Indeed many would say that the manager should be judged primarily by the value of the changes he has made, or helped to make, because that is his job more than it is anyone else's job.

For that kind of change-making contribution at the organizational level, where successful change is complex and challenging because many systems and people are involved, the health manager must acquire the concepts and skills of organizational change.

#### The Contribution of Organizational Change to HMM

Ultimately any organization - but particularly a human service organization such as a PHC programme or a health centre or a hospital - consists of people: the structure and procedures, the systems and task allocations, will only function properly through the people who do the work. So it is self-evident that organizational changes can only be achieved through the management of people (staff, manpower) which is the role of the health manpower managers using this module.

You have, we hope, identified many changes that you want to achieve in your organization's HMM as a result of using previous modules in this series. Organizational change abilities assist you in converting such general hopes and intentions into positive and permanent improvements in HMM; such changes themselves depend on your understanding, skill and judgement in managing people.

But the contribution of organizational change to HMM goes beyond specific improvements in local staff management. The whole movement for Health for All through Primary Health Care requires massive changes in the way health workers (as well as politicians and citizens generally) think and function. Such changes include their education and training, their objectives and tasks, their methods and place of work. This is the major challenge to all health manpower managers - to become more proficient in specific HMM functions but also in problem-solving and organizational change so that their HMM proficiency is successfully applied - and the commitment of their staff is fully achieved - in the total drive towards Health for All. If HFA cannot be reached by well-managed health manpower it cannot be reached at all.

### The Learning Objectives

Within this wider context, the learning objectives are that, by the end of a 2<sup>1</sup>/<sub>2</sub> to 3-day workshop based on this module, participants should be able to demonstrate that they have:

- gained an understanding of organizational change based on two alternative approaches:
  - . a 'now - then' approach
  - . an 'open systems planning' approach
- learned and practised the skill of writing scenarios (word 'pictures' of alternative future situations);
- analyzed various models and techniques for creating effective change.

If these learning objectives are achieved, and followed by further practice, there should be a noticeable improvement in the ways in which participants subsequently manage organizational changes at their place of work, through a better defined vision of the future; improved planning of the change; a more realistic assessment of how people can be encouraged to change; and more confident use of the techniques involved in all this.

Although all the modules are inter-related, there are specially close links between those on Organizational Change and Problem-Solving (General Management Module A), where the 8-stage framework has already introduced in stage 6 (Action Planning) and stage 7 (Taking Action) some basic ideas about the management of change, which are being given much more detailed attention in this Module, which concentrates on quite complex organizational changes.

### The Use of this Module

This Module links the classroom with the workplace by focusing attention on how to put into practice the organizational changes that participants have been considering whilst working through previous modules.

It is therefore essential that participants bring to the workshop an organizational change problem. Such a problem should have the following characteristics:

- (1) It should relate to HMM.
- (2) It should require a change in the organization involving two or more organizational systems, that is, other units or departments or services are affected.
- (3) It should be possible for the participant to do something about the change.
- (4) The participant should be willing to share the problem with others.

There are many sources for problems requiring changes of this nature, including: participants' own experience and work situations; the HMM problems listed in Table 2 of the General Introduction as being typical of HMM; the four specific HMM case study/exercises presented in Section 2 of the General Management Module on Problem-Solving; and the personal action plans for improving HMM that participants have been forming as a result of their attendance at any of the HMM functional modules in this Manual. The organizational change problem chosen by each participant is likely to be most suitable if he has sufficient familiarity with it in order not to be delayed by the need for additional information.

The learning materials which follow in Section 2 comprise a series of participative exercises to reinforce the ideas and information outlined in the handouts/lecture notes, which will be supported by the tutor's viewfoils and discussed fully.

The Module's Section 3 (detailed step-by-step Notes for Tutors) and Section 4 (questionnaires for evaluation) are for organizers and tutors only. They are advised to modify, substitute or remove particular learning materials, or parts of them, to make the Module more helpful to the participants; and to arrange starting and finishing times to suit local preference. It follows from this that the duration of the workshop is flexible. It is therefore described as of 2<sup>1</sup>/<sub>2</sub> to 3 days, reflecting the possibility that the organizers may decide that time is required to work more slowly and have more practice in the vital skills of organizational change.

## ORGANIZATIONAL CHANGE

### SECTION 2. THE LEARNING MATERIALS

This section of the Module contains the following learning materials. Do please check that you have them all.

LM.1 Problems of Organizational Change - Exercise

LM.2 Models for Change - Handout

LM.3 Sharing Change Problems - Exercise

#### Open System Planning

LM.4 Core Mission - Handout

LM.5 Establishing the Present Demand System - Handout

LM.6 The Doom Scenario - Handout and Exercise

LM.7 The Ideal Scenario - Handout and Exercise

#### Transition Management

LM.8 Managing the Change - Handout

LM.9 The 7 'S' Framework - Handout

LM.10 Commitment Planning - Handout

LM.11 Readiness and Capability to Change - Handout

LM.12 The Change Equation - Handout

LM.13 Force Field Analysis - Handout

LM.14 Preparing the Transitional Plan - Exercise.

LM.1 PROBLEMS OF ORGANIZATIONAL CHANGE - EXERCISE

AIM

The aim of this exercise is to consider the management of organizational change.

STRUCTURE

The exercise is undertaken in groups of 6 or 7.

PROCEDURE

Each group should address the following problem:

Consider some recent examples of organizational change within your own health organization that affected its functioning in some way.

Describe in what ways such changes were successful or unsuccessful and try to analyze the causes.

TIMING

There are 45 minutes for the exercise. The rapporteur should be prepared to report back on your findings.

LM.2 MODELS FOR CHANGE - Handout

1. INTRODUCTION

It is valuable to have a clear approach to organizational change, particularly in complex health care organizations. This note proposes two approaches. The first called "Now - Then" is more useful for relatively straightforward change problems. The second, "open systems planning", is appropriate when the change problem is more complex. For example, it could be used when organizational units are being reviewed for their effectiveness; or when some external force is inevitably going to create changes within a unit.

2. "NOW - THEN" APPROACH

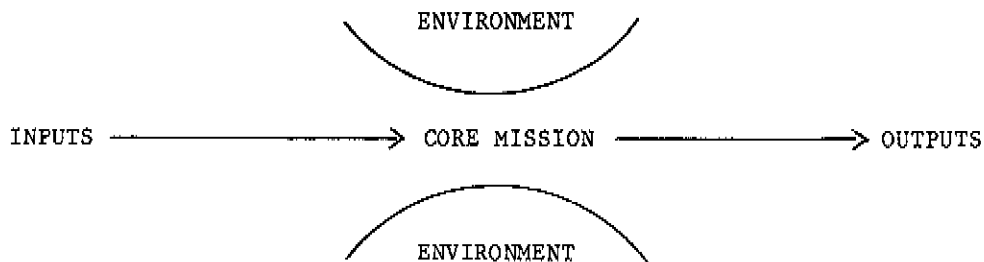
This is a two-stage approach. It often begins when a manager has a vision or picture of a future he wants for his department or organizational unit. The first step is to describe what this vision means in terms of policies, resources, attitudes, skills and practices. The result should be a comprehensive picture of the future; in other words an ideal scenario.

The second step is to discover what is happening now. This often requires careful investigation and analysis. Do not just believe that what is supposed to happen, does happen. As time passes many small changes may have been made about which management could be unaware.

The third step is a comparison of "Then" with "Now". This will demonstrate what needs changing. This transition state is the same for both the "Now - Then" approach and the "open systems planning" approach.

3. OPEN SYSTEMS PLANNING

Open systems planning is based on the following model:-



This describes how an organization has a core mission (its reason for existence) and receives inputs which are translated in some way to become outputs. But the organization exists within an environment that impacts upon it. The environment both makes demands upon the organization as well as responding to it.

The open systems planning approach "maps" the key demands and responses in terms of:-

What happens now (present)

What will happen if no changes are made (doom)

What ideally should happen (ideal).

An important part of open systems planning is gaining clarity about the core mission.

#### 4. CONCLUSION

This note has introduced two approaches to organizational change. The "Now - Then" approach is sufficiently straightforward to need little further explanation. A word of warning though is necessary. The approach may appear simple but it requires both imagination and analytical ability to use. Imagination is needed for constructing the picture of the future; analytical ability to discover what is happening now. And both situations need to be described as comprehensively as possible.

The "Open Systems" approach is a little more complex and future notes in this module will describe some of its features more fully.

Also do not forget that both approaches only set up the dynamics for change; the actual change state or transition needs to be described and future notes will do this.

LM.3 SHARING CHANGE PROBLEMS - EXERCISE

AIM

The aim of this exercise is to start the process of planning organizational change through participants sharing with each other their change problems.

STRUCTURE

The exercise is done in pairs with each pair member taking it in turn to act as consultant/adviser to his colleague. When in this role he should test out the ideas of his colleague to make sure that they are realistic and practical. He should at all times try to be helpful and critical only in a constructive way.

PROCEDURE

Each pair member should share with his colleagues the nature of the organizational change problem that he has already identified as the one he wishes to work on. No attempt should be made to try and discover the causes of the problem or possible solutions. All that is important is for his colleague to understand all the dimensions of the problem and to make sure that he similarly has taken into account all these dimensions when describing the problem.

TIMING

There are 45 minutes for this pair discussion. It will not be necessary to report back on the outcomes of the discussion.

OPEN SYSTEMS PLANNING

LM.4 THE CORE MISSION - Handout

1. INTRODUCTION

This note is the first concerned with open systems planning and discusses the concept of "core mission".

2. THE CORE MISSION

Identifying the "core mission" of an organization is a bit like trying to answer the question "What business are we in?"

Such a question goes to the very heart of the purpose of the organization. The answer to the question is the "core mission". It is the reason why the organization exists.

It can be argued that organizations exist for many purposes - to heal the sick; to prevent sickness; to train doctors; to provide employment. But if priorities are to be allocated in terms of resources, energies, then there needs to be the touchstone of one "core" purpose which will enable decisions on such matters of priority to be made.

3. WHO DECIDES?

The core mission is decided upon by top management. There needs to be agreement to the decision as well otherwise activities may well diverge from the mainstream purpose.

4. A SENTENCE

It should be possible to define the core mission in one sentence without conjunctions. If conjunctions have to be used, then the described missions need to be prioritized.

It takes careful thought to decide on the "core" mission. The decision can have major implications for the future of the organization, and the management of any change.

OPEN SYSTEM PLANNING

LM.5 ESTABLISHING THE PRESENT DEMAND SYSTEM - Handout

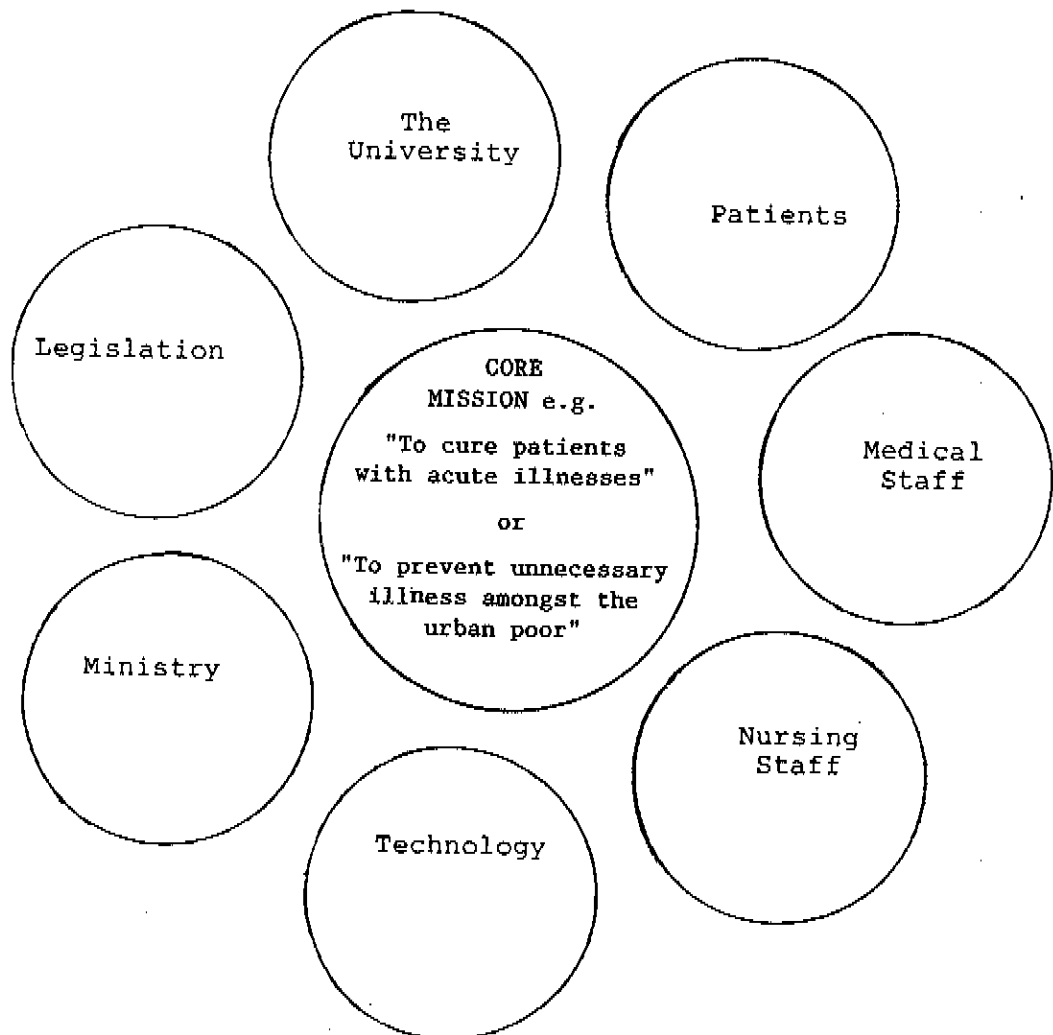
1. INTRODUCTION

Establishing the present demand system is the second step in open systems planning after agreement has been reached on the core mission. Its purpose is to determine as explicitly as possible the nature of the existing environment within which the organization is having to conduct its business.

2. DOMAINS

If you were to think of the organization's core mission as being at the centre of a number of pressures or demands being made upon it, you could visualize a "map" of the following configuration, perhaps.

(The basis for the following example is that some change has to be made in the way that the objectives relating to the core mission are achieved, because of, for example, new medical technology or unacceptably low immunization rates.)



Having drawn up the map identifying the six or so key "domains" that surround the mission, the next step is to make explicit what demand or demands each domain will make on the organization and its mission.

It is sometimes easier to do this if the domains are "personalized" so that the demand can be phrased in terms of what it might be saying. For example, in the above illustrations the "Patients" domain might be demanding as follows:

"I demand that I do not have to wait longer than four weeks for admission".

or

"We the urban poor demand to be protected against preventable diseases".

Then the typical response to this demand should be identified and written down.

The sum of these demands and responses provide the basis for writing the "present scenario"; that is the environmental context in which the change is to take place.

OPEN SYSTEMS PLANNING

LM.6 THE DOOM SCENARIO - Handout and Exercise

INTRODUCTION

All organizations, and particularly health care organizations, are affected by many forces from both within and outside. Internal forces could be the creation of a new building or a department or the addition of new staff. External forces could be the changing demands that patients and others are placing upon hospitals and health care systems. There is always a constant interaction between the organization and these forces. Unless management respond to these forces the organization might move towards a crisis where it no longer can cope with the demands being placed upon it. It is useful, therefore, to consider just what might happen if no attempt were made to cope with changes. This is known as writing a "doom" scenario.

WRITING A SCENARIO

A way of writing the scenario is to think of your organization or part of the organization as being in the centre of a number of other systems which place demands upon it. For example, the hospital's medical records system has demands placed upon it by consultants, by patients, by nursing staff, by hospital administrators, by legislation, by technology, and so on. Consider in what way these systems make the demands and how the organization responds to these, for example, the consultants may demand that all case notes are available at the clinic when they see patients. The medical records department might respond to these demands currently by providing 60% of these case notes because the other 40% get lost. Another example might be that legislation is demanding that case notes are kept secure and confidential at all times. The medical records department might be responding to this demand by not keeping case notes under such stringent conditions of security. In undertaking the demand/response analysis do not forget to assess what the causes are of unsatisfactory responses, and to make a note of these as this will help you in deciding what needs to be changed. This analysis creates the present scenario.

The doom scenario extrapolates these demands and responses into the future and anticipates what might happen unless change is brought about, particularly if the demands change and become more stringent. Such a doom scenario should create a level of dissatisfaction. It could be summarized as being "The Projected Future - What our world will look like if we don't do something about it". Stress dissatisfaction of the present to make even more attractive the vision of the future.

EXERCISE - WRITING THE DOOM SCENARIO

AIM: The aim of this exercise is to give participants an opportunity to practise doom scenario writing.

STRUCTURE: The exercise is done in the same pairs as previously.

PROCEDURE: Each individual, with the help of his colleague, should identify the demands being placed upon the organization that he sees as needing to change and the organization's current response to such demands. He should then extrapolate these into the future and write, say, a page of notes setting out his doom scenario.

TIMING: Ninety minutes is allowed for this exercise.

OPEN SYSTEMS PLANNING

LM.7 THE IDEAL SCENARIO - Handout and Exercise

1. INTRODUCTION

Just as the doom scenario is aimed at increasing the dissatisfaction, the ideal scenario is aimed at providing the vision.

2. WRITING THE IDEAL SCENARIO

Use the demand/response analysis that helped you write the doom scenario but this time describe what the ideal responses should be to the demands. In doing this, do not forget to include the responses to potential changes in demand on the organization.

Set out as specifically as possible these responses and work out what has to be done to achieve them. Think through what changes will be necessary in terms of people's knowledge, attitudes, skills, methods of working, organizational systems, style, technology and resources. Make sure that the vision or model of the future is comprehensive, covering both what needs to be done and how it is to be done. Your diagnosis of causes of unsatisfactory responses will help in discovering what needs changing.

EXERCISE - WRITING THE IDEAL SCENARIO

AIM

The aim of this exercise is for participants to describe how they would wish the future to be.

STRUCTURE

The exercise is done in existing pairs.

PROCEDURE

Each individual should set down the ideal scenario for how he would like things to be once the changes have been brought about. This should be in terms of demand/response analysis as before.

TIMING

You have 90 minutes for this exercise.

TRANSITION MANAGEMENT

LM.8 MANAGING THE CHANGE - Handout

INTRODUCTION

Defining where you want to be, and analyzing where you are will give you some commitment and energy to make changes. But this in itself is insufficient. To move from the present to the future needs planning and careful management. This is the process called "transition management".

OBJECTIVE AND PLANS

A key aspect of transition management is clarity about purpose (objectives) and the logic of a plan. The following section suggests an approach to setting objectives. Drawing up a plan is basically a straightforward process in which the various events are put into a timetable. However, many changes are actually quite complex and it may be useful to draw up a critical path network to show how various activities relate one to another, particularly where some actions are dependent on other actions already having been taken.

It is beyond the scope of these notes to describe how a critical path network is constructed. If the plan is complex, it is suggested that the "change manager" uses the services of an expert in drawing up such a plan.

HIERARCHY OF OBJECTIVES

Organizational change is normally so complex and difficult that it is useful to try and organize a plan in terms of objectives. Set out below are four levels of objectives which you may find useful in helping you through your change plan.

- a) Aspirations - These tend to be very long term, open ended, couched in general terms, and relate closely to the vision.
- b) Strategic Goals - These are time bound, realistic and are expressions of what has to be by year X (5 or more years ahead) of we are to reach the aspirations. Here there could be a mixture of business, organizational and value based objectives. In a large complex organization, agreement about the strategic goal provides the sense of direction and framework within which individual units can operate. These goals should focus on establishing what has to be done long term in order to achieve the organization's desired position opposite the macro trends and pressures of the environment.
- c) Tactical Goals - These focus on a time position, halfway between the present and the timing of the strategic goals. Agreement on tactical goal is the main tension-setting and energy-generating process. The goals are time bound, specific, and responsibility for their achievement clearly and publicly agreed or allocated.
- d) First Steps - These are the immediate things that have to be done and agreement on them has the purpose of making action legitimate.

By using these definitions, it should be possible to set objectives relating to the achievement of change and the resolution of problems.

TRANSITION MANAGEMENT

LM.9 THE 7 'S' FRAMEWORK - Handout

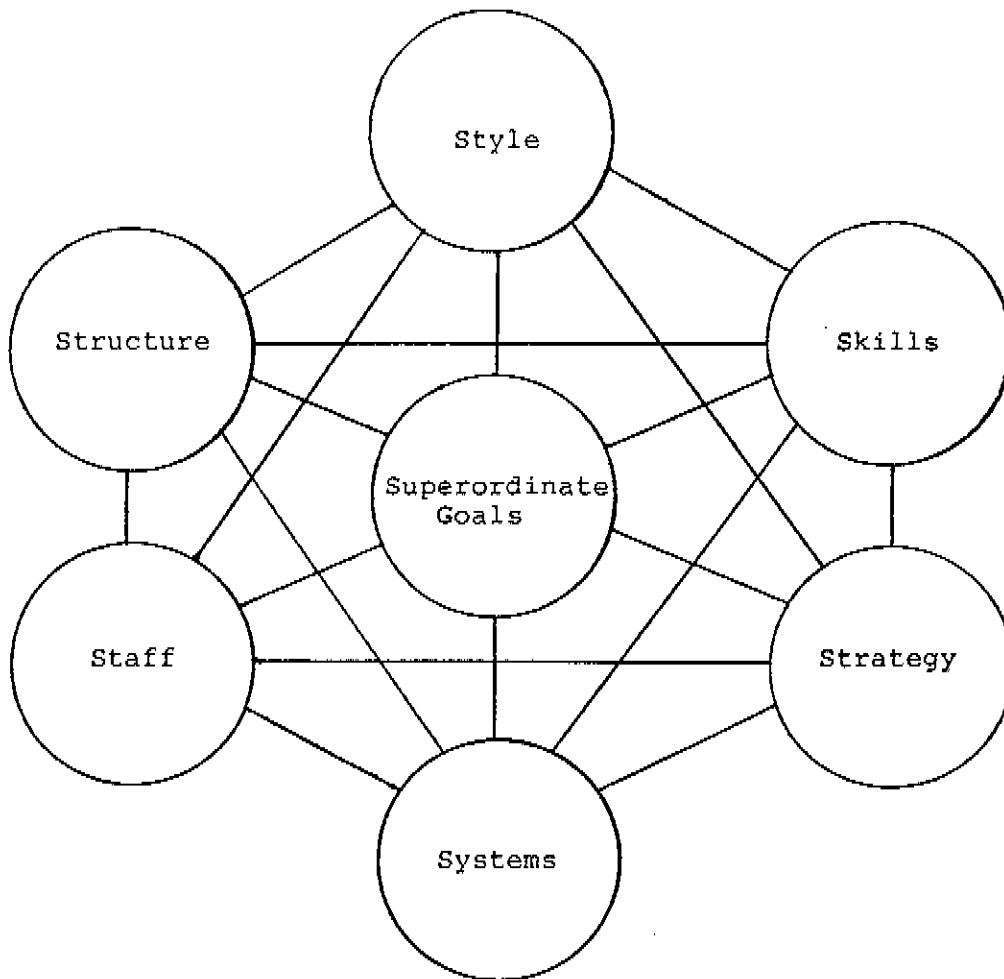
1. INTRODUCTION

Organizations are a set of complex relationships with many of them dependent on others. If you change one part of the organization, this is likely to have an effect on many other parts. The 7 'S' framework is a good way of tracing through the effects of change in one part on other parts.

The framework was developed by Waterman, Peters and Phillips (1980).

2. THE FRAMEWORK

The framework is best described as the following picture:



Change can be externally driven by forces impacting upon the organization. For example, a shortage of skills may require changes in systems of work and style of supervision.

Change can also be internally generated when, for example, new information systems are to be implemented throughout the organization.

### 3. EXPLAINING THE ELEMENTS

#### i) Superordinate Goals

Superordinate goals embody the vision and mission of the organization. They describe what the organization is there to do and how it intends to do it. Superordinate goals include the often implicit assumptions by which people in the organization relate to the outside world.

#### ii) Structure

Structure describes how the various organizational components relate to each other. Structure is often depicted in formal organizational charts showing lines of accountability and responsibility.

#### iii) Strategy

Strategy is the implementation of plans aimed at improving the performance of the organization. Strategies are developed in response to potential or actual changes in the environment.

#### iv) Systems

Systems describe how things are made to happen and are controlled within the organization. There can be formal systems where rules and procedures are written down (e.g. Health and Safety System). There can also be informal systems which individuals and work groups set up to regulate their own behaviour and actions.

#### v) Style

Style describes the way management, and especially top management, conducts itself.

Style is essentially a behavioural phenomenon and can be observed by what management does to make things happen, rather than by saying what it does. "Actions speak louder than words" enables a diagnosis of "style" to be made.

#### vi) Staff

"Staff" describes the "people" orientation of the organization. Organizational change is bound to affect people. The way in which people are managed and developed through the change describes this "S" of the framework clearly. The management of "staff" is of vital concern in both times of change and stability.

#### vii) Skills

It is very probable that an organizational change will demand new skills of its people. For example, it is of little value to introduce a new piece of equipment without training people to use it properly.

### 4. CONCLUSION

The 7 'S' framework is an aid to analysis. Organizational change is complex and difficult. By using the framework it is possible to identify how change in one aspect can affect the other aspects. You can, therefore, anticipate likely problems and prepare for these before they become critical and possible impediments to change.

TRANSITION MANAGEMENT

LM.10 COMMITMENT PLANNING - Handout

1. Introduction

Just as in any effort aimed at moving from one state to another, a number of activities have to be performed (e.g. cooking the Sunday lunch). These activities must be sequenced appropriately otherwise the objective of a lunch appearing complete and on the table by 13h00 will not be achieved.

When the move from one state to another requires shifts in people's behaviour, the problem is more complex and contingencies have to be catered for.

To avoid too many occasions when unplanned and unsought for effects occur, it is useful to try and gauge how likely the individuals are to change their views and become committed to the end state.

This note focuses on how to gauge commitment and increase it where necessary, as well as suggesting the criteria for a sequence for transition activities.

2. Getting Commitment

First analyze what you consider to be the current state of commitment to the change. You need a "critical mass" of committed people to move the change along.

Next consider in what ways commitment can be enhanced and finally work out how you can tell whether there is commitment from your target group.

In time order the process looks like this:

- Decide whose commitment is essential
- Decide how many people form the critical mass
- Decide the state of each individual's commitment level
- Decide how to increase commitment (if necessary)
- Assess as you go whether resistance to the change outweighs the support for it.

3. Assessing "Commitment" Level

Consider four levels of commitment:

- no commitment
- willing to let the change happen
- willing to support the change
- willing to make the change happen

Then in chart form use these levels to check off each individual's state, e.g.

Change problem: Installing a new catering system

Individual	Oppose	Let	Support	Make
Catering Officer				x
Kitchen Superintendent				x
Head Porter		x		
Shop Steward	x			
Individual staff etc.	marks vary from individual to individual but are all charted			

This analysis then enables you to decide on whom to work to build up their commitment.

#### 4. Building Commitment

In attempting to build up commitment, you are in the business of changing attitudes; a few suggested approaches are set out below:

- i) Problem focussed interviews of a "counselling" nature.
- ii) Group discussions, using the problem that the "change" is designed to solve as the agenda.
- iii) Seminars or other educational mechanisms aimed at informing and developing individuals' views.
- iv) Demonstrating the value of the change by working with some system that is already experiencing "pain" caused by the problem.
- v) Deliberately rewarding behaviour which demonstrates support for the change.

#### 5. Your Transition Plan

Your transition plan should:

- be clear about how activities fit into the overall strategy aimed at achieving the change goal;
- set out quite definitely the tasks to be performed;
- have a timetable;
- be able to be adapted.

#### 6. Conclusion

This note concludes the sequence aimed at applying a model for the change process. Although the notes are sequential, it is possible that some of the activities might, in some cases, be sequenced differently.

The following notes describe some specific techniques to aid in the planning and analysis of change problems. A "Commitment Status Chart" is annexed to this note.

You may find the note on the change equation (LM.12) especially useful for thinking about gathering commitment to your vision of the future.

COMMITMENT STATUS

Key Players	No Commitment	Let Change Happen	Help Change Happen	Make Change Happen

TRANSITION MANAGEMENT

LM.11 READINESS AND CAPABILITY TO CHANGE - Handout

1. INTRODUCTION

In many change situations individuals are not aware that they may need to change. In fact they may prefer to remain as they are. To achieve a successful change, people need to be both prepared or "ready" to change and have the capability to actually change.

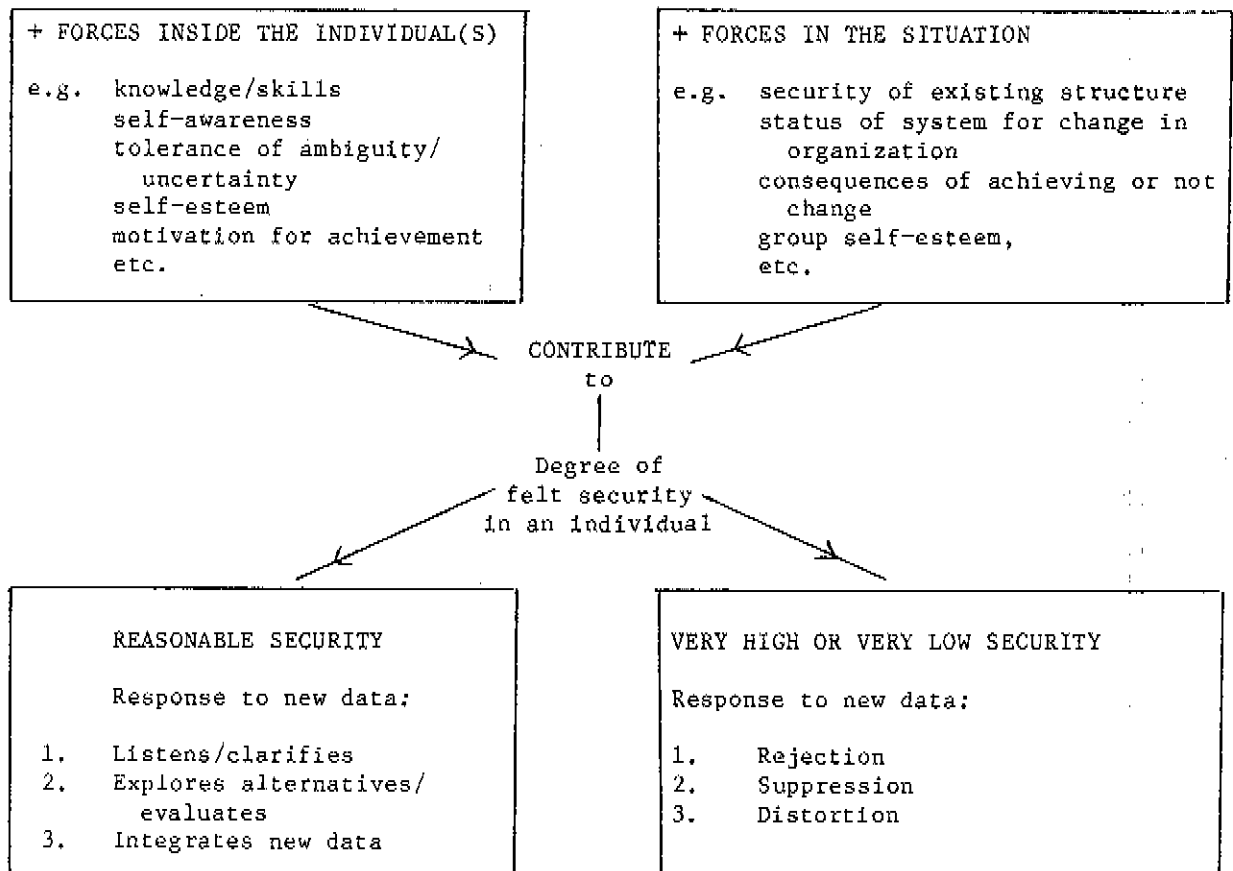
2. READINESS AND CAPABILITY

Readiness to change is when an individual wants to change the way he works or behaves. When he is not ready to change he, by definition, prefers the existing situation. Capability to change is where the individual has the ability to bring about the change because he has the appropriate skills or sufficient power, or, if the change is to do with his behaviour has the relevant insight. Lasting change will not occur if someone does not have both readiness and capability.

3. DIAGNOSING "READINESS"

A way of diagnosing readiness to change is to look at the forces impinging on the security felt by an individual. If those forces make the individual feel reasonably secure, then providing he experiences some dissatisfaction with the present situation, he is likely to change. On the other hand, if the forces make him feel very secure, or very insecure, he is unlikely to change. In the first case, why should he bother? And in the second, the major feeling of security left to him is the status quo which he knows and understands.

The following model illustrates the situation:



What this model is saying is that an individual is ready to change when he has reasonable security. If, however, he feels very threatened by potential change or alternatively feels extremely satisfied by the present, his immediate reaction to change is likely to be rejection. To bring about increased readiness for change the manager needs to be aware of the cause of resistance and see what he can do to increase the security of the individual if he feels very threatened, or reduce the security if he feels very complacent.

4. DIAGNOSING CAPABILITY

Even though a person may be ready to change, unless he has the new skills required he will not be able to change. In diagnosing capability you need to examine whether the individual has the appropriate skills, whether he has the power to bring about the changes he wants, and whether he has the resources to bring about the changes he wants. If any of these are lacking then, however ready, change will not occur. The change manager has to ensure that the individual is capable of change. It is of course possible that however ready individuals are they will never have the capability to change because they are not able to acquire the relevant resources or competencies.

5. CHARTING READINESS AND CAPABILITY

In order to see where energies have to be directed to bring readiness and capability into congruence, it is suggested a chart is drawn up in which the key actors are identified in a column down the left-hand side of the page and their readiness and capability "scored" in terms of High (H), Medium (M), Low (L), across the page, for example:

Topic - Introducing a new pay system

	READINESS			CAPABILITY		
	H	M	L	H	M	L
Treasurer			X	X		
Salaries and Wages Officer	X				X	
Salaries and Wages Staff		X				X
Computer Manager	X			X		
Computer Staff			X			X
etc.						

This analysis now directs specific attention to the significant problem areas in bringing about the desired change.

6. CONCLUSION

The techniques set out in this note enable a manager to organize and systematize his thinking on what on the face of it seems messy and can only be described in anecdotal terms.

TRANSITION MANAGEMENT

LM.12 THE CHANGE EQUATION - Handout

INTRODUCTION

It is useful for managers to have a clear and reasonably simple model in mind when thinking about the complex business of organizational change in health care institutions. The model set out below is simple and straightforward. Beware, however, that its simplicity does not lead you to believe that organizational change itself is simple.

THE CHANGE EQUATION

The change equation is simply stated as:

$$\text{COMMITMENT TO CHANGE} = D \times M \times P > \text{COSTS}$$

What this model is saying is that change will only occur when there is an element of Dissatisfaction felt by those who have to change, when there is a Model or vision of the future which is perceived by those affected by the change and a Plan for moving towards this vision, which is perceived as being realistic; the total strength of all this must be greater than the 'costs' of the proposed change.

As we know, change involves some costs. These costs may be social, financial, psychological or whatever, and if these costs to the individual are greater than the effort required to bring about change, then change will not occur.

One important observation of the change equation is the x sign between D, M, and P. Those of you familiar with arithmetic will know that if one of the factors is 0 then all the others multiplied by that factor are also 0. The implications of this are as follows:

- You may have a high level of dissatisfaction with the present, but if you have no model or plan to move forward to, then no change will occur.
- You may have an ideal model of the future but if there is no dissatisfaction or plan then change will not occur.
- You may have an ideal plan but if people do not feel dissatisfied or know what they are aiming at, then change will not occur.

IMPLICATIONS FOR MANAGERS

The model is a powerful tool when thinking about change in an organization. Unless all three components are present we know that change will not happen. It is, therefore, for the manager to ensure that the three components are present. The following sections suggest approaches:

1) Creating Dissatisfaction

It may seem odd to create dissatisfaction, but if people are to be motivated to change then dissatisfaction is a potent source of energy to change. A good way of achieving dissatisfaction is by presenting objective data on what is wrong with the present and then discussing the relevance of this with those who have to change. Another way is to write a doom scenario (see LM.6).

## 2) Creating a Model for the Future

A model for the future must cover all aspects that might be affected by the change. For example, it is not sufficient to consider the impact of introducing a disposable syringe just on the nurses who have to use it. You need to think about other systems which will be impacted by the change, such as the storage system and the disposal system. The model should cover both the technical way in which new tasks should be done and also the impact of these on people. Again, for example, if you introduced a new supply system you may have to build a large warehouse which could break up the current way in which people work together in small groups. A good way of presenting the vision is by writing an ideal scenario. (See LM.7)

### Plan

Generally speaking managers are quite good at planning for technical changes. They know what things have to be installed, commissioned, maintained, etc. What managers often ignore, however, is the people side of the plan. Who, for example, needs to be involved, how do we get their commitment, how do we persuade them to accept the change? A plan in this context is a systematic link of all the features in the change with particular emphasis on the "people".

### Costs

Despite having done the D, M and P model well it may still be that the costs of the change to the individual are greater than the perceived advantage. In this case it may be necessary to increase the level of dissatisfaction.

## CONCLUSION

Writing a doom scenario in terms of demands and responses upon the system that needs to change focuses attention on potential problem areas. If the scenario is written after joint discussion between the staff involved in the change, it can produce energy and commitment to the necessary changes through the dissatisfaction it creates with the present. But you must also have joint commitment to the Vision and the Plan.

LM.13 FORCE FIELD ANALYSIS - Handout

1. Situations are dynamic

We often think of groups and organizations as having stable characteristics: "reactionary"; "resistant to change"; "supportive", etc. In fact, the appearance of stability hides a constantly shifting set of forces.

All organizational and group situations involve the interaction of a variety of forces: the feelings, fears, ambitions, etc. of the people involved; the work demands of organizational goals and systems, etc. These forces are not static; they change over time and with new situations.

A manager who wishes to implement some form of planned change must be able to analyze the situation that confronts him. If he can identify the major forces at work in the situation then he can take action to influence them to bring about the desired change.

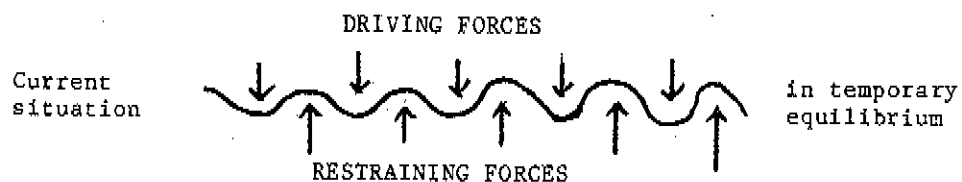
2. The analysis of forces

Force Field Analysis provides managers with a framework for use in problem-solving and implementing planned change. It was developed from Kurt Lewin's 'field theory'.

All situations can be seen as being in temporary equilibrium:

i.e. The forces acting to change the situation are balanced by the forces acting to resist the change.

This idea is pictured below, with DRIVING forces arrayed against RESTRAINING forces within a field of forces. The line between the two sets of forces represents the current situation.



In this model, the term 'force' covers any of the broad range of influences which restrain or support change. Examples of such forces are:

- |                               |                          |
|-------------------------------|--------------------------|
| Current policies/procedures   | Initiatives              |
| Presence or lack of resources | Public opinion           |
| Prejudice/attitudes           | Distrust and fear        |
| Loss or increase of status    | Ambition                 |
| Preference for old methods    | Personal rivalries       |
| Things obviously going wrong  | Professional aspirations |
| Organizational systems        | Traditions               |
| Political pressures           | Legal considerations     |

Organizational tradition can be a particularly strong pressure: "We have never done it this way before" restrains people from trying new techniques.

Forces can either DRIVE or RESTRAIN depending on the situation and the kind of change desired. DRIVING forces are those which support, encourage, or push for changes. RESTRAINING forces are those which slow or stop the momentum for change.



These alterations come by:

- Strengthening or adding driving (positive) forces
- Reducing or removing restraining (negative) forces
- Changing the direction of some of the forces
- Any combination of the above.

You should be aware that strengthening the driving forces, without reducing the restraining forces, might increase resistance and tension. Removal of restraining forces will reduce tension and lead to more stable change.

You may be able to identify driving forces which, if strengthened, do not increase resistance. You may be able to divert restraining forces in other directions. It may be that your own enthusiasm and pushing for change (driving) created the resistance in the first place.

A very effective way of dealing with a restraining force is to convert it to a driving force. For example: can an individual who opposes change be helped to discover that it offers significant benefits, or that he overestimated its negative impact? Changing opposing forces into supporting forces doubles the positive effect of the change.

Always test the reality of the forces you have identified, especially the major ones. It may be that some of your expectations or assumptions are false. For example, if you anticipated that top management would disapprove of your initiative, that would be a powerful restraining force. But, if you test this assumption with a good case it may become clear that top management would enthusiastically support your project - an additional and strong driving force.

## 6. Strategy

Having considered which forces you intend to modify, and how, you should ensure that your plans include:

- i) The stages to occur in your plan, in sequence, and with target dates where possible.
- ii) The resources you need at each stage (particularly people). Will they be available?
- iii) Measurable events/results against which to regularly check your progress.

## 7. An example

A man has been told by his doctor that he is 15 kilograms overweight, and that to safeguard his health he should lose this excess.

### The Analysis

What are the driving and restraining forces which are maintaining the present situation of overweight? How can an imbalance be created so that a change for the better can come about?

Some possible driving forces at work to reduce weight are:

- the advice of the doctor;
- existing feeling of tiredness;

- recognition of possible physical consequences, shortness of breath, possible strain on the heart, etc.;
- no-one wants to be thought of as fat;
- it would be easier to get in and out of cars, climb stairs etc.;
- personal appearance would be improved.

However, confronting these driving forces are the restraining forces working against dieting. These might include:

- the thought that nothing serious has happened yet;
- personal discipline is required to change eating habits;
- having to give up favourite foods;
- clothing would have to be altered;
- the feeling that exercise might be more effective than dieting for losing weight;
- lack of personal support for dieting from family and friends.

Until some imbalance is created in these forces, the doctor's advice is not likely to be implemented. How can this change be brought about?

#### Optional Strategies

1. Increase the driving forces? The doctor might confront the patient with stronger evidence of the physical effects of overweight, making the problem more urgent. "Weigh less and live longer". The problems here are:
  - i) Such advice may actually increase resistance to change and the man would find more excuses.
  - ii) When the pressure is removed (the man stops seeing the doctor) the old habits may gradually return.
2. Reduce the restraining forces? Friends and family could be encouraged to be more supportive to the doctor's advice. The man could be advised on methods of losing weight which fit his own limited capacity for self-discipline, and involve him in finding solutions to his own problem. By decreasing the restraining forces, the driving forces are freed to effect the change.
3. Combine both these methods? You can probably think of many ways in which driving forces can be increased, and restraining forces reduced so that the change can be implemented and the problem solved.

LM.14 PREPARING THE TRANSITIONAL PLAN - Exercise

AIM

The aim of this exercise is to give participants an opportunity to plan their organizational change using some of the techniques described in the handouts.

STRUCTURE

The exercise is undertaken in the consulting pairs.

PROCEDURE

Each participant should by now have written a doom scenario and an ideal scenario.

This step is aimed at drawing up the plan to move from one to the other, in the context of your work as a health manpower manager.

A number of ideas and techniques have already been discussed. Some of these will be particularly relevant to each individual's change problem and perhaps some of them not relevant at all. Consider in what way the ideas can be of use to you and draw up a change plan. Such a plan should identify who is going to do what to whom with specific times programmed into it.

TIMING

Two hours are allowed for this activity.

## ORGANIZATIONAL CHANGE

### FOR TUTORS ONLY

#### SECTION 3. NOTES FOR ORGANIZERS AND TUTORS

##### 1. INTRODUCTION

In the series of Modules on Health Manpower Management this one on Organizational Change is the last apart from the General Module on Evaluation. The previous workshops should have given the participants many ideas about what they would like to change in their own organization, but change is complex and managers are often deterred from making the effort because they cannot see a way of dealing with all the problems.

We have already offered, in Section 3 of the Introductory Module on HMM in Health for All, detailed advice to organizers and tutors on the best approach to the preparation and conduct of the HMM modules in general, particularly through workshops. That advice, together with this module's Introduction (Section 1) provides the essential background to these more specific notes on conducting a workshop based on this Module.

As usual the materials in the workshop have been well tested and work well. Do not hesitate to change them as you wish. An important aspect of this workshop, unlike the others, is that the participants should come prepared to discuss the problem that they wish to tackle themselves. The criteria for this problem are set out in Section 1, under 'The Use of the Module'. Therefore, before the workshop, write to the participants asking them to outline, in writing, and bring with them, an organizational change problem on which they wish to work during the workshop. The value of running the workshop in this way is that the participants learn by working on a real problem related to HMM which is of consequence to them. The learning is enhanced by the practical relevance of what the participants are doing. In a sense this workshop builds the bridge between the other workshops and the manager's job.

##### Numbers

The workshop is designed for any number of participants. Most of the work is undertaken in pairs.

##### Tutor's Role

This workshop should be conducted more flexibly than the others, and you should not be afraid to modify the approach. Organizational change comes in such a variety of ways that it is impossible to prescribe exactly how it should be undertaken. Use this flexibility to encourage participants to apply the ideas intensively to their organizational change problems in HMM, and be prepared to extend the workshop from 2<sup>1</sup>/<sub>2</sub> to 3 days if necessary.

##### Viewfoils

The viewfoils are referenced by numbers in the session plan: try to use the viewfoils as 'headlines' to introduce and discuss the topic, reinforced by the handout.

Suggested Timetable

Day 1

08.00	Inauguration, Introductions and Objectives (plenary)	Step 1
08.15	"Problems of Organizational Change" - Exercise (in groups)	Step 2
09.00	Report back on Exercise	
09.30	Break	
09.45	"Models for Change" - Lecture Notes and Discussion	Step 3
10.15	"Sharing Change Problems" - Exercise	Step 4
11.00	"Core Mission" - Lecture Notes and Discussion	Step 5
12.00	LUNCH	
13.00	"Establishing the Present Demand System" - Handout and Discussion	Step 6
14.00	"The Doom Scenario" - Lecture Notes and exercise (in pairs)	Step 7
15.45	"The Ideal Scenario" - Lecture Notes and plenary discussion	Step 8
16.15	Conclude for the day with brief review.	

Day 2

08.00	"Writing the Ideal Scenario" - Exercise (pairs)	Step 9
09.30	Break	
09.45	"Managing the Change - Transition Management" Handout and Discussion	Step 10
10.00	"The 7 "S" Framework" - Lecture Notes and individual work	
12.00	LUNCH	
13.00	"Commitment Planning" - Lecture Notes (pairs)	Step 11
14.00	"Readiness and Capability to Change" - Lecture Notes	Step 12
14.30	Break	
15.00	"The Change Equation" - Lecture Notes and work in groups	Step 13
16.15	Conclude for the day with brief review	

Day 3

08.00	Review progress on using the "Change Equation"	Step 14
08.30	Lecture Notes "Force Field Analysis"	
09.30	"Preparing The Transitional Plan" - Exercise	Step 15
11.30	Conclude and Summary, Evaluation	

SESSION PLAN

DAY 1

Step 1

Make sure that everyone has a timetable for the workshop, modified as necessary. Set out the objectives from Section 1 and explain how the workshop will be run (Viewfoil OC.1).

Step 2

Introduce the exercise "Problems of Organizational Change" (LM.1, Viewfoil OC.2). Write up on a flipchart the result of the exercise and try to categorize these into, for example, lack of preparation, lack of framework, powerful people opposing the change, etc.

Step 3

Give the Handout "Models for Change" (LM.2, Viewfoils OC.2, OC.3, OC.4). Take your time over this as it is vitally important that it is fully understood. Try, if possible, to relate some of the ideas in it to the information generated from the first exercise.

Step 4

Explain the idea of pairs working together with one pair member acting as a consultant adviser to the other. Then introduce the exercise "Sharing Change Problems" (LM.3).

Step 5

Introduce the handout on "Core Mission" (LM.4), and lead into a discussion on this (Viewfoil OC.5). Try, in the discussion, to encourage participants to think about the core mission for their own part of the organization.

Step 6

After lunch explain that you are going to discuss scenario writing with the participants. During the discussion you will look at the "Doom Scenario" (LM.6) and then consider the "Ideal Scenario" (LM.7). Begin by giving the lecture "Establishing the Present Demand System" (LM.5, Viewfoil OC.6). Note that you may want to change the example given in the handout to make it more relevant to the participants' own "change" problem. At the conclusion of this lecture ask the participants in their pairs to identify five or six key domains that impact upon their organization and to write these down. These will be used for the exercise on "Doom Scenario".

Step 7

Review the lecture notes "The Doom Scenario" (LM.6) and then ask the participants in their pairs to construct doom scenarios for their organizational change problem; in other words what would happen if no change occurred.

A break can be organized during the exercise.

Step 8

Review the lecture notes "The Ideal Scenario" (LM.7) and lead into a general discussion before concluding for the day.

Day 2

Step 9

Welcome the participants to the second day and ask them to work in their pairs on the Ideal Scenario.

IMPORTANT NOTE

If the participants find writing scenarios using the idea of demand/response analysis too difficult or not very relevant, encourage them to use the "Now - Then" model for change. This is not such a rigorous approach but can be made comprehensive by using the 7 "S" framework described later in the workshop.

Step 10

Share the lecture notes "Transition Management - Managing the Change" (LM.8, Viewfoil OC.7). This introduces the idea of the transition state between "Now and Then".

Lead from this into a discussion on the 7 "S" framework (LM.9. Viewfoil OC.8). Emphasize the many inter-relationships that can be affected by change. Spend some time on this framework using, if you can, the participants' own change problems to exemplify how one change can lead to another.

After this discussion, ask the participants to set out and write down what changes in the 7 "S's" will be required to achieve their ideal scenario.

Step 11

After lunch give the lecture notes "Commitment Planning" (LM.10, Viewfoils OC.9, OC.10), and ask the participants to complete a "commitment status" chart for the "key players" in their change problem. This should, of course, be done in pairs.

Step 12

Present the lecture notes "Transition Management - Readiness and Capability to Change" (LM.11, Viewfoils OC.11, OC.12). At the conclusion of any discussion, invite the participants to analyze the readiness and capability of the key players they identified in the previous discussions.

Step 13

Give the lecture notes "Transition Management - The Change Equation" (LM.12, Viewfoils OC.13, OC.14). Invite discussion on this and then ask the participants to consider how "dissatisfaction" can be created in those key individuals who are not committed to the change and/or who are not capable or ready to change at this point in time.

This exercise, if done properly, should take some time; the precise length of time, of course, depends on the complexity of the problem. Explain therefore that at 9.00 a.m. the following morning, you will be reviewing progress.

Day 3

Step 14

Review progress on the exercise started the previous evening. Then outline the lecture "Force Field Analysis" (LM.13, Viewfoil OC.15) explaining that it might be another useful tool for creating change.

Step 15

This is the final step when participants draw all the "change" activities together in a written plan (LM.14, Preparing the Transitional Plan - Exercise). Encourage them to make the plan specific and include timetables (Viewfoil OC.16). For very complex changes, the participants may want to seek the help of project managers or critical path planners.

Step 16

Summarize the main points of this workshop and bring it to a conclusion, followed by up to 30 minutes devoted to evaluation with the help of materials from Section 4.

CONCLUSION

This particular workshop should be run much more flexibly than the previous ones to allow the participants to really apply the ideas to their actual problem.

We hope that these notes assist you in this task, and help to give you the materials and confidence to conduct a first-class workshop.

## ORGANIZATIONAL CHANGE

### FOR TUTORS ONLY

#### SECTION 4. EVALUATION OF THE MODULE

A separate module (General Management Module C) is focused specifically on evaluation for the whole Training Manual on HMM, with the aim of offering basic principles and a range of techniques and instruments. From these a choice can be made with any modifications necessary to match the evaluation requirements of each training and work situation.

The requirements for evaluation to provide feedback on the efficiency and effectiveness of the training are reflected in the accompanying instruments which comprise :

1. A basic questionnaire 1 concerned with participants'
  - . reactions to the module
  - . learning during the workshop
  - . action plans for its use at workfor their completion individually, before departure.
2. A follow-up questionnaire 2 to participants on the application at work of what was learned at the workshop, for completion individually some months afterwards.
3. Where it is acceptable to those concerned, a matching follow-up questionnaire to the senior officer of each workshop participant could be sent at the same time, for the benefit of a responsible second opinion about the impact of the training on the participant's work performance. Such an instrument can be prepared locally, simply by changing 'you' to 'he/she' and 'your' to 'his/her' wherever necessary in questionnaire 2.

It is good practice for the course organizer to send a summary of all the responses in both cases to the participants themselves, their senior officers, the workshop tutor and the module authors so that the overall impact can be seen and desirable improvements made. No participants' names should appear on those summaries, in order to preserve confidentiality.

Evaluation Questionnaire 1 (End of module)

WHO TRAINING MANUAL ON  
HEALTH MANPOWER MANAGEMENT

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GENERAL MANAGEMENT MODULE B: ORGANIZATIONAL CHANGE

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1. Your General Reactions

Please indicate, by circling the appropriate figure

- 0 = not at all
- 1 = to a limited extent
- 2 = to a considerable extent
- 3 = extremely

How far you have found the written module:

Interesting	0	1	2	3
Potentially useful	0	1	2	3
Well prepared	0	1	2	3

and the training workshop:

Well conducted	0	1	2	3
----------------	---	---	---	---

Please write any explanatory comments here

2. Your Specific Reactions

In particular would you show in the same way how helpful you found:

The Introduction (Section 1)	0	1	2	3
The handouts	0	1	2	3
The viewfoils	0	1	2	3
The exercises	0	1	2	3
The work in pairs	0	1	2	3
The plenary discussions	0	1	2	3
Your own action planning	0	1	2	3
The tutorial contribution to the workshop	0	1	2	3
The administration of the workshop	0	1	2	3

Please write any explanatory comments here

3. Your Learning

Similarly, would you please indicate how well in your judgement you have achieved the workshop's learning objectives:

Increased your understanding of objective leadership in health organizations -

- Vision Building and Objective Setting	0	1	2	3
- Communications and Relationships	0	1	2	3
- Group Working and Team Development	0	1	2	3
- Individual Needs and Motivation	0	1	2	3

Improved your skills in these four elements

	0	1	2	3
--	---	---	---	---

Had opportunities to consider your own approach to leadership and to receive feedback on it

	0	1	2	3
--	---	---	---	---

Started to plan specific changes you will wish to make in the way you exercise leadership in HMM

	0	1	2	3
--	---	---	---	---

Is there any way in which your learning could have been increased during the workshop? (Please write here)

4. Your Action Plans

Please summarize briefly how you intend to use in your work what you have learned during the workshop

- 1. ....  
.....  
.....
- 2. ....  
.....  
.....
- 3. ....  
.....  
.....
- 4. ....  
.....  
.....
- etc .....  
.....  
.....

Do you have any further comments, criticisms or suggestions that would assist in the improvement of this module and workshop? (Please write here)

THANK YOU VERY MUCH FOR COMPLETING THIS QUESTIONNAIRE: YOUR REPLIES WILL BE HELPFUL AND WILL BE TREATED IN STRICT CONFIDENCE. ANY SUMMARY OF PARTICIPANTS' REPLIES WILL INCLUDE NO NAMES.

IT IS INTENDED TO SEND YOU A COPY OF THIS PAGE AFTER SOME MONTHS, TO FOLLOW-UP PROGRESS ON YOUR ACTION PLANS AND SEEK YOUR LONGER-TERM EVALUATION OF THE MODULE AND WORKSHOP. TO MAKE THIS POSSIBLE WOULD YOU PLEASE WRITE YOUR NAME BELOW.

Your name please .....

Evaluation Questionnaire 2 (Follow-up)

WORLD HEALTH ORGANIZATION  
TRAINING MANUAL ON  
HEALTH MANPOWER MANAGEMENT

GENERAL MANAGEMENT MODULE B: ORGANIZATIONAL CHANGE

1. Please indicate, by circling the appropriate figure

- 0 = not at all
- 1 = to a limited extent
- 2 = to a considerable extent
- 3 = fully

how far each of your action plans has so far been achieved:  
(insert a brief description below)

plan 1 .....	0	1	2	3
plan 2 .....	0	1	2	3
plan 3 .....	0	1	2	3
plan 4 .....	0	1	2	3
etc. ....	0	1	2	3

2. Please indicate the major factors which have

helped

hindered

.....	.....
.....	.....
.....	.....
.....	.....

the achievement of your action plans

3. Have there been any other changes in the way you work that have been helped by the training?

.....

.....

.....

4. Looking back on the workshop as a whole and recalling the time and costs involved, please indicate by circling the appropriate figure as in question 1 above how far you believe that your attendance was justified in terms of

. benefit to your organization                    0    1    2    3

. benefit to yourself                            0    1    2    3

5. Do you have any further comments criticisms, or suggestions for the future as you consider the workshop's impact?

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE.

## **OBJECTIVES**

**Consider two approaches  
to organisational change.**

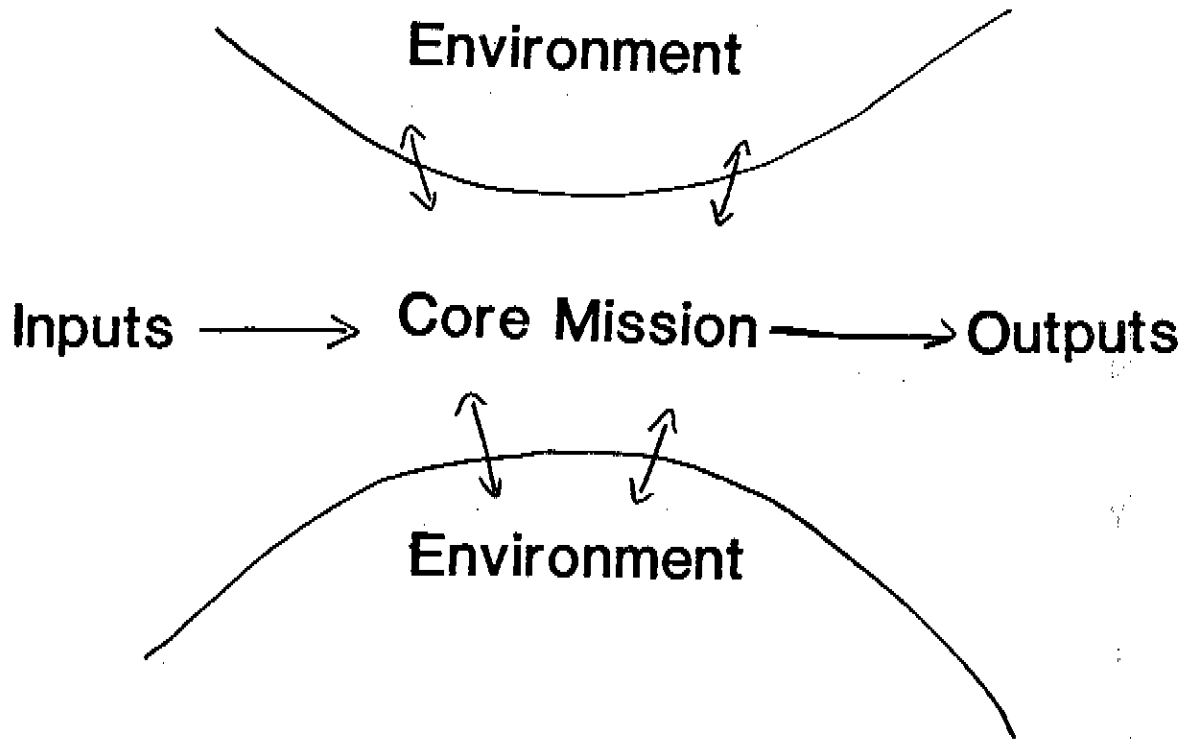
**Introduce scenario writing.**

**Suggest models and techniques  
for creating change.**

## **MODELS FOR CHANGE**

**'Now-then' approach.**

**Open systems planning.**



## **OPEN SYSTEMS PLANNING**

### **SCENARIOS**

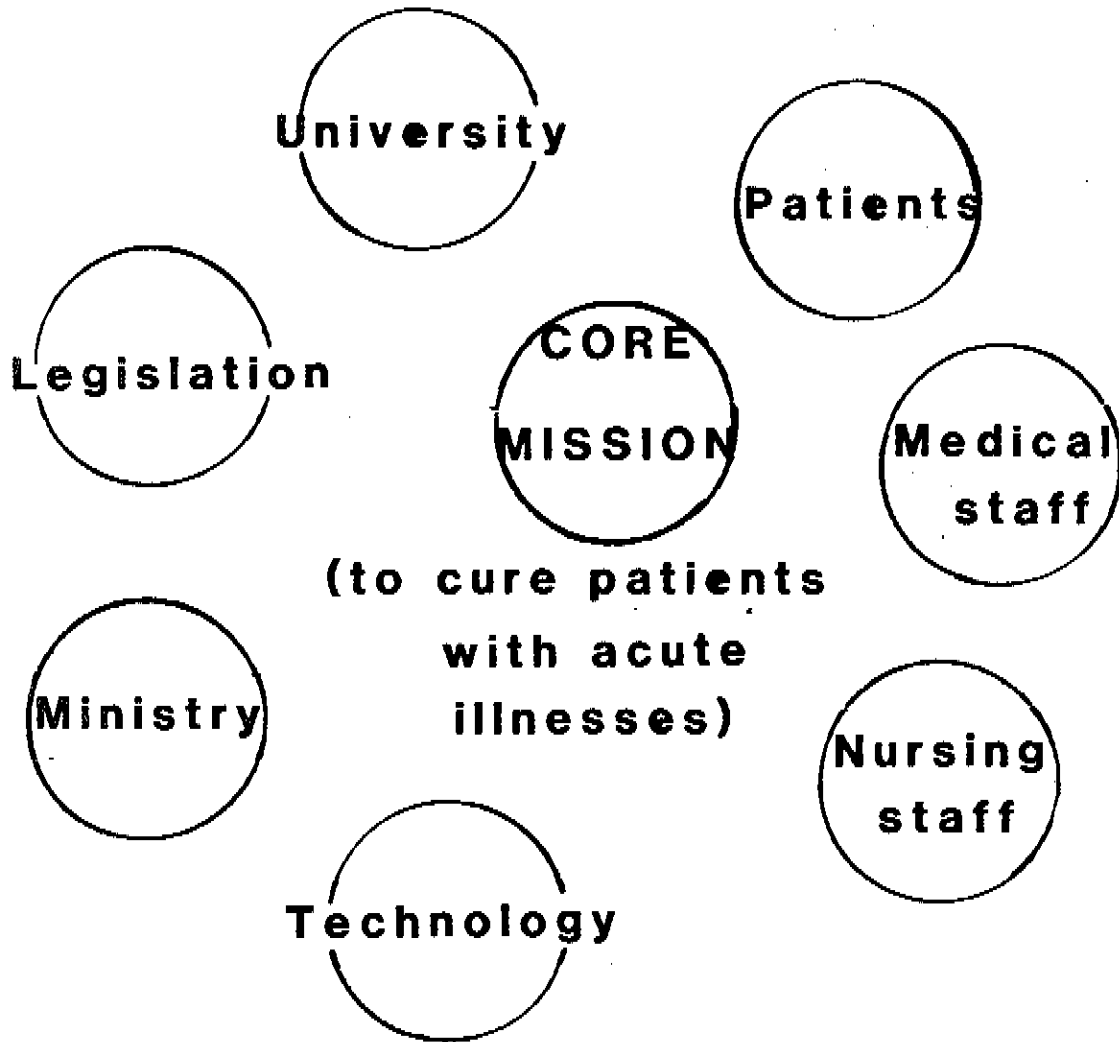
**What happens now (present)**

**What ideally should happen (ideal).**

**What will happen if no changes are  
made (doom).**

## **THE CORE MISSION**

**The core mission is the organisation's  
reason for being**



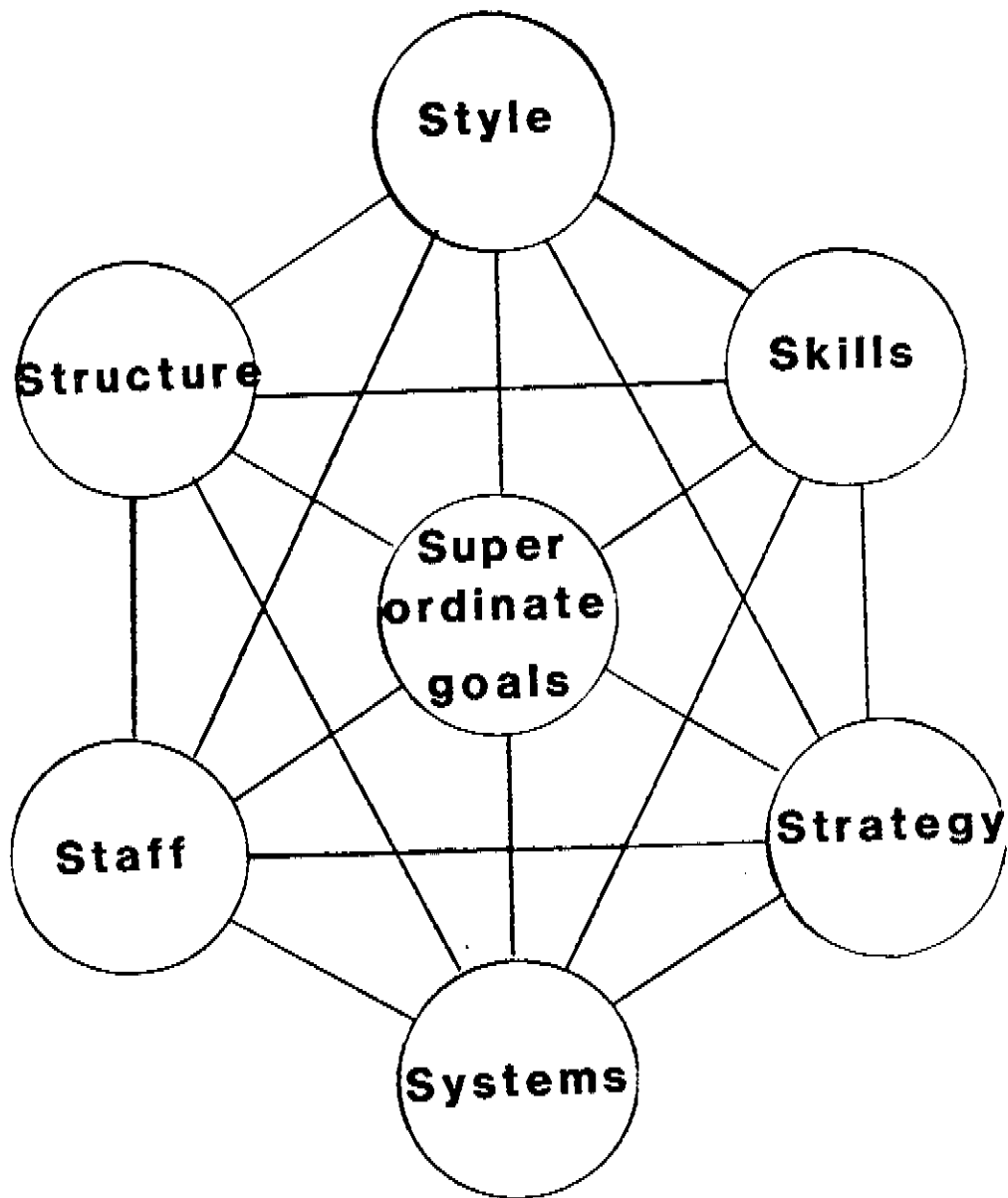
## **A HIERARCHY OF OBJECTIVES**

**Aspirations**

**Strategic**

**Tactical Goal**

**First Steps**



## **Developing a Commitment Plan**

**Identify target individuals**

**Define the critical mass**

**Assess the present state of commitment**

**Develop a plan for getting the**

**necessary commitment from the critical mass**

**Develop a monitoring system to**

**assess the progress**

**CHANGE PROBLEM : INSTALLING NEW CATERING SYSTEM**

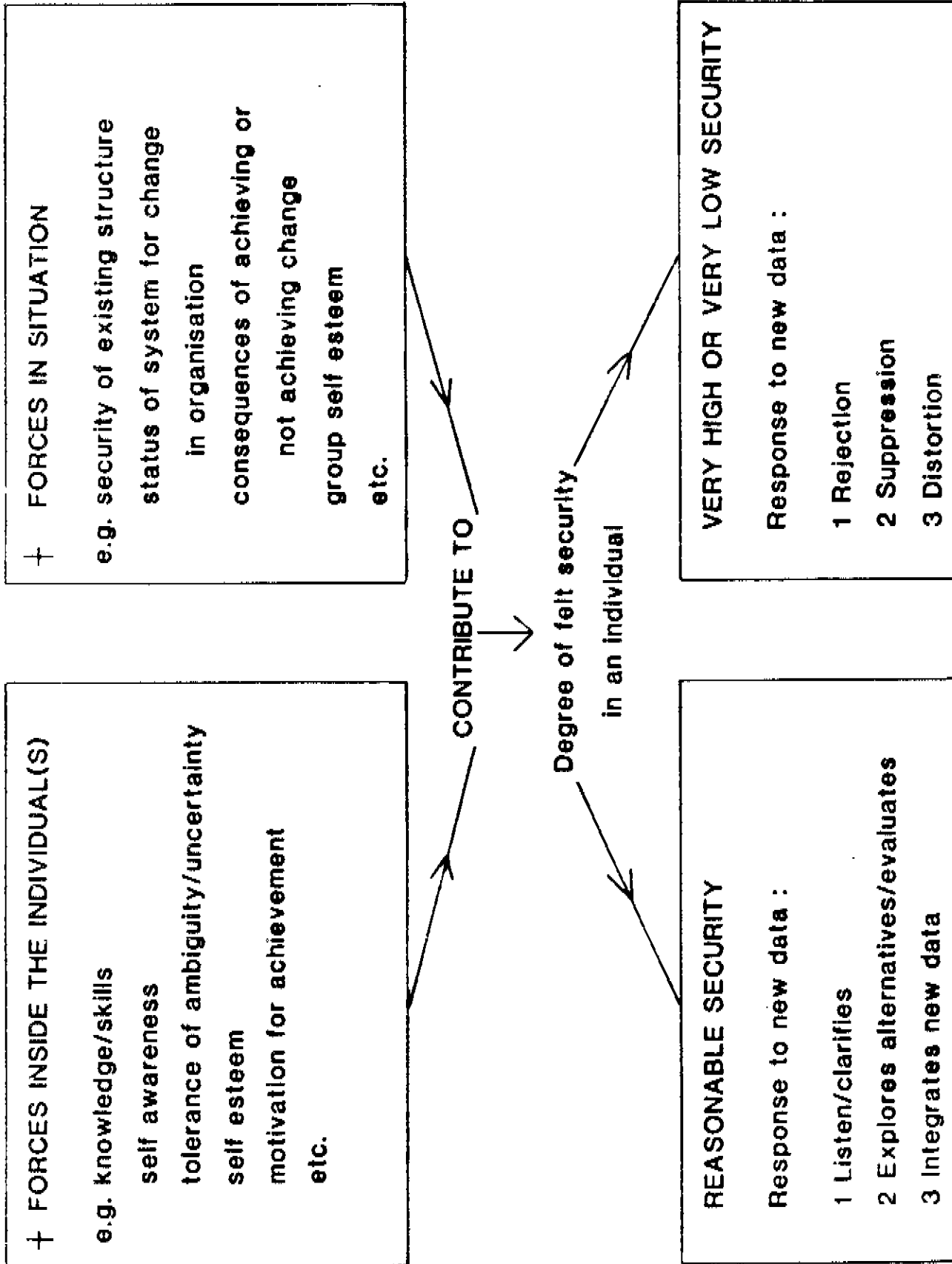
<b>Individual</b>	<b>Oppose</b>	<b>Let</b>	<b>Support</b>	<b>Make</b>
<b>Catering Officer</b>				/
<b>Kitchen Superintendent</b>				/
<b>Head Porter</b>		/		
<b>Shop Steward</b>	/			

**Individual staff etc. marks vary from individual to individual but are all chartered**

## **READINESS AND CAPABILITY**

**Readiness is to do with willingness,  
motives and aims**

**Capability is to do with power,  
influence and authority**



## THE CHANGE EQUATION

**Commitment to change =  $D \times M \times P > \text{cost}$**

## **PLANNING FOR CHANGE**

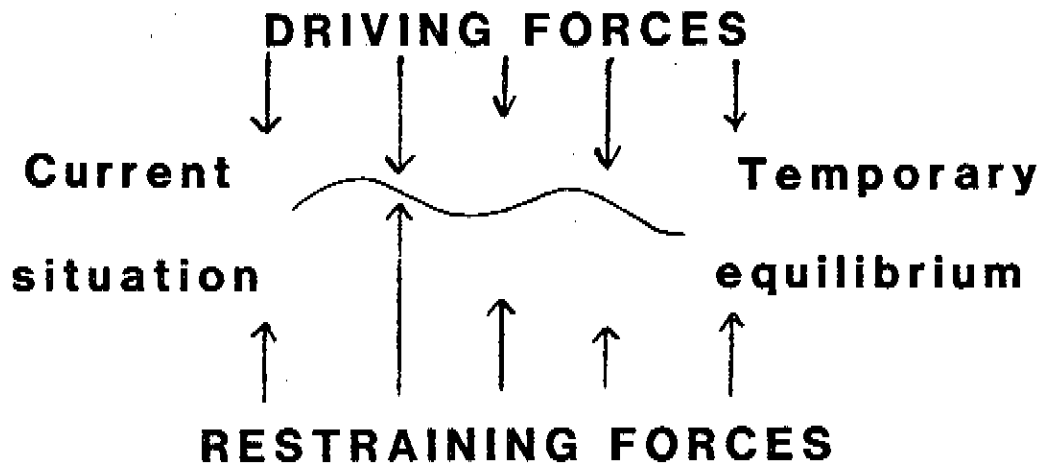
**Defining the change problem.**

**Locating the appropriate systems.**

**Determining each system's readiness,  
capability potential for change.**

**What are appropriate change objectives  
– long or short range?**

**What is the appropriate starting point?**



# ACTION PLANNING

Number	Action	By Whom	By When