

# Let's Talk Informatics

*Change*

*How do we harness the opportunity?*

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Please be advised that we are currently in a controlled vendor environment for the One Person One Record project.

Please refrain from questions or discussion related to the One Person One Record project.

# Informatics...

utilizes health information and health care technology to enable patients to receive best treatment and best outcome possible.

# Clinical Informatics...

is the application of informatics and information technology to deliver health care.

AMIA. (2017, January 13). Retrieved from <https://www.amia.org/applications-informatics/clinical-informatics>

# Objectives

At the conclusion of this activity, participants will be able to...

- Identify what knowledge and skills health care providers will need to use information now and in the future.
- Prepare health care providers by introducing them to concepts and local experiences in Informatics.
- Acquire knowledge to remain current with new trends, terminology , studies, data and breaking news.
- Cooperate with a network of colleagues establishing connections and leaders that will provide assistance and advice for business issues, as well as for best-practice and knowledge sharing.

# Objectives for this session

- Understanding models of change past and present
- Detailed understanding Kotter's Change Theory
- Practical application of Kotter's theory of change in healthcare environment - lessons learned

# Conflict of Interest Declaration

I do not have an affiliation (financial or otherwise) with a pharmaceutical, medical device, health care informatics organization or other for-profit funder of this program.

# Change

How do we harness the  
opportunity?

# What we know for sure Death Taxes and Change

- Magnitude of change impacting healthcare in past 20 years
  - Mergers
  - Restructuring
  - Acuity and treatment
  - Technology, Systems and Applications
  - Resources
  - Social media

# Why is Successful Change Critical

- What we know is needed:
  - Health information that is accurate, up to date, easily accessible, sharable and supports clinical decision making
  - AND
  - Health information needs to be protected and confidential
- What we don't have
  - A healthcare system sustainable in current state
  - An unlimited pool of resources - money, clinicians, knowledge
  - Integration of technology and informatics in health care
  - Systems that share and 'talk' to each other

# Change theory through the years.....

- No shortage of change theories or change theorists
  - Analyzed, dissected, critiqued, expanded
  - Papers, articles and books
- Change theorists in health
  - Kurt Lewin - three staged model of change - unfreeze, move, refreeze; relies on dominant forces for change overpowering resistant forces - simplistic and does not recognize the impact of individuals or the value of collaboration
  - Everett Rogers - expands from three to five steps and values the impact of peer to peer interaction, communication and collaboration; still not recognizing how change can be planned and controlled

# Through the years.....

- Change theorists in health
  - Ronald Lippitt describes 7 stages assessing need, capacity and motivation for change, planning change with goal setting and identified stakeholders, anchoring the change and finally concluding; getting closer
- HIMSS - DELTA (Data Enterprise Leadership Targets Analysts)
  - EMR Adoption Model - based on information generated from analysis of US studies of EMR adoption
  - Included here as it provides a method of measuring adoption of EMR
  - Possible benefit in identifying short and long term goals for healthcare informatics in practice

# Through the years.....

## More recent theorists

- Malcolm Gladwell
  - Tipping point describes how change is realized once critical mass is achieved
- Spencer Johnson - *Who Moved My Cheese*
- John Kotter
  - Identifies 8 steps to change
  - Builds on critical need for leadership for successful change
  - Our Iceberg is Melting - great analogy

# Our Iceberg is Melting

The story

A colony of penguins faced with life threatening change



The cast

- Fred curious and observant
- Alice - action oriented and penguin boss
- Louis - head of Penguin Leadership Council
- Buddy - storyteller; popular in colony
- Professor - intelligent and scientific
- Sally Ann - student, young penguin, eager
- No No - a necessary participant

# Our Iceberg is Melting

## The plot

- Set on an iceberg in Antarctica
- Fred discovers the iceberg is melting and in danger of breaking apart
- Majority of the penguins are happy with life as it is on the iceberg
- Population does not share Fred's concerns or urgency for change
- Life altering and he knows something must be done
- Fred sets about to initiate the change

# Our Iceberg is Melting

## The Story

- Fred makes the discovery
- Reluctant to share his findings as he has been ridiculed in the past for making alarming revelations
- Trusts Alice - tells her and shows her the 'proof'
- Alice takes it to council however no one believes it until Fred does his experiment
- Fred convinces a few of the penguins of the danger and need for change
- Small group takes on tasks of generating sense of urgency; form team to identify, guide and communicate the needed changes; work together to address obstacles of nay sayers, stubborn behavior and stuck in the mud traditions
- In the end the penguins move, reestablish community in new area

# Kotter's 8 Step Change Process

## 1. Establish a Sense of Urgency

- Recognize need for change, help others recognize change needed and the need to happen now

## 2. Creating a Guiding Coalition

- Bring together a group of change leaders
- Insure action oriented, leadership skills, analytical and strong communicators
- Identify stakeholders
- Commit to direction and team building

# Kotter's 8 Step Change Process

## 3. Developing a Vision and Strategy

- Revisit and confirm organization values
- Establish long term goal(s) - what does the future look like and how is it different from the now
- Identify how will future going to happen
- Create 'elevator speech' - short statement(s) on the vision and how to get there

## 4. Communicating the Change Vision

- Remember equally important to talk and listen
  - Talk often - have multitude of methods and 'mix up' the message
  - Listen to feedback and concerns
  - Remember the nonverbal - actions speak volumes

# Kotter's 8 Step Change Process

5. Removing Obstacles - Empowering Employees for Action
  - Engage change leaders
  - Identify resisters - bring them in
  - Insure all who want to be part of the change have role in the change
6. Generating Short Term Wins
  - Identify short term changes/gains - steps to the future objective
  - Confirm affordable, realistic and easily seen as steps in 'right direction'
  - Celebrate and publicize the gains
  - \*\*Communicate communicate communicate
  - \*\*Remember this process is dynamic

# Kotter's 8 Step Change Process

## 7. Consolidating Gains

- Analyze at each step - build on positive, make necessary changes
- Continue building on the gains
- Be cautious about declaring success too soon

## 8. Anchoring Change

- Create the new culture - identify it, name it, celebrate it
- Monitor to insure changes stick and that result is what is desired
- Becomes the new 'norm'

# How to Implement the Theory

- Identify the change and supporting rationale - do not need the 'how/who details yet
- Establish the initial 'guiding coalition' - the team critical to start process
- Plan a day for 'guiding coalition' to come together - face to face
- Confirm workshop environment - space for breakout group work
- Select facilitator(s) to lead the agenda and guide exercises
- Create agenda - timed and objective(s) to be achieved
  - Confirm leadership and team membership
  - Detail the objectives and goals of the change
  - Identify challenges or obstacles including solution options
  - Plan communication - speaking points, media, resources
  - Develop timeline
  - Schedule meetings

# Mission Vision Values

## Our Vision

Healthy people, healthy communities – for generations

## Our Mission

To achieve excellence in health, healing and learning through working together

## Our Values

- **Respect**  
... underlies our interactions with each other and the people we serve. It insists on caring, compassion and understanding, and embraces our diversity and differences to foster a positive environment for good health
- **Integrity**  
... is at the heart of who we are and what we do. In a world that constantly challenges us, our integrity guides us to do what is honest and ethical
- **Courage**  
... strengthens our resolve to do what is right for the health and wellness of Nova Scotians. We must, as an organization and as individuals, listen to others, have open and honest conversations, and make difficult decisions
- **Innovation**  
... requires inquisitiveness, focused attention and creative solutions. We welcome and seize opportunities to create value. It is through our pursuit of excellence, individually and collectively, that new ideas and knowledge can emerge to advance health, healing and learning
- **Accountability**  
... is our individual and organizational duty to be answerable to the people we serve and each other. It means our decisions and actions are transparent, based on evidence and focused on positive outcomes. We manage ourselves and our finite resources to ensure an effective and sustainable health and wellness system in Nova Scotia

# Our Strategic Priority Areas

- **Person-centred, high-quality, safe and sustainable health and wellness for Nova Scotians.**
  - NSHA will deliver a person-centred, high-quality, safe, accessible, equitable and sustainable health and wellness system through a focus on performance, accountability, education, research and innovation.
- **A healthy, high-performing workforce**
  - NSHA will create a positive and healthy organizational culture that enables employees, physicians, learners and volunteers to support the health and wellness of Nova Scotians. We will foster safety, learning, respect, leadership, accountability, inclusiveness, role optimization and collaboration among our teams.
- **Nova Scotians engaged to create a healthier future.**
  - NSHA will engage Nova Scotians to promote and support our shared accountability for health and improvement in health status.

Let's Talk Informatics has been certified for continuing education credits by:

- College of Family Physicians of Canada and the Nova Scotia Chapter for 1 Mainpro+ credit.
- Digital Health Canada for 1CE hour for each presentation attended. Attendees can track their continuing education hours through the HIMSS online tracking certification application, which is linked to their HIMSS account.

*Thank you for attending this event.*