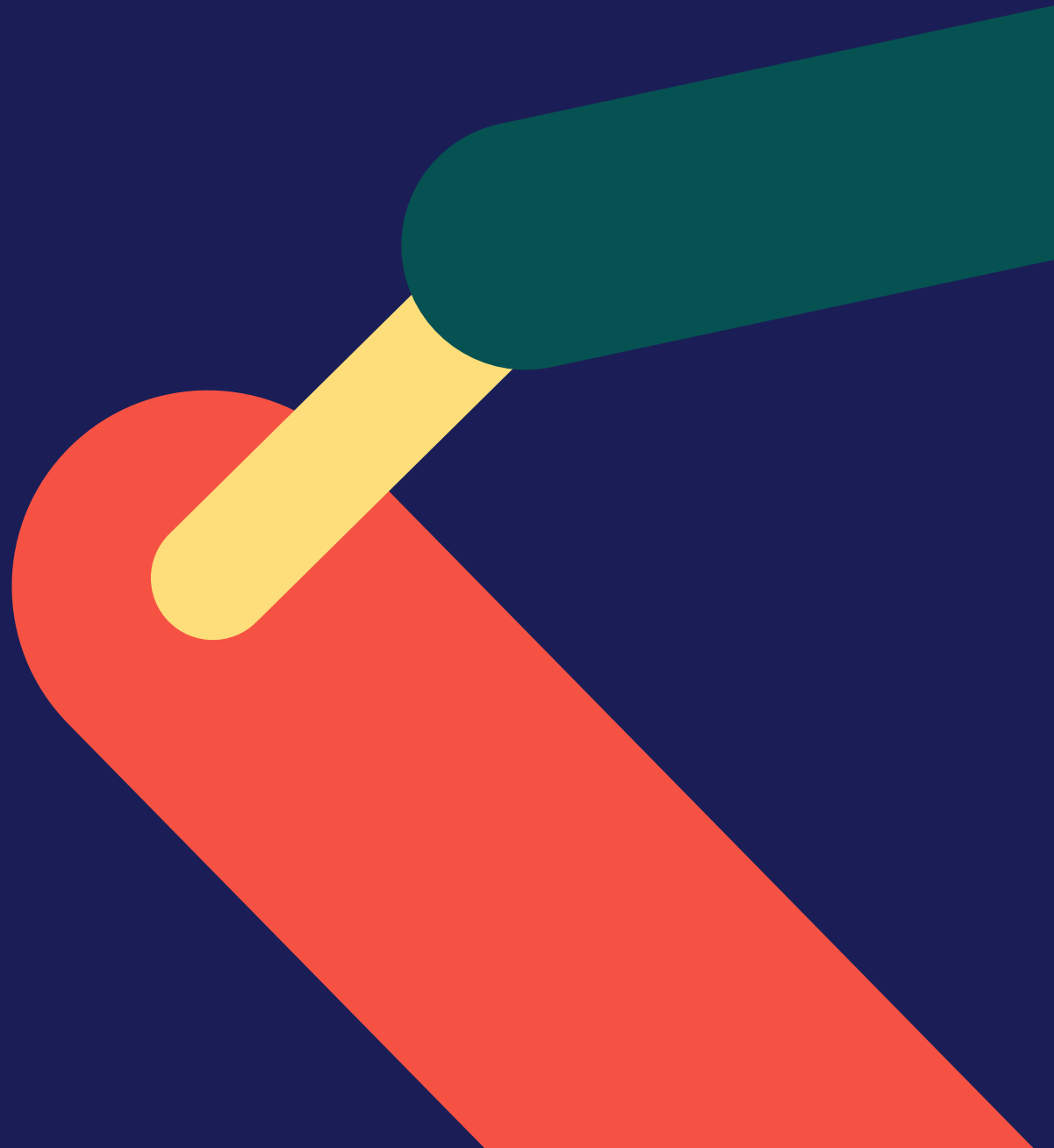
The PSC

Delivering Fast Effective Projects

Full Participant Pack



Welcome to the programme

INTRODUCTIONS AND ICE BREAKER

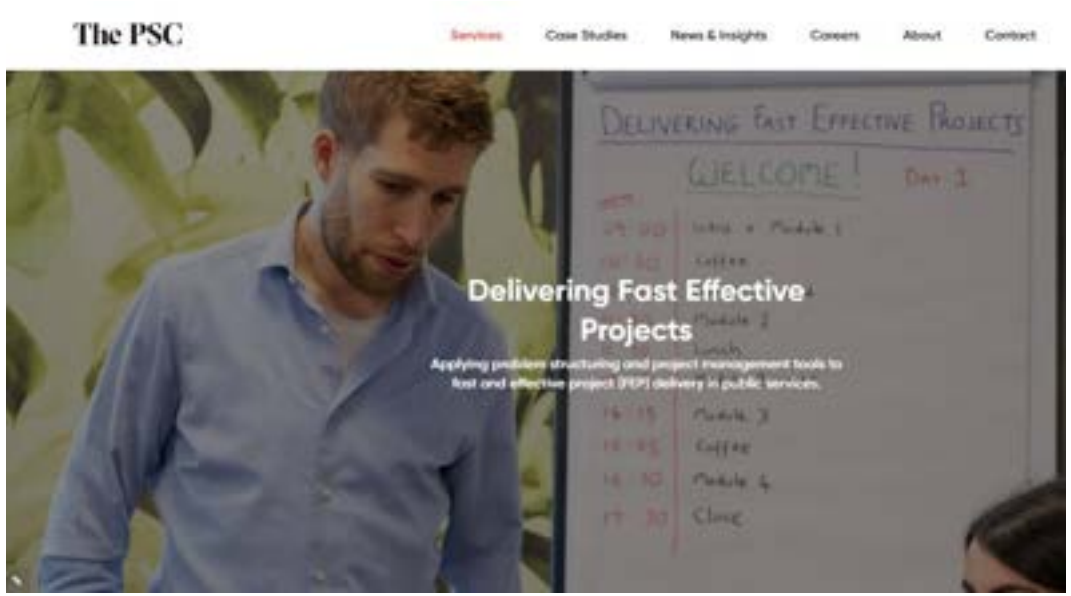
Housekeeping:
Fire Exits, Bathrooms, Drinks, Register, Breaks

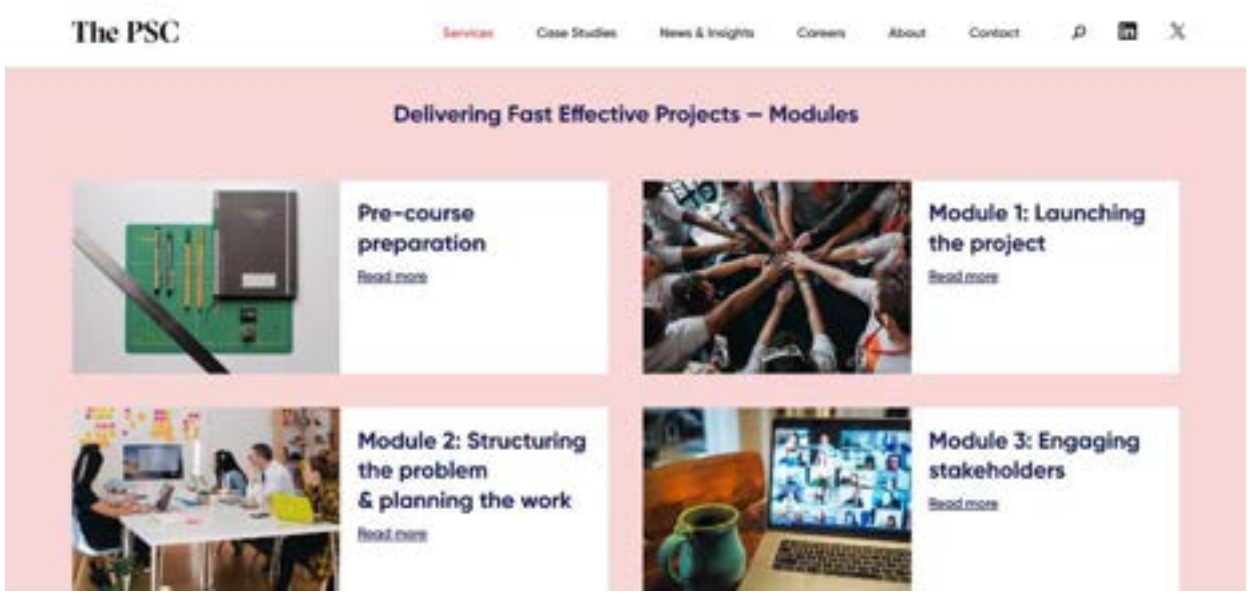
Who are you?
What's your role? What are you excited to learn?

Icebreaker:
An interesting fact about you…

Course materials and templates can be found on The PSC website

GUIDE TO THE PSC WEBSITE





The relevant course materials, including handbooks, Microsoft Excel exercises and downloadable tools, are all available here: https://thepsc.co.uk/index.php/capability-building/course/delivering-fast-effective-projects.

We will now pause and show you how to navigate the website!

...so let's learn more about delivering 'Fast Effective Projects' (FEP)

What do these stories have in common...?

Source: BBC; gov.uk

D5 uses an improvement cycle to deliver effective change

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, engaging with stakeholders to understand their view

Using quantitative and qualitative data and tools to discover the current state of a process or service, best practice and/or the root causes of a problem.

Establishing a vision for a future state: developing strategic recommendations and/or specific changes using design tools, options generation & evaluation

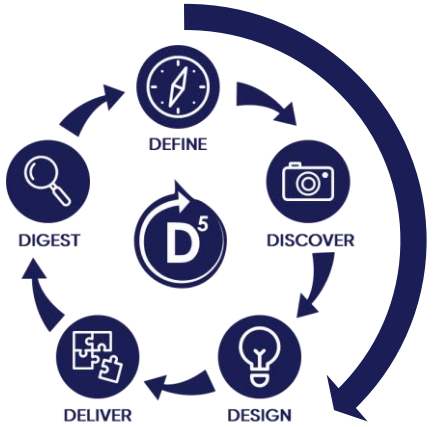
Using rapid improvement cycles to test changes, planning for implementation, engaging stakeholders in implementation and delivering a sustainable change

Frequent review of improvement cycles, evaluating the outcomes of a project, identifying improvements and communicating success

The D5 method for fast effective projects can be adapted to apply to a wide range of different projects

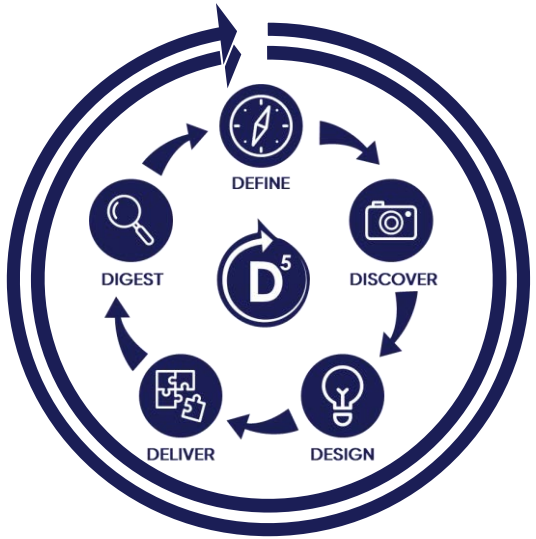
D5 PROJECT SPECTRUM

STRATEGIC RECOMMENDATIONS — **DELIVERY AND CONTINUOUS IMPROVEMENT**



Where the project is on the spectrum depends on…

Project aims
Involvement in implementation
Time to delivery
Feasibility of rapid improvement cycles



- The project is focused on **design of an evidence-based recommendation** or set of options.
- The project team is responsible **for developing realistic and achievable recommendations** to inform a decision making process, but may not be involved in the implementation of the recommendations.

- The project is focused on **delivering a change**; this could be a new service model, pathway, or process.
- The team is involved in **implementing the options** and may use rapid improvement cycles to test and refine their recommendations

Today we will work on 'Define' - setting up our project

COURSE AGENDAS

Day 1 DEFINE	Day 2 DISCOVER & DESIGN	Day 3 DESIGN, DELIVER & DIGEST
Arrival and coffee	Arrival and coffee	Arrival and coffee
Welcome to Fast Effective Projects	Introduction to Day 2	Introduction to Day 3
Introduction and set-up	**M5** **Gathering data and conducting analysis**	**M8** **Modelling and options appraisal**
M1 **Launching the project**	Break	Break
Break	**M5 continued**	**M9** **Planning for change**
M2 **Structuring the problem and work planning**	Lunch	Lunch
Lunch	**M6** **Creating high-performing teams**	**M10** **Developing and communicating recommendations**
M3 **Engaging stakeholders**	Break	Break
Break	**M7** **Process improvement and Plan Do Study Act**	**M11** **Closing the project**
M4 **Developing hypotheses**	Daily feedback	Close
Daily feedback	Close	
Close		

Contents

This module will prepare you to launch a project

OBJECTIVES AND INTRODUCTION

After this module I will:

- Understand what is meant by a fast, effective project
- Understand the need to invest sufficient time in ensuring the project scope is right
- Be aware of the elements of project scope: the problem definition, stakeholders, criteria for success, what's out of scope
- Be aware of other elements of a project kick-off which relate to the proposed approach – workplans, deliverables, governance, stakeholder engagement, information requirements, key meetings, project risks, and team working styles

The module includes two sections:

- Scoping the project
- Kicking off the project

Problem solving and where the tools fit in

THE D5 APPROACH

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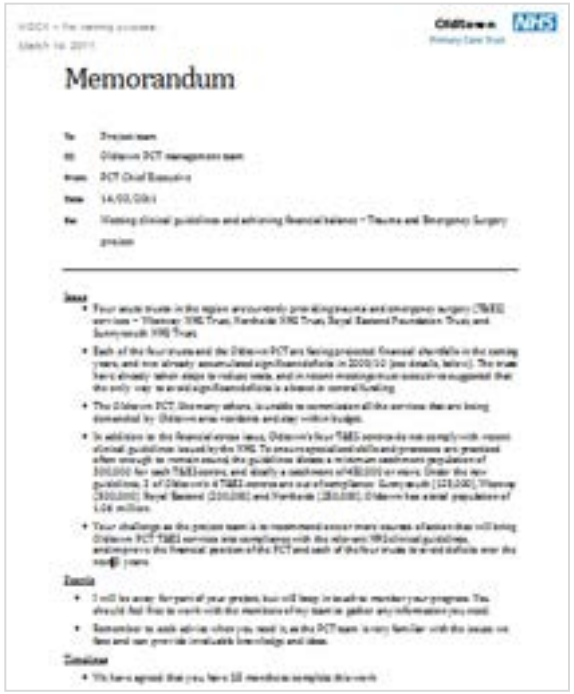
Supporting the effective delivery of health services

A CASE STUDY

Your project for the next three days is...

SCENARIO (1/2)

- You have all been seconded to work for a health-economy wide project team based at Oldtown ICB
- You are concerned with **meeting clinical catchment guidelines** and **achieving financial balance** for the ICB and the four trusts in the region
- You have come from a variety of NHS backgrounds in the local health economy; some from the four trusts in the region, others from departments in Oldtown ICB
- Despite the plurality of backgrounds, you are currently working for the ICB and committed to the best possible outcome for the local health economy, not just for a particular trust


Memorandum

To be read in conjunction with the kick-off memo

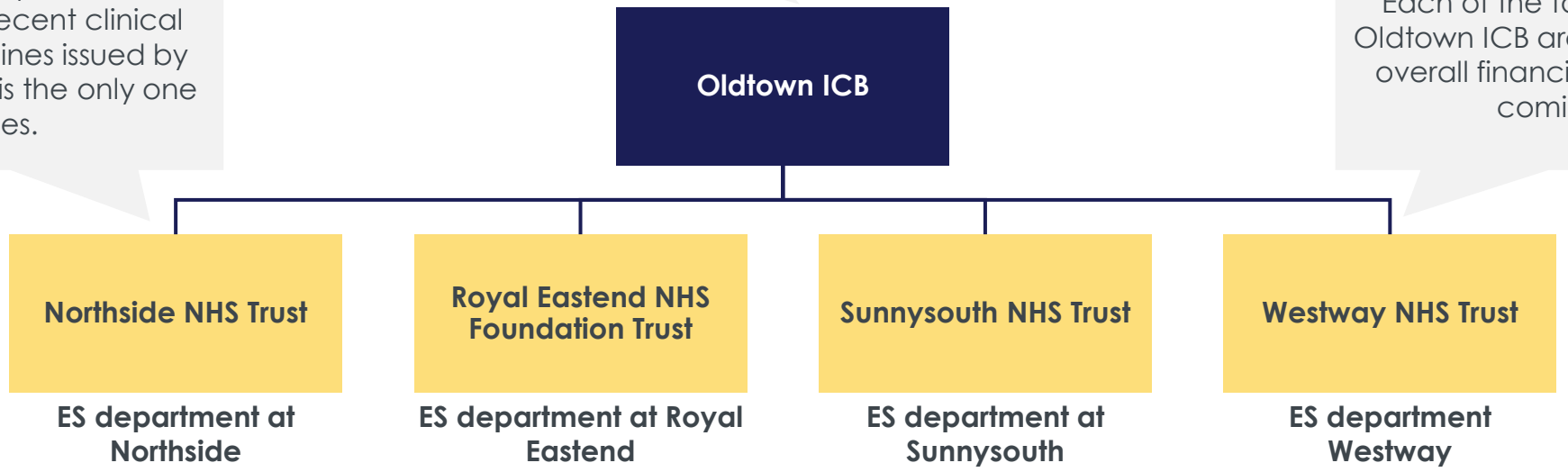
...what's the situation?

SCENARIO (2/2)

The Oldtown ICB is unable to commission all the services from the Trusts that are being demanded by Oldtown residents and stay within budget.

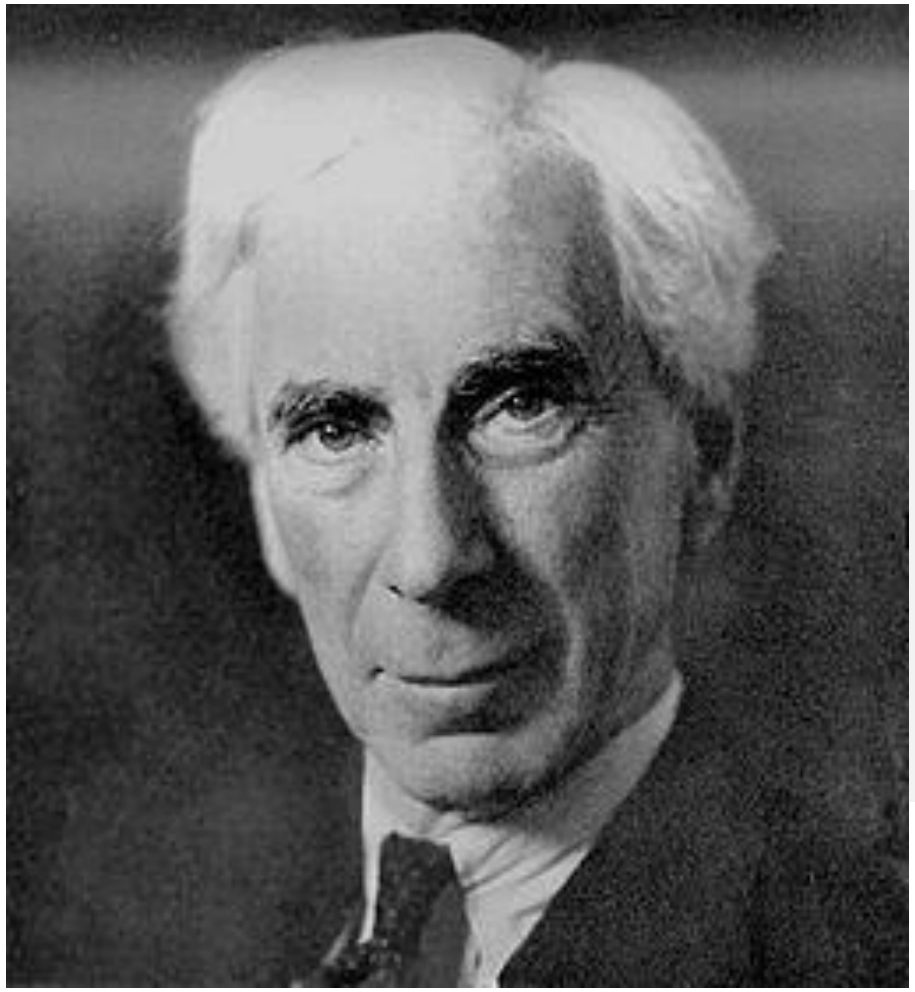
3 of Oldtown's ES departments do not comply with recent clinical catchment guidelines issued by the NHS. Westway is the only one that does.

Each of the four trusts and the Oldtown ICB are facing projected overall financial shortfalls in the coming years



Your challenge as the project team is to recommend one or more courses of action that will bring Oldtown ICB emergency services into compliance with the relevant NHS clinical catchment guidelines, and improve the financial position of the ICB and each of the four trusts to avoid deficits over the next 3 years (i.e., by the third financial year)

Establish the fundamental question to be resolved



"The greatest challenge to any thinker is stating the problem in a way that will allow a solution"

Bertrand Russell, British philosopher (1872-1970)

The Problem* Definition Sheet ('PDS')

- A Problem Definition Sheet sets out on a single page the question to be addressed and the important parameters of the project.
- They are helpful in ensuring everyone starts from the same understanding and agreement.

The problem statement needs to show the underlying question, and not a solution for it.

1. Basic question to be resolved	
2. Stakeholders, decision makers and project resourcing	3. Desired outputs and criteria for success
4. Scope of the work (in/out)	5. Outline timings and milestones
6. Context/ background	7. Constraints and risks/ dependencies/ interfaces

*Problem = question: something that requires a solution

The Problem Definition Sheet sets out your project on a page

PROBLEM DEFINITION SHEET (GUIDANCE)

1. Basic question to be resolved Be as specific as possible and, within this, as succinct as possible. The question should be time bound and refer to a specific organisation, department, or process. Describe the underlying question that the project is aiming to answer, so you can use it to shape your analysis and test your hypotheses.

2. Stakeholders, decision makers and project resourcing

- Who are the project lead, sponsor and project mentors?
- What type of **project governance** is needed to monitor quality, decide on plans and provide external challenge, for example, a project board or steering group?
- Who are the **key stakeholders** with whom you must engage? Where do you expect the most support for this project to come from?
- Who are your **delivery partners** (e.g. information team)?
- Who has **lived experience** of the question/problem to be resolved?

3. Desired outputs and criteria for success

- What are the **key performance indicators** (financial and non-financial) that will show the project has been successful? What targets are you aiming for on each one, for example, at least one option which meets criteria X / Y / Z, stakeholder support for our proposal to meet criteria X / Y / Z, a pilot demonstration of achieving Q / C / D)?
- What **specific end products** are required?
- Goals should be '**SMART**' (Specific, Measurable, Attainable, Realistic and Timely).

4. Scope of the work

- What's **included** within the project and what's not?
- If it is **out of scope**, is it being reviewed elsewhere?

5. Outline timings and milestones

- When are the project steering groups or **end of phase reviews**?
- When are the **key deliverables due**?

6. Context / background

Why is the work being done now?

7. Constraints and risks / dependencies / interfaces

- Outline the key likely **risks / constraints** to the project and any interaction with other projects or work.

Here's a draft PDS for a digital inclusion question – what can you learn?

PROJECT: DIGITAL INCLUSION ACTIVITIES IN WALES

1. Basic question to be resolved

What activities are being done to boost 'digital inclusion' in different organisations in Wales, including public services and businesses, and how can we help plan future policy interventions to support digital inclusion, by April 15th?

2. Stakeholders, decision makers and project resourcing

- Leadership Team for the Welsh Govt's 'Centre for Digital Public Services' (names)
- Leads for each of the key national digital programmes in Wales (names)
- Project team (names)
- Steering group (fortnightly)
- Monthly reporting to Centre for Digital Public Services
- Lived experience - People who: have engaged in digital inclusion activities, have been offered services but chosen not to engage, are in priority demographics

3. Desired outputs and criteria for success

Outputs:

- Directory of ongoing digital inclusion activities
- Signed-off report of ongoing digital inclusion activities

Outcomes:

- Directory is user-friendly and owned by a named member of the Leadership Team by the end of this project
- Processes are in place to ensure that the directory can be continually iterated based on new information
- Report includes initial analysis of trends in inclusion activities across Wales
- Agreement with leadership on the key implications and next steps arising from this initial analysis, with support from across key national digital programmes

4. Scope of the work

In scope:

- Comparing trends and gaps in digital inclusion activities across Wales
- Comparing Welsh approaches to international comparators e.g. UK Government's Essential Digital Skills framework
- Initial analysis of trends in the directory data
- Both public and private sector organisations

Out of scope: Setting the strategy for digital inclusion

- Recommendations of policy interventions or activities to stop/start/continue
- Researching the budget for digital inclusion or who has authority or governance over the inclusion activities

5. Outline timings and milestones

- Phase 1 by March – initial engagement with key leads and development of directory
- Phase 2 by April – analysis of director and writing of report, with multiple cycles of feedback and iteration
- Key meeting: Board meeting on 13th April, with papers due 8th April

6. Context / background

'Digital inclusion' is a priority in the Digital Strategy for Wales, referring to the government's aspirations to "equip people with the access, skills and confidence to engage with an increasingly digital world." This work has been prompted by the Welsh Government Chief Digital Officer's request to progress this work at pace.

7. Constraints and risks / dependencies / interfaces

- Early stakeholder engagement with senior individuals needed to identify key data access points and agree realistic scope for 'digital inclusion' activities
- Data availability may drive timeline
- Need for alignment with other national programmes, to avoid duplication

In small groups or pairs, develop a problem definition sheet using the template provided on the next slide

EXERCISE I: WRITING A PROBLEM DEFINITION SHEET

- Focus on Box 1 – "Basic question to be resolved"
  - If this is proving difficult (and it often is!) then first have a go at Box 6 – "Context". And then return to Box 1.

- If you finish Box 1, move next to Box 3 – "Desired outputs and criteria for success"

- If you finish Boxes 1 and 3, complete whichever other boxes you wish

20 minutes

PROBLEM DEFINITION SHEET (TEMPLATE)

Project Title:

1. Basic question to be resolved:

2. Stakeholders, decision makers and project resourcing
- xx

3. Desired outputs and criteria for success
- xx

4. Scope of the work
- xx

5. Outline timings and milestones
- xx

6. Context
- xx

7. Constraints and dependencies/interfaces
- xx

Often you will need additional information to create a kick-off pack which ensures sponsor and team are fully aligned

TOOL: KICK-OFF PACK TEMPLATE

Project context	▪ Kick-off agenda ▪ Problem Definition Sheet (PDS)
Proposed approach	▪ Project deliverables/ project tracker ▪ Issue tree ▪ Information requirements ▪ Governance ▪ Stakeholder checklist ▪ Project workplan ▪ Key meetings ▪ Key risks
Project context	▪ Team composition and timing ▪ Team working: working styles, team norms and logistics

In small groups, use the provided kick-off pack to prepare to meet with your CEO

EXERCISE 2: ICB CHIEF EXECUTIVE OFFICER

- Your team has developed a kick-off pack
- In small groups or pairs, review the contents of this kick-off pack and decide what message to share with the CEO (10 min)
- One group, selected at random, will present their kick-off pack to the CEO (20 mins)
- Debrief discussion (15 mins)

45 minutes

Use the prompts below to guide your reflection

USE ADAPTIVE ACTION TO REFLECT ON YOUR LEARNING

What?

- What did you notice in your learning?
- What surprised you?
- What's different to what you've learnt about this before? What's the same?
- What are you feeling about this cycle of learning?

So What?

- So what could this mean?
- So what are the implications for you, for your project, for your role?
- So what are your options for action?

Now What?

- Now what will you do?
- By when?
- How will you know when you've got there?

Contents

Where are we in the case?

CASE RECAP

- There are four trusts in Oldtown ICB: Westway NHS Trust, Northside NHS Trust, Royal Eastend NHS Foundation Trust and Sunnysouth NHS Trust. Each of the trusts and the ICB is facing financial pressures in the coming years. Only one of the trusts, Westway, is currently complying with recent NHS clinical catchment guidelines regarding emergency services catchment population
- Your team is to recommend one or more courses of action to the ICB CEO to address these challenges
- Your team has defined the problem to be addressed as 'How can Oldtown ICB ensure that emergency services meet clinical catchment guidelines and contribute towards financial balance by end of FY3?'
- The CEO feels strongly that reconfiguration – meaning closure of emergency services at one or more of the four trusts – is the only way forward to resolve the financial and clinical catchment guidelines issues.

Module 2 will prepare you to structure your problem and set up a work plan

OBJECTIVES AND INTRODUCTION

After this module I will:

- Understand how to disaggregate problems into core elements and translate this into a work plan
- Understand the importance of prioritisation – including which issues to focus on and where to expend team efforts

The module includes three sections:

- Breaking down the problem with issue trees
- Assessing analytical priorities with 2x2 matrices
- Planning the work

Problem solving and where the tools fit in

THE D5 APPROACH

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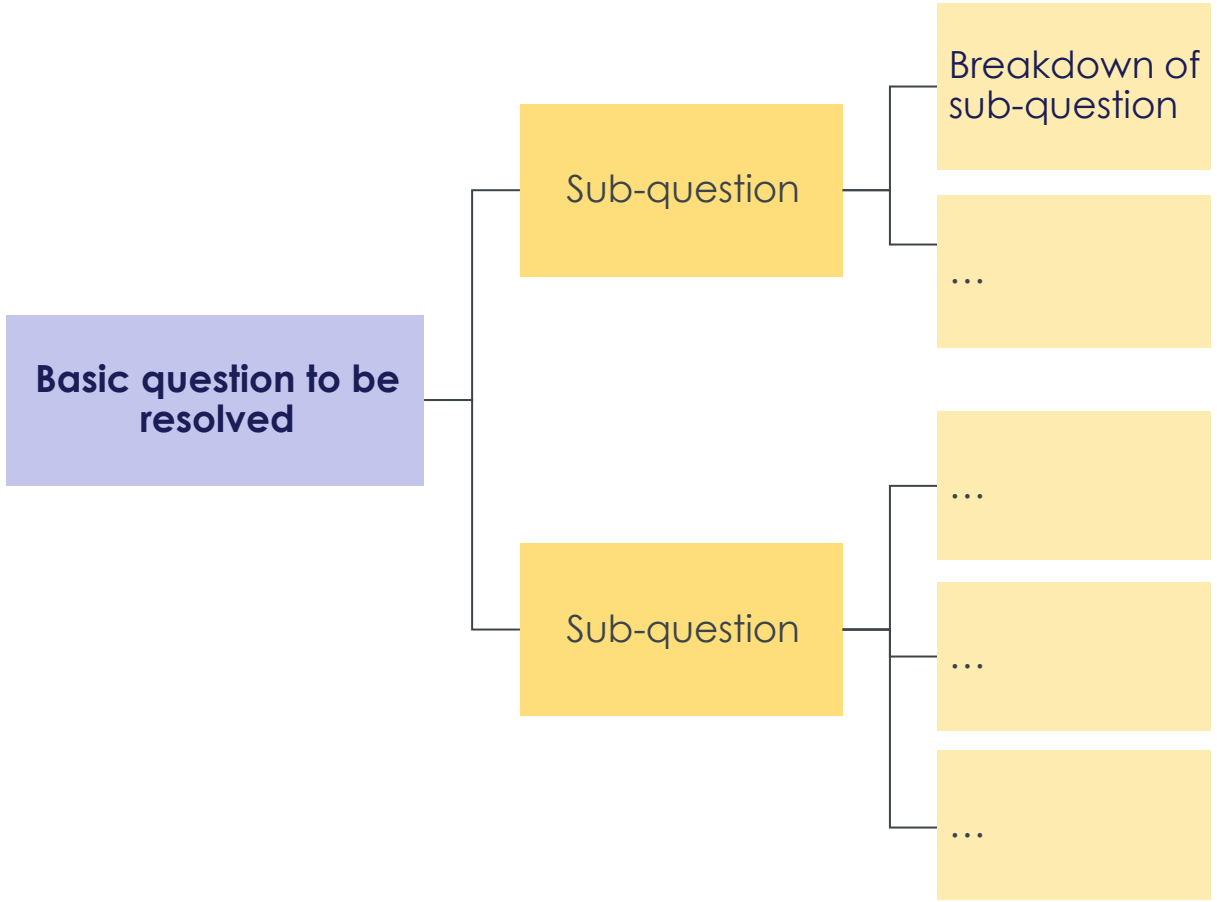
You can use an issue tree to disaggregate your question into effective workstreams

ISSUE TREES - INTRODUCTION

Why are issue trees important?

Once you've written the problem statement, the next step is to break the problem down into manageable chunks. The issue tree helps you to:

1. Break the work down into clear, separate workstreams
2. Give you confidence that you've looked at the full extent of the project



*Issue = question: Do not confuse with issues on a risk log, or an arising operational issue

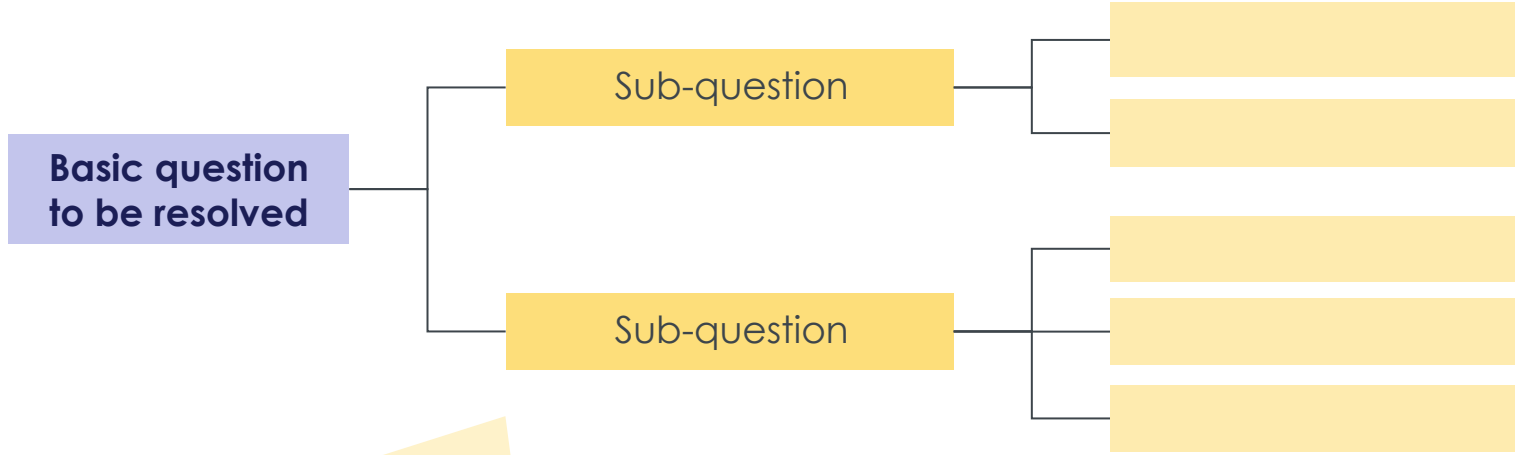
An issue tree sets out the 'basic question to be solved', and breaks it out into increasingly more specific questions

HOW ISSUE TREES WORK

An Issue Tree sets out the 'basic question to be resolved', and breaks it down into increasingly more specific questions.

The right-hand side of an Issue Tree shows a set of areas of potential experiments / solutions / analyses / workstreams

An Issue Tree works by setting out the 'basic question to be resolved' on the left-hand side of the page, then breaking out this question into increasingly more specific questions as you go from left to right



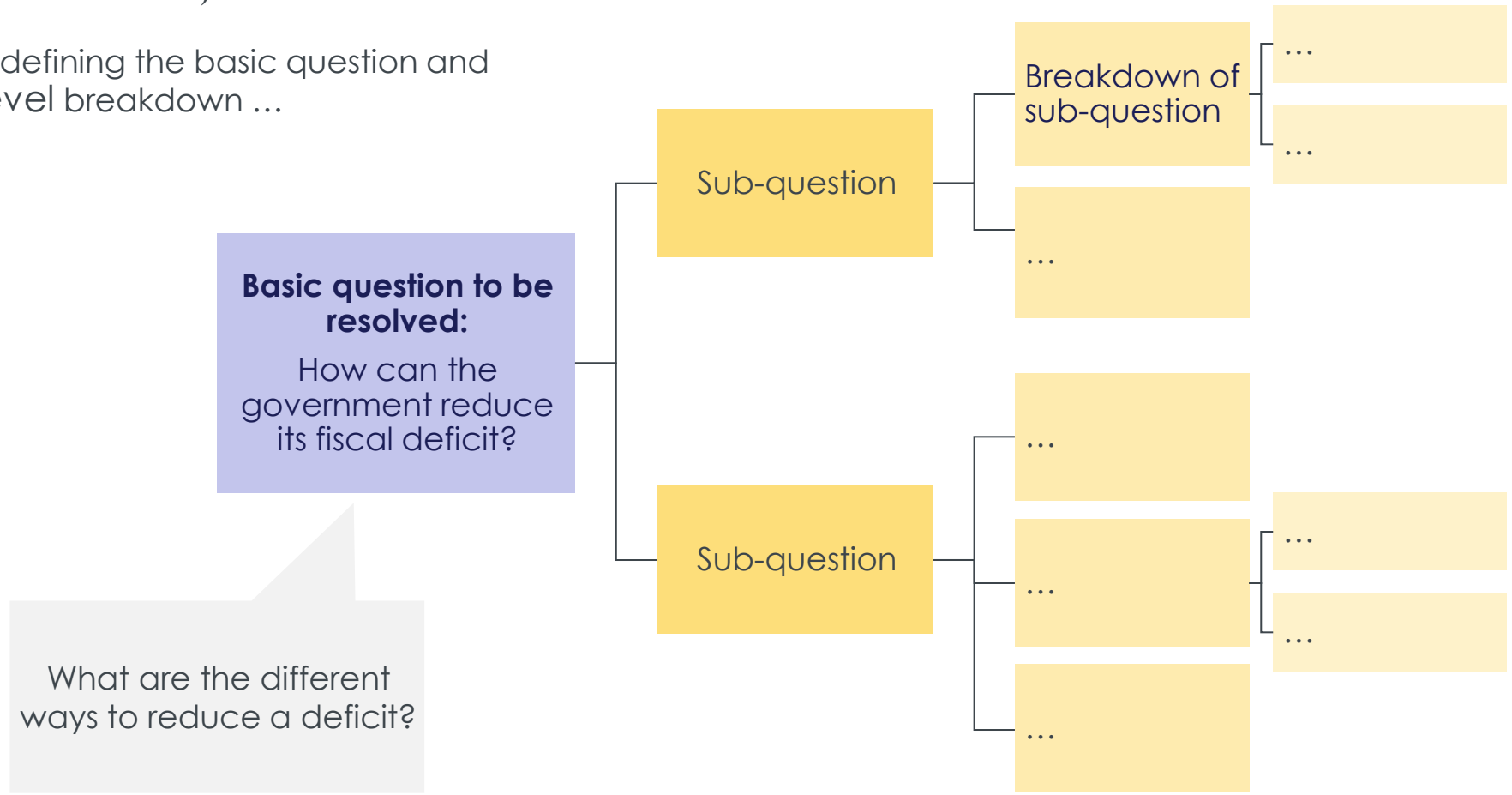
Good Issue Trees have questions at each level (vertical cut through the Tree) which:

a) can be answered without reference to other questions in the same level (**M**utually **E**xclusive questions)
b) when taken together, add up to the question to the left (**C**ollectively **E**xhaustive questions)

Start your issue tree by defining the basic question, and think about your first level breakdown

ISSUE TREE EXAMPLE (FISCAL DEFICIT)

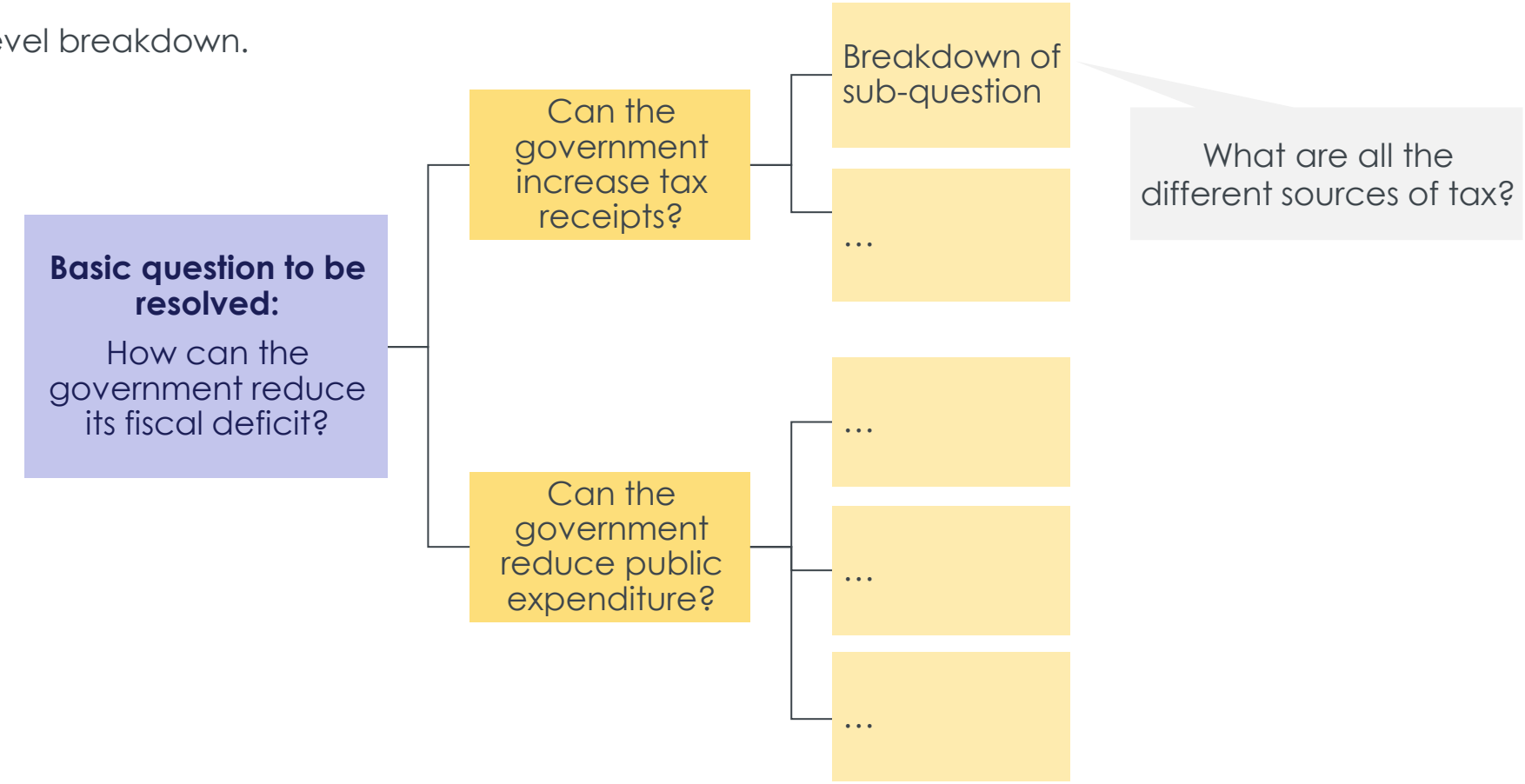
Start your Issue Tree by defining the basic question and think about your first-level breakdown …



Then work through your second level breakdown

ISSUE TREE EXAMPLE (FISCAL DEFICIT)

…then work through your second-level breakdown.



Stop breaking down when your sub-issues are sufficient to drive independent workstreams

ISSUE TREE EXAMPLE (FISCAL DEFICIT)

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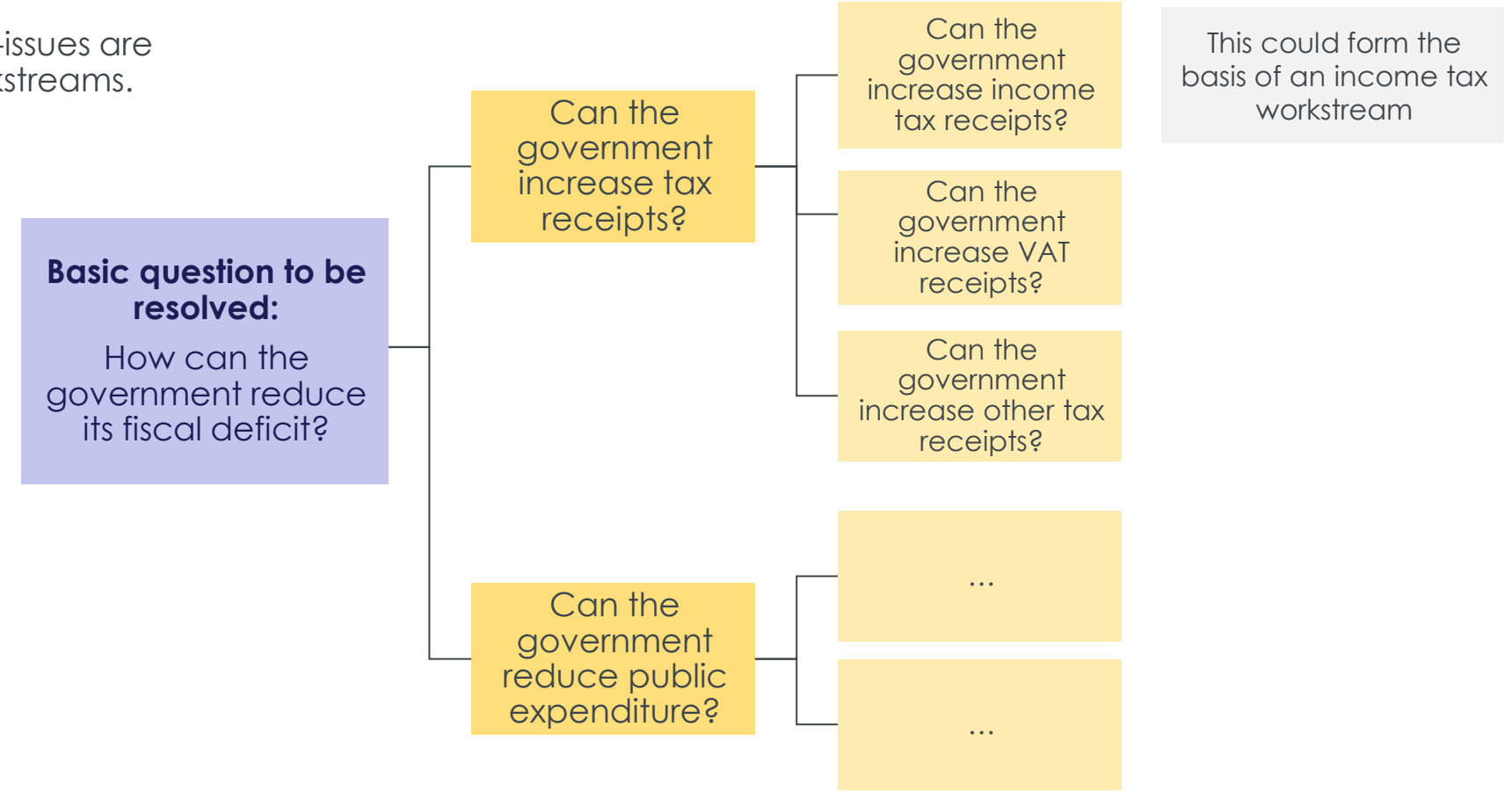


What happens if an issue tree is not MECE?

MECE ISSUE TREES

	Implications if not
Mutually Exclusive	▪ Workstreams become tangled together, with minor changes to one part of the answer affecting other parts of the problem solving
Collectively Exhaustive	▪ Important analyses may be missed

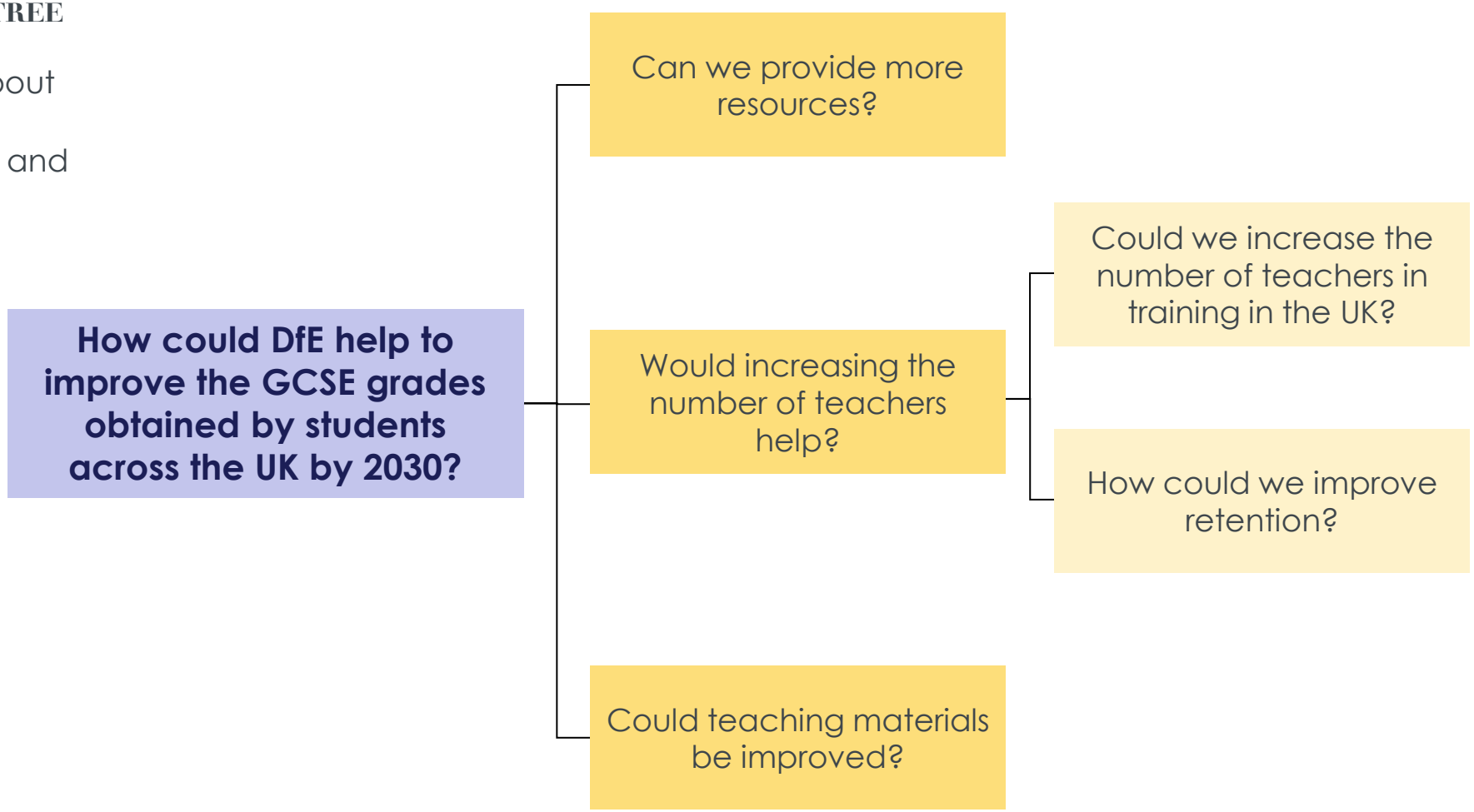
Conversely, a MECE issue tree implies that:

- All the questions at the right hand side collectively add up to the 'basic problem to be solved', without overlapping
- You have reached the right level of disaggregation when the questions are specific enough to assign resources to them

What's weak/ineffective about this tree? Is it MECE?

WORKED EXAMPLE: A WEAK ISSUE TREE

- What is weak or ineffective about this Tree?
- Is it 'MECE' (Mutually Exclusive and Collectively Exhaustive)?



 Source: Illustrative team analysis

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WORKED EXAMPLE: A WEAK ISSUE TREE

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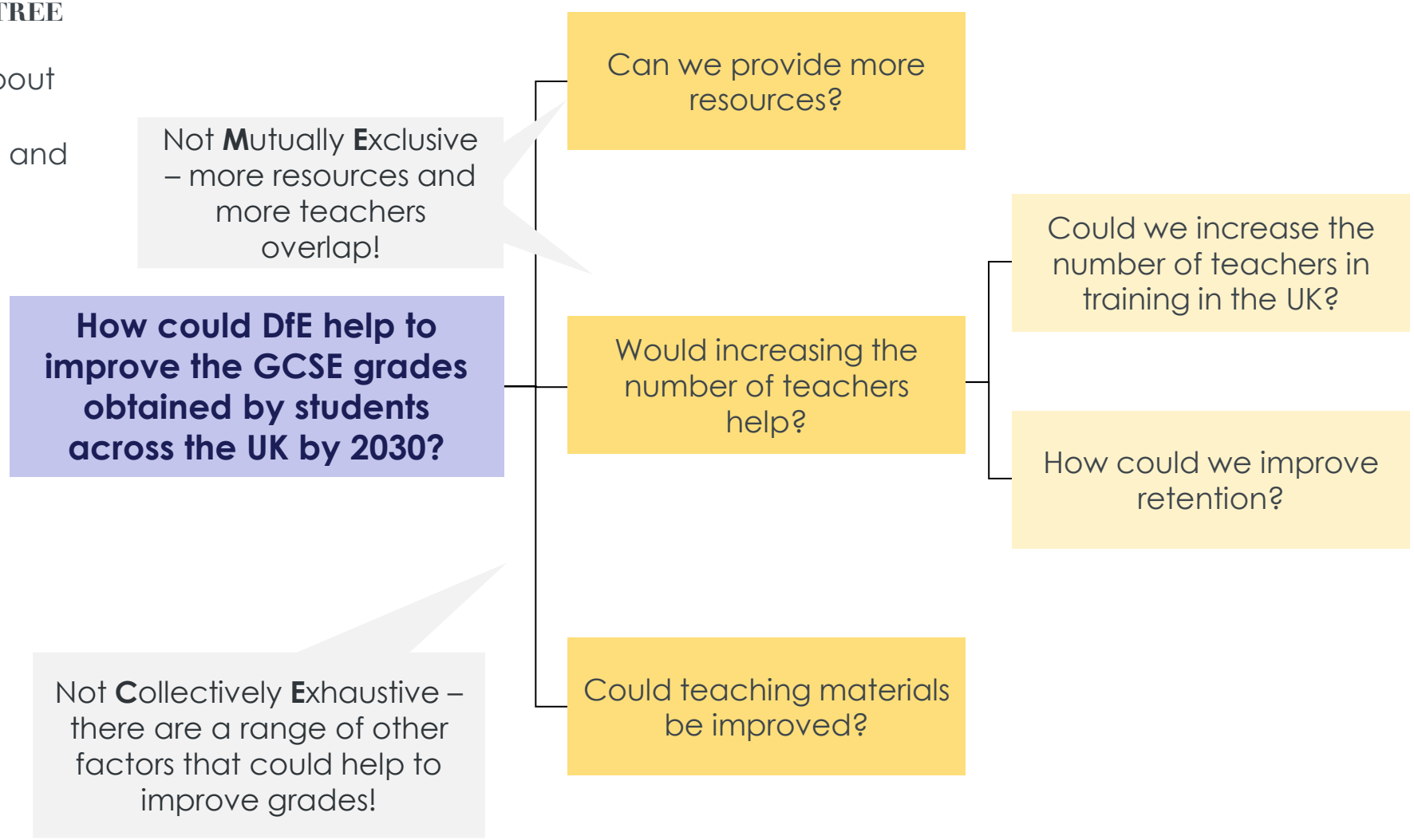
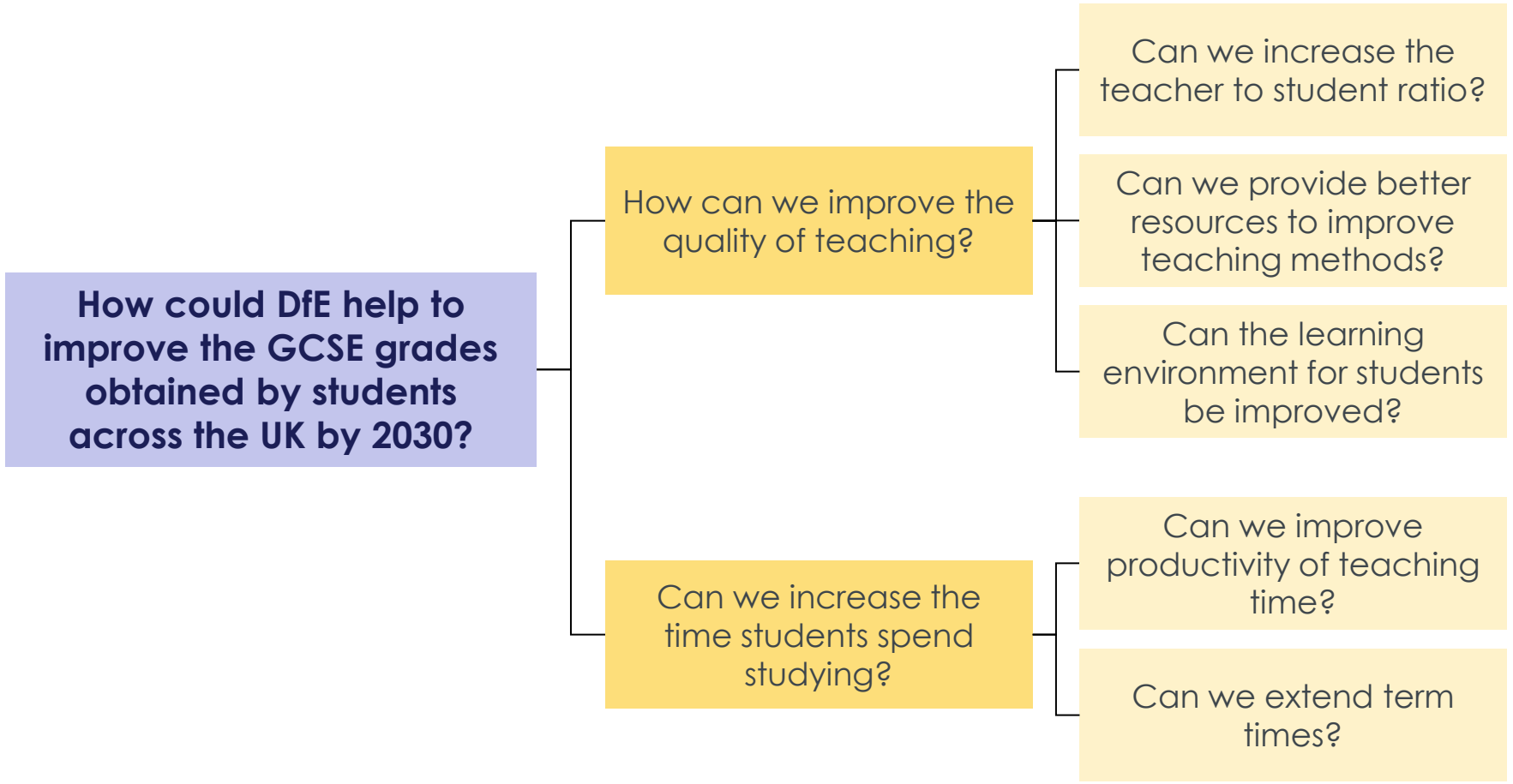


 Source: Illustrative team analysis

Is this one stronger / more effective? Why?

WORKED EXAMPLE: A STRONG ISSUE TREE



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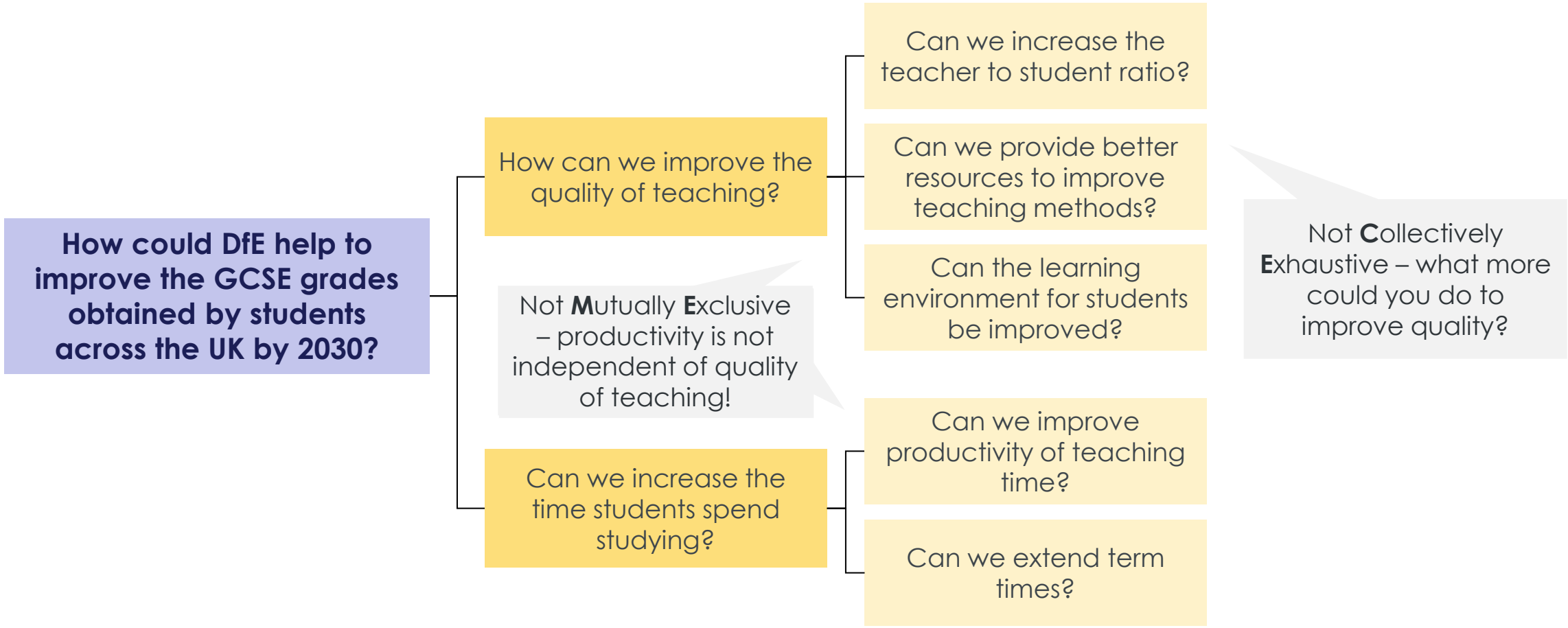
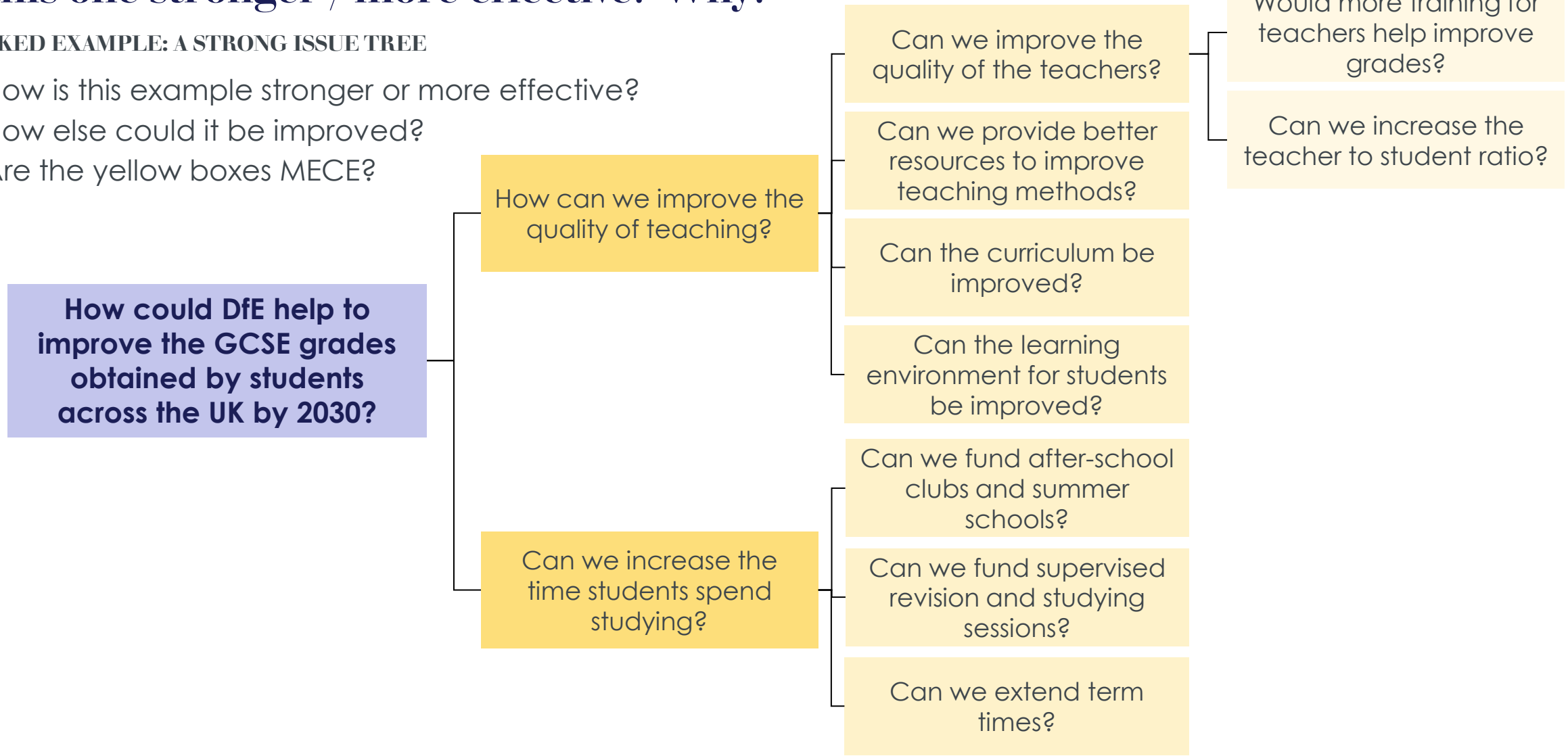


 Source: Illustrative team analysis

Is this one stronger / more effective? Why?

WORKED EXAMPLE: A STRONG ISSUE TREE

- How is this example stronger or more effective?
- How else could it be improved?
- Are the yellow boxes MECE?



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WORKED EXAMPLE: A STRONG ISSUE TREE

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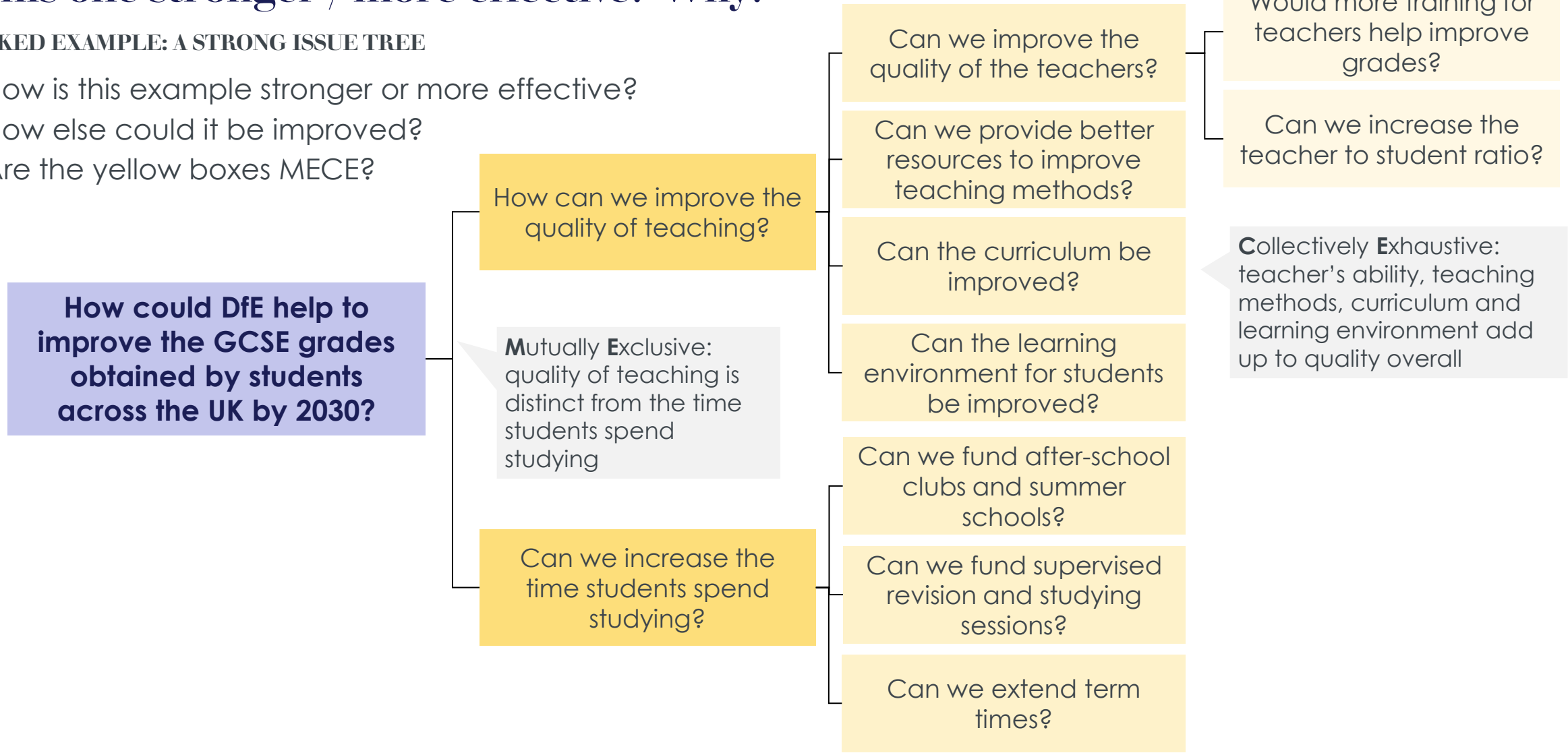
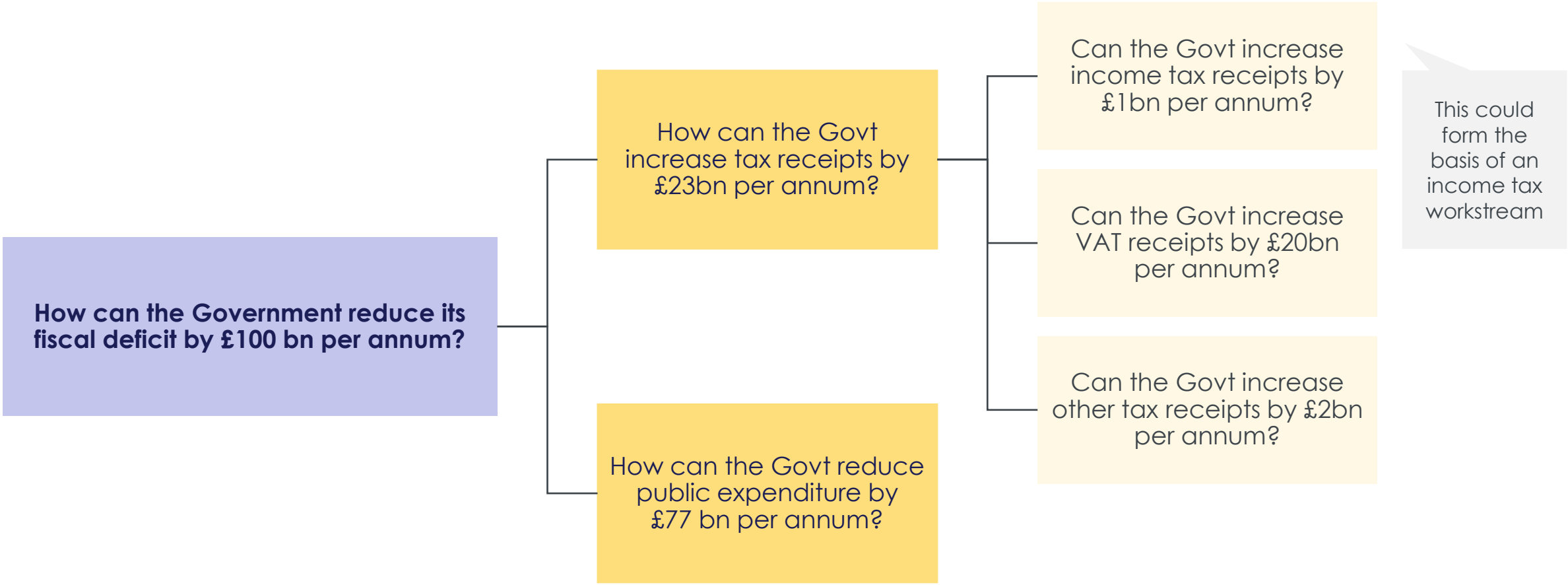


 Source: Illustrative team analysis

Where appropriate, a MECE issue tree can work mathematically

ISSUE TREE – MATHEMATICAL EXAMPLE



A few things to keep in mind when using issue trees to structure your work

ISSUE TREES KEY POINTS

1. **Keep iterating the tree throughout the project as you develop your answer** – the first draft of the tree will help unlock the key general questions and will lead to hypotheses which in turn allow the next iteration of the issue tree to be re-cut in a way which gets to the heart of the problem
2. **Don't go beyond ~4 levels of the tree** – if you have many levels, you've probably gone into too much detail
3. **Use established frameworks to ensure MECEness** – if the problem is on profit, the first level should probably be 'revenues' and 'costs'
4. **Capture and challenge existing myths and preconceptions in your issue tree** – these are often referred to by stakeholders
5. **Focus on content, not process** – "What data is available?" and "How should we evaluate options?" are not valid questions for solving the problem, whereas "By how much can productivity be improved?" is
6. **There is no single right answer** – although it is important for the tree to be MECE, it does not need to be perfect and there are multiple "right answers"
7. **Issue Trees are useful in making your case to stakeholders** – not to present to them, but to demonstrate thinking

In pairs or small groups, try developing your own issue trees to break down the clinical catchment guidelines question

EXERCISE 1: CASE STUDY – DISAGGREGATING THE PROBLEM WITH AN ISSUE TREE

In pairs or small groups:

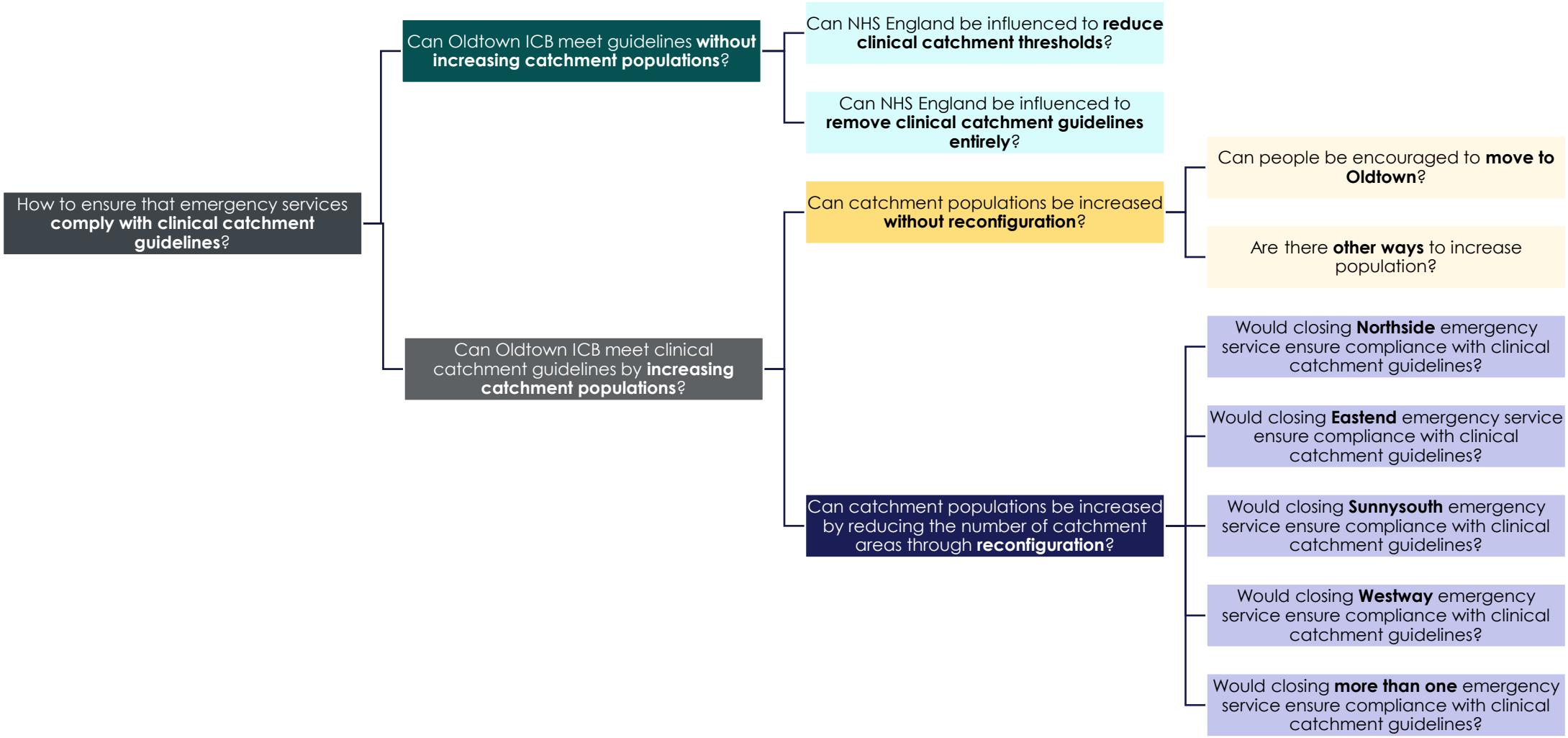
- Try developing your own sub-issue tree to breakdown the highlighted sub-question:

"what can be done to ensure emergency services comply with clinical catchment guidelines?"

**15 minutes in pairs or small groups;
5 minutes together**

EXAMPLE SOLUTION:
Week 1 project issue tree – draft for review

EXERCISE 1 (S)

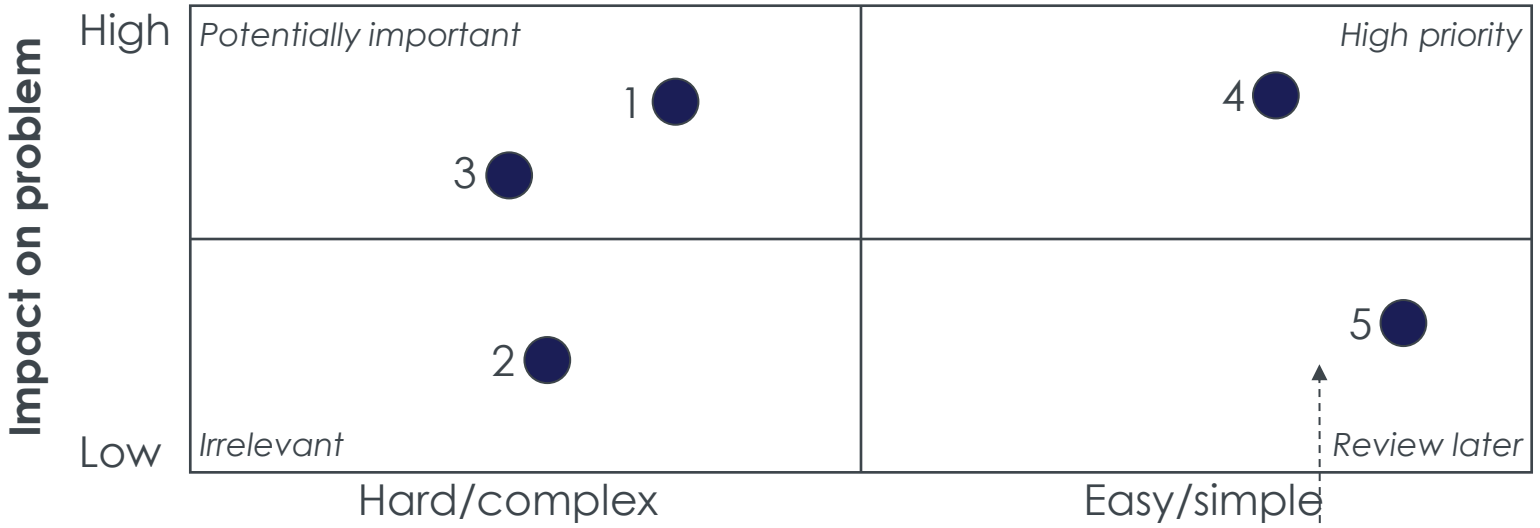


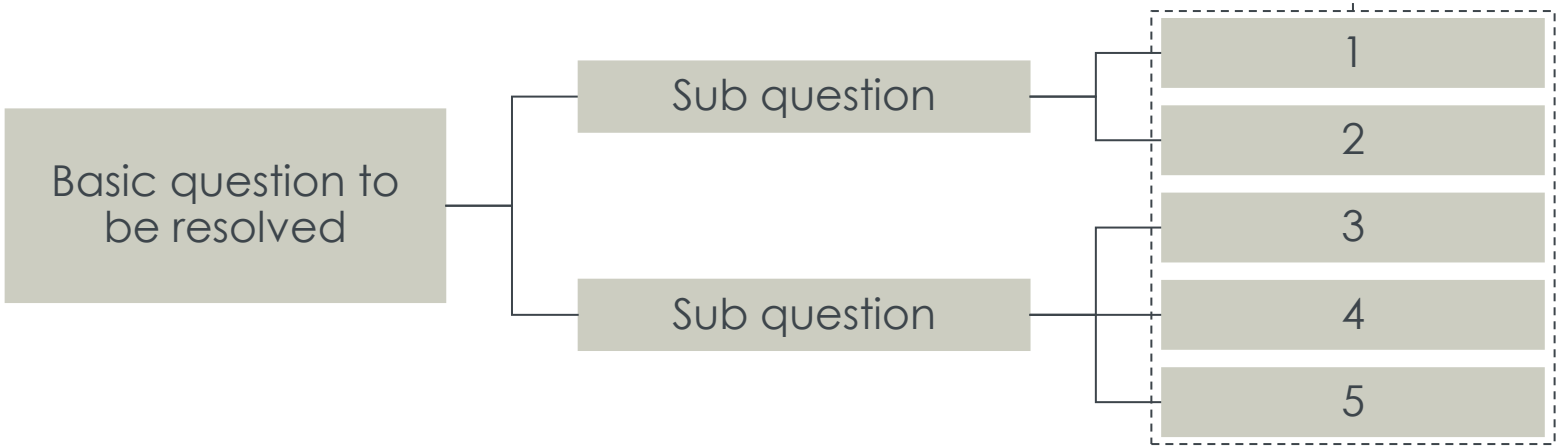
You are unlikely to have the time/resources to address all of the actions in your issue tree, so will need to prioritise...

PRIORITISATION TOOL

Creating an issue prioritisation matrix

1. Develop a set of prioritisation criteria that are most appropriate to your project – e.g., timing vs impact, impact vs level of control, impact vs effort to assess
2. Develop a matrix using the criteria and take each question from the issue tree and put on the matrix
3. Focus your team's time on the questions that are most impactful and timely/within control (the top right hand corner of the matrix)





Use prioritisation to help you focus your activities

TIPS FOR PRIORITISING

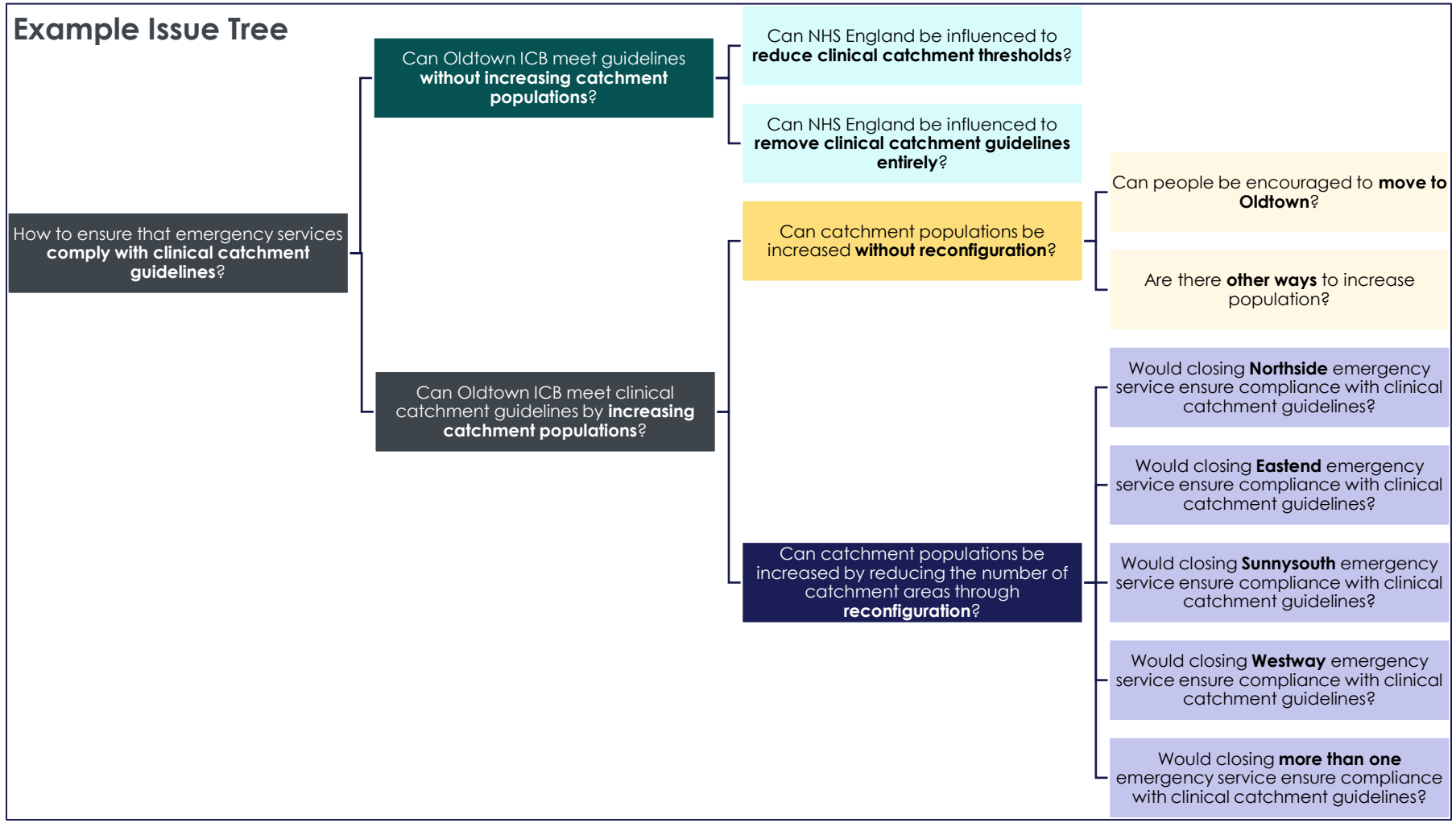
- **Prioritise ruthlessly** – to make sure the team is focused on the aspects that matter most
- Use simple tests to **determine impact** when prioritising. If a back-of-the-envelope calculation shows that an area of cost is known to be small, don't waste time analysing how small – it won't matter
- Don't forget to include the **high impact analyses** required later in the problem solving– although they can wait a while, they still need to be done

Develop a prioritisation grid based on the clinical catchment guidelines issue tree from exercise 1

EXERCISE 2: PRIORITISING ISSUES

- Have a go at using the matrix to prioritise your issues
- Either use your own issue tree from the previous exercise, or the example
- Start by agreeing your two prioritisation criteria (e.g. impact/ease) for your 2x2 matrix
- Then assess each of your most-detailed sub-questions against these criteria, and plot them onto the matrix

15 minutes in pairs or small groups;
5 minutes together



Now you've prioritised which work-streams to focus on, use them to plan and schedule your team's work

PLANNING AND TRACKING THE WORK

- Once you've written the actions needed from the issue tree, you can use these to create your work plan
- The work plan should incorporate the workstreams/actions that you have identified in the issue tree and show the timings for each of these

*Typical problems that arise when a **work plan** is not used:*

- *"We didn't know what the expected output of the work was meant to be"*
- *"We were unprepared for key meetings and struggled to meet deadlines"*

A "boat chart" or "project on a page" style work plan is a useful overview for both project leads and stakeholders

EXAMPLE 'BOAT CHART' PROJECT WORKPLAN

	September	October	November	December	January
	Set-Up	**Diagnosis and Option Development**		**Option Development and Review**	**Recommendations and Report Development**
Estimated Duration	**1-2 weeks**	**~1.5 months**		**~1 month**	**2-3 weeks**
Key activities	▪ Understand context ▪ Establish team working relationships ▪ Identify key stakeholders ▪ Put in data requests ▪ Set up interviews / fieldwork	▪ Conduct interviews with key stakeholder groups (see separate slide for initial list) ▪ Gather data and patient MI ▪ Determine analytical priorities and conduct analyses		▪ Collate and review findings ▪ Conduct follow-up interviews as appropriate	▪ Share recommendations ▪ Work with Steering Group to: – Influence key decision-makers – Develop outline action plan for implementation
Key meetings	▪ First Steering Group meeting ▪ Kick off working team meeting	▪ Workshop to test and improve initial findings (October 21) ▪ Steering Group (first week of November)		▪ Workshop to develop options (early November) ▪ Steering Groups (first week December)	▪ Final Steering Group (last week December) ▪ Workshop improve options and agree recommendations (second week December)
End products	▪ List of interviewees / fieldwork ▪ Interview guides ▪ Data request	▪ Initial findings report diagnosing strategic challenges		▪ Emerging recommendations report, including: – Interim list of options, with associated financial impact – SWOT analysis / risk assessment of delivering each option	▪ Final report

TIP: Start from the bottom right, then work up and across!

Make sure your workplan is a simple, and useful document, which you can use to drive your project

TIPS FOR WORK PLANNING

- Keep it simple – the purpose is to help the team achieve the project objectives on time and in full, running the work plan is not an objective in itself
- The primary use of the work plan often ends up as a communication tool to the stakeholders – so make sure it is easily understandable (avoid jargon and acronyms) and can be communicated on a single page

A risk log is useful to facilitate risk identification and mitigation

RISK LOGS

- **Risk:** A potential problem that has not yet happened, should be mitigated
- **Issue:** A problem that has arisen, requires action and resolution

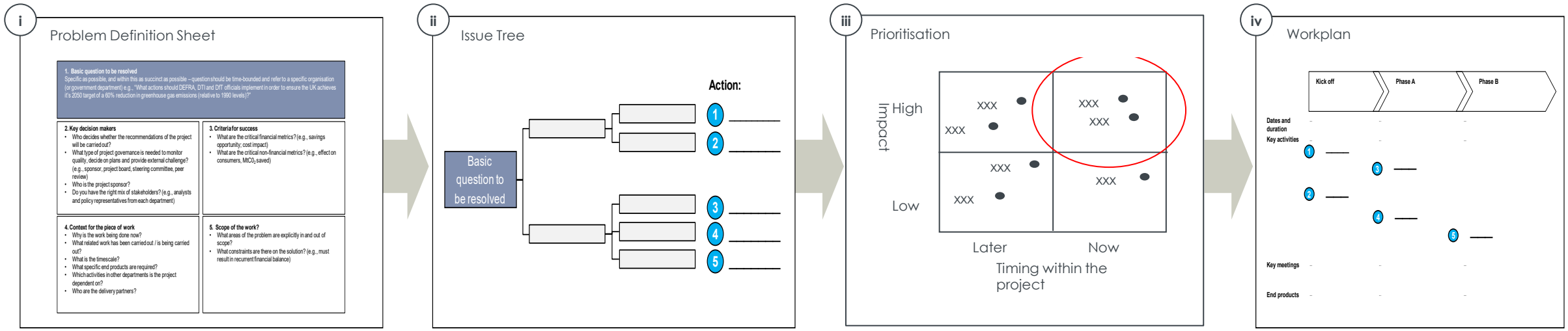
No.	Risk description	Potential impact	Mitigation / Action	Post-mitigation score			Owner
				Impact (1 – low, 5 – high)	Likelihood (1 – low, 5 – high)	Total score	
1.	Unable to schedule interviews within time available	Information /views not accessed in time to inform recommendations	Contact interviewees as early as possible; draw on stakeholders to encourage prioritisation of this work	3	4	12	XX
2.	Analysis is inconclusive	Unable to generate evidence-based recommendations	Regularly review analyses and insights to ensure they are leading to logical conclusions	4	1	4	XX

Discussion: How do you use risk logs within your organisation? What would make them more effective?

The tools link together through the project process

RECAP

To efficiently solve a problem, you need to know what the problem is, break it down into manageable chunks, and assign dated actions to them



Use the prompts below to guide your reflection

USE ADAPTIVE ACTION TO REFLECT ON YOUR LEARNING

What?

- What did you notice in your learning?
- What surprised you?
- What's different to what you've learnt about this before? What's the same?
- What are you feeling about this cycle of learning?

So What?

- So what could this mean?
- So what are the implications for you, for your project, for your role?
- So what are your options for action?

Now What?

- Now what will you do?
- By when?
- How will you know when you've got there?

Contents

Where are we in the case?

CASE RECAP

- There are four trusts in Oldtown ICB: Westway NHS Trust, Northside NHS Trust, Royal Eastend NHS Foundation Trust and Sunnysouth NHS Trust. Each of the trusts and the ICB is facing financial pressures in the coming years. Only one of the trusts, Westway, is currently complying with recent NHS clinical catchment guidelines regarding emergency services catchment population
- Your team is to recommend one or more courses of action to the ICB CEO to address these challenges
- Your team has defined the problem to be addressed as 'how can Oldtown ICB ensure that emergency services meet clinical catchment guidelines while ensuring financial balance in emergency services by end of FY 3?'
- The ICB CEO feels strongly that reconfiguration of emergency services is the only way forward to resolve the financial and clinical catchment guidelines issues
- **Your team has developed an issue tree to dissect the clinical catchment guidelines challenge, isolating four high priority sub-questions related to closing acute emergency services**

Module 3 will prepare you to engage with stakeholders effectively throughout your project

OBJECTIVES AND INTRODUCTION

After this module I will:

- Be able to plan and prioritise stakeholder engagement
- Be aware of effective techniques for engaging with and influencing stakeholders
- Understand good interviewing technique

This module contains the following elements:

- Identifying and prioritising **who** needs to be influenced
- Understanding **how** to engage with and influence stakeholders:
  - Assessing stakeholder support
  - Understanding stakeholder perspectives
  - Building relationships
  - Influencing and negotiating techniques
- Planning for a potentially challenging meeting

Problem solving and where the tools fit in

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, **engaging with stakeholders to understand their view**

Using quantitative and qualitative data and tools to discover the current state of a process or service, best practice and/or the root causes of a problem.

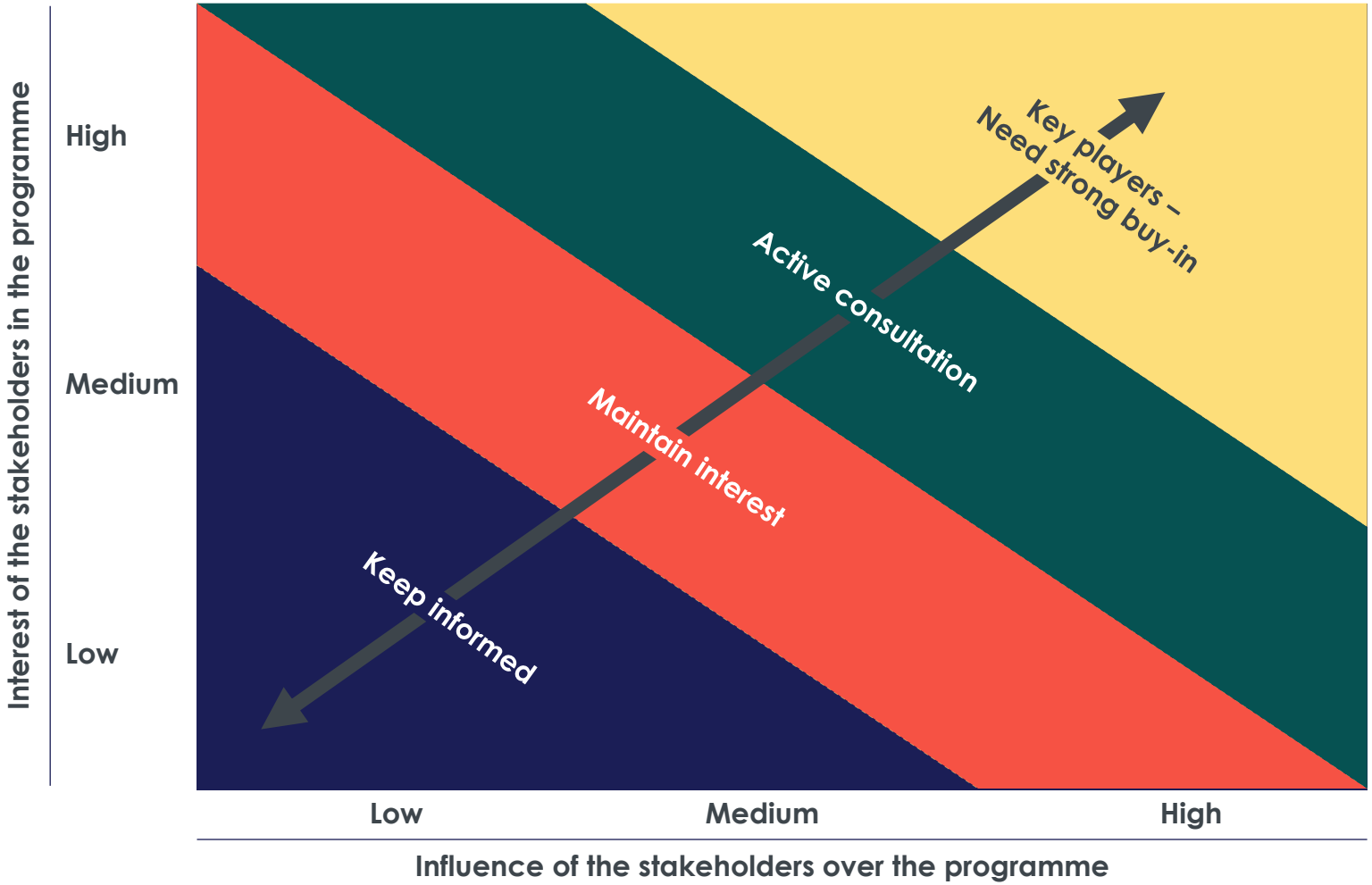
Establishing a vision for a future state: developing strategic recommendations and/or specific changes using design tools, options generation & evaluation

Using rapid improvement cycles to test changes, planning for implementation, engaging stakeholders in implementation and delivering a sustainable change

Frequent review of improvement cycles, evaluating the outcomes of a project, identifying improvements and communicating success

Mapping your programme stakeholders onto an influence/interest matrix can help you think through the level of engagement appropriate for each

INFLUENCE/INTEREST MATRIX



 Source: Office of Government Commerce

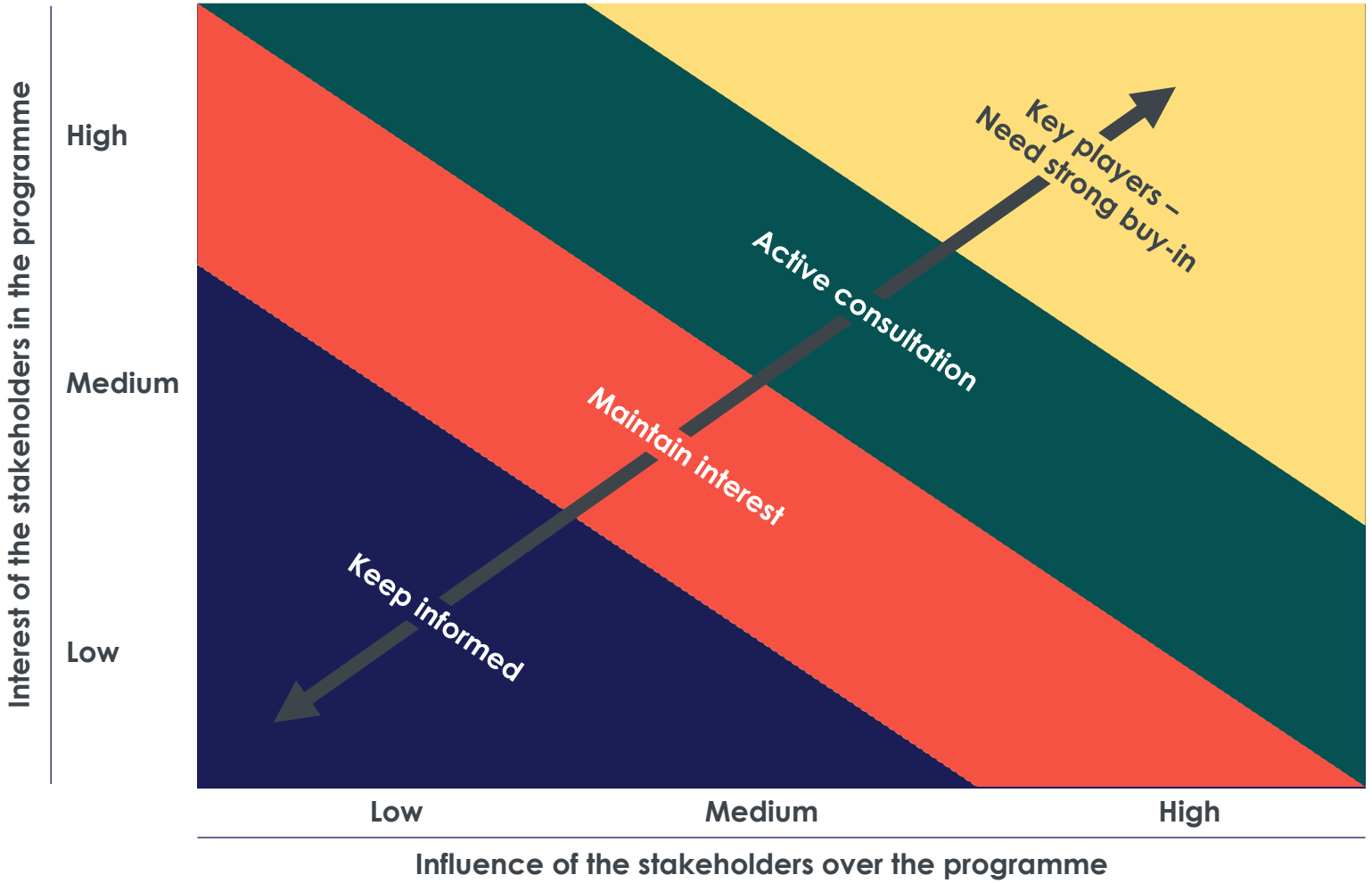
Then use a stakeholder engagement plan to translate the mapping on the matrix into a practical approach & next steps

TEMPLATE: STAKEHOLDER ENGAGEMENT PLAN

Name	Role	Engagement approach	Next steps	Forum invitations?		
				Programme board	Working group	Steering group
		Engagement approach should be proportional to position and category on the matrix	*E.g. X to reach out directly*			

In small groups, develop a matrix and plan for key stakeholders in the case

EXERCISE I: PLANNING FOR STAKEHOLDER ENGAGEMENT



In small groups, develop a matrix and plan to engage key stakeholders for your programme

- Start by developing a list of stakeholders – refer back to your Problem Definition Sheet and the Kick-Off Memo
- Then, use the matrix to sort and prioritise
- Complete the process by developing a brief plan for how you intend to engage each stakeholder / stakeholder group

15 minutes

Where you need to assign more formal programme governance roles & responsibilities to stakeholders, consider using a RACI framework

RACI FRAMEWORK

- RACI helps clarify *who does what* on a programme, helping to reduce ambiguity and streamline decision-making.

Responsible	Delivers the work and drives tasks forwards to completion
Accountable	Owns the outcome and signs off on the final decision or result
Consulted	Provides expert input and is engaged for feedback before action
Informed	Kept updated on progress and outcomes without needing direct involvement

- Be careful of assigning more than one stakeholder as Accountable
- In theory, an individual stakeholder could be both Responsible and Accountable – but there is a risk of conflating the two roles

The CEO has arranged for you to meet Northside's strategy director later today.....

CASE STUDY: A POTENTIALLY CHALLENGING STAKEHOLDER MEETING

Catherine M is the Strategy Director of Northside NHS Trust and, as such, is likely to be a key stakeholder for the project and for the implementation of any recommendations.

Catherine was overheard earlier in the day by the team expressing a lack of familiarity and distrust of the project team, and the project as a whole. She is not aware that she was overheard. Catherine has had a negative experience with external project teams in the past.

Some information on Northside NHS Trust as background:

- 700 bed, single site District General Hospital
- £2.1m surplus in the last financial year
- Excellent for 'Quality of Care' and Good for 'Use of Resources' in most recent CQC ratings
- Hosts MDHU (Military hospital)
- Provides healthcare for patients in the north west of the ICB
- Emergency services catchment: 250,000

Think through the content of the meeting and the key topics to cover

EXERCISE 2: INITIAL MEETING OUTLINE PREPARATION

Make an outline plan for your meeting with Catherine M, taking into account her level of interest, influence and support for the project. Use the following questions to support you in your planning:

- What phase of the project are we in and, thus, what are the most important things you would like to achieve in the meeting?
- Where does Catherine sit within the stakeholder prioritisation grid? What does this mean for the meeting?
- What are the key questions you would like to ask to help you answer the basic question to be addressed on your Problem Definition Sheet?

10 minutes

Understanding the stakeholder perspective

THE TRUST EQUATION

$$\text{Trust} = \frac{\text{Credibility} + \text{Reliability} + \text{Intimacy}}{\text{Self-orientation}}$$

Component	Definition	Risks of ignoring element
Credibility	▪ **Words**: Credentials and honesty	▪ People may be less willing to believe or buy into your claims and suggestions
Reliability	▪ **Actions**: Promises kept	▪ You may be seen as irresponsible or unable to deliver what someone needs
Intimacy	▪ **Emotions**: Feel comfortable talking to you about the sensitive, personal issues connected to the surface issue	▪ You may not be seen as "human", and others may not feel comfortable sharing information with you
Self-orientation	▪ **Motives**: Know that you care about serving our interests	▪ You may be seen as manipulative, and others may doubt the intentions behind your claims and suggestions

Source: "The Trusted Advisor", David Maister, Robert Galford, Charles Green

Myers-Briggs personality types communicate people's preferences based on four aspects of their personality

MYERS-BRIGGS PREFERENCE PAIRS

Extraversion	e	or	i	**Introversion**
	Opposite ways to direct and receive energy			
Sensing	s	or	n	**Intuition**
	Opposite ways to take in information			
Thinking	t	or	f	**Feeling**
	Opposite ways to decide and come to conclusions			
Judging	j	or	p	**Perceiving**
	Opposite ways to approach the outside world			

Source: "Introduction to Myers-Briggs Type", Isabel Briggs Myers, Seventh Edition

What is your ideal workplace environment?

MYERS-BRIGGS TYPE INDICATOR – E/I EXERCISE

How would you describe your ideal workplace environment? What would it look like? What would it sound like? How many people would be there?

People have different preferences for how they direct and receive energy

MYERS-BRIGGS TYPE INDICATOR – E/I PREFERENCE PAIR

Extraversion	e	or	i	Introversion
Drawn to the outside world				Drawn to their inner world
Work out ideas by talking them through				Work out ideas by reflecting on them
Learn best through doing or discussing				Learn best by reflection, mental "practice"
Readily take initiative in work and relationships				Take initiative selectively – when the situation or issue is very important to them

Source: "Introduction to Myers-Briggs Type", Isabel Briggs Myers, Seventh Edition

Study this picture carefully for 15 seconds...

MYERS-BRIGGS TYPE INDICATOR – S/N EXERCISE

Source: https://commons.wikimedia.org/wiki/File:Going_to_Work_-_L_S_Lowry.jpg

People have different preferences for how they take in information

MYERS-BRIGGS TYPE INDICATOR – S/N PREFERENCE PAIR

Sensing	S	or	N	Intuition
Oriented to present realities				Oriented to future possibilities
Factual and concrete				Imaginative and verbally creative
Understand ideas and theories through practical applications				Want to clarify ideas and theories before putting them into practice
Trust experience				Trust inspiration

Source: "Introduction to Myers-Briggs Type", Isabel Briggs Myers, Seventh Edition

Which of these influencing approaches do you naturally gravitate towards?

MYERS-BRIGGS TYPE INDICATOR – T/F EXERCISE

Influencing approach	Example
Authority	The ICB CEO has told us that reconfiguration is the way forward.
Logic	The data from our model shows an opportunity to save the ICB £x million over 5 years if we reconfigure.
Examples	Here's how another ICB saved £x million from reconfiguration.
Consultation	What are the pros and cons of reconfiguration from your perspective?
Reciprocity	If you can send me ICB emergency department activity data over the last 5 years, I can use that as a baseline to model future scenarios.
Sociability	Let's talk through the political implications of reconfiguration over coffee.
Values	We're all ultimately focused on achieving the best care outcomes for patients at best value to the taxpayer.

People have different preferences for how they influence and come to conclusions

MYERS-BRIGGS TYPE INDICATOR T/F PREFERENCE PAIR

Thinking	t	or	f	Feeling
Use cause-and-effect reasoning				Assess impact of decisions on people
Strive for an objective understanding of truth				Strive for harmony and positive interactions
Can appear "tough-minded"				Can appear "tender-hearted"
Fair – want everyone treated equally				Fair – want everyone treated as an individual

Source: "Introduction to Myers-Briggs Type", Isabel Briggs Myers, Seventh Edition

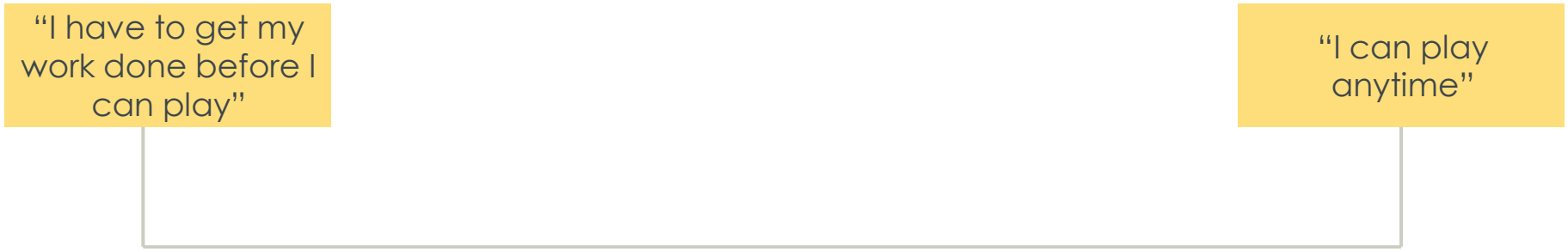
The influencing approaches we discussed can be thought about on a Thinking-Feeling spectrum

MYERS-BRIGGS TYPE INDICATOR T/F PREFERENCE PAIR

MBTI preference	Influencing approach	Example
Thinking	Authority	The ICB CEO has told us that reconfiguration is the way forward.
	Logic	The data from our model shows an opportunity to save the ICB £x million over 5 years if we reconfigure.
	Examples	Here's how another ICB saved £x million from reconfiguration.
	Consultation	What are the pros and cons of reconfiguration from your perspective?
	Reciprocity	If you can send me ICB emergency department activity data over the last 5 years, I can use that as a baseline to model future scenarios.
	Sociability	Let's talk through the political implications of reconfiguration over coffee.
Feeling	Values	We're all ultimately focused on achieving the best care outcomes for patients at best value to the taxpayer.

Where would you place yourself on this spectrum?

MYERS-BRIGGS TYPE INDICATOR – J/P EXERCISE



People have different preferences for how they *approach the outside world*

MYERS-BRIGGS TYPE INDICATOR – J/P PREFERENCE PAIR

Judging	j	or	p	Perceiving
Scheduled				Flexible
Make short and long-term plans				Open-ended
Like to have things decided				Like things loose and open to change
Try to avoid last-minute stress				Find last-minute pressure energising

Source: "Introduction to Myers-Briggs Type", Isabel Briggs Myers, Seventh Edition

An interview with Catherine M

EXERCISE 4: PRACTISE YOUR STAKEHOLDER ENGAGEMENT SKILLS

- You have 10 minutes to prepare for your interview with Catherine M. Draw on the interview guide you made in Exercise 2 and consider your negotiating position, influencing techniques and the level of trust that Catherine M will currently have in you.
- The purpose of the interview is to obtain as much information as possible that is relevant to the case.

20 minutes

Use the prompts below to guide your reflection

USE ADAPTIVE ACTION TO REFLECT ON YOUR LEARNING

What?

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- What surprised you?
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So What?

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- The ICB CEO feels strongly that reconfiguration of emergency services is the only way forward to resolve the financial and clinical catchment guidelines issues
- Your team has developed an issue tree to dissect the clinical catchment guidelines challenge, isolating four high priority sub-questions related to closing acute emergency services
- **You have learned from the Strategy Director at Northside that patients do not want their ability to access emergency services to be impacted**

Module 4 will help you develop hypotheses to clarify your thinking and synthesise recommendations efficiently

OBJECTIVES AND INTRODUCTION

After this module I will:

- Recognise the importance of constantly articulating and developing hypotheses
- Understand how to use a hypothesis tree to do this

The module includes:

- Introduction to hypothesis trees
- Developing insights

Problem solving and where the tools fit in

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, engaging with stakeholders to understand their view

Frequent review of improvement cycles, evaluating the outcomes of a project, identifying improvements and communicating success

Using quantitative and qualitative data and tools to discover the current state of a process or service, best practice and/or the root causes of a problem.

Establishing a vision for a future state: developing strategic recommendations and/or specific changes using design tools, options generation & evaluation

Using rapid improvement cycles to test changes, planning for implementation, engaging stakeholders in implementation and delivering a sustainable change

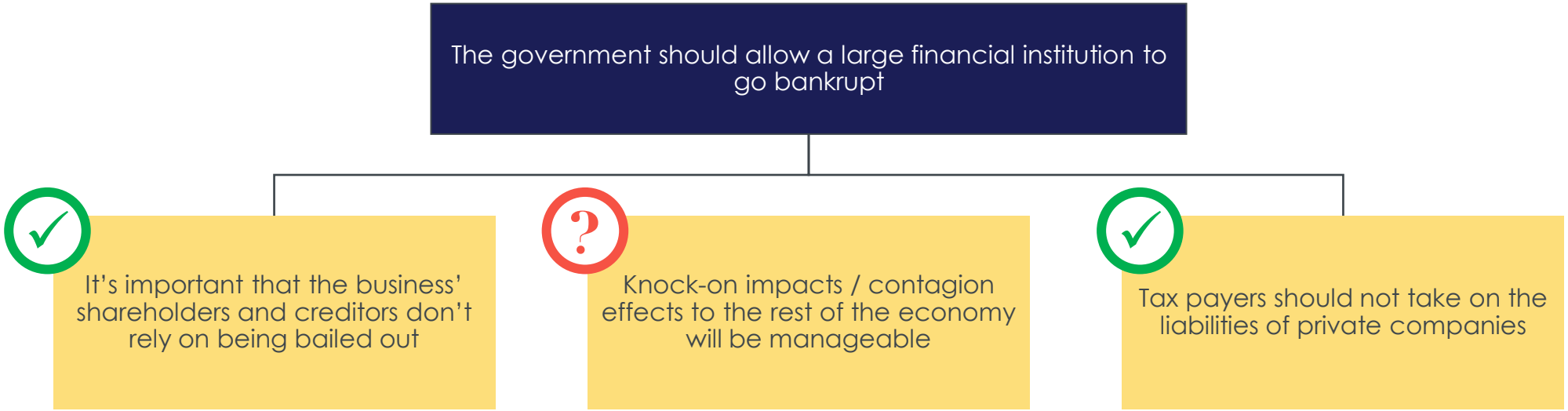
Hypothesis trees help us order our thinking by proposing a likely answer to our PDS question and laying out the supporting facts

THOUGHT ORDERING WITH HYPOTHESIS TREES

We all propose solutions and use facts to support them every day in the hypothesis tree form

A hypothesis tree may support or disprove a decision being made, and help articulate the rationale

HYPOTHESIS TREE EXAMPLE: NOT YET DECIDED



Use Hypothesis trees throughout your project, to clarify your thinking and synthesise recommendations

HYPOTHESIS TREES - PURPOSE

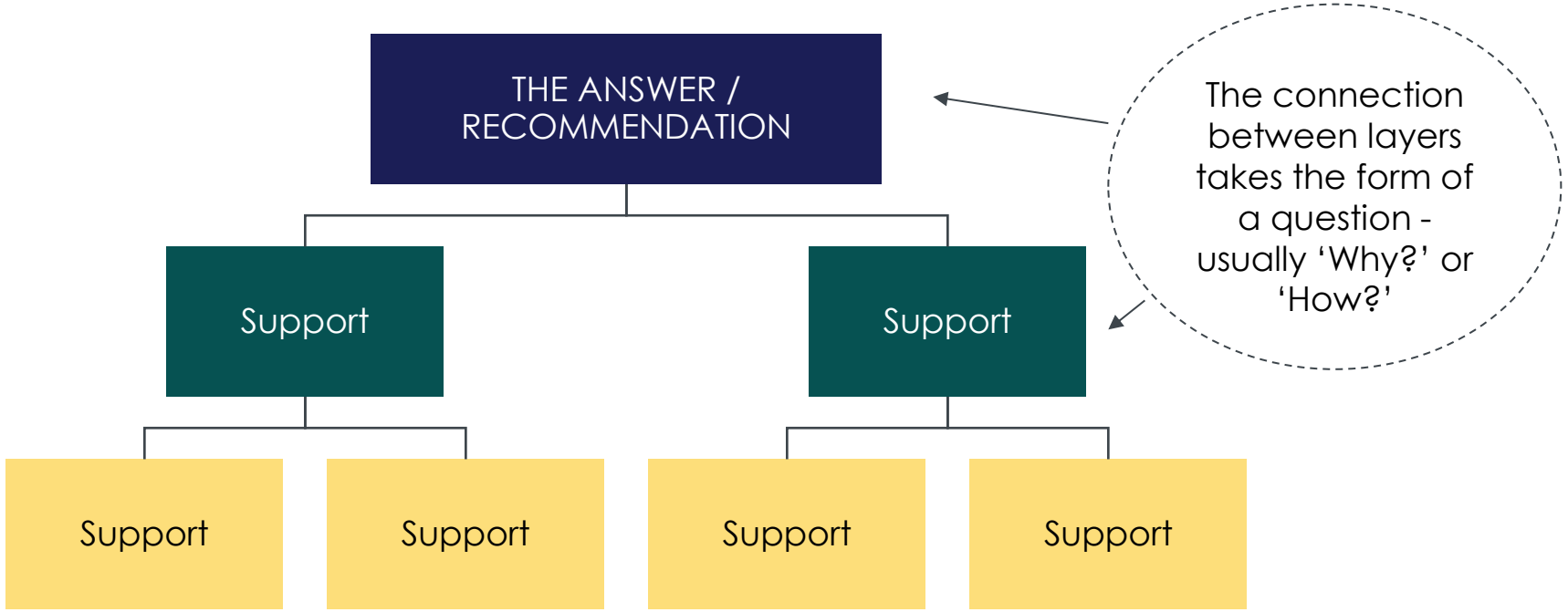
- The biggest trap you can fall into is leaving the development of insights and hypotheses until the end of the project. Hypothesis trees work by stating what you believe to be the best answer(s) or options(s) to the 'basic question to be solved,' then below each statement you add its supporting evidence. This is used to:
  a) Clarify your thinking
  b) Debunk myths
  c) Synthesise recommendations – helping you to explain them to stakeholders
- The aim of a hypothesis tree is to organise your thoughts and highlight where the gaps in your logic are

Typical problems that arise when a **hypothesis tree** is not used:

- "We jumped to what we thought was the solution – it wasn't"
- "It was hard to see how all the work tied together"

Hypothesis trees use the "pyramid principle" – the "answer" is only sufficient if the support is sufficient

HYPOTHESIS TREES - INTRODUCTION

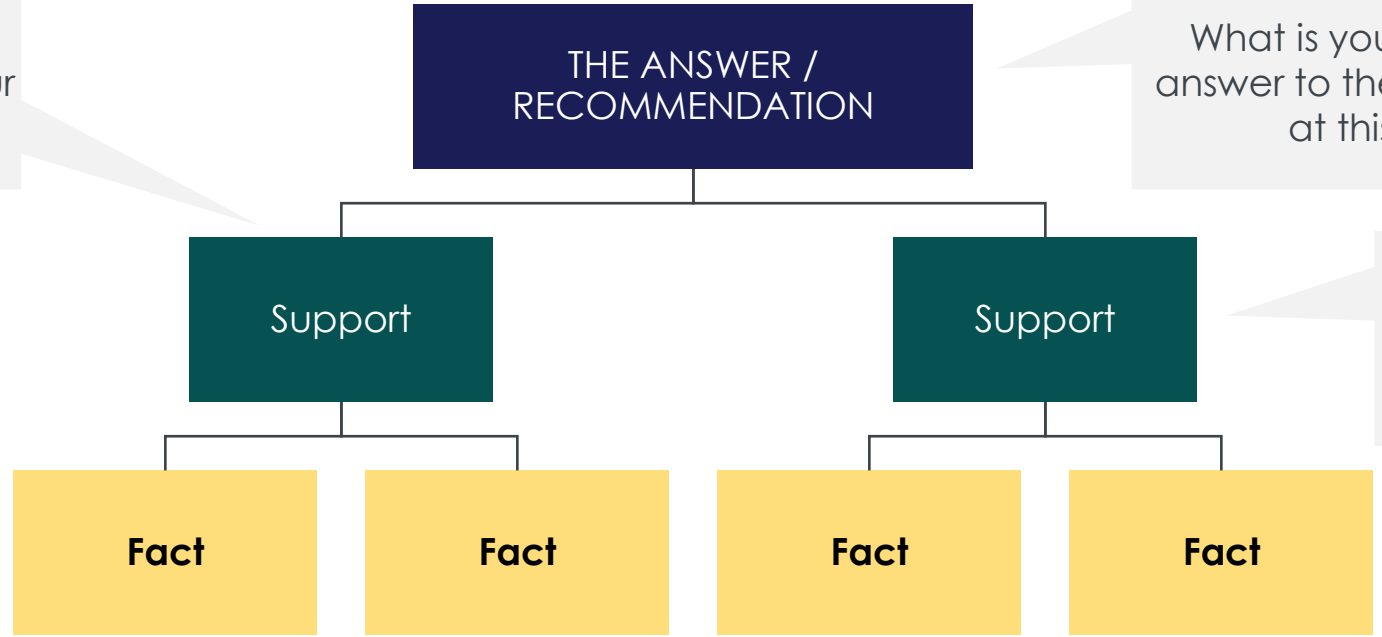


1. Ideas at any level in the pyramid must always be summaries of the ideas grouped below
2. Ideas in each grouping must always be the same kind of idea
3. Ideas in each grouping must always be logically ordered

We develop a Hypothesis Tree by asking "Why do we believe this?" at each level until it's self-evident or it is a statement you can test

HYPOTHESIS DEVELOPMENT

What do you need to be true in order to believe your hypothesis?



What is your best guess answer to the key question at this time?

In conjunction with your other branch, what else needs to be true to prove your hypothesis?

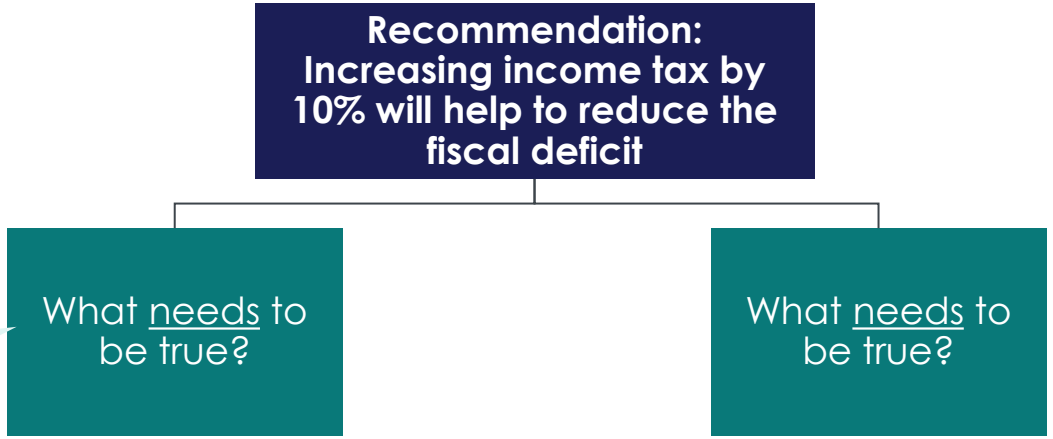
You know you've reached your lowest level when you are either **stating facts** that are self-evident, not opinion / drawn conclusions, or points which you are **planning to test** through your work

Illustrative example: Reducing fiscal deficit

DEVELOPING A HYPOTHESIS TREE – ILLUSTRATIVE EXAMPLE

A helpful framework to use for your first level is:

1. Is it **acceptable**?
2. Is it **feasible**?
3. Is it **appropriate**?



Illustrative example: Reducing fiscal deficit

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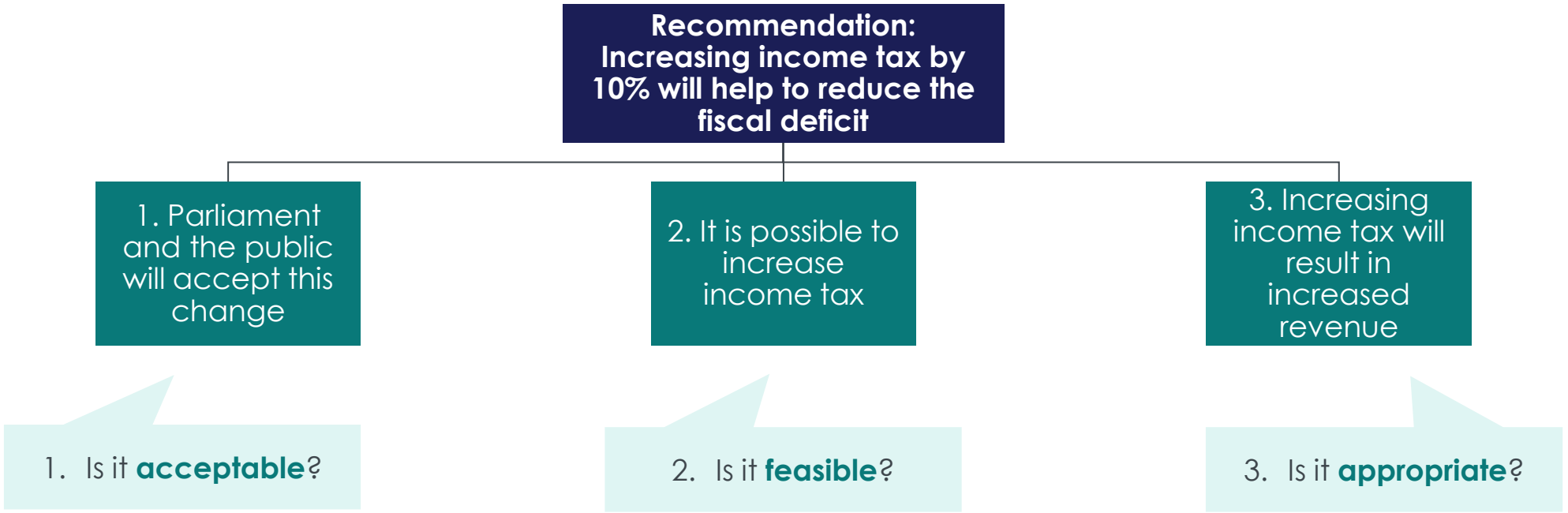
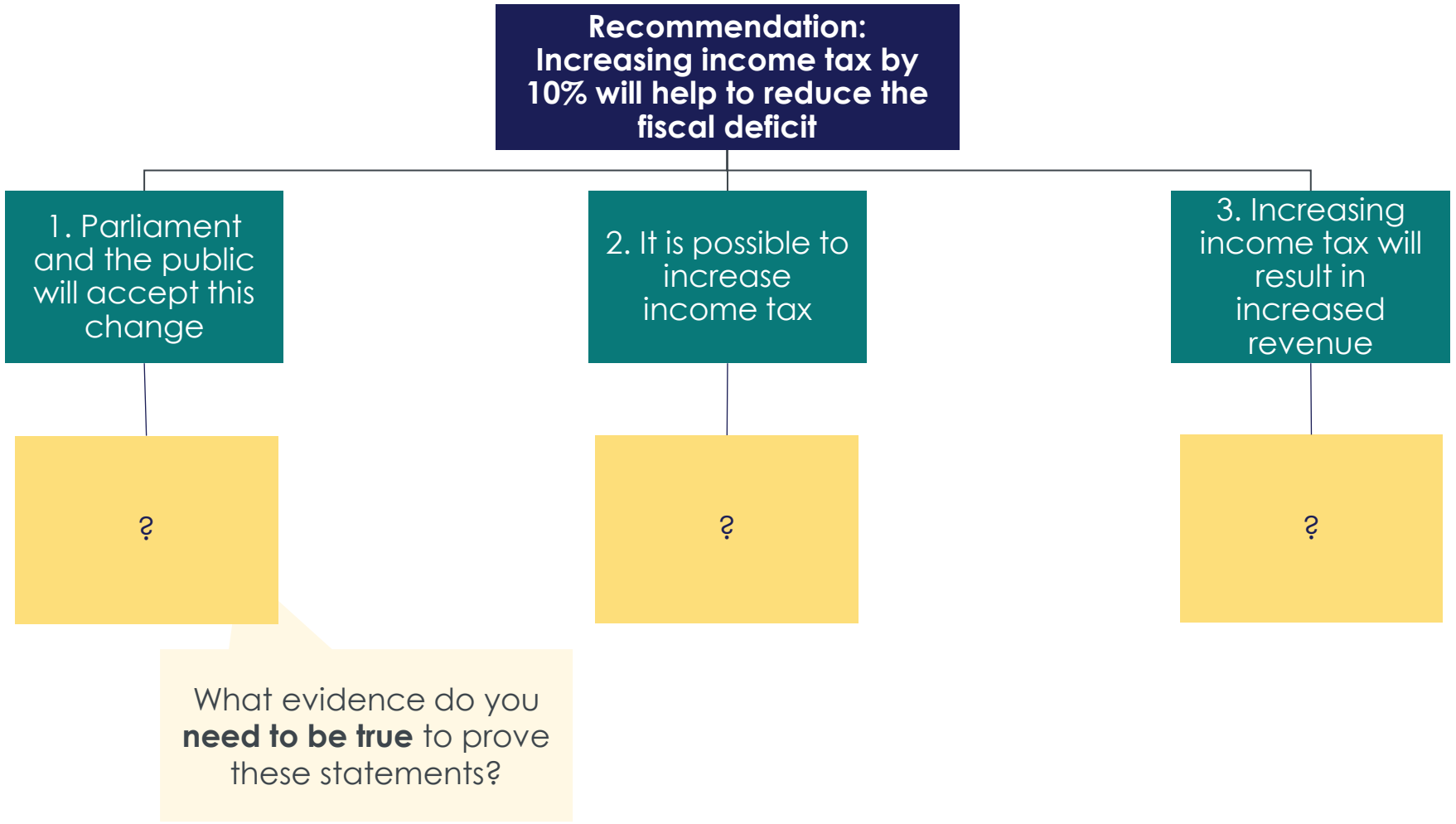


Illustrative example: Reducing fiscal deficit

DEVELOPING A HYPOTHESIS TREE – ILLUSTRATIVE EXAMPLE



Illustrative example: Reducing fiscal deficit

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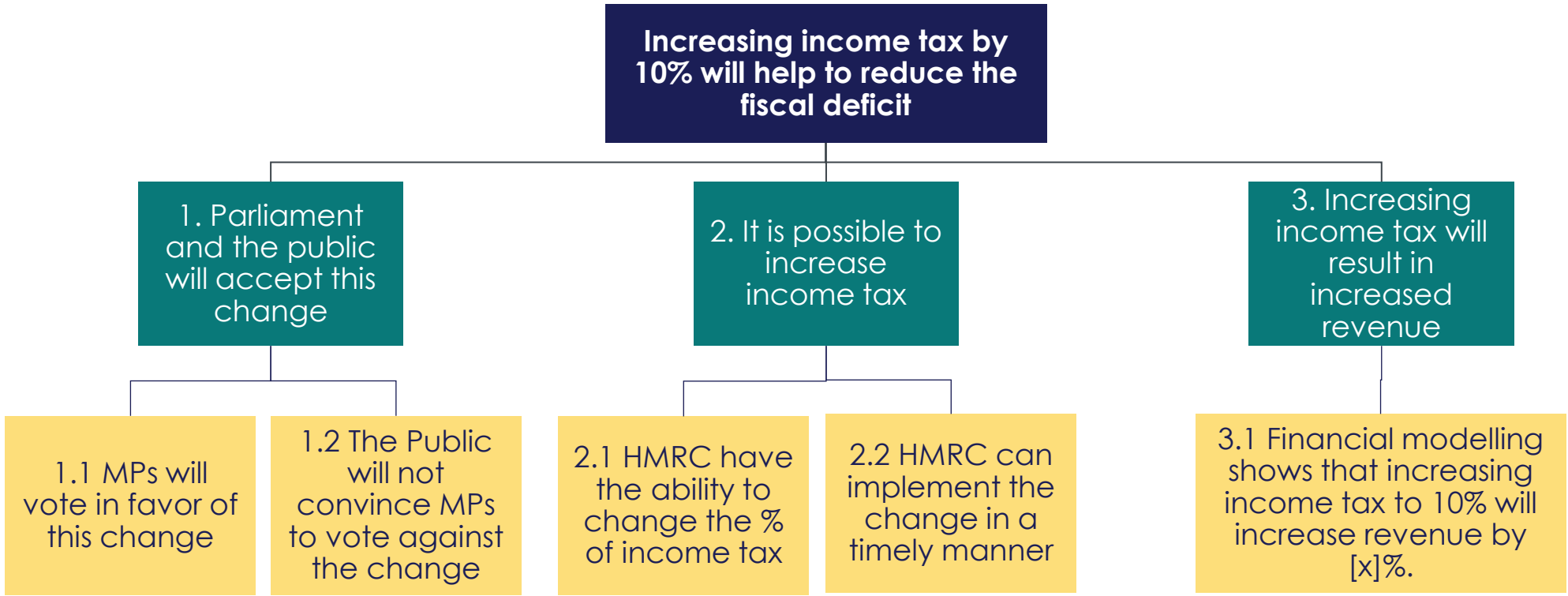


You would now need to answer: **Are these statements true?**
You would now go away and complete the required analysis to either prove or disprove the statements

Hypothesis testing is common in many professions

HYPOTHESIS TESTING EXAMPLES

Hypothesis testing in criminal justice

Hypothesis testing and medical diagnosis

How do criminal investigators use exhaustive vs hypothesis based processes?

EXAMPLE 1: HYPOTHESIS TESTING AND CRIMINAL JUSTICE

When investigating a crime, what steps do investigators take that are exhaustive, for example, not hypothesis-based)?

What steps do investigators take that are **hypothesis-based**?

Once hypotheses are formed, **how are these tested** in the criminal justice system?

How do GPs diagnose their patient's illness?

EXAMPLE 2: HYPOTHESIS TESTING AND MEDICAL DIAGNOSIS

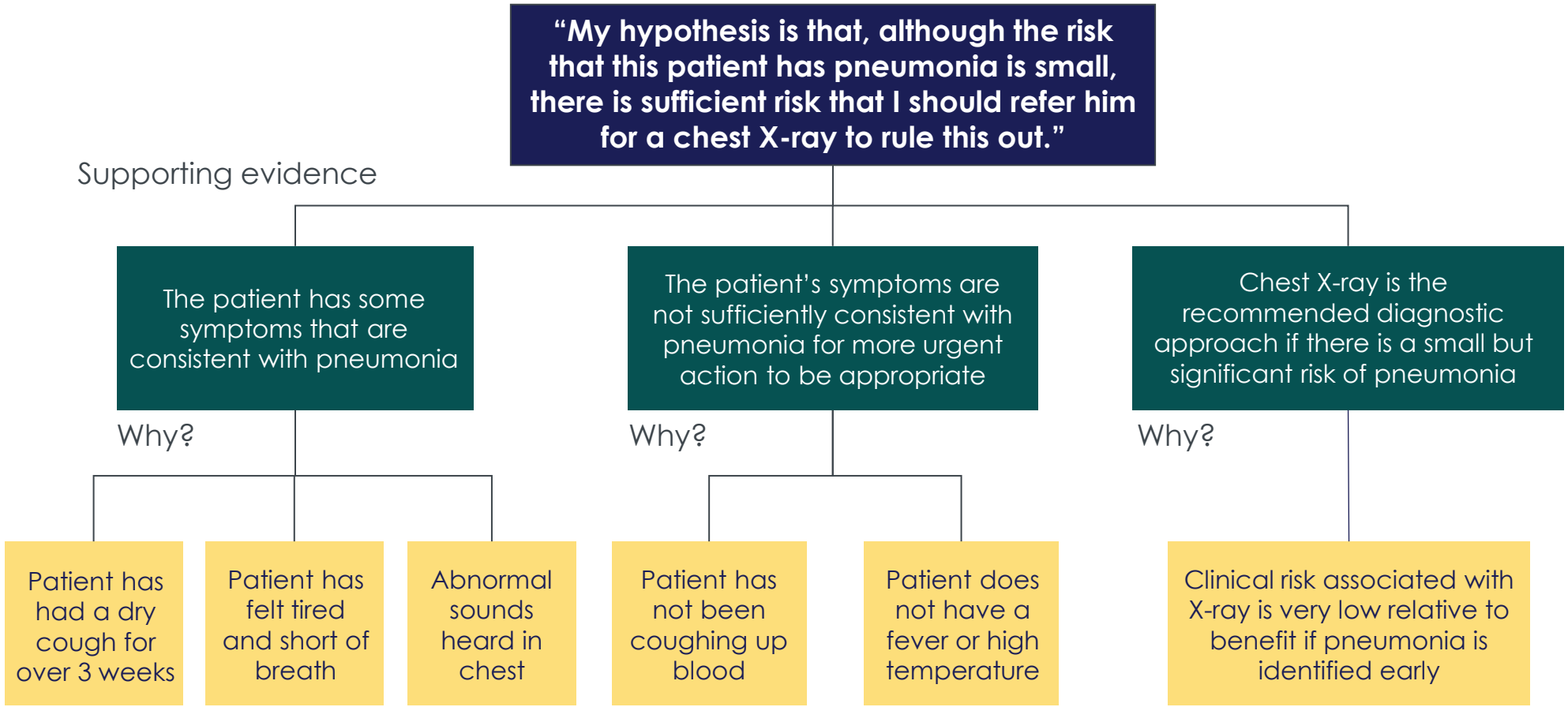
A 50-year-old man sees this advert (left) and visits his GP, stating that he has a cough that he has had for more than 3 weeks, and that he is worried that it is not getting better

How might the GP **diagnose the cause** of the problem?

What hypotheses might the GP test, and how might they **test these**?

The GP can use a Hypothesis Tree to rule out an unlikely (but serious) diagnosis

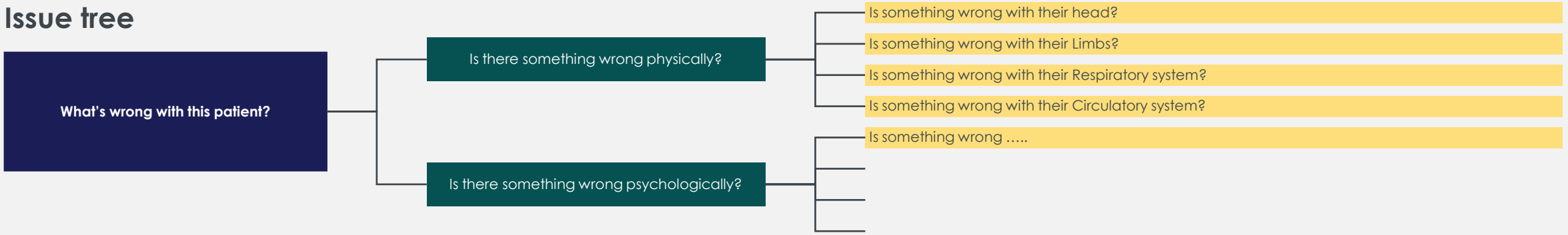
HYPOTHESIS EXAMPLE: MEDICAL DIAGNOSIS RISK



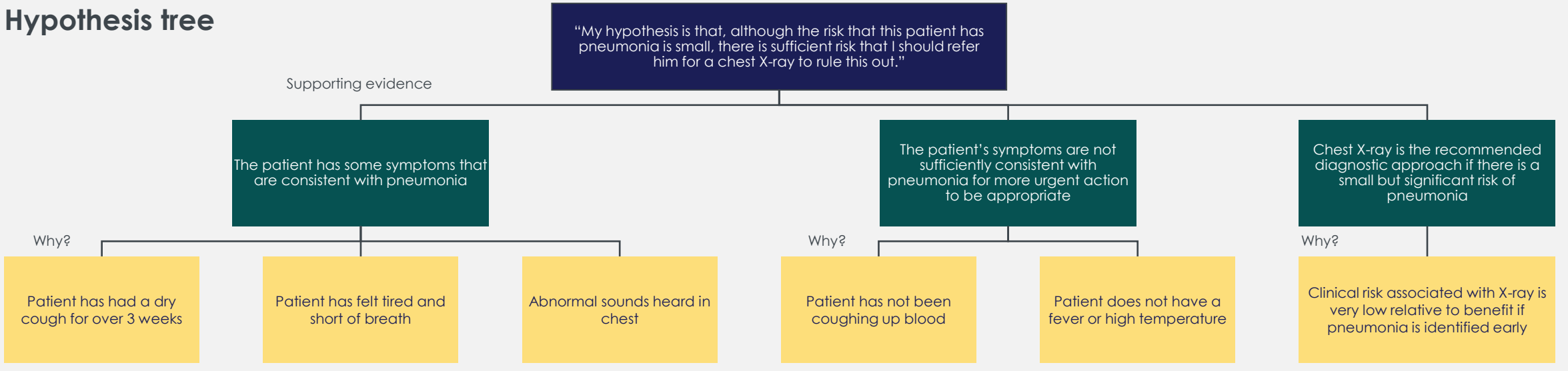
Using purely an issue tree on its own would take more time and effort than using a hypothesis based approach

ISSUE VS HYPOTHESIS TREES: MEDICAL EXAMPLE

Issue tree

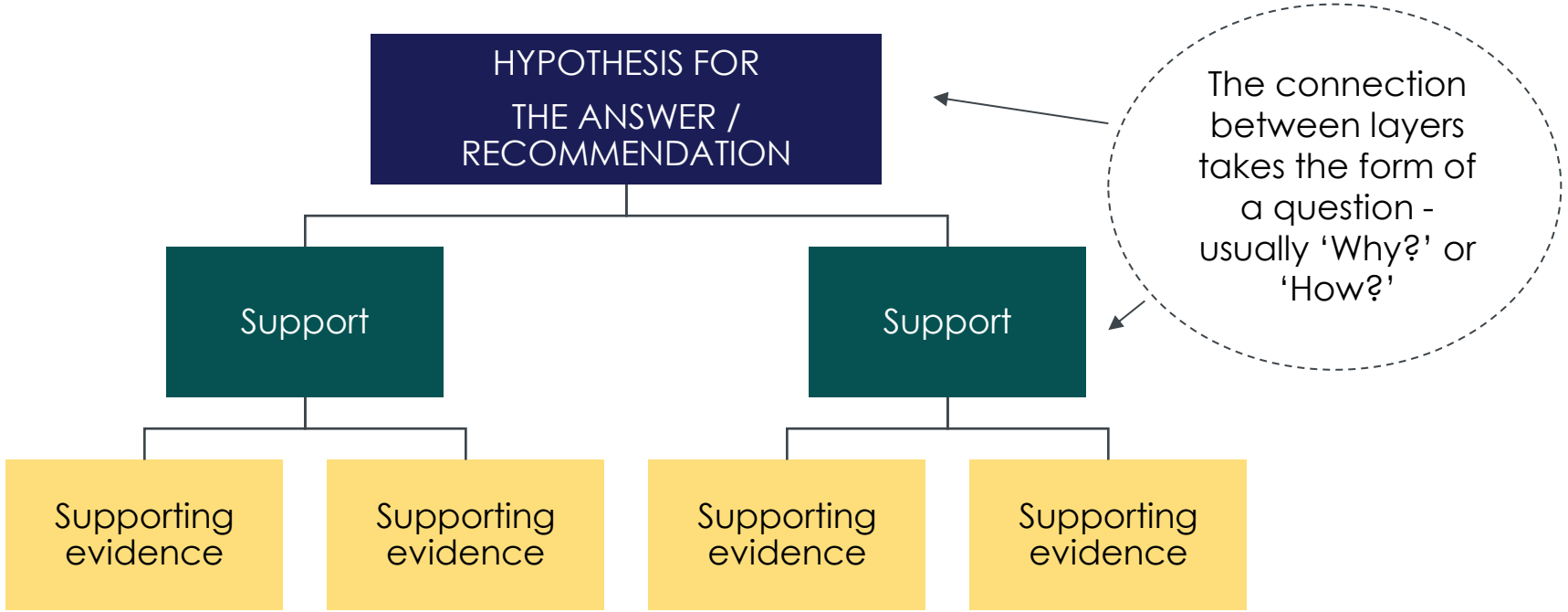


Hypothesis tree



Recap: How to structure a hypothesis tree

HYPOTHESIS TREES - INTRODUCTION



1. Ideas at any level in the pyramid must always be summaries of the ideas grouped below
2. Ideas in each grouping must always be the same kind of idea
3. Ideas in each grouping must always be logically ordered

Now, create your own hypothesis tree

EXERCISE 1: HYPOTHESIS TREES

Based on the case so far you want to create a hypothesis tree which addresses this question:

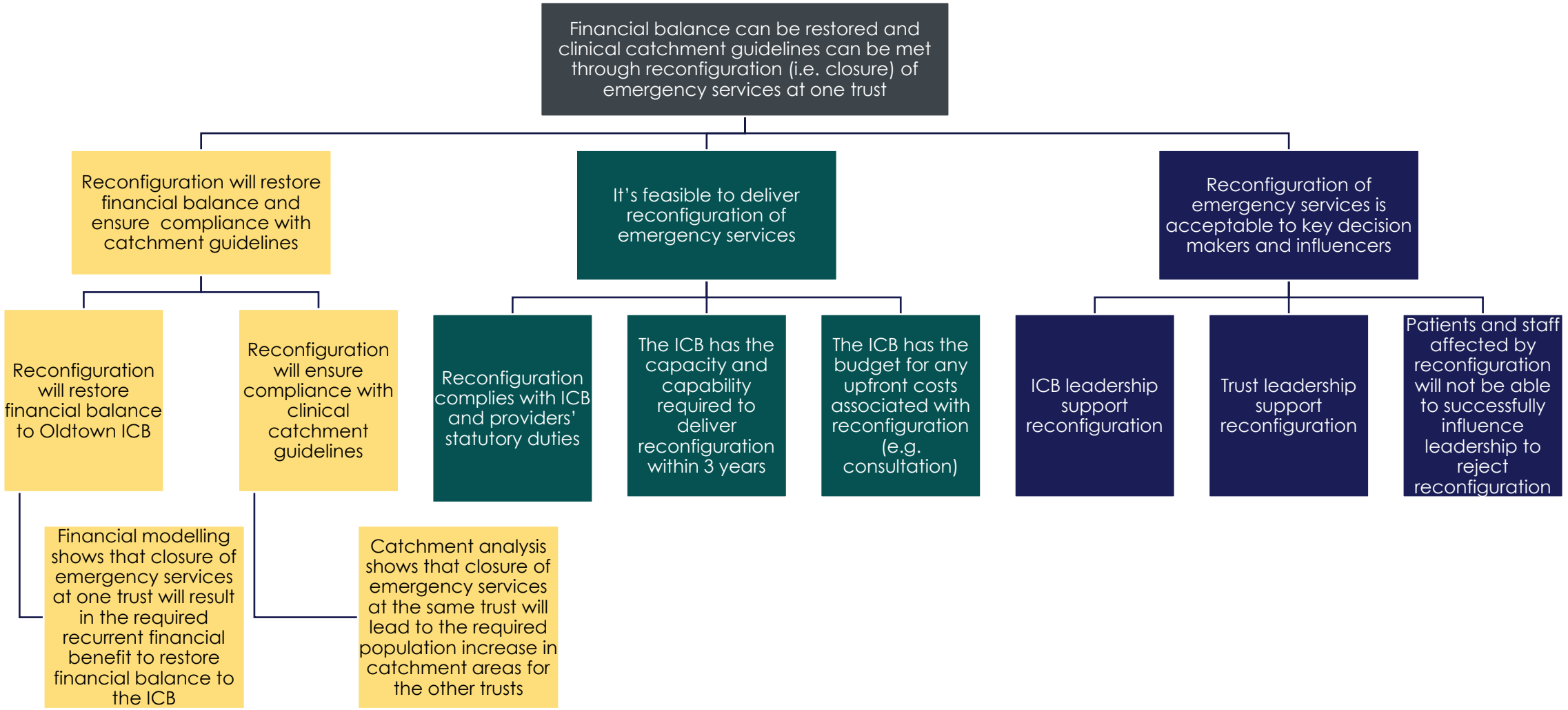
"How can financial balance be restored and clinical catchment guidelines met within Oldtown ICB?"

Your ingoing hypothesis based on the discussion with the ICB CEO is that:

Financial balance can be restored and clinical catchment guidelines can be met through reconfiguration (i.e. closure) of emergency services at one trust

**30 minutes in pairs or small groups;
5 minutes together**

EXAMPLE SOLUTION
Working Hypothesis: Financial balance



The hypothesis tree can be used in two main ways

1. PROBLEM SOLVING

- A hypothesis tree can be used **early** in a project or piece of work when:
  - You have an **emerging hypothesis** or answer to a key question…
  - …but **incomplete or ambiguous evidence**
- In this mode you are using the hypothesis tree to assess *what would **need to be true** to prove this hypothesis?*
- You're in effect saying:
  - If our current best guess is correct…
  - … then these conditions must hold true
- This can then help you prioritise your analysis, focusing on capturing the outstanding evidence needed to prove or disprove your hypothesis

2. STRUCTURING RECOMMENDATIONS

- A hypothesis tree can be used **later** in a project or piece of work when:
  - You have a **final recommendation** or answer to a key question that is…
  - …backed up by **evidence that is sufficiently convincing**
- In this mode you are using the hypothesis tree as a story-telling tool to communicate your recommendation in a compelling, **inductive** way
- You're now saying:
  - Here is our recommendation…
  - …and here is all the evidence that proves it
- Essentially, the hypothesis tree shifts from testing logic to communication logic

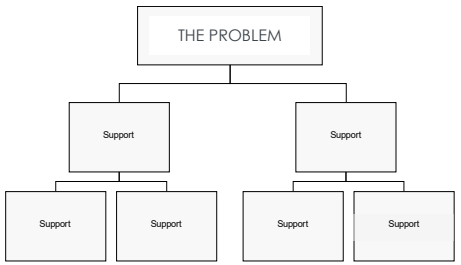
There is no single “right” time to use a hypothesis tree. Instead, a hypothesis tree can be used to help refine and structure your thinking whenever you are grappling with a question

HYPOTHESIS TREES THROUGH THE PROJECT PHASES

To efficiently solve a problem, you need to know what the problem is, understand the root causes, and design and test your proposed solution.
You can use a hypothesis tree to support ALL of these stages.

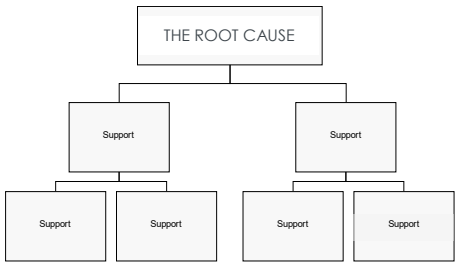
D1 Define

Clarify your understanding of the problem



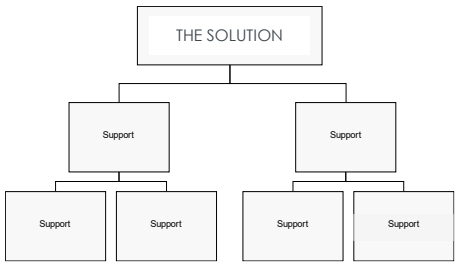
D2 Discover

Use initial hypotheses to direct and prioritise analysis



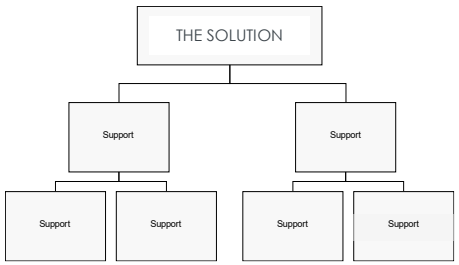
D3 Design

Develop and test solution(s)



D4 Deliver

Test whether your implementation plan will deliver the intended result



D5 Digest

Use the prompts below to guide your reflection

USE ADAPTIVE ACTION TO REFLECT ON YOUR LEARNING

What?

- What did you notice in your learning?
- What surprised you?
- What's different to what you've learnt about this before? What's the same?
- What are you feeling about this cycle of learning?

So What?

- So what could this mean?
- So what are the implications for you, for your project, for your role?
- So what are your options for action?

Now What?

- Now what will you do?
- By when?
- How will you know when you've got there?

Day 1 Wrap Up

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, engaging with stakeholders to understand their view

Using quantitative and qualitative data and tools to discover the current state of a process or service, best practice and/or the root causes of a problem.

Establishing a vision for a future state: developing strategic recommendations and/or specific changes using design tools, options generation & evaluation

Using rapid improvement cycles to test changes, planning for implementation, engaging stakeholders in implementation and delivering a sustainable change

Frequent review of improvement cycles, evaluating the outcomes of a project, identifying improvements and communicating success

Today we have covered ‘Define’, and started to think about ‘Discover’ and ‘Design’

DAY 1 KEY LEARNINGS

We have learned how to:

- Define the problem to be addressed
- Set KPIs to measure our success
- Break down the problem and create a prioritised workplan
- Plan stakeholder engagement
- Understand our influencing style
- Develop an initial set of hypotheses

Before you go home....

END OF DAY 1 TASKS

Write on two post-it notes, and take them to the board:

- 1 memorable tool or insight from today's training
- 1 outstanding question, tool, or area you would like to revisit tomorrow

Day 2 introduction & teachback

On day 1, we covered planning projects and initial development of insight

DAY 1 TOPICS

- Module 1: Launching the project
  - Problem Definition sheet
  - Project kick-off pack
- Module 2: Structuring the problem and work planning
  - Issue trees
  - Prioritisation with 2x2 matrices
  - Boat work plan
  - Risk logs
- Module 3: Engaging stakeholders
  - Stakeholder prioritisation and mapping
  - ACCA framework: awareness, comprehension, commitment, action
  - Trust equation
  - MBTI
  - Positive influencing tactics
  - Negotiation skills
- Module 4: Developing hypotheses
  - Hypothesis trees

5 mins, in pairs

Select a topic that you think you need to revise, your partner should spend two minutes explaining it back to you

Today we will work on 'Discover' and 'Design'

COURSE AGENDAS

Day 1 DEFINE	Day 2 DISCOVER & DESIGN	Day 3 DESIGN, DELIVER & DIGEST
Arrival and coffee	Arrival and coffee	Arrival and coffee
Welcome to Fast Effective Projects	Introduction to Day 2	Introduction to Day 3
Introduction and set-up	**M5** **Gathering data and conducting analysis**	**M8** **Modelling and options appraisal**
M1 **Launching the project**	Break	Break
Break	**M5 continued**	**M9** **Planning for change**
M2 **Structuring the problem and work planning**	Lunch	Lunch
Lunch	**M6** **Creating high-performing teams**	**M10** **Developing and communicating recommendations**
M3 **Engaging stakeholders**	Break	Break
Break	**M7** **Process improvement and Plan Do Study Act**	**M11** **Closing the project**
M4 **Developing hypotheses**	Daily feedback	Close
Daily feedback	Close	
Close		

Contents

On Day 2, we discover the current state, develop insight, design solutions, and start to deliver

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, engaging with stakeholders to understand their view

Frequent review of improvement cycles, evaluating the outcomes of a project, identifying improvements and communicating success

Using quantitative and qualitative data and tools to discover the current state of a process or service, best practice and/or the root causes of a problem.

Using rapid improvement cycles to test changes, planning for implementation, engaging stakeholders in implementation and delivering a sustainable change

Establishing a vision for a future state: developing strategic recommendations and/or specific changes using design tools, options generation & evaluation

Today we will cover some core methods that can be used to discover the current state, starting with data analysis

CORE METHODS TO DISCOVER THE CURRENT STATE

Where are we in the case?

CASE RECAP

- There are four trusts in Oldtown ICB: Westway NHS Trust, Northside NHS Trust, Royal Eastend NHS Foundation Trust and Sunnysouth NHS Trust. Each of the trusts and the ICB is facing financial pressures in the coming years. Only one of the trusts, Westway, is currently complying with recent NHS clinical catchment guidelines regarding emergency services catchment population. Your team was commissioned to recommend one or more courses of action to the ICB CEO to address these challenges
- The ICB CEO feels strongly that reconfiguration of emergency services is the only way forward to resolve the financial and clinical catchment guidelines issues
- You have learned from the Strategy Director at Northside that patients do not want their ability to access emergency services to be impacted
- **Your team developed the hypothesis that financial stress can be alleviated by reducing costs through reconfiguration and other initiatives – and you wish to test this.**

Module 5 will focus on gathering data for analysis

OBJECTIVES AND INTRODUCTION

After this module I will:

- Have practised using Excel functions to format and analyse data
- Understand how to define analytical tests and run analysis
- Understand the importance of robust quality assurance as part of the analytical process
- Have practised generating insight from data analysis

The module includes three sections:

- Introduction to Excel functions and formatting
- Data analysis: travel times question
- QA and generating insight from data

Even if you don't use Excel day to day, having a basic grasp of how it works is essential for interpreting analysis confidently and asking the right questions. We'll also cover commissioning, QA, and insight generation – skills that are just as relevant for those commissioning analysis as for those doing it.

Gathering data and analysis is usually part of the 'Discover' phase

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, engaging with stakeholders to understand their view

Using quantitative and qualitative data and tools to discover the current state of a process or service, best practice and/or the root causes of a problem.

Establishing a vision for a future state: developing strategic recommendations and/or specific changes using design tools, options generation & evaluation

Using rapid improvement cycles to test changes, planning for implementation, engaging stakeholders in implementation and delivering a sustainable change

Frequent review of improvement cycles, evaluating the outcomes of a project, identifying improvements and communicating success

Why do we use Excel?

ANALYSIS VS MODELLING

- **Quantitative analysis: what is happening now?**
  - Answering questions such as "how many", "what proportion", "how frequently"
  - Calculating averages, variation, correlations

Covered in module 5

- **Modelling: what would happen if…?**
  - Projecting into the future
  - Testing alternative scenarios
  - Considering uncertainty / sensitivity

Covered in module 8

Get started by opening the "Module 5 workbook" file, and familiarising yourself with Excel

EXERCISE 1.1: BASIC EXCEL FEATURES

- Have a play at:
  - Checking what the tab bar does
  - Identifying where the formula bar is
  - Trying out some simple shortcuts (don't use the mouse!)

N.B. These are keyboard shortcuts for Windows versions of Excel – Mac OS keyboard shortcuts are slightly different

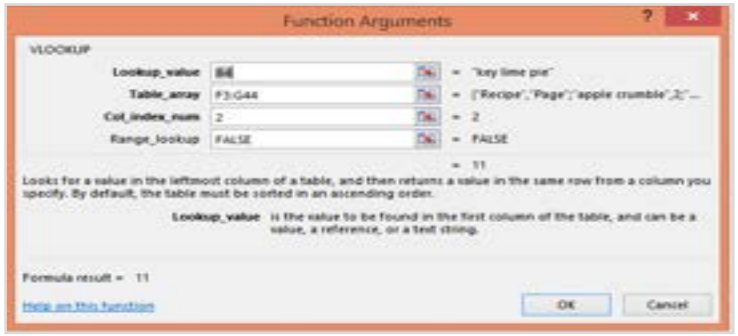
Shortcut	Action	Shortcut	Action
Ctrl Z	Undo	**Shift+Space**	Select row
Ctrl S	Save	**Ctrl+Space**	Select column
Ctrl F	Find	**Ctrl-Shift-arrow**	Select data row/column
Ctrl C	Copy	**F2**	Enter cell; show precedents
Ctrl V	Paste	**F4**	Repeat
Ctrl X	Cut	**F9**	Re-calculate sheet
Ctrl A	Select "all" – data area	**Ctrl+[**	Trace precedent, helpful for QAing
Alt	Control menu	**Win**	… *try out E, L, D, arrows*
Alt…	*Find your own shortcuts!*		

1-5 minutes

If you have a question or challenge with Excel, the prompt, function arguments window and the internet will answer it

EXCEL – WHERE TO FIND OUT MORE

Double-clicking/editing a formula in a cell or the formula bar will open a reminder prompt of the available functions that start with those letters, and once you've typed "(" a prompt for the required function arguments



Clicking fx in the formula bar will open a "Function Arguments" window for the selected function, and a link to Excel's own Help pages

A search using a quality search engine or AI tool (e.g. ChatGPT) will yield]advice on solving common and rare Excel problems

Complete the exercises on Tab "1.2 Formatting"

EXERCISE 1.2: FORMATTING IN EXCEL

Fill & font colour

Wrap text

Borders

Number formats:

- **Number of decimal places**
- **Thousand commas**
- **Decimal places**

Conditional formatting

Use the Excel workbook
"Excel – Participant Workbook – The PSC"

Complete the exercises on the tab "1. Formatting"

Feeling confident already? Either:
Help your colleagues who are less experienced
OR
Turn to Tab "1.4 Advanced Functions", and complete the exercise

10 minutes

Complete the exercises on Tab "1.3 Functions"

EXERCISE 1.3: USEFUL EXCEL FUNCTIONS

= (tells Excel to calculate a result)

Algebraic functions: +, -, *, /

SUM

COUNT

MIN

MAX

AVERAGE

IF

COUNTIF

SUMIF

VLOOKUP

Use the Excel workbook
"Excel – Participant Workbook – The PSC"

Complete the exercises on the tab "2. Functions"

TIPS:

- Start every function by typing =
- Double click the fill handle to copy a formula downwards
- For "IF" functions try using a "helper cell" instead of hardcoding

20 minutes

Next steps in the case...

CASE PROGRESS

Returning to our example of potential reconfiguration of emergency services:

- The Director of Strategy at Northside has suggested that if one of the hospitals in the local health community stops providing emergency services, some patients would have longer journey times for those services, which could increase the risk of harm
- As the team moves forward with research, they also learn that patients do not want their ability to access emergency services compromised through reconfiguration
- Your team have access to a drive time database from the Department for Transport, which provides average journey times to emergency department (ED) for each area within Oldtown, and plan to use this to assess the impact of different reconfiguration scenarios on travel times
- Before opening Excel, your team want to spend some time clearly defining the questions they want to answer by running analysis on the dataset

Defining analytical tests is an important skill – even for people who may be commissioning – but not necessarily carrying out – analysis

WHY THIS MATTERS

- Good analysis starts with asking the right questions
- Commissioners need to shape the *focus* of analysis – even if they aren't the ones carrying out the analysis
- Clear questions lead to insights that decision-makers can actually use
- Without direction, analysis risks being too broad, too complex, or irrelevant
- Use your Issue Tree to help understand the overarching question you want to solve using analysis

'4CS' OF GOOD ANALYSIS QUESTIONS

Context

- What decision is the analysis trying to support?
- Why is this important?

Comparison

- What should we compare (e.g. today vs. after closure, different sites)?

Clarity

- What simple measures would make the answer clear (e.g. % of patients who have to travel over x mins)?

Concerns

- Who is most affected, and what risks or worries should we test for?
- Are there any groups who are disproportionately affected?

In small groups, define three analytical tests that you would like to run to assess the impact of different reconfiguration scenarios on travel times

EXERCISE 2: DEFINING ANALYTICAL TESTS

In small groups or pairs, discuss and be prepared to feedback to the group:

What questions might we want to answer using the available data for the emergency department reconfiguration case?

Zone	Population (#)	Travel time to Westway (mins)	Travel time to Northside (mins)	Travel time to Eastend (mins)	Travel time to Sunnysouth (mins)
Coast Town	132,840	21.0	11.7	6.5	12.3
Midlands West	131,887	10.4	17.6	25.3	30.4
North Zone B	131,850	21.7	7.9	23.0	11.0
Coastal North	128,630	26.3	9.4	22.8	32.2
South Gateway	89,440	24.0	21.5	23.7	18.4
North Zone A	86,593	18.7	8.2	34.6	11.7
Capital Outer	61,583	23.4	11.7	12.9	29.7
Capital Inner	53,273	21.2	9.9	19.3	32.7
Westville	52,483	4.6	38.2	29.2	34.3
Midlands East	45,853	38.4	21.1	5.4	27.3
Rural Far East	44,303	22.2	28.9	17.9	31.9
Rural Far West	42,793	6.5	25.9	21.2	23.2
Eastville	38,597	39.2	42.4	12.2	37.3
South Central	36,850	21.4	21.0	33.7	13.4

Our dataset from the Department for Transport

10 minutes

Next steps in the case...

CASE PROGRESS

The team discusses options for assessing the impact each reconfiguration option would have on travel times, **and agrees to use excel and the available data to answer three key questions for each potential reconfiguration scenario:**

1. How many people will have an increase in travel time to the nearest hospital?
2. How many people will have an increase in travel time of more than 10 minutes to the nearest hospital?
3. What is the largest increase in travel time for a single zone?

Turn to tab “3.1 Travel times” in “Excel – Participant Workbook – The PSC” file and complete the tasks for a Westway Closure scenario

EXERCISE 3: ANALYSIS OF TRAVEL TIMES DATA

For a Westway closure scenario, complete the tasks in the workbook to answer the following questions:

1. How many people will have an increase in travel time to the nearest hospital?
2. How many people will have an increase in travel time of more than 10 minutes to the nearest hospital?
3. What is the largest increase in travel time for a single zone?

For those wanting more of a challenge, turn to tab “3.2. Advanced travel times” and have a go at completing the analysis for all scenarios

20 minutes

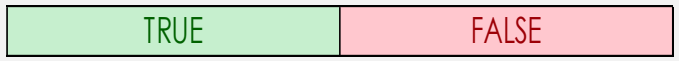
Quality Assurance (QA) is an essential part of the analytical process, ensuring results are accurate before they are shared more widely

QA BEST PRACTICE

Even if you're not doing the analysis yourself, **commissioners need confidence in results** because:

- Decisions may rest on the numbers
- Small errors can at best cause embarrassment, and at worst undermine trust
- A light-touch QA can catch issues before they reach senior decision-makers

Use "True" and "False" functions with conditional formatting to quickly spot errors



HOW TO QA ANALYSIS EFFECTIVELY

Do a quick sense check

- Look out for "impossible numbers" (e.g. >100%, negative counts, totals that don't add up) or results that appear too-good to be true
- Cross reference findings with quick 'back-of-the-envelope' calculation

Compare with other sources

- Cross-check against published stats, past work, or expert judgement

Build in error checks

- "Triangulate" any calculation using different approaches
- Build in "error checks" that automatically warn you if there is likely an error

Turn to tab “4. QA & Generating Insights” in “Excel – Participant Workbook – The PSC” file and answer the questions

EXERCISE 4: QA & GENERATING INSIGHTS

- Your analyst has completed the data analysis for all four reconfiguration scenarios, and presented you with the findings
- It’s now over to you and your team to review and QA the findings, and then synthesis key insights ready to share with the programme board
- Turn to tab “4. QA & Generating Insights” in “Excel – Participant Workbook – The PSC” file and answer the questions

20 minutes

A Sunnysouth closure scenario will have the least impact on patient travel times

MODULE EXERCISE 5.4 (S)

(000s)	Westway closure	Northside closure	Eastend closure	Sunnysouth closure
1. Increase in travel time to ED	227	462	262	126
As % of tota population	21%	43%	24%	12%
2. Increase in travel time of more than 10 mins	95	129	84	~
As % of tota population	9%	12%	8%	0%
3. Largest increase in travel time for a single zone (mins)	24.6	13.4	25.1	7.6

What have we covered in this module?

RECAP

- How to use some simple Excel functions (and where to look to learn more on this)
- How to do simple formatting of Excel sheets (and, again, where to look to learn more)
- Defining – and carrying out – analysis to assess different options
- Reviewing analysis carried out by other people to test its validity and generate insights

Use the prompts below to guide your reflection

USE ADAPTIVE ACTION TO REFLECT ON YOUR LEARNING

What?

- What did you notice in your learning?
- What surprised you?
- What's different to what you've learnt about this before? What's the same?
- What are you feeling about this cycle of learning?

So What?

- So what could this mean?
- So what are the implications for you, for your project, for your role?
- So what are your options for action?

Now What?

- Now what will you do?
- By when?
- How will you know when you've got there?

Contents

Where are we in the case?

CASE RECAP

- The ICB CEO feels strongly that reconfiguration of emergency services is the only way forward to resolve the financial and clinical catchment guidelines issues
- You have learned from the Strategy Director at Northside that patients do not want their ability to access emergency services to be impacted
- Your team also developed the hypothesis that financial stress can be alleviated by reducing costs through reconfiguration and other initiatives – and you wish to test this
- Data analysis suggests that closing Sunny South would have the least impact on patient travel time
- **Following yesterday's meeting with Catherine M, the team want to spend some time exploring how to work better as a team and manage challenging conversations**

This module focuses on creating high-performing teams

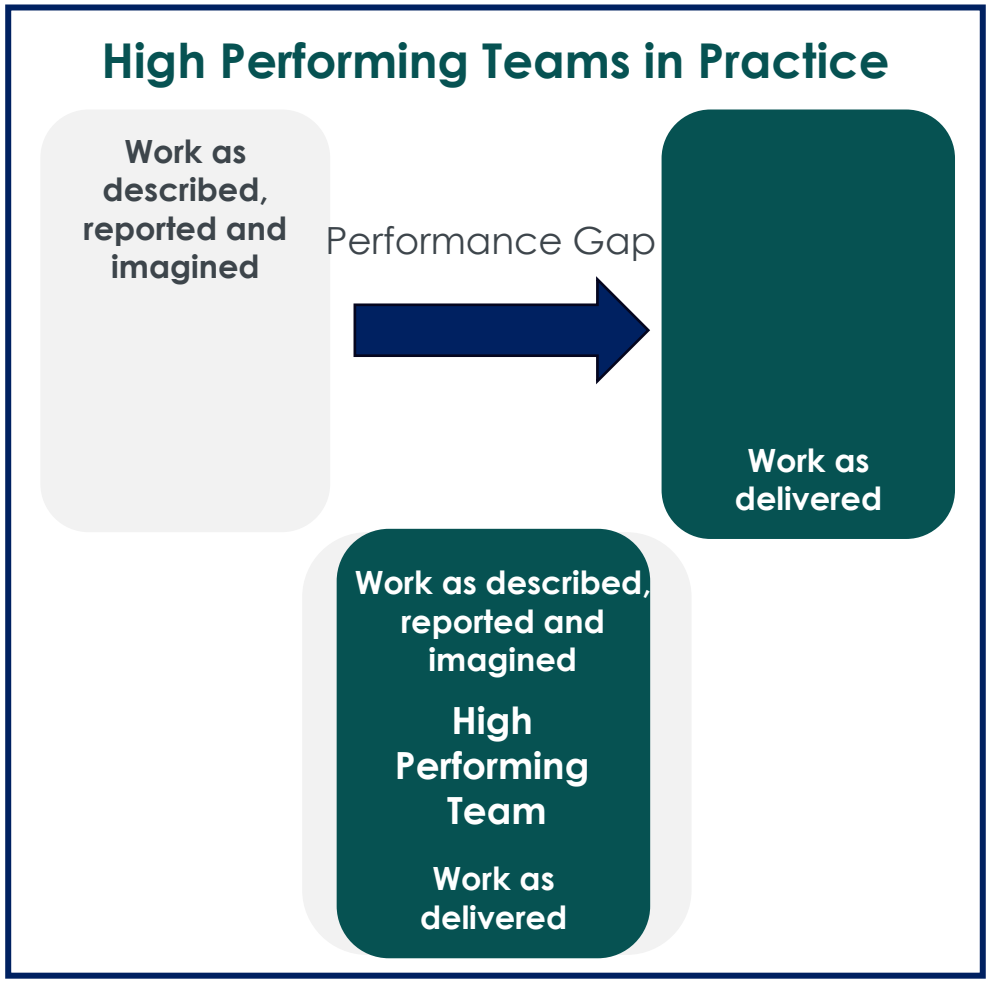
OBJECTIVES AND INTRODUCTION

After this module I will:

- Understand the attributes of a high-performing team
- Understand what it takes to build psychological safety
- Be able to apply frameworks to better manage emotional awareness and challenging conversations
- Have practiced applying these learnings

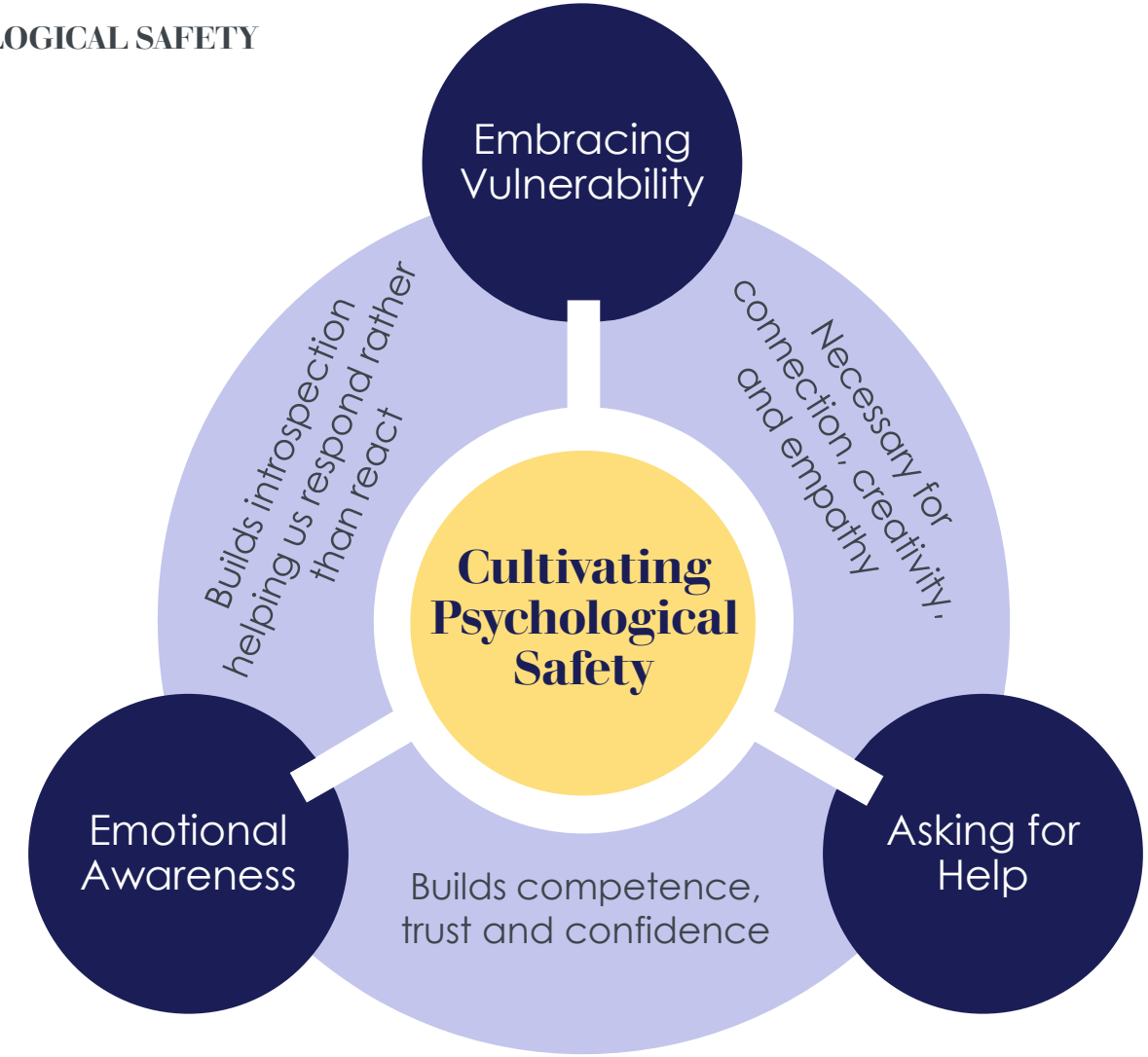
This module incorporates three elements:

- Psychological safety
- Vulnerability & asking for help
- Reacting vs responding
- Rupture & repair



Challenging ourselves to build the best possible culture

THREE WAYS TO SUPPORT PSYCHOLOGICAL SAFETY



Psychological safety

Discovering the significance of Psychological Safety

GOOGLE'S 5 ATTRIBUTES OF HIGH PERFORMING TEAMS

In 2014 Google launched 'Project Aristotle' to identify the attributes of High Performing Teams.

200+
Interviews

250+
Attributes

180
Teams

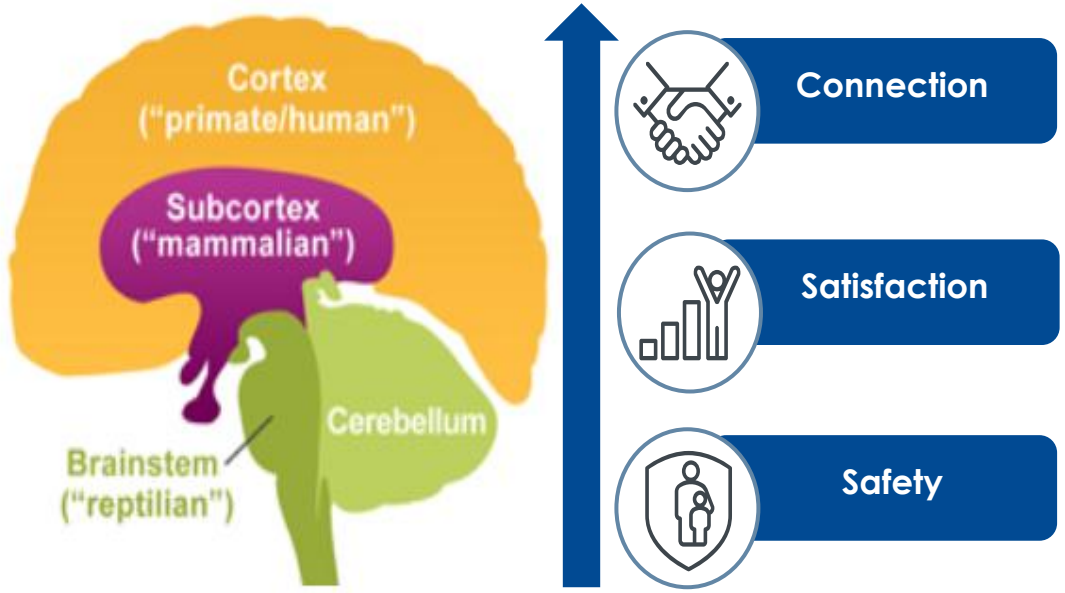
Psychological Safety – what is it?

LEARNINGS FROM PROFESSOR AMY EDMONDSON

> “Psychological safety is a belief that one will not be punished or humiliated for speaking up with ideas, questions, concerns or mistakes”
>
> - Amy Edmondson, Novartis Professor of Leadership and Management at Harvard Business School

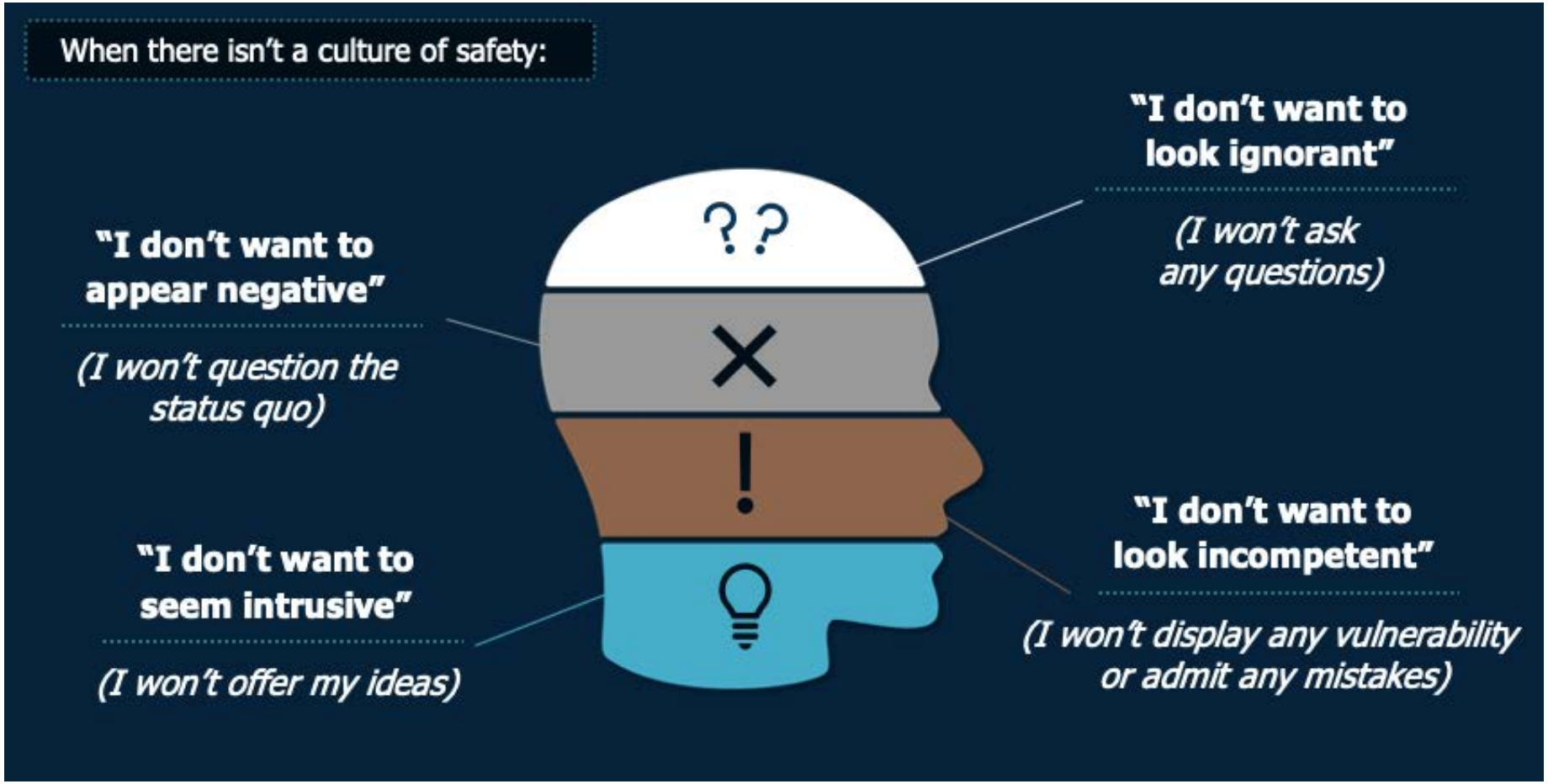
The neuroscience of psychological safety

HOW OUR FIGHT, FLIGHT, FREEZE OR FLOCK INSTINCTS PLAY A PART IN OUR WORKPLACES



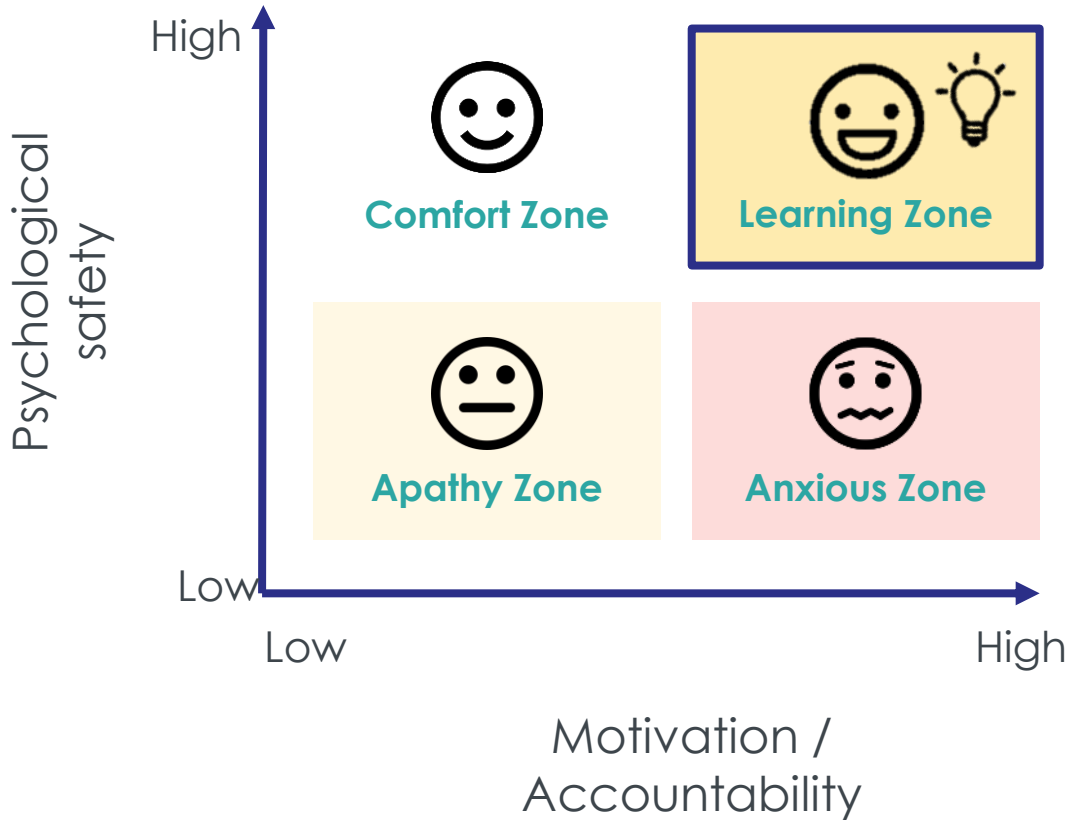
How do we feel without Psychological Safety?

HOW ARE INTERACTIONS AND BEHAVIOURS IMPACTED BY FEELING PSYCHOLOGICALLY UNSAFE?



Psychological safety and personal and professional growth

CREATING AN ENVIRONMENT WHERE WE CAN LEARN AND DEVELOP TOGETHER



In your groups discuss the following prompts

EXERCISE 1 – IDENTIFYING BEHAVIOURS THAT HELP AND HINDER PSYCHOLOGICAL SAFETY

1. What are examples of behaviours that **damage** psychological safety?
2. What are examples of behaviours that **build** psychological safety?

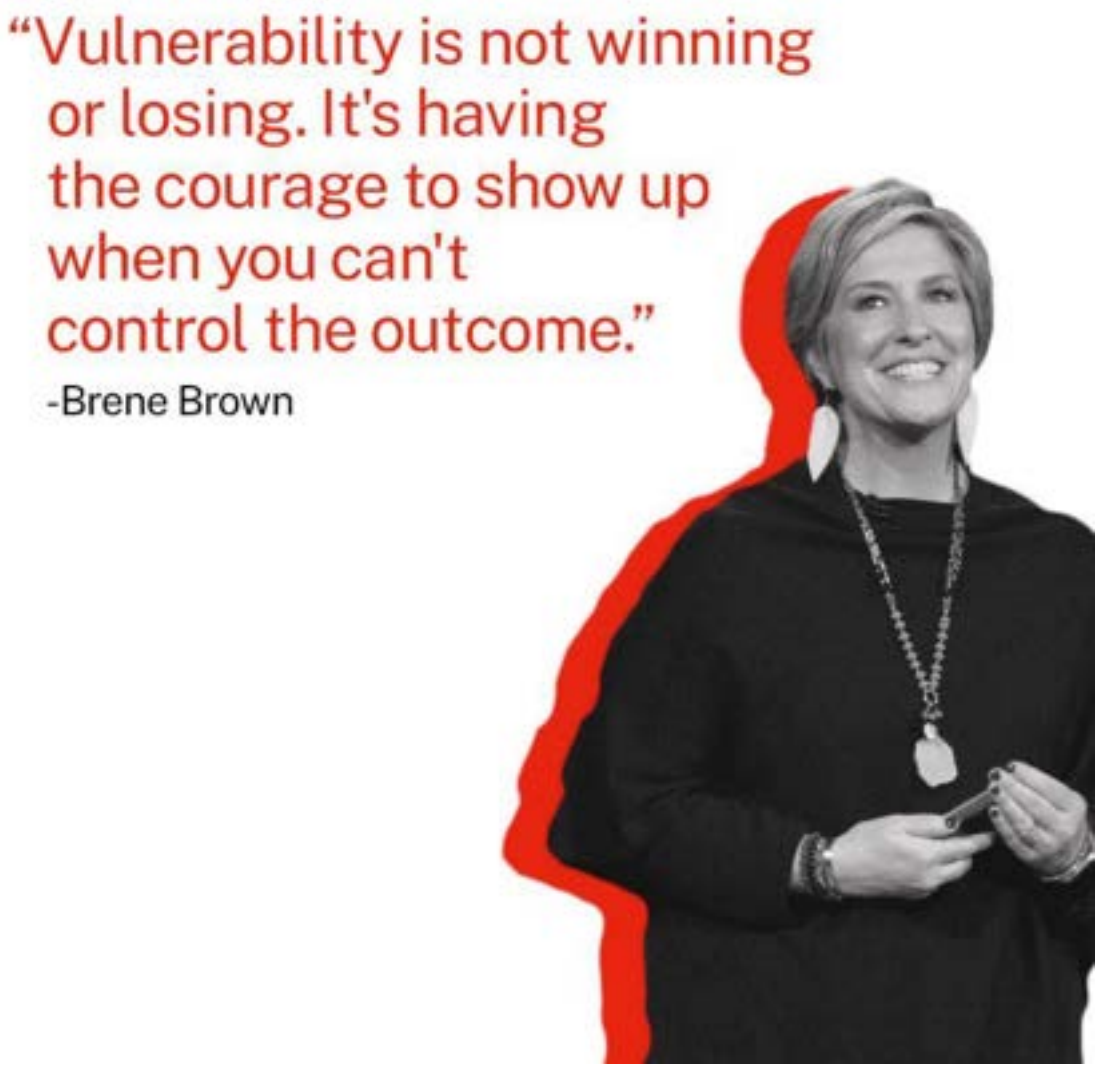
10 minutes

Exploring vulnerability and asking for help

The Power of Vulnerability at work

CREATING A CONNECTIVE AND CREATING WORKPLACE

- Brene Brown's research started with a simple ambition – since vulnerability is one of the most excruciating feelings we contend with in our day to day lives how can we reduce or eradicate it in pursuit of comfort
- What she discovered was that expressing our vulnerability was in fact essential to connecting with others, to being creative, to innovation and to our sense of belonging
- Being vulnerable is hard – it involves uncertainty, risk and emotional exposure
- Without it we risk limiting our interpersonal relationships both at work and at home, fostering shame and reinforcing scarcity culture – the sense of 'never enough'



Asking for help is hard

Asking for help: building trust and demonstrating competence

Competence

Alison Wood Brooks

" We find that people are reticent to seek advice for **fear of appearing incompetent**. This fear however is misplaced. We demonstrate that **individuals perceive those who seek advice as *more* competent than those who do not**."

Source: Brooks, 2015 Management Science Paper: Smart People Ask for (My) Advice: Seeking Advice Boosts Perceptions of Competence

Trust

Asking for help was found to by the #1 trust building behaviour across over 1,000 senior leaders.

Asking for help was also correlated with being given work that was seen as more exciting, more ambiguous and more 'cutting edge' whereas **colleagues who did not ask for help tended to be given work that they had already proven they could do before.**

Source: Brown, Dare to Lead: Brave work, tough conversations, whole hearts

Brené Brown

Asking for help: embracing discomfort and fighting off judgement

Discomfort

Xuan Zhao

"Performing acts of kindness increases well-being, yet people can be **reluctant to ask for help that would enable others' kindness**. We suggest that people may be overly reluctant because of **miscalibrated expectations about others' prosocial motivation**, underestimating how positively others will feel when asked for help.

Source: Zhao, Surprisingly happy to have helped: Underestimating prosociality creates a misplaced barrier to asking for help

Judgement

"If you can't ask for help without self-judgement, you cannot offer help without judging others."

Brené Brown

Source: Brown, Dare to Lead: Brave work, tough conversations, whole hearts

In your groups discuss the following prompts

EXERCISE 2 – REFLECTION ON EXPERIENCES OF ASKING FOR/GIVING HELP

1. Reflect on your experiences of asking for help both positive and negative – *what made the experience positive or negative for you?*

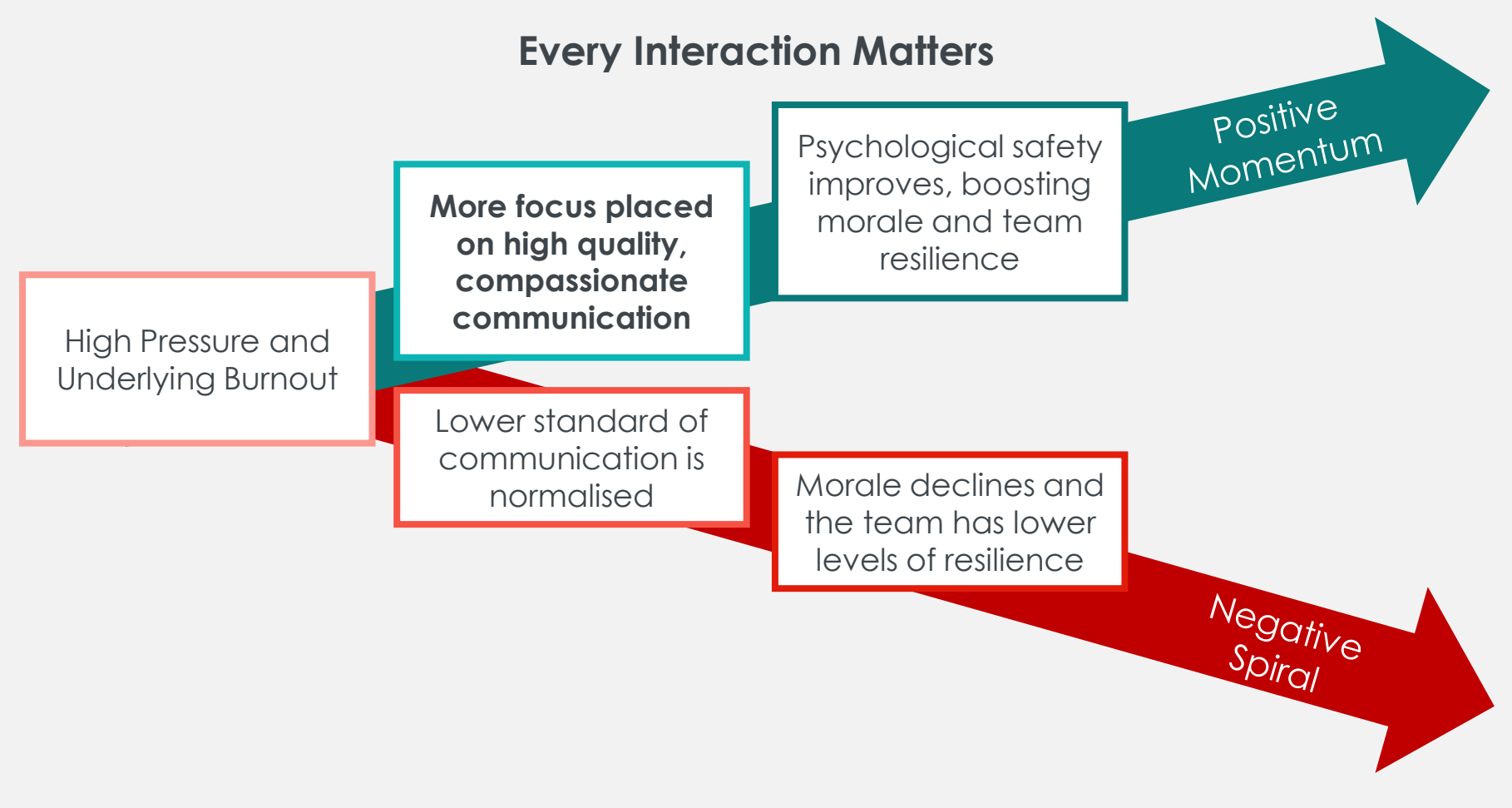
2. Reflect on your experiences of giving help – *how did you feel in those moments and afterwards?*

10 minutes

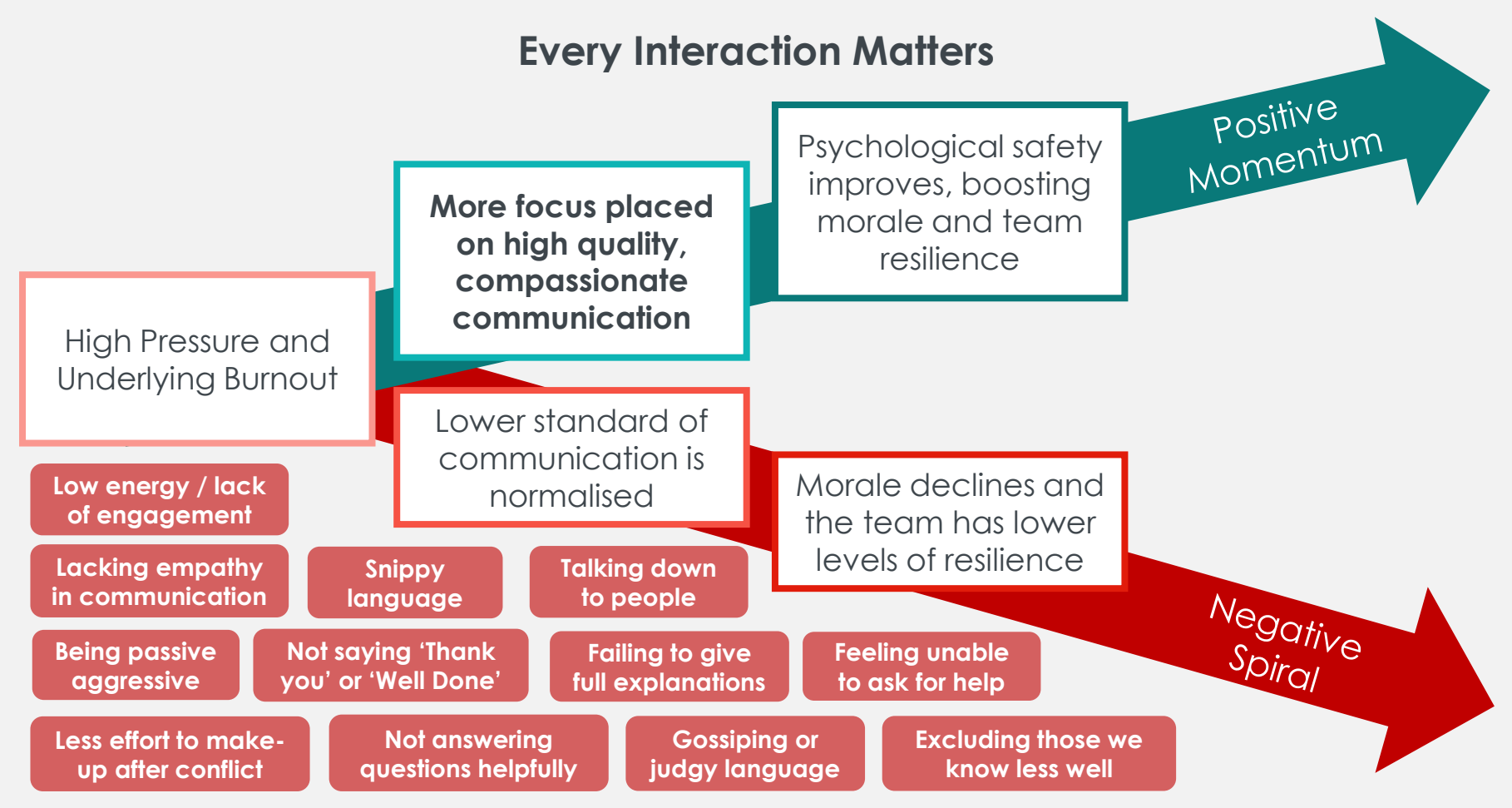
Reacting vs Responding:

Applying the PEACE Model

The role of communication



The role of communication



The core message of our work: every interaction matters

The better our communication, the more valued we feel

When we're tired, busy or stressed, conscientiousness about how we communicate **is often the first thing to slip.**

This can lead to:

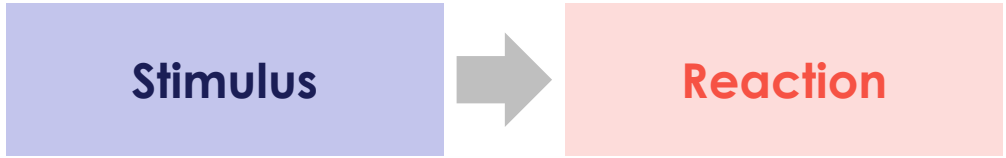
- snippy, rude, or curt language;
- judgemental or passive aggressive comments;
- excessive use of hierarchy or a tone of superiority;
- focussing only on those we're close to and excluding those we know less well;
- unwillingness to answer questions or encourage others to learn;
- imposing parent/child dynamics instead of healthy two-way adult to adult conversations.

Poor communication often lacks empathy, harming our ability to generate meaningful connection and undermining psychological safety within the team. Over time this negatively impacts team morale and individual wellbeing

Our feelings are real, but they're not facts. Our emotions are important data signals but they're not directives.

FROM REACTING TO RESPONDING

Instinct: when we act immediately, driven by an emotional reaction



Emotional Awareness: when we use emotions as signals and reflect on them before responding

A framework for reflection to help us be more considered in our response

PEACE FRAMEWORK (1/2)

P	E	A	C	E
Pause	**Emotions**	**Assess**	**Control**	**Empathy**
Notice your reaction and take a breath	Identify the emotions you're feeling e.g. hurt, disappointed, frustrated, let-down etc. What signals are your emotions giving you?	Assess the facts and consider any assumptions you've made What is the context of the situation?	Focus on what is within your influence to control What can you change?	Consider the situation from the other perspective How are the other people in this situation feeling?

Working through an example

PEACE FRAMEWORK (2/2)

P	E	A	C	E
Pause	**Emotions**	**Assess**	**Control**	**Empathy**

"I'm feeling frustrated because a task hasn't been completed properly and my colleague is confused and asking me about it when I'm busy. I'm also feeling annoyed because I consider this to be quite a basic task which I'm surprised they don't know how to do to a high standard."

"I don't know whether they've ever been taught how we do it here though."

"It will only take me 5 minutes to show them a good example."

"It's not their fault that they haven't been shown before and I remember feeling really nervous about getting things wrong at that stage of my career and needing encouragement myself."

Spend a couple of minutes reflecting independently, and then share with your group

EXERCISE 3 – PEACE FRAMEWORK

1. Can you think of a time where you *reacted*, instead of *responded*?

2. How could you have applied the PEACE model?

P	E	A	C	E
Pause	Emotions	Assess	Control	Empathy

10 minutes

Rupture & Repair:

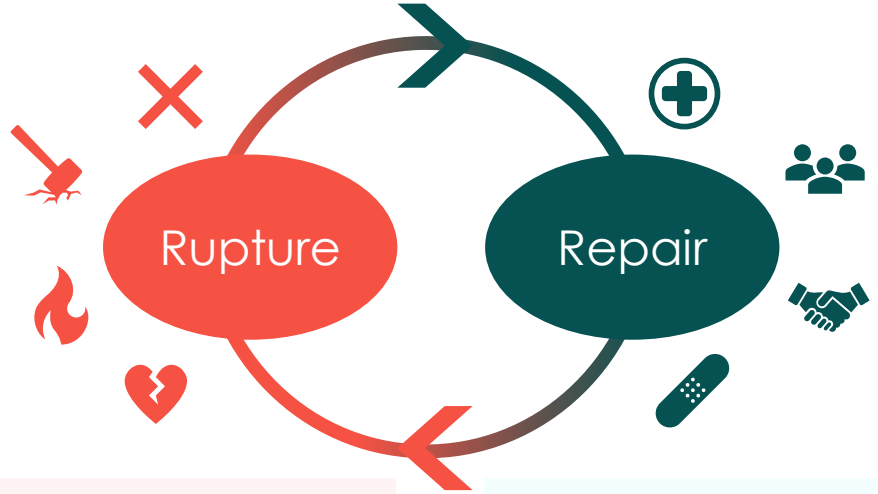
Using the IDEA Framework

Our professional relationships go through cycles of rupture and repair

RUPTURE & REPAIR

Every interaction matters:
But what do we do when things go wrong?

The moments where our relationships break down



Empathy and connection to rebuild our relationships

- When working in a high-stress or time-pressured environment, and despite our best efforts, we will sometimes fail to communicate clearly and compassionately
- Unresolved interpersonal conflict on top of this existing stress can harm morale and lead to overwhelm

- Reconnecting with colleagues when we've communicated poorly is essential to psychological safety
- Showing-up, being empathetic and embracing these difficult conversations is at the heart of a healthy culture

We can use a feedback tool to help us navigate difficult conversations

IDEA FRAMEWORK

I	D	E	A
Intent	Describe	Exchange	Action
Only start the conversation from a place of positive intent when you're ready to lead with compassion	Be specific in identifying what can be improved and be objective in your description	Have a two-way discussion, listening carefully to their point of view	Agree on 1-2 tangible actions to take forward
You should ask permission first and give constructive feedback in private	You should describe the behaviours not ascribe personality traits	You should aim to have a timely conversation as close to the event possible	**Even better if** you're able to set a date to follow-up and discuss again

Returning to the case

EXERCISE 4 – MEETING WITH ICB MEDICAL DIRECTOR

- The team has been interviewing various staff members at the ICB and four acute trusts as part of evidence-gathering.
- You have received this email from the ICB medical director expressing their concerns about your work.
- You had been planning to speak to the ICB medical director, but hadn't got round to it yet…

You have 10 minutes to prepare for your meeting with the medical director. Using learnings from this session, create a plan for how you can repair your relationship with the medical director.

Dear team,

I've been told that you are considering closing emergency services within the Oldtown geography. I have some considerable concerns.

Why haven't I been contacted about this yet? It sounds like your recommendations will have a significant impact on clinical practice and outcomes – I would have thought it was obvious that I need to be involved.

Please can we get a meeting in ASAP to discuss.

Regards,
ICB medical director

10 minutes

What have we covered in this module?

RECAP

- The attributes of a high-performing team
- What it takes to build psychological safety
- Frameworks to better manage emotional awareness and challenging conversations

Use the prompts below to guide your reflection

USE ADAPTIVE ACTION TO REFLECT ON YOUR LEARNING

What?

- What did you notice in your learning?
- What surprised you?
- What's different to what you've learnt about this before? What's the same?
- What are you feeling about this cycle of learning?

So What?

- So what could this mean?
- So what are the implications for you, for your project, for your role?
- So what are your options for action?

Now What?

- Now what will you do?
- By when?
- How will you know when you've got there?

Contents

This module focuses on fast experimental cycles, and is a chance to practise hypothesis thinking

OBJECTIVES AND INTRODUCTION

After this module I will:

- Understand the basic principle of plan-do-study-act cycles
- Be aware of tools that can be used to support process improvement within these cycles

This module includes:

- Plan do study act (PDSA) cycles

Problem solving and where the tools fit in

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, engaging with stakeholders to understand their view

Frequent review of improvement cycles, evaluating the outcomes of a project, identifying improvements and communicating success

Using quantitative and qualitative data and tools to discover the current state of a process or service, best practice and/or the root causes of a problem.

Using rapid improvement cycles to test changes, planning for implementation, engaging stakeholders in implementation and delivering a sustainable change

Establishing a vision for a future state: developing strategic recommendations and/or specific changes using design tools, options generation & evaluation

Westway is making some big claims about productivity improvements – the team visits a neighbouring trust outside the ICB to find out more...

SCENARIO

- The Chief Executive at Westway is claiming that they will make major productivity improvements over the next year which will improve the financial position of the trust
- The planned improvements are:
  - A 25% improvement in theatre productivity
  - An increase in outpatients utilisation from 65% to 80%
  - 97% of oncology patients being seen within 2 weeks (currently 91%)
  - A saving of 20% of administration costs
  - An 18% improvement in pharmacy productivity
  - A 12% reduction on non-elective length of stay
  - A 1/3 reduction in MRSA rates
  - An increase in screening for dementia so that >90% of patients are assessed (currently 83%)
- The ICB CEO is sceptical these improvements will be achieved and wants your team to investigate the validity of the claims
- You have decided to visit a neighbouring trust outside the ICB which is known for its focus on continuous improvement, to see whether it is possible to make such large changes

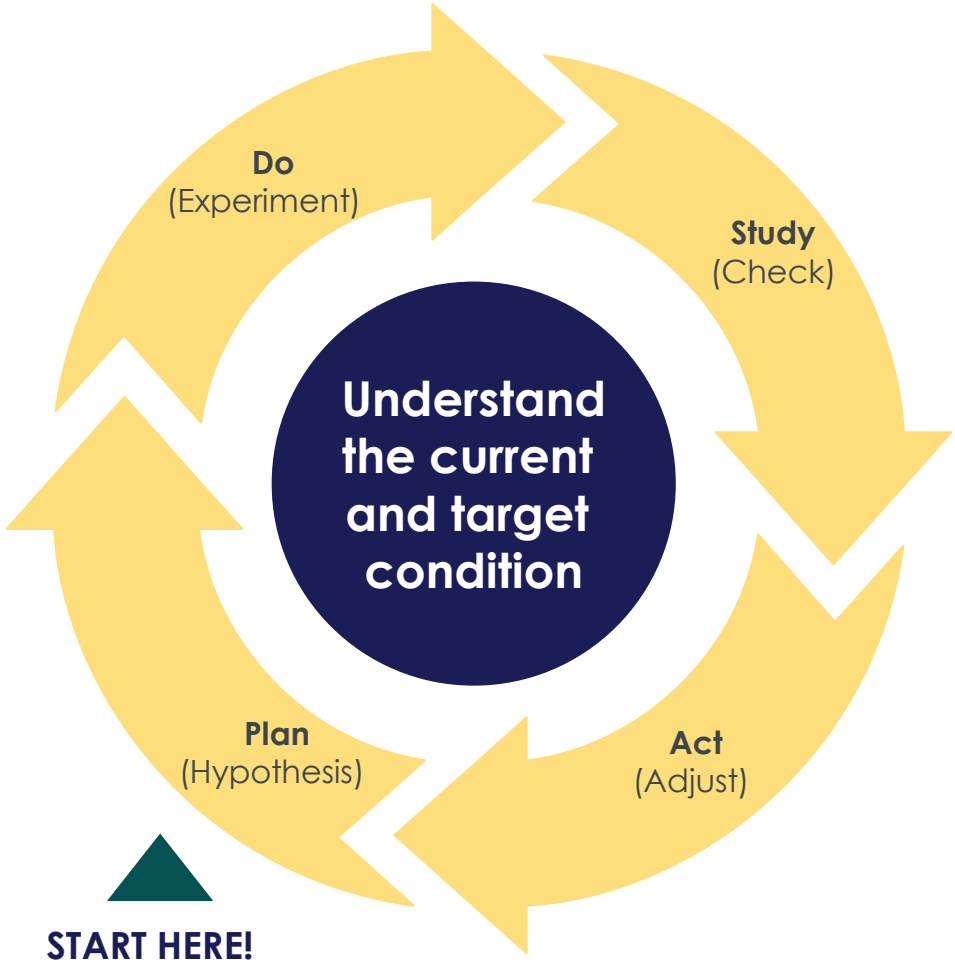
PDSA is based on the scientific method of iteratively testing hypotheses, until the obstacle is overcome

PDSA: PLAN, DO, STUDY, ACT

"I have two jobs – one to deliver care, one to improve the delivery of care"

- Consultant, NHS Trust

- Trial the change
- Record any problems
- Observe the impact of your change (the new "current condition")



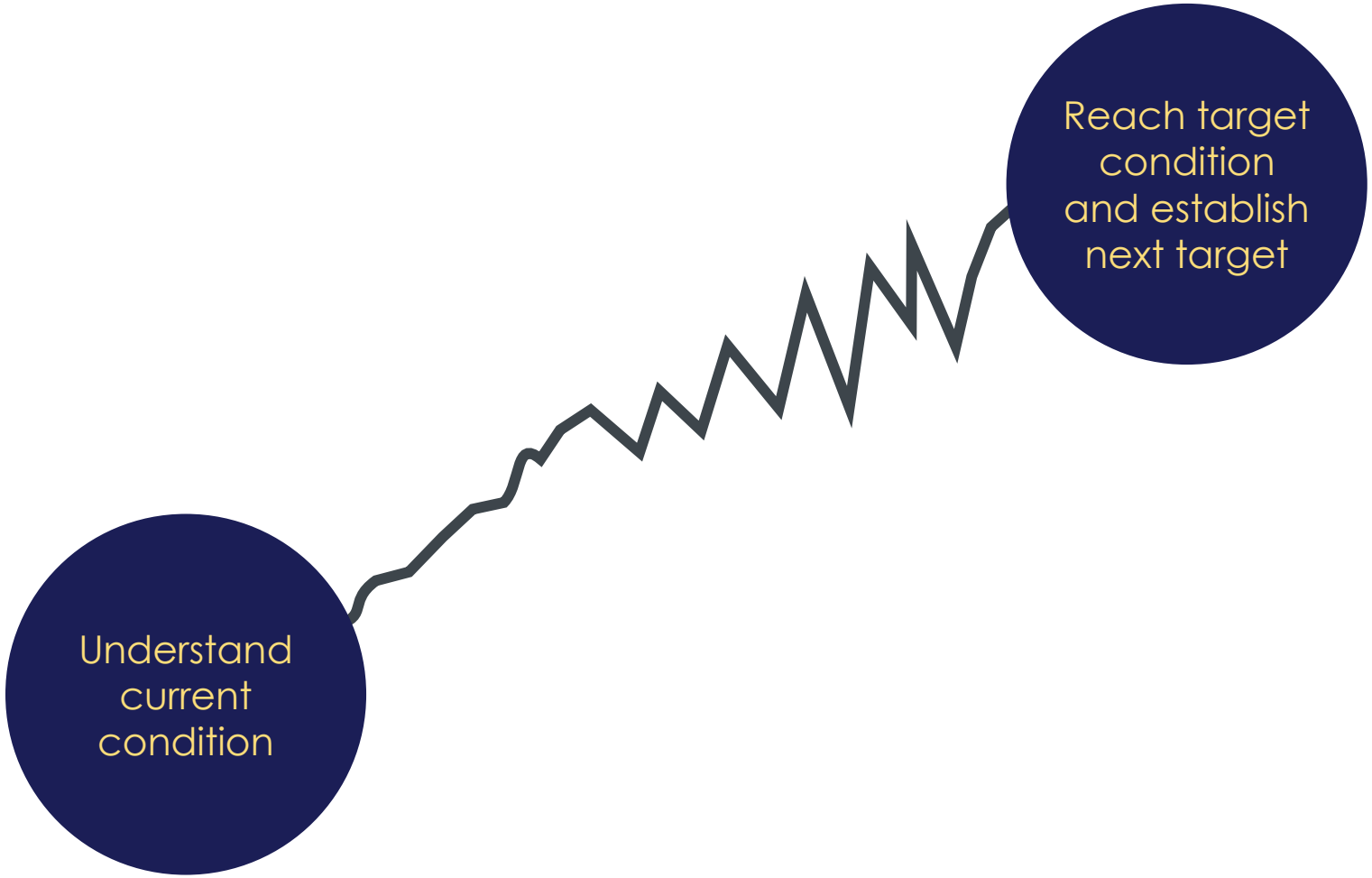
- Check if the impact / results matched your predictions
- If not, study what actually happened, and the root causes of under-performance

- Confirm the objective
- Clarify your "test" – what's the problem/obstacle/root cause you will impact and predictions that impact
- Plan the trial (what, who, when, where)

- Adopt – if effective, standardise, embed and share
- Adjust – if not, could you adjust the change and PDSA again?
- Abandon – if not, pick something else to PDSA instead

Your improvement plan will be an “agenda of experiments” targeting the causes of your performance gap

EXPERIMENTS RARELY GO TO PLAN...



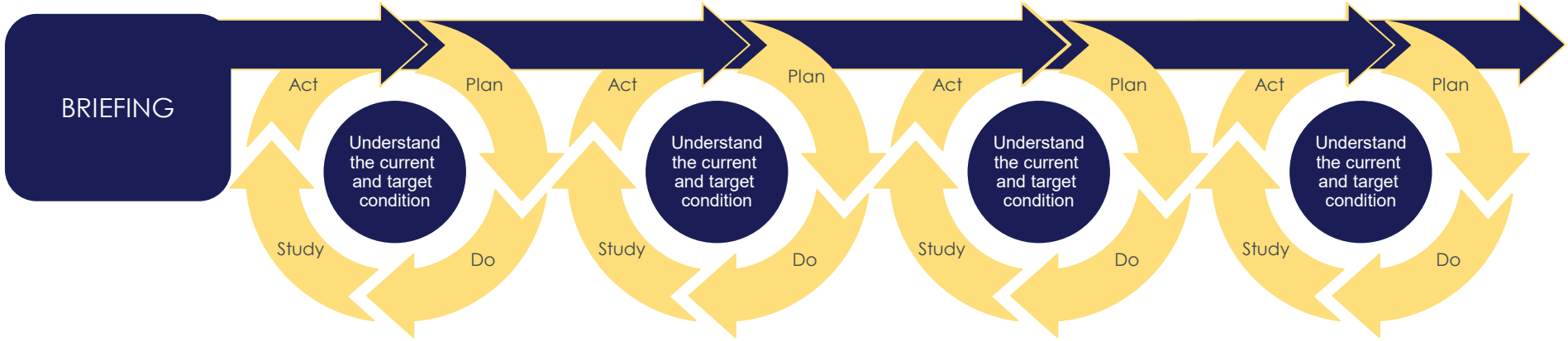
Look for activities which do not "add value" and might be reduced or eliminated

WASTE IDENTIFICATION: 'TIMWOOD' EXAMPLE

Transportation	Moving material/product from one place to another	File movement sheets are completed each time the case is moved
Inventory	Material / product waiting to be processed	Space and storage – multiple locations for cases
Motion	Excess movement and/or poor ergonomics	Staff walking miles to carry out tasks
Waiting	Delays caused by shortages, approvals, downtime	Opportunity for 'cherry picking' cases
Over-production	Producing more than is needed	Unnecessary output
Over-processing	Adding more value than the customer is willing to pay for	Admin staff create manual spreadsheets for everything
Defects/Rework	Correcting mistakes	No quality checks are completed

Let's see how PDSA is used to iteratively improve performance of an individual process

PDSA SIMULATION: HOW IT WORKS



We will run cycles of PDSA, each time "Doing" for 5 minutes

1. "DO" the process
2. "STUDY" the current process and your performance:
   - How are you currently performing?
   - What do your observations tell you?
   - Can you identify any waste by thinking through TIMWOOD?
3. Consider possible options to move towards your required level of performance, propose ONE adjustment to "ACT" on in that cycle, and predict its effect
4. "PLAN" your next change, set up that change to the process, and "DO" it again
   - In the following "STUDY" phases, also decide whether to keep the change, or revert!

Virtual PDSA game: The object of this exercise is to work out how to spin a coin so that it spins for the longest possible time

PDSA SIMULATION: EXERCISE

You need

- 4 coins (different shapes and sizes)
- A timing device
- Piece of paper to track PDSA

Roles

- Spinner
- Time keeper
- Observer (1 or 2)

Time allowed

- 2 mins planning (no spinning allowed)
- 2 mins "experiment" time
- 2 mins planning (no spinning allowed)
- 90 seconds final experiments
- Competition!
- 10 mins to debrief and share lessons

Objectives

- To achieve the maximum spinning time
- To understand which ideas work and which don't to get the best result
- To reflect on how to apply this to 'real life'

Plan

- Who will play each role?
- What variables at may affect the outcome? (Consider which conditions enable the maximum spinning time)
- How will you collect data? (e.g. how many spins do you need to be confident of a result?)
- What is your starting hypothesis for how to achieve the maximum length spin?

Keep track of your hypothesis testing and progress with this template

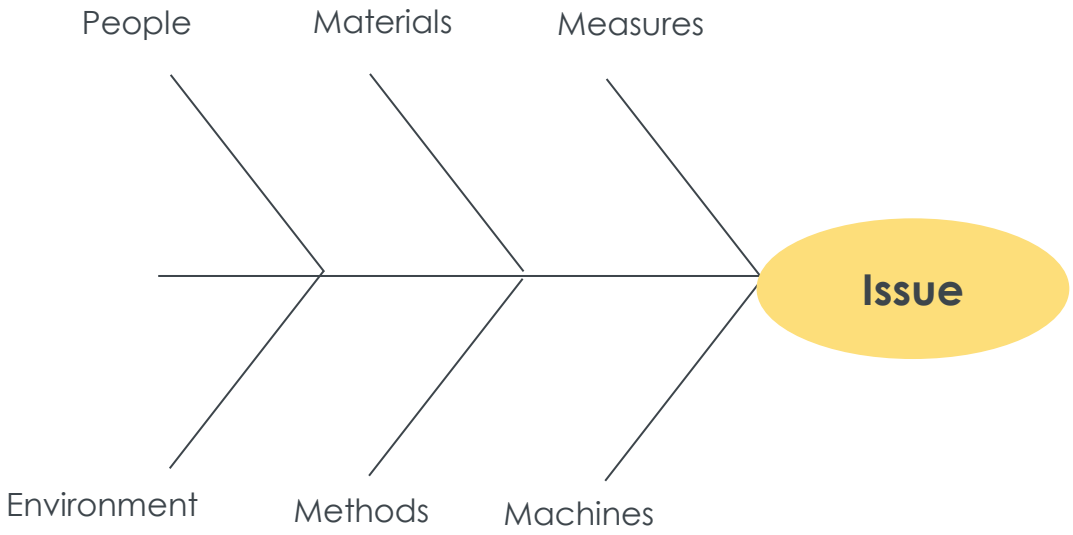
PDSA RECORD SHEET

Cycle	Hypothesis tested	Plan	Result	Study
1	To be agreed…	To be agreed…	To be agreed…	To be agreed…
2				
3				
4				
5				
6				
7				
8				

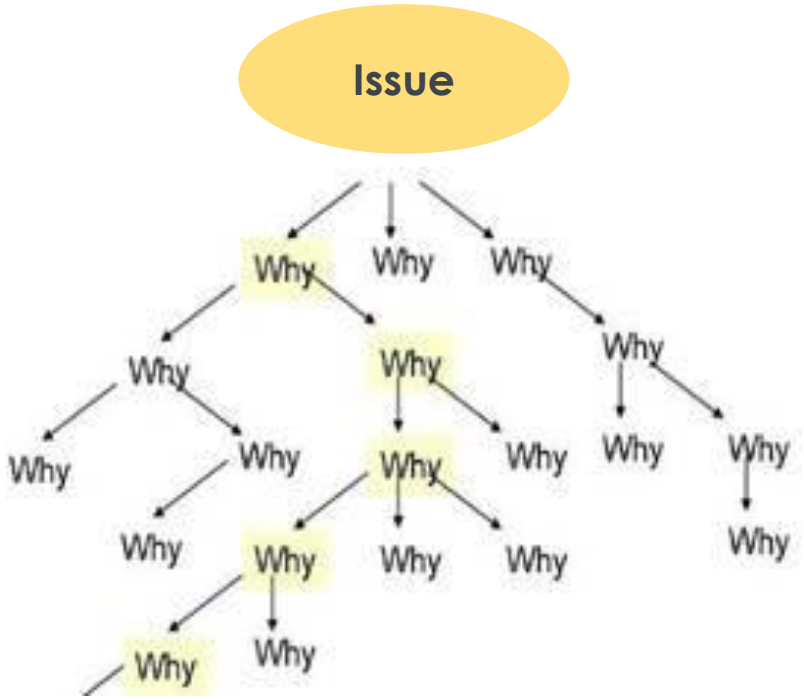
Use root cause analysis to understand the underlying reason why a problem occurs

ROOT CAUSE ANALYSIS

1 Ishikawa (Fishbone Diagram)



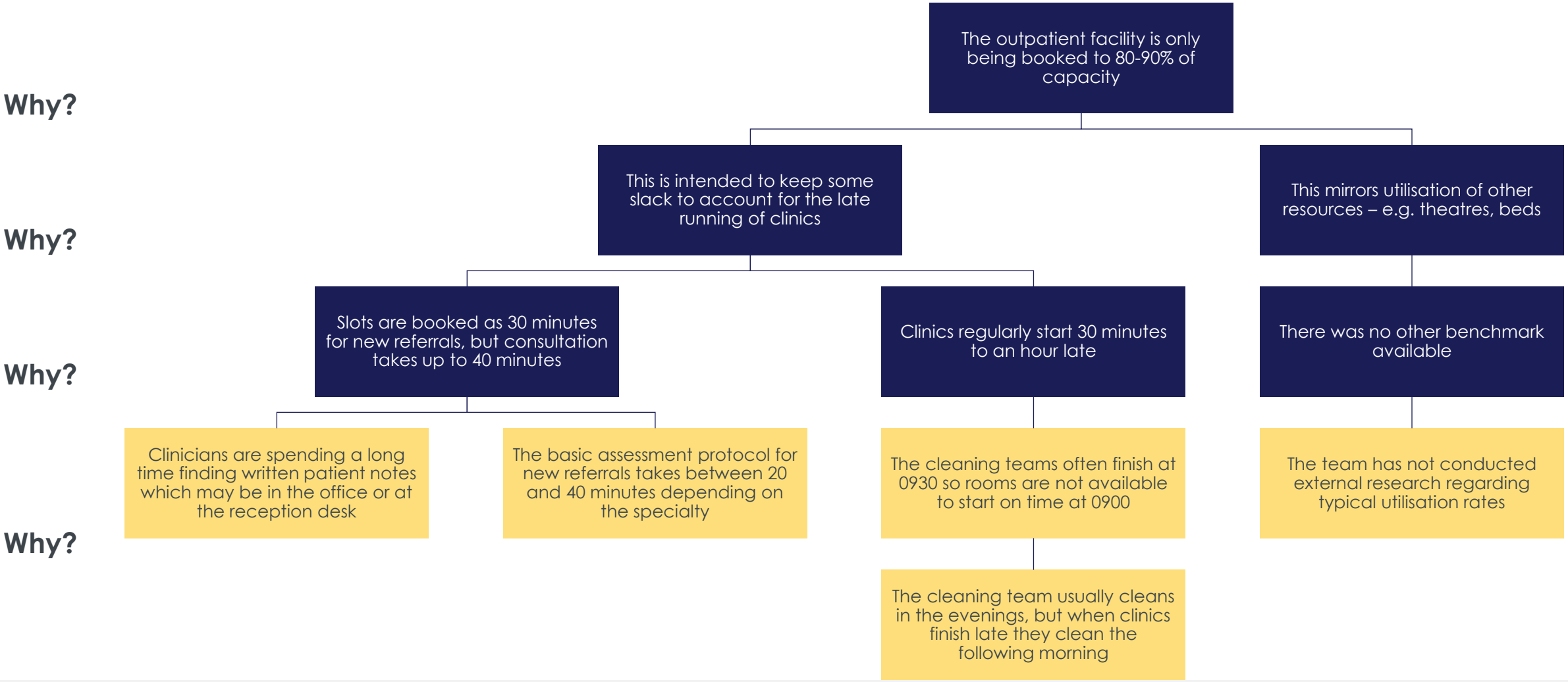
2 5 Whys



Fixing the symptom solves today's problem. Fixing the root cause solves it in the long term.

Why is this outpatient facility only being booked to 80-90% capacity?

EXAMPLE: ROOT CAUSE ANALYSIS



What did you learn?

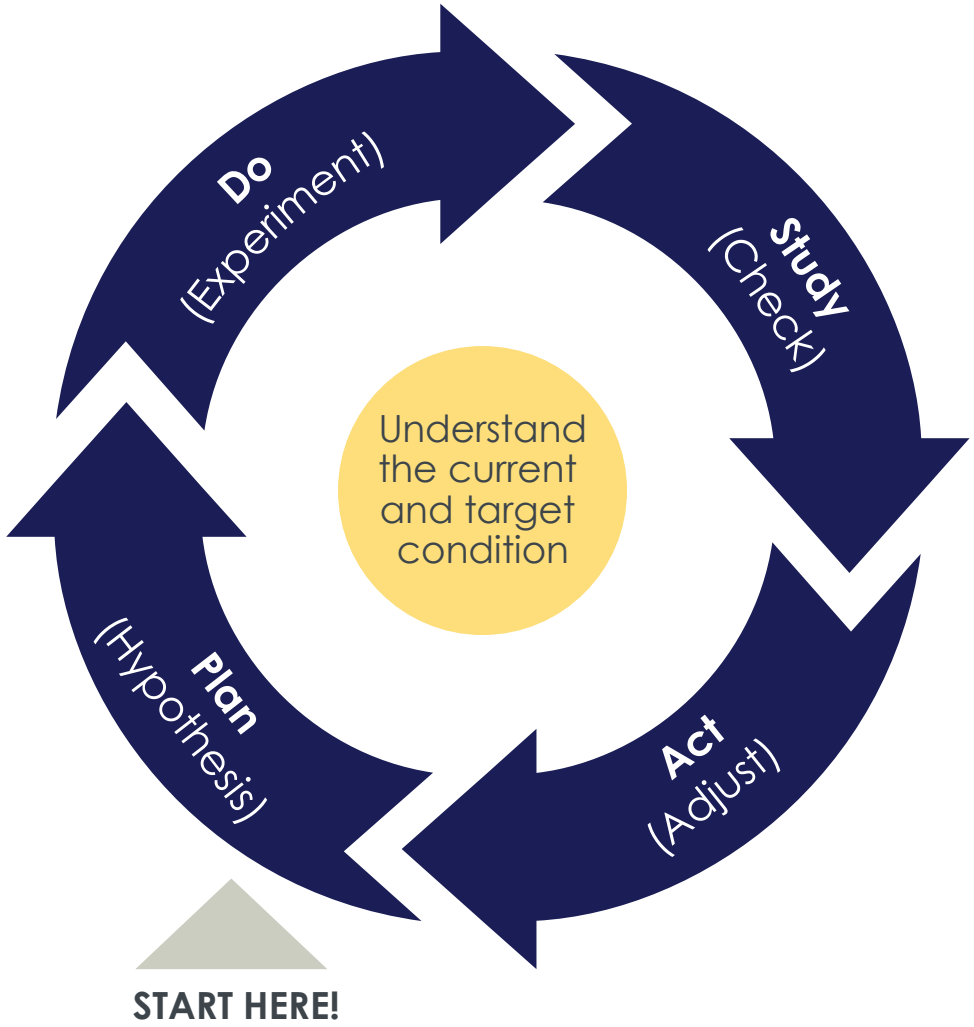
PDSA SIMULATION DEBRIEF

Reflection

In your teams, discuss :

- What happened in your team?
- What improvements did you achieve?
- How did you identify the potential for these improvements?
- What did you learn about the PDSA cycle?
- What was hard? What was easy?

Two minutes per team to summarise to the whole group



What opportunities are there for improvement within a Trust?

WHAT OPPORTUNITIES ARE THERE FOR IMPROVEMENT WITHIN A TRUST?

- The Chief Executive at Westway is claiming that they will make major productivity improvements over the next year, which will improve the financial position of the trust
- The planned improvements are:
  - A 25% improvement in theatre productivity
  - An increase in outpatients utilisation from 65% to 80%
  - 97% of oncology patients being seen within 2 weeks (currently 91%)
  - A saving of 20% of administration costs
  - An 18% improvement in pharmacy productivity
  - A 12% reduction on non-elective length of stay
  - A 1/3 reduction in MRSA rates
  - An increase in screening for dementia so that >90% of patients are assessed (currently 83%)
- **At the start of the module, how realistic did you think these claims were?**
- **Have your views changed? How? Why?**
- **Which aspects of your own work would be open to this improvement approach? List 2 or 3**

5 minutes

DAY 2 WRAP UP

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, engaging with stakeholders to understand their view

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Establishing a vision for a future state: developing strategic recommendations and/or specific changes using design tools, options generation & evaluation

Today, we have covered elements of 'Discover', 'Design', and 'Deliver'

DAY 2 KEY LEARNINGS

We have learned how to:

- Perform basic analysis with Excel
- Manage challenging conversations
- Use PDSA cycles to rapidly test changes and improve a process

Before you go home....

END OF DAY 2 TASKS

Write on two post-it notes, and take them to the board:

- 1 memorable tool or insight from today's training
- 1 outstanding question, tool, or area you would like to revisit tomorrow

Day 3 introduction & teach back

On day 2, we explored a variety of methods to discover the current state and design solutions and answers to our question

DAY 1 & 2 TOOLS

- Module 1: Launching the project
  - Problem Definition sheet
  - Project kick-off pack
- Module 2: Structuring the problem and work planning
  - Issue trees
  - Prioritisation with 2x2 matrices
  - Boat work plan
  - Risk logs
  - Deliverables tracker
- Module 3: Engaging stakeholders
  - Stakeholder prioritisation and mapping
  - ACCA framework
  - Trust equation, MBTI, positive influencing tactics
  - Negotiation skills
- Module 4: Developing insight
  - Hypothesis trees
- Module 5: Gathering data and conducting analysis
  - Basic Excel functions
  - Excel analysis
- Module 6: Creating high-performing teams
  - Psychological safety
  - Vulnerability
  - Reacting vs responding
  - Rupture and repair
- Module 7: Process improvement and Plan Do Study Act
  - PDSA cycles
  - Root cause analysis

5 mins, in pairs

Select a topic that you think you need to revise, your partner should spend two minutes explaining it back to you

On Day 3 we will finish designing the future state, before moving on to planning for delivery, communicating recommendations and digesting the project

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, engaging with stakeholders to understand their view

Using quantitative and qualitative data and tools to discover the current state of a process or service, best practice and/or the root causes of a problem.

Establishing a vision for a future state: developing strategic recommendations and/or specific changes using design tools, options generation & evaluation

Using rapid improvement cycles to test changes, planning for implementation, engaging stakeholders in implementation and delivering a sustainable change

Frequent review of improvement cycles, evaluating the outcomes of a project, identifying improvements and communicating success

Today we will look at the transition from options to recommendations, delivery, and learning

COURSE AGENDAS

Day 1 DEFINE	Day 2 DISCOVER & DESIGN	Day 3 DESIGN, DELIVER & DIGEST
Arrival and coffee	Arrival and coffee	Arrival and coffee
Welcome to Fast Effective Projects	Introduction to Day 2	Introduction to Day 3
Introduction and set-up	**M5** **Gathering data and conducting analysis**	**M8** **Modelling and options appraisal**
M1 **Launching the project**	Break	Break
Break	**M5 continued**	**M9** **Planning for change**
M2 **Structuring the problem and work planning**	Lunch	Lunch
Lunch	**M6** **Creating high-performing teams**	**M10** **Developing and communicating recommendations**
M3 **Engaging stakeholders**	Break	Break
Break	**M7** **Process improvement and Plan Do Study Act**	**M11** **Closing the project**
M4 **Developing hypotheses**	Daily feedback	Close
Daily feedback	Close	
Close		

Contents

Where are we in the case?

CASE RECAP

- The ICB CEO feels strongly that reconfiguration of emergency services is the only way forward to resolve the financial and clinical catchment guidelines issues
- You have learned from the Strategy Director at Northside that patients do not want their ability to access emergency services to be impacted
- Your team also developed the hypothesis that financial stress can be alleviated by reducing costs through reconfiguration and other initiatives – and you wish to test this
- Data analysis suggests that closing Sunny South would have the least impact on patient travel time
- The ICB Medical Director has raised several concerns regarding the proposed reconfiguration, **emphasising that compliance with clinical catchment guidelines is not a mandatory requirement**, but rather one of several important factors to consider alongside broader clinical outcomes and service quality
- The team has visited a neighbouring trust outside the ICB and seen the potential for service improvement through productivity and efficiency gains

This module will introduce option appraisal and modelling

OBJECTIVES AND INTRODUCTION

After this module I will:

- Know how to design an options appraisal using a Pugh matrix, including selection of options, criteria and weighting
- Understand how to use a model to generate projections to evaluate different options
- Know how to complete an options appraisal using a range of quantitative and qualitative inputs

This module includes:

- An introduction to option appraisals, including Pugh matrix
- Exercise 1, designing an options appraisal for the case
- An introduction to modelling using excel
- Exercise 2, exploring a model and – depending on your skill level – having a go at modelling
- Exercise 3, using evidence to complete an options appraisal

What are we trying to achieve when developing options?

What are the outputs?

A set of credible options, for which the costs, benefits and the implementation challenges are well understood by stakeholders

Plenty of projects fail because the options are superficial or not thought through.

You need to turn your analysis and insights into credible options which decision makers can understand and support, knowing that the detailed work behind each has been done well.

Agree which options to work with, then detail each option and test its suitability, feasibility and acceptability

DEVELOPING THE OPTIONS – HOW?

1. **Agree (with key decision makers) which options should be taken forward**

2. **Develop objective criteria to compare options.** Bear in mind:

   - **Suitability:** how well does this option address the basic question from your PDS?

   - **Feasibility:** how easy will it be to deliver this option(e.g., cost, time to implement, conflict with other policies)?

   - **Acceptability:** will this option be acceptable to decision makers, or stakeholders who can influence decision makers (doctors, nurses, patients, etc.)?

3. **Assess each option against the criteria:**

   - **Quantitative assessment:** carrying out analysis (e.g. cost-benefit; demand-capacity modelling)

   - **Qualitative assessment:** best practice research; speaking to experts or key stakeholders; looking at comparative examples or case studies

4. **Test your assessment widely with key stakeholders** (and if you think an option should be discounted, say so)

A Pugh Matrix can be used to give a semi-quantitative evaluation of multiple factors for a range of options

EVALUATING OPTIONS: PUGH MATRICES

- A Pugh matrix will provide a semi-quantitative evaluation of each idea or option – you will be able to rank them according to the final score
- This ranking depends on the weightings you select – if you change the weightings you will get a different result
- You can use this tool to challenge your thinking as well as to prioritise your ideas

Ideas / Options Criteria / Considerations	Weighting	1. Increase productivity of existing wards	2. Expand into mothballed wards	3. Build new ward	4. Build new department	5. Outsource additional demand
Time to delivery					+ 2	+ 1
Longevity of solution					- 1	- 1
Disruption						
Financial impact						
Overall Benefit						

Your weightings could be based on rankings (1, 2, 3, 4) or a set scale (e.g. 1-10)

Use a simple scoring system to capture differences e.g. - - to ++ or -2 to +2

Example: Where should Oldtown University allocate the funding it received from a recent donation

PUGH MATRICES: WORKED EXAMPLE

It is worth repeating: this ranking depends on the weightings you select – if you change the weightings you will get a different result

This table records your weighting and scores, but does not contain the calculation for the overall benefit – you will need to do that elsewhere.

Criteria / consideration	Weighting	Increased tutor salary	Increased contact hours	New student bar	Digital learning system	Marketing Campaign
Tutor satisfaction	25%	3	2	-2	0	0
Student satisfaction	20%	2	3	3	2	-1
Increase in students	30%	0	2	3	1	3
Environmental impact	15%	0	0	-2	-1	-1
Speed of change	10%	3	3	0	1	2
Overall Benefit						

What's next in the case?

SCENARIO

- A number of options for future configuration of services in the local health community have been suggested by stakeholders. The full list of options is now:
  - No reconfiguration of emergency services
  - Emergency services discontinued from one hospital (four potential scenarios)
- The ICB CEO has raised their concern that there is not a sufficiently robust process in place for evaluating the differences between the options detailed above
- They point out that other health communities in similar situations have developed and published scoring systems for option appraisal

What factors would you include? How would you agree them? What process would you suggest for deciding?

EXERCISE 1: FACTORS TO BE INCLUDED IN THE EVALUATION OF OPTIONS

- 10 minutes of discussion in groups of the following questions:
  - What criteria should be considered when evaluating the different options?
  - What weighting should be applied to the different criteria?
  - Who should be consulted to confirm criteria and weighting?

10 minutes

- Create a basic/outline Pugh Matrix listing the factors to consider when evaluating options, whether to use weightings and, if you choose to, what weightings you would give them (you are only evaluating reconfiguration options at this stage, not alternatives)

10 minutes

- 10 minutes of plenary discussion on conclusions

10 minutes

Pugh Matrix – Evaluating reconfiguration options

EXERCISE 1 (S)

		Ideas / Options				
Criteria / Considerations	**Weighting**	**1. Close Emergency Services at Northside**	**2. Close Emergency Services at Royal Eastend**	**3. Close Emergency Services at Sunnysouth**	**4. Close Emergency Services at Westway**	**5. Do nothing**
Financial sustainability	35%					
Clinical outcomes and safety	20%					
Meeting clinical catchment guidelines	10%					
Travel times	5%					
Ease of implementation	15%					
Patient experience	15%					
Overall Benefit						

Your weightings may differ from these – the important thing is to have a clear justification for the relative weighting of each criteria

The team now want to model the financial implications of reconfiguring emergency services

NEXT STEPS WITH THE CASE

- To support with the options appraisal, the team would like to explore the financial implications of stopping provision of emergency services at one of the four sites at the **beginning of FY 3**.
- The team now need to model similar projections for each of the four-reconfiguration scenarios using assumptions generated from analysis and conversations with finance teams.

Why do we use Excel for modelling?

ANALYSIS VS MODELLING: MODELLING

- **Quantitative analysis: what is happening now?**
  - Answering questions such as "how many", "what proportion", "how frequently"
  - Calculating averages, variation, correlations

Covered in module 5

- **Modelling: what would happen if…?**
  - Projecting into the future
  - Testing alternative scenarios
  - Considering uncertainty / sensitivity

Covered in module 8

- What is a model?
  - A representation, imitation or prototype
  - Can be used to project what would happen if conditions remained as they are, or if certain conditions change
  - Can be used to try out different configurations and options and see how this affects an output
  - Can be used to test uncertainty or sensitivity

Even if you're unlikely to carry out modelling, understanding how models work helps you be a smarter consumer of analysis and make better, data-driven decisions

UNLIKELY TO CARRY OUT MODELLING

You don't need to build a model — but you *do* need to:

- Understand **what models can and can't do**
- Be confident **challenging assumptions and interpreting results**
- Use model outputs to **tell clear, evidence-based stories**

LIKELY TO CARRY OUT MODELLING

We'll go deeper into:

- How to **structure and design** a model
- **Best-practice in Excel** and logic building
- How to make models that are **transparent, adaptable, and insightful**

The best consumers of modelling ask:

1. Can you explain how it works?

The team should be able to give an explanation in plain English about what the model does overall and at each stage.

Drilling down: What are the main assumptions? Which p processes aren't captured?

2. What level of uncertainty is there in the outputs?

Uncertainty is unavoidable and come from both modelling approach and inputs (data quality, assumptions)

Drilling down: Where does the uncertainty come from? How are you quantifying uncertainty? What's the uncertainty range on the outputs?

3. What are the sensitivities in the model?

Which assumptions (and combinations of assumptions) have the biggest impact on the outputs.

Drilling down: Have you done local or global (combined) sensitivity testing? How have you quantified or visualised the uncertainty?

And the best modellers are ready to answer them

Why do we use projections in Excel?

FINANCIAL ASSESSMENTS

- We normally use projections to answer the question "what if"?
- For example, if Oldtown ICB made a surplus (profit) of £2m in FY 0, what might its profit be in FY 3 if Sunny South emergency service closed?
- **But**, while projections/ forecasts can be made to *look* flashy and robust, they should always be treated with caution and caveats:
- Caveat 1: an Excel model will only give a meaningful projection if:
  - It is based on accurate raw data
  - It has reasonable assumptions
  - The mechanics of the model work
- Caveat 2: An Excel model cannot be any more accurate than its least accurate assumption. Understanding the potential scale of errors around key assumptions is critical

How a model works

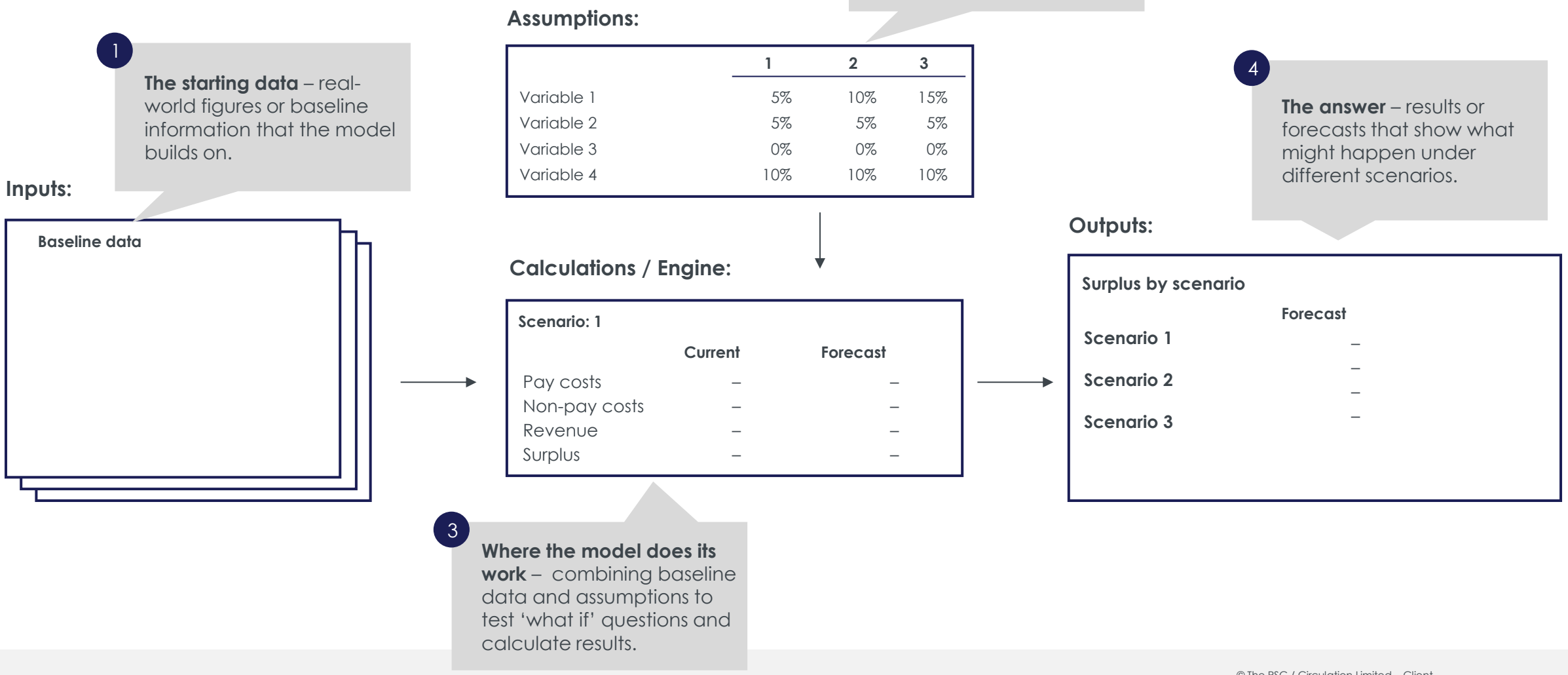
MODEL WIRING DIAGRAM: THE DIFFERENT ELEMENTS OF A MODEL

1 **The starting data** – real-world figures or baseline information that the model builds on.

2 **The 'what ifs'** – the choices or scenarios we want to test, such as growth rates, costs, or demand changes.

3 **Where the model does its work** – combining baseline data and assumptions to test 'what if' questions and calculate results.

4 **The answer** – results or forecasts that show what might happen under different scenarios.



We are now going to split depending on your role

EXERCISE 2.1 – FINANCIAL MODELLING

Track A – unlikely to carry out modelling in your role

- Open "Module 8 – COMPLETE model"
- Spend **5 minutes** navigating the document with reference to the **wiring diagram**, and find the **outputs** tab
- Review the output table, and then spend **10 minutes** discussing the following questions in your pairs:
  - Which option is the best option and why?
  - Which option is worst, and why?
  - What are your three key insights from the modelling that you would present at programme board?
  - What would inform your confidence in presenting to the board?

Track B – likely to carry out modelling in your role

- Open "Module 8 – INCOMPLETE model"
- With reference to the **wiring diagram**, spend **five minutes** familarising yourself with:
  - **Output**
  - **Projections_Baseline**
  - **Assumptions**
  - **Scenario_2_Northside**
- Starting on the **Output** worksheet spend **10 minutes** tracing how the forecast surplus/(deficit) position has been calculated for:
  1. The "Do Nothing" scenario
  2. "Close Northside" Scenario
- Spend **25 minutes** completing **Scenario_1_Eastend** and then complete the **Output** table. Visualise the output using a chart of your choice

For discussion

- Which option is the best option and why?
- Which option is worst, and why?
- What are your three key insights from the modelling that you would present at programme board?

Your analyst has completed the modelling for the different reconfiguration scenario – here are the results

EXERCISE 2.2 – INTERPRETING RESULTS

Surplus/deficit (£m)	Y1	Y2	Y3	Y4	Y5	Y6
Do nothing	-1.7	-11.0	-14.2	-11.7	-10.1	-9.5
Close Eastend	-1.7	-11.0	-5.9	-0.3	1.4	2.2
Close Northside	-1.7	-11.0	-8.2	-2.7	-0.9	-0.2
Close Sunny South	-1.7	-11.0	-14.8	-9.3	-7.6	-7.0
Close Westway	-1.7	-11.0	-28.1	-24.1	-21.2	-20.8

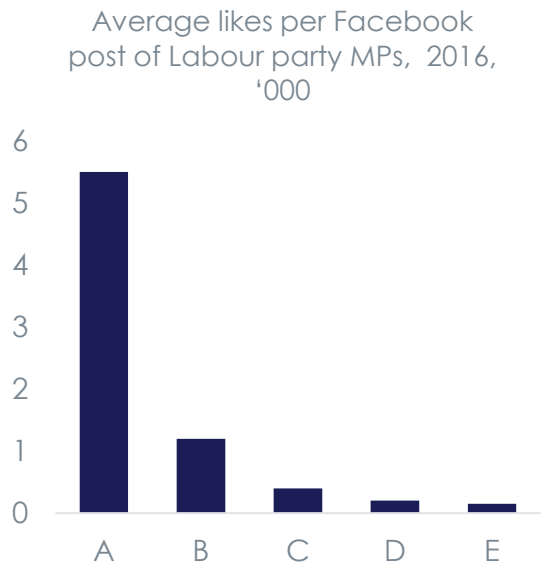
Good visualisation is as important as the analysis itself

INTRODUCTION TO VISUALISATION

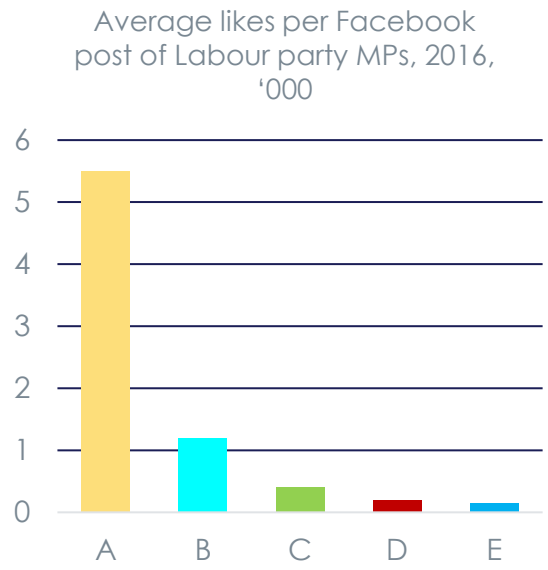
- **Data visualisation is an important skill**, particularly for people who may be using analysis to inform recommendations (i.e. it's not just important for analysts)
- **If a person cannot understand the analysis,** they will disregard it – it won't impact their decision making!
- **If they don't believe the analysis** (because the methodology and inputs are not clear) – it won't impact their decision making!
- **If your data visualisation looks unprofessional**, they will assume the same thing about the analysis – it won't impact their decision making!

We want to avoid ugly, misleading and inaccurate visualisations in our presentation

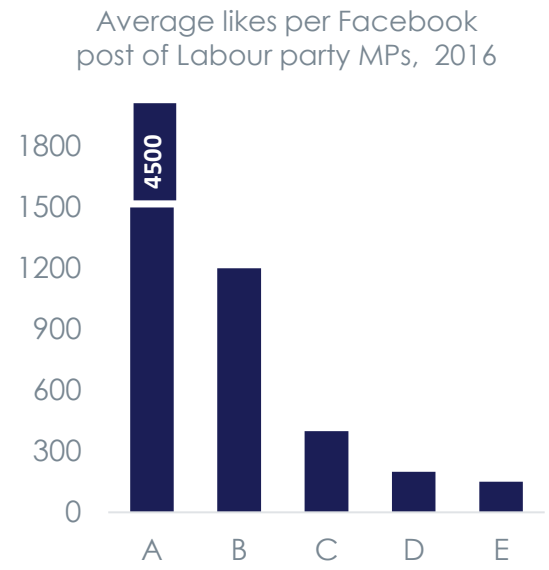
"The purpose of data visualisation is first and foremost to accurately convey the data. At the same time, a data visualisation should be aesthetically pleasing."



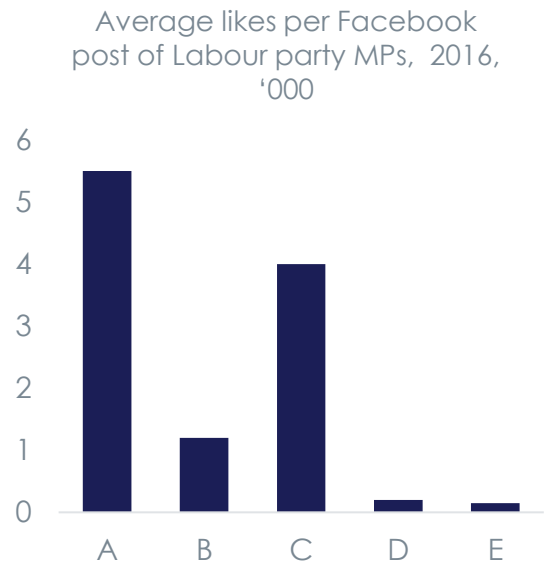
Original



Ugly



Misleading



Inaccurate

Source: *Claus O. Wilke : Fundamentals of Data Visualisation*
The Economist: Mistakes, we've drawn a few, Learning from our errors in data visualisation

Follow these principles of data visualisation for better data storytelling

Focus on the 'so what'

- Choose the right visual (the simpler the better)
- Highlight the key data you want to show, avoid including too many details
- Reduce distracting elements (e.g. bold axis & gridline)
- Consider highlighting the key points with highlight colours, or callouts
- Use your action title to bring out the key message of the visualisation (when using action titles)

Aim for clarity

- Use pie charts and donut charts with caution, as they can often be misleading
- Break the y-axis with caution (e.g. y-axis starts from 50 instead of 0)
- Use double axis with caution
- Avoid too many colours, usually no more than 5
- Avoid colour scales with red and green
- Don't use 3D
- Careful when using a secondary y-axis not to create the false appearance of correlation

Tell the story

- Think about how this analysis plays into the wider narrative
- Aim for one key finding per slide
- Ensure the visual is self – sufficient, use call-outs or information boxes to share key methodology info needed to understand the chart (try to pre-empt client questions)
- Always put the data analysis source in the footnote

Example 1: Oldtown ICB surplus/deficit position for different reconfiguration scenarios

EX A2.3 – DATA VISUALISATION (1/3)

Pros:

- ✓ **Clarity and simplicity** – the table format is clean and easy to read with no unnecessary design elements
- ✓ **Consistency** – consistent formatting across years (Y1-Y6) supports quick comparison
- ✓ **Transparency** – no manipulation or "creative" presentation that might mislead readers

Surplus/deficit (£m)	Y1	Y2	Y3	Y4	Y5	Y6
Do nothing	-1.7	-11.0	-14.2	-11.7	-10.1	-9.5
Close Eastend	-1.7	-11.0	-5.9	-0.3	1.4	2.2
Close Northside	-1.7	-11.0	-8.2	-2.7	-0.9	-0.2
Close Sunny South	-1.7	-11.0	-14.8	-9.3	-7.6	-7.0
Close Westway	-1.7	-11.0	-28.1	-24.1	-21.2	-20.8

Cons:

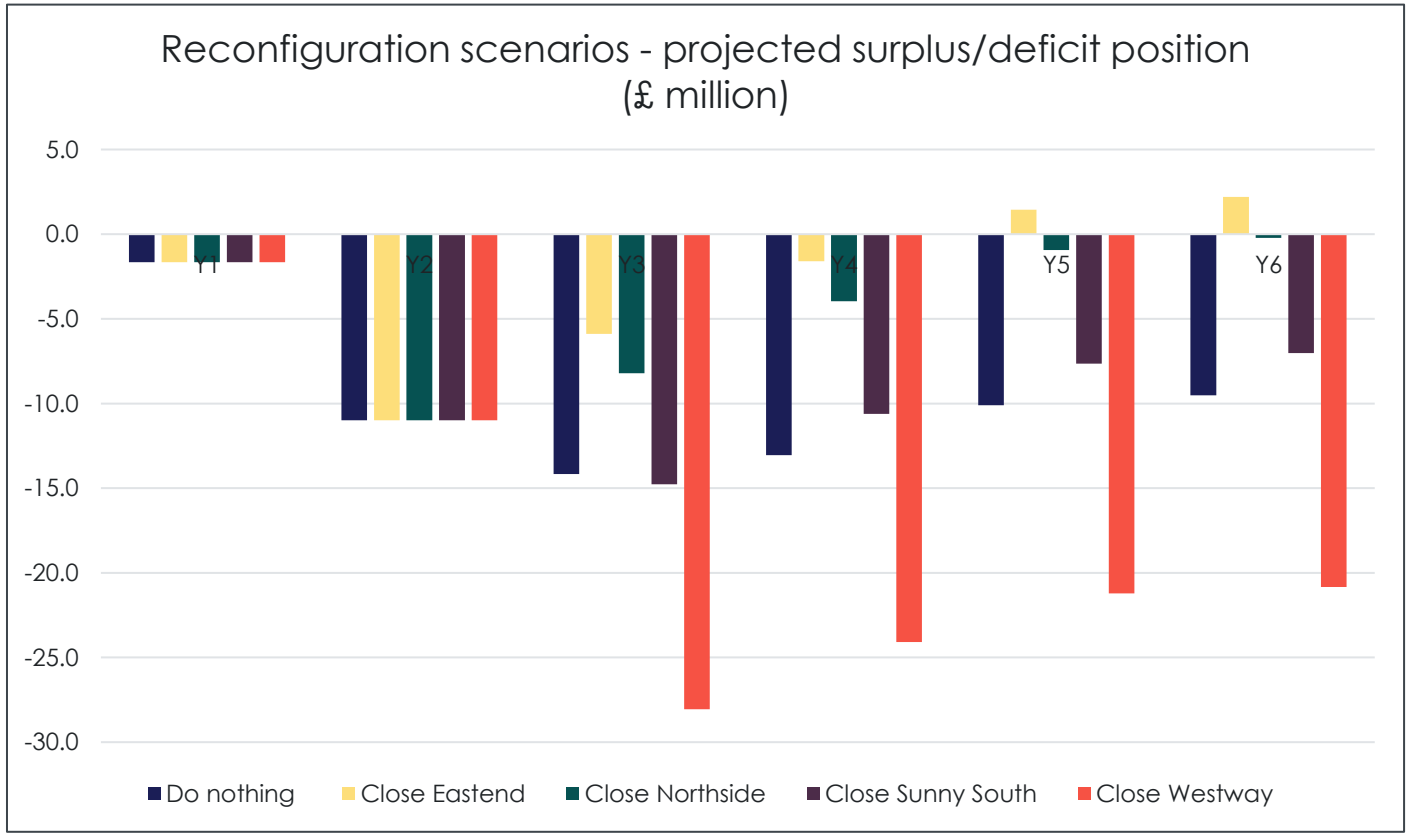
- ❑ **No clear "so what"** – the key message or insight is not immediately visible, with no action title. The reader must do the leg work
- ❑ **Cognitive load** – tables make it hard to compare trends across time (compared to a graph). The reader must mentally follow rows
- ❑ **No data source!**

Example 2: All reconfiguration scenarios – except close Westway – will generate a favourable financial return compared to a "do nothing" scenario

EX A2.3 – DATA VISUALISATION (2/3)

Pros:

- ✓ **Action title** – makes it easier to infer the 'so-what'
- ✓ **Data source** – a reader can see where the data has come from
- ✓ **Pattern recognition** – the use of a chart with colours makes it somewhat easier to see patterns compared with a table format



Cons:

- ❑ **Clarity and readability** – clustered column chart makes it difficult to see which column belongs to which year or scenario at a glance. Not the best chart selection
- ❑ **Colour overload** – at the limit of number of different colours to have on a single chart

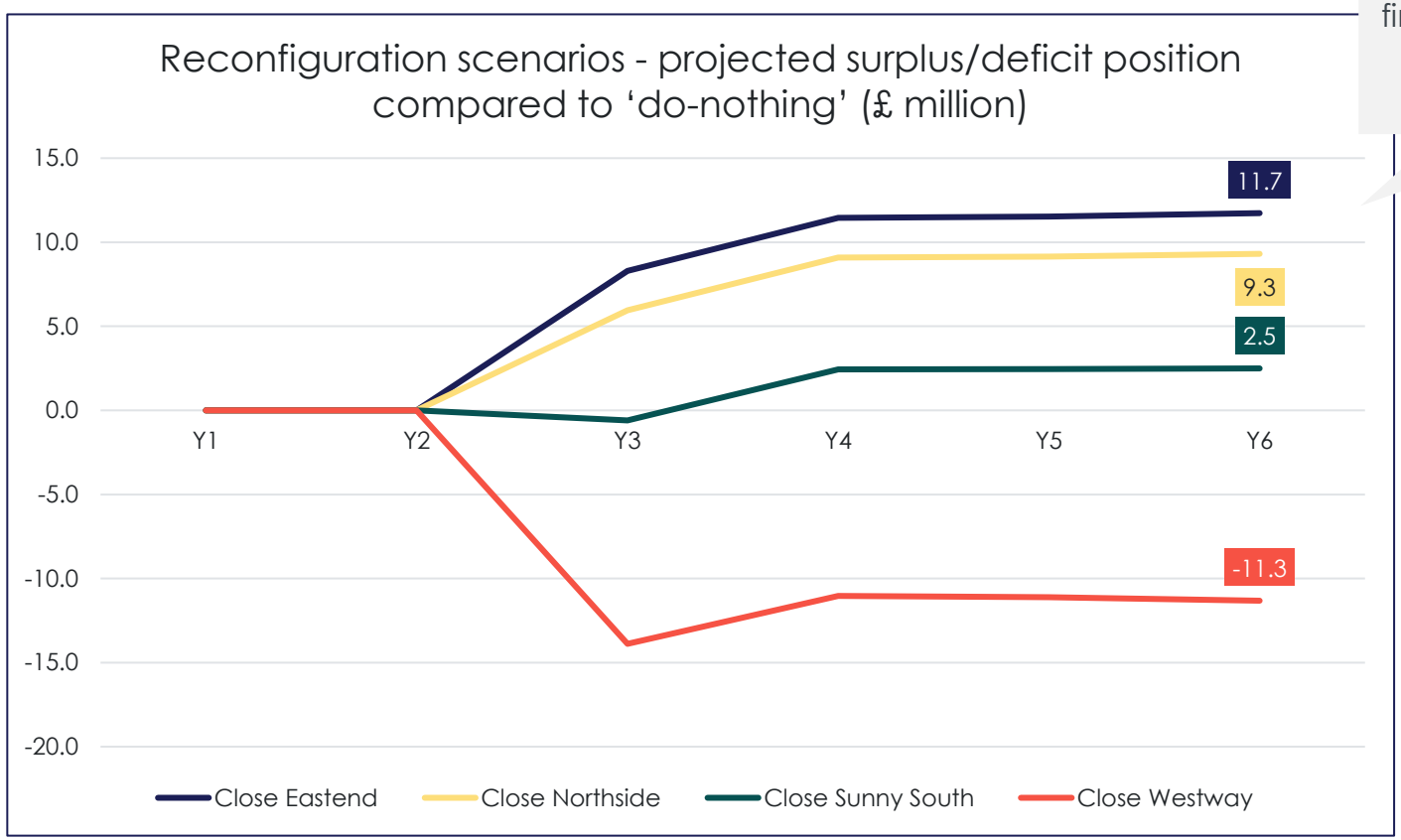
Source: Oldtown ICB reconfiguration financial modelling, 2025

Example 3: All reconfiguration scenarios – except close Westway – will generate a favourable financial return compared to a "do nothing" scenario

EX A2.3 – DATA VISUALISATION (3/3)

Pros:

- ✓ **Clarity** – line chart is the best choice to visualise trends over time
- ✓ **Simplicity** – chart has been stripped of extraneous information (i.e. do-nothing scenario)
- ✓ **Simple callout** to anticipate audience questions (which is best)
- ✓ **Consistent colour palette**
- ✓ **Action title**
- ✓ **Data source**



A **close Eastend** scenario will generate the greatest financial return compared to a 'do-nothing' scenario - **£11.7m in FY6**

Source: Oldtown ICB reconfiguration financial modelling, 2025

Use the prompts below to guide your reflection

USE ADAPTIVE ACTION TO REFLECT ON YOUR LEARNING

What?

- What did you notice in your learning?
- What surprised you?
- What's different to what you've learnt about this before? What's the same?
- What are you feeling about this cycle of learning?

So What?

- So what could this mean?
- So what are the implications for you, for your project, for your role?
- So what are your options for action?

Now What?

- Now what will you do?
- By when?
- How will you know when you've got there?

Contents

Where are we in the case?

CASE RECAP

- There are four trusts in Oldtown ICB: Westway NHS Trust, Northside NHS Trust, Royal Eastend Foundation Trust and Sunnysouth NHS Trust. Each of the trusts and the ICB is facing financial pressures in the coming years.
- The team conducts interviews, travel times analyses , financial modelling and visits to trusts outside the area in order to understand the current situation and test options for the ICB strategy.
- Financial modelling has shown that a Sunny South, Eastend, or Northside reconfiguration scenario would improve the financial position of Oldtown ICB compared to a 'do nothing scenario.' Only a Westway reconfiguration scenario would worsen the financial position.
- But … catchment analysis shows that closing Sunnysouth's, Royal Eastend's or Northside's ES will divert most patients to Westway's ES – without sufficient increases at the other sites. Only closing Westway's ES will take all three remaining sites over 300,000 catchment.
- Given that there is no perfect reconfiguration scenario, the team has decided to further explore the possibility of productivity improvements, either in addition to or as a substitute for reconfiguration.
- **The team therefore takes some time looking at how they might prioritise such productivity improvements and what it would take to implement them successfully.**

This module will focus on successful implementation

OBJECTIVES AND INTRODUCTION

After this module I will:

- Understand how to prioritise to maximise the likelihood of successful delivery
- Understand how to define and track benefits from implementation
- Understand how to engage stakeholders to buy-into your findings and commit to your implementation plan

This module includes:

- Prioritisation matrices
- Leading and lagging indicators
- Performance trajectories
- The “influence model” of behavioural change

Problem solving and where the tools fit in

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, engaging with stakeholders to understand their view

Using quantitative and qualitative data and tools to discover the current state of a process or service, best practice and/or the root causes of a problem.

Establishing a vision for a future state: developing strategic recommendations and/or specific changes using design tools, options generation & evaluation

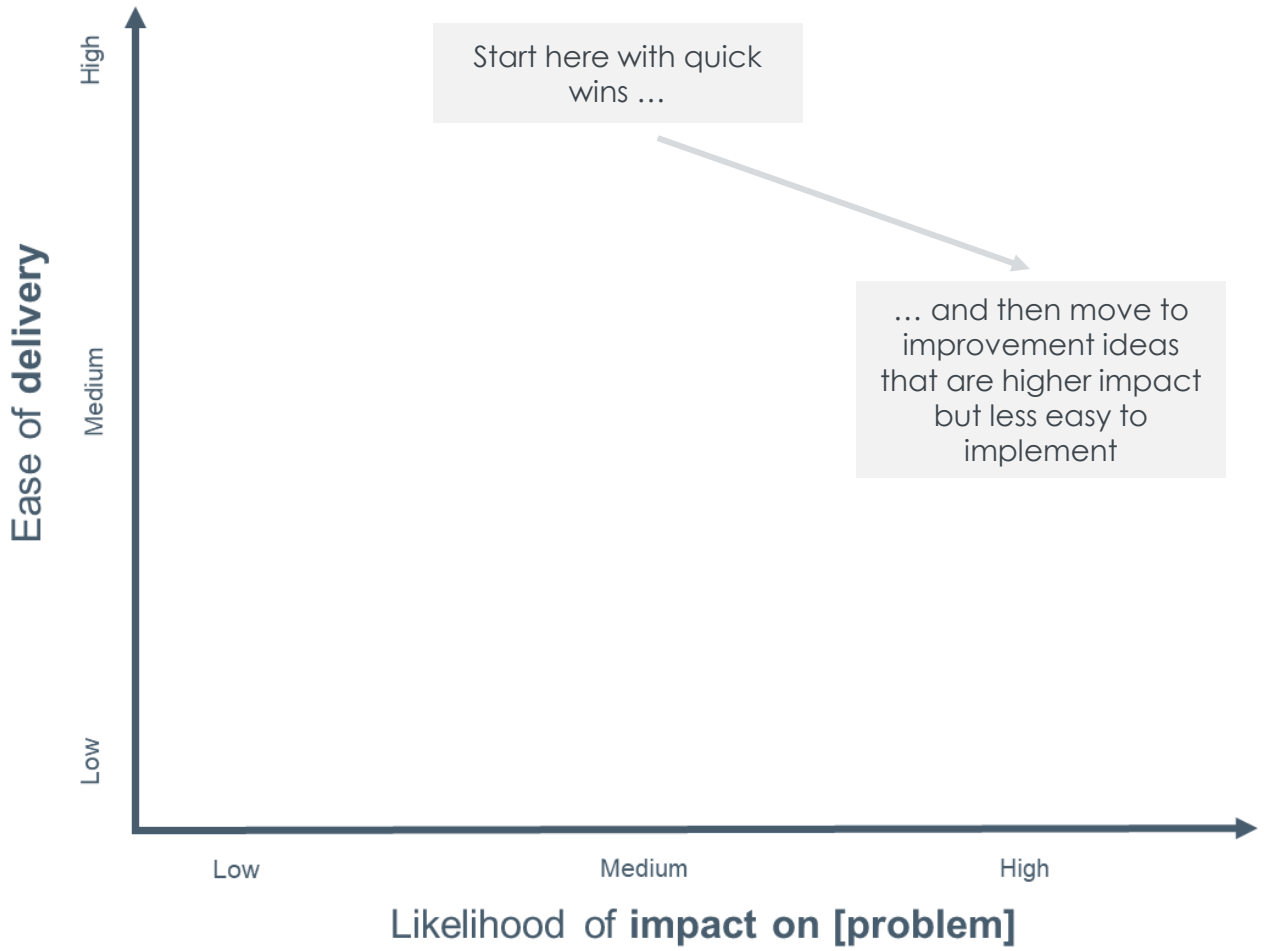
Using rapid improvement cycles to test changes, planning for implementation, engaging stakeholders in implementation and delivering a sustainable change

Frequent review of improvement cycles, evaluating the outcomes of a project, identifying improvements and communicating success

You will likely need to prioritise between a range of improvement ideas

PRIORITISING CHANGE

- Prioritisation matrices were introduced in Module 2
- When prioritising implementation changes you need to balance the **likelihood of impact** and **ease of delivery**
- Top tips for prioritising change:
  - Select some quick wins that are easy to implement and will demonstrate that change is possible
  - Once you have demonstrated that change is possible you can move to higher impact ideas that are more difficult to implement and need your stakeholders to believe they can succeed



How would you prioritise implementation of eight changes Westway are suggesting?

EXERCISE I: PRIORITISING CHANGES AND PLANNING DELIVERY

- In pairs, read through the current plans and projected savings for eight proposed changes across the Oldtown ICB trusts(see next slide) and plot them onto a prioritisation matrix of ease of delivery x impact on the problem
- Discuss as a group which actions you would recommend taking and in which order

15 minutes

These are the current plans and projected savings for the eight identified initiatives

EXERCISE: PROPOSED CHANGES ACROSS TRUSTS IN OLDTOWN ICB

	Planned improvement	Implementation plans	Projected saving
A	A 25% improvement in theatre productivity	Map the current system Apply PDSA cycles to understand causes of inefficiency and make incremental improvements	£750,000
B	An increase in outpatients utilisation from 65% to 80%	Use text reminders to reduce Did Not Attend (DNA) rates Publish data on utilisation Further plans to be developed with team	£1.5m
C	90% of oncology patients being treated within 62 days of consultant referral (currently 88%)	Develop standard referral procedure for other Trusts so that patients are not referred late in the 62-day window Further plans to be developed with team	£9,000 (in Q2)
D	A saving of 20% of administration costs	Awaiting first meeting	£1m
E	An 18% improvement in pharmacy productivity	Map the current system Apply PDSA cycles to understand causes of inefficiency and make incremental improvements	Unknown
F	A reduction in non-elective upper GI and urology bed days – target 370 bed days	Map the current system Apply PDSA cycles to understand causes of inefficiency and make incremental improvements	£70,000
G	A 1/3 reduction in MRSA rates	Put a screening flag above every patient's bed Publish ward-level data	£210,000
H	An increase in screening for dementia so that >90% of patients are assessed (currently 83%)	Integrate screening into inpatient admission form (currently a separate form)	£150,000

It is important to identify the right indicators – try to balance between "lagging" and "leading"

USING INDICATORS TO PLAN FOR IMPLEMENTATION

An **Indicator** is any information that can help predict future events

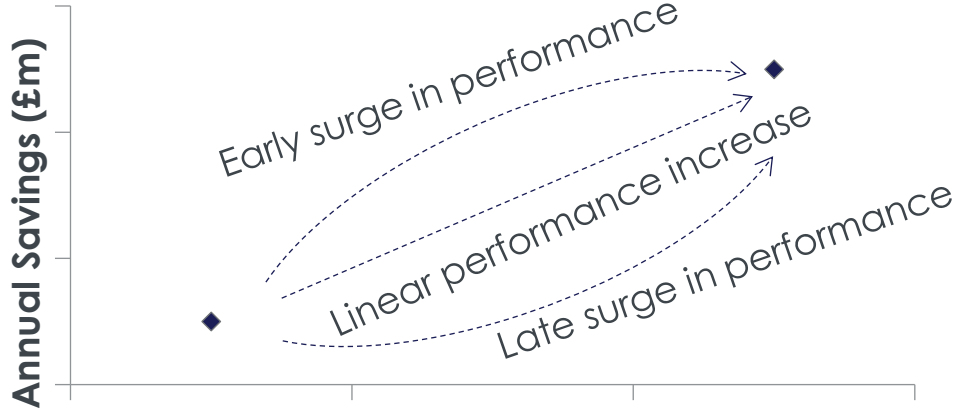
- **Lagging indicators** follow events
  - Lagging indicators are usually more accurate
  - Lagging indicators are useful to confirm/deny trends
  - For example, annual financial reports give a picture of how an organisation performed over the past year
- **Leading indicators** help to anticipate future events
  - Leading indicators are usually less accurate than historical data
  - Useful for taking action before events happen
  - If you know the rate-limiting step in a process, measuring its effectiveness against a target can give advance information that downstream processes will be affected
  - For example, the number of people booked on flights arriving at an airport (e.g., during a sporting event) would be a leading indicator of the required capacity at border control
- Each has advantages; a **combination of both lagging and leading indicators is usually the most effective**

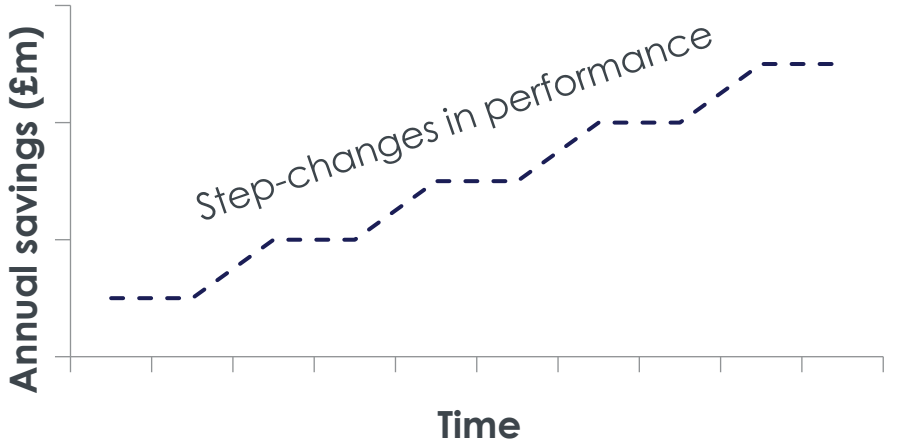
Only using lagging indicators is like only looking in the rear-view mirror

Ensure you understand the trajectory that you expect performance to take as you carry out your implementation

SETTING TRAJECTORIES

- At the beginning of an implementation, it is vital to understand the trajectory that you expect performance to take as you carry out your implementation
- This process is usually undertaken with stakeholders to build consensus around expectations
- Trajectories can be built bottom-up (e.g., by adding up savings identified by different business units)
- Or they can be built top-down (e.g., executive team saying "each business unit will make £xm savings")
- Different trajectories:
  - Early surges in performance (caused by, e.g., implementing quick wins)
  - Late surges in performance
  - Linear performance increase
  - Step-changes (caused by, e.g., specific interventions at set points in time)





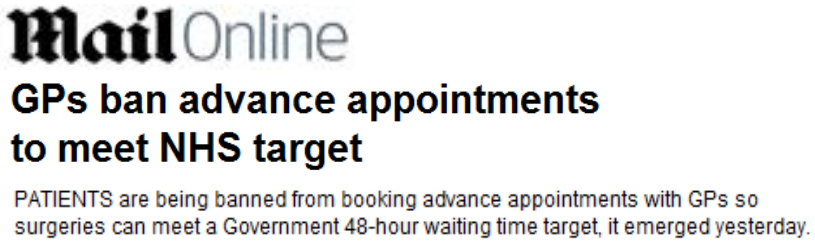
In order to measure and track benefits, you must have certain structures and processes in place

PROCESSES AND STRUCTURES TO TRACK AND MONITOR BENEFITS

Questions you should ask yourself

- Which KPIs do we need to track? Which are lagging and which are leading?
- What is the baseline? What are the targets? Can we measure these with – e.g., RAG ratings?
- How will we calculate it?
- When will the information be produced? Who by? Do they have the skills, capabilities and resources to do so?
- Where will the information be displayed?
- Who will review it? How often?
- How will changes be made to the project once the information has been reviewed?
- Are we confident that the set of actions arising will realise the benefits?

It is also important to be aware of the potentially negative effects of implementing certain KPIs...


Mail Online

GPs ban advance appointments to meet NHS target

PATIENTS are being banned from booking advance appointments with GPs so surgeries can meet a Government 48-hour waiting time target, it emerged yesterday.

Think of a change management initiative that you have experienced which went really badly.

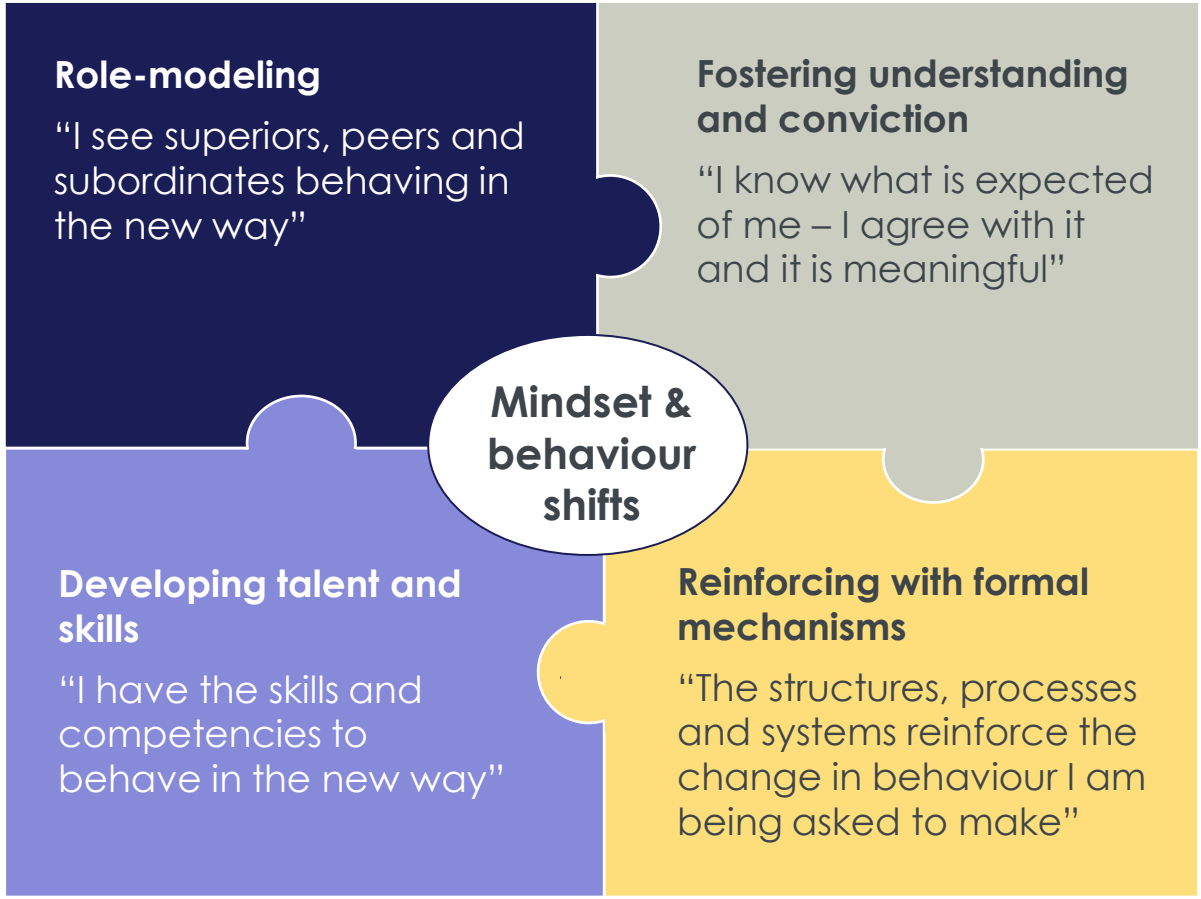
List out on separate post-it notes all the reasons why it went wrong.

Source: www.dreamstime.com/stock-illustration-change-management-happens-not-to-me-image49225557

The Influence Model gives four components that must be in place to shift mindsets and behaviours

THE INFLUENCE MODEL: COMPONENTS OF EFFECTIVE CHANGE

"I will change my own behaviour if…"



Lasting change is unlikely unless all four pieces are in place

Source: John Drew et al, Journey to Lean: Making Operational Change Stick, p201, Fig 10.3.

Each component can be broken down into a number of more actionable categories

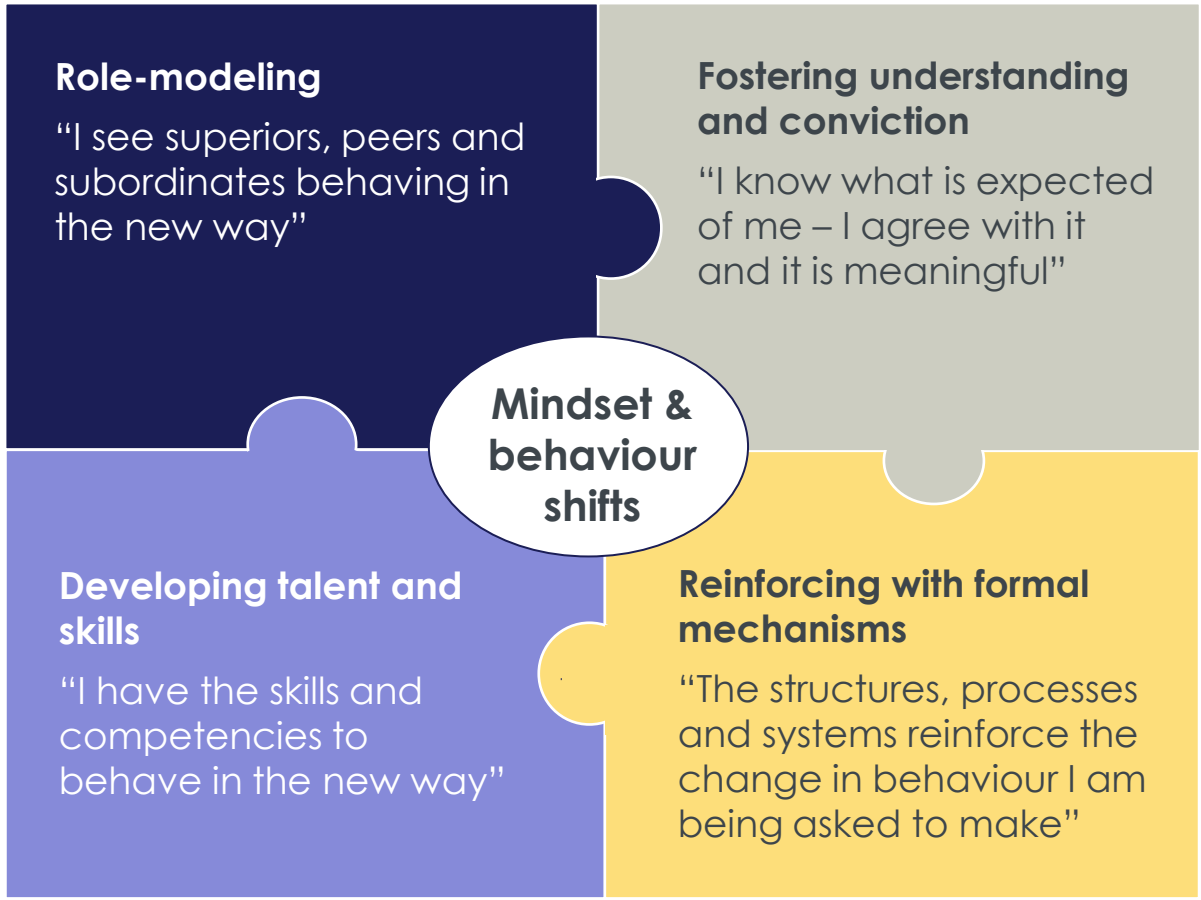
THE INFLUENCE MODEL: ACTIONS FOR CHANGING BEHAVIOUR

"I will change my own behaviour if…"

Component actions

- Leadership embodying the change
- Getting opinion-shapers on board
- Peer interactions

- Talent management
  - Hiring
  - Replacing
  - Retaining
- Learning
  - On-the-job development
  - Training
  - Action learning



Component actions

Story development (includes all the key elements – e.g., values, strategy, case for change)

Story delivery (across relevant levels – e.g., organisational, employee, functional)

Organisation structure

Targets and metrics

Management processes

Business processes

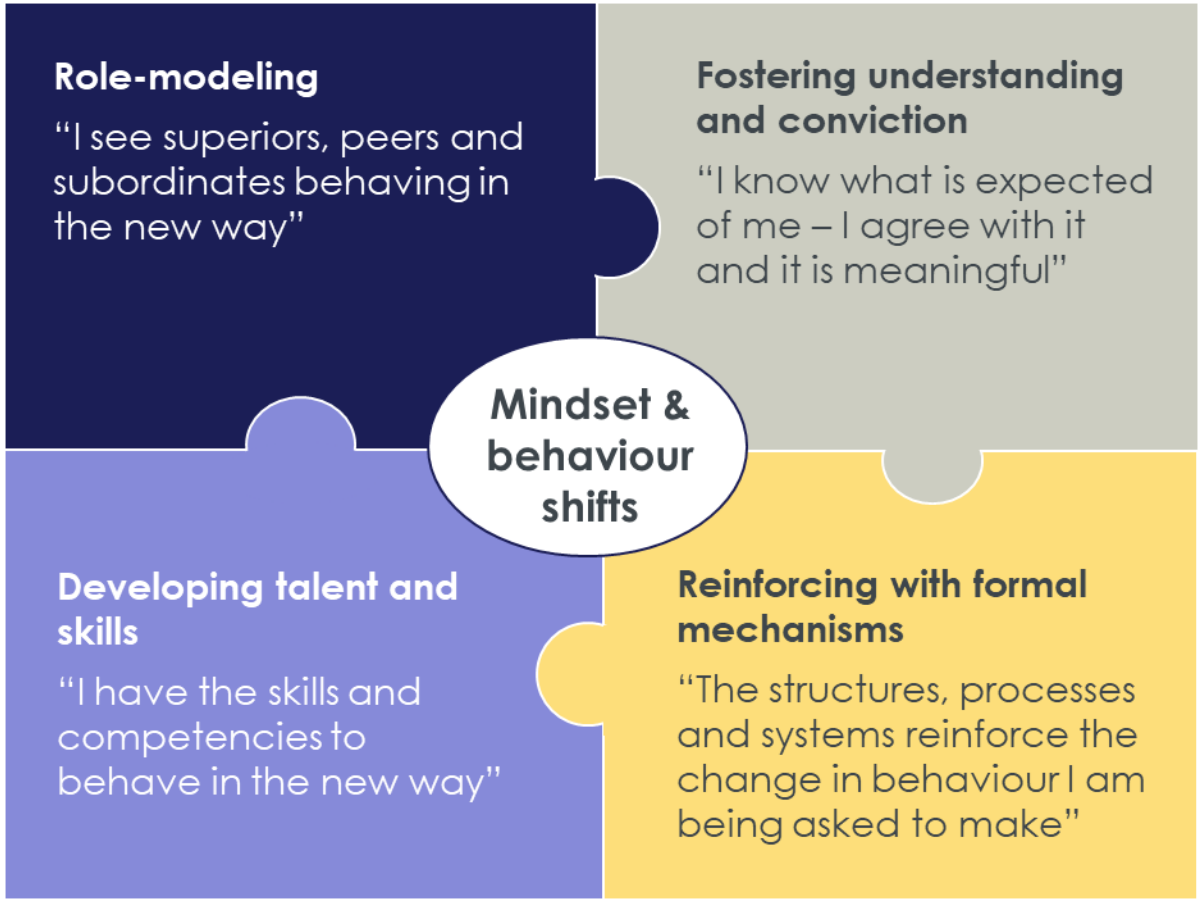
Rewards, recognition and consequences

Information systems

Source: John Drew et al, Journey to Lean: Making Operational Change Stick, p201, Fig 10.3.

Now look back at all the reasons for the bad change management initiative that you thought about before.

Try mapping them onto the four components of the Influence Model.



Use the prompts below to guide your reflection

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What?

- What did you notice in your learning?
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Contents

Where are we in the case?

CASE RECAP

- The ICB CEO feels strongly that reconfiguration of emergency services is the only way forward to resolve the financial and clinical catchment guidelines issues
- You have learned from the Strategy Director at Northside that patients do not want their ability to access emergency services to be impacted
- Data analysis suggests that closing Sunnysouth would have the least impact on patient travel time
- The ICB Medical Director has raised several concerns regarding the proposed reconfiguration, emphasising that compliance with clinical catchment guidelines is not a mandatory requirement, but rather one of several important factors to consider alongside broader clinical outcomes and service quality.
- **There is no perfect solution to resolving both financial and clinical catchment guideline issues:** financial modelling has shown that a Sunny South, Eastend, or Northside reconfiguration scenario would improve the financial position of Oldtown ICB compared to a 'do nothing' scenario, but only closing Westway's ES will take all three remaining sites over a 300,000 catchment size. Productivity improvements could be an alterative or complement to reconfiguration, but the team is not fully confident about the implementation planning or the scale of improvement being claimed.
- **The team now needs to develop and communicate its recommendation to the ICB CEO.**

This module looks at generating hypotheses to translate analysis into "so what" insight, as well as covering effective communication of these insights

OBJECTIVES AND INTRODUCTION

After this module I will:

- Understand how to translate analyses into insight, extracting the "so whats" of each analysis/ piece of information
- Appreciate that not all data needs to be included in the final recommendation, only what is relevant
- Understand how to communicate recommendations effectively and in tailored ways for the audience

This module includes:

- Forming and articulating recommendations
- Situation-Complication-Question-Answer storytelling approach
- The Pyramid Principle
- Techniques for compelling written and visusal communication
- Presentation to the ICB CEO

This module covers aspects of both 'Design' and 'Delivery'

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, engaging with stakeholders to understand their view

DEFINE

Using quantitative and qualitative data and tools to discover the current state of a process or service, best practice and/or the root causes of a problem.

DISCOVER

Establishing a vision for a future state: developing strategic recommendations and/or specific changes using design tools, options generation & evaluation

DESIGN

Using rapid improvement cycles to test changes, planning for implementation, engaging stakeholders in implementation and delivering a sustainable change

DELIVER

Frequent review of improvement cycles, evaluating the outcomes of a project, identifying improvements and communicating success

DIGEST

Now is the time to review all the project information available to you, generate a hypothesis, and develop a recommendation for the ICB CEO

EXERCISE I: DEVELOPING A RECOMMENDATION

In small groups:

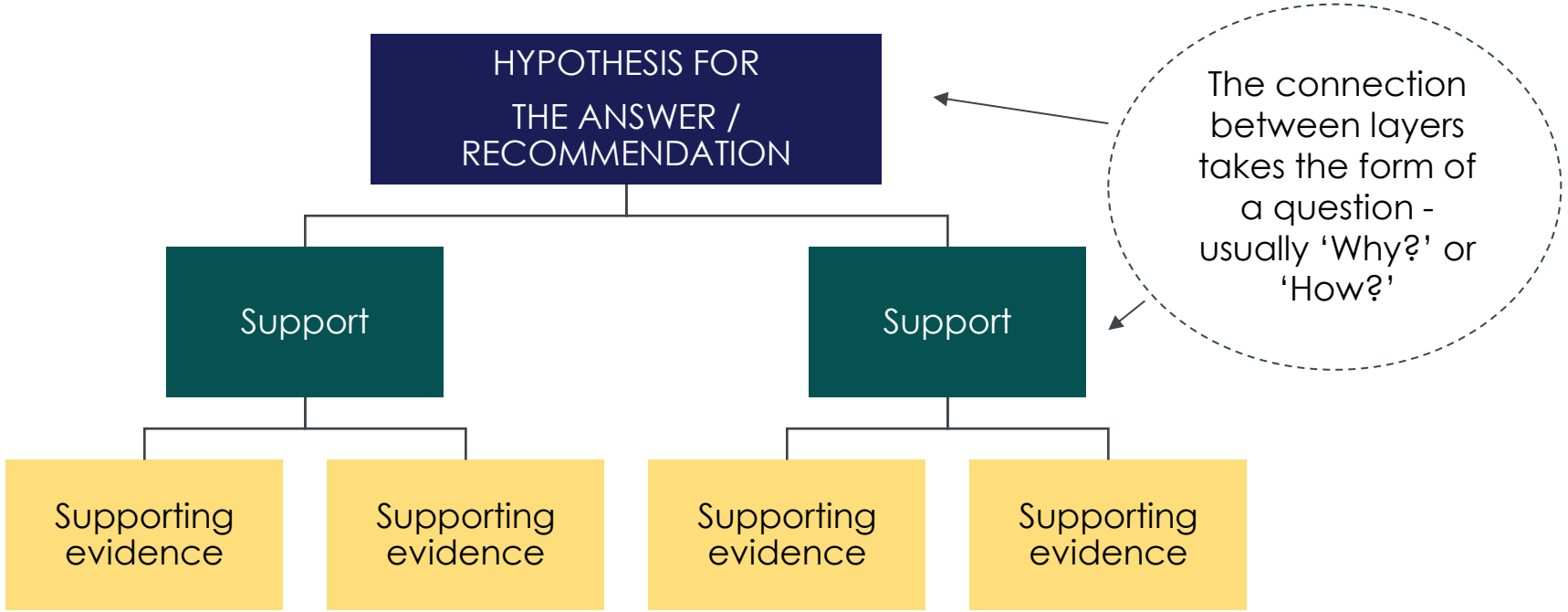
- Review all of the key insights / facts (one card pack for each group)
- Use these insights and other case information to create a hypothesis recommendation (and supporting facts)

45 min

But before we start, a quick recap on **hypothesis trees…**

Recap: How to structure a hypothesis tree

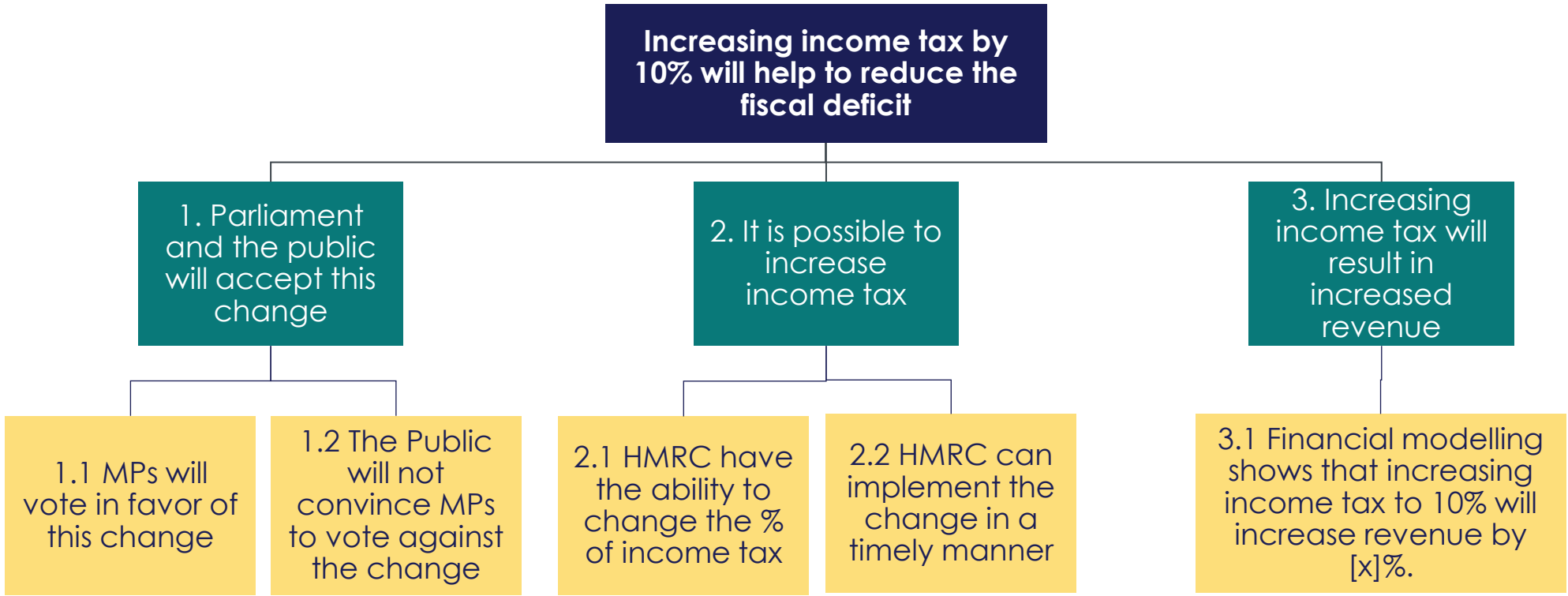
HYPOTHESIS TREES - INTRODUCTION



1. Ideas at any level in the pyramid must always be summaries of the ideas grouped below
2. Ideas in each grouping must always be the same kind of idea
3. Ideas in each grouping must always be logically ordered

Illustrative example: Reducing fiscal deficit

DEVELOPING A HYPOTHESIS TREE – ILLUSTRATIVE EXAMPLE



You would now need to answer: **Are these statements true?**
You would now go away and complete the required analysis to either prove or disprove the statements

Now is the time to review all the project information available to you, generate a hypothesis, and develop a recommendation for the ICB CEO

EXERCISE I: DEVELOPING A RECOMMENDATION

In small groups:

- Review all of the key insights / facts (one card pack for each group)
- Use these insights and other case information to create a hypothesis recommendation (and supporting facts)

45 min

Now that your team has developed a recommendation, it's time to prepare a presentation of this recommendation for the ICB CEO.

Let's first spend some time exploring the art of storytelling and effective communication.

Storytelling approach #1

SCQA

Situation, Complication, Question, Answer

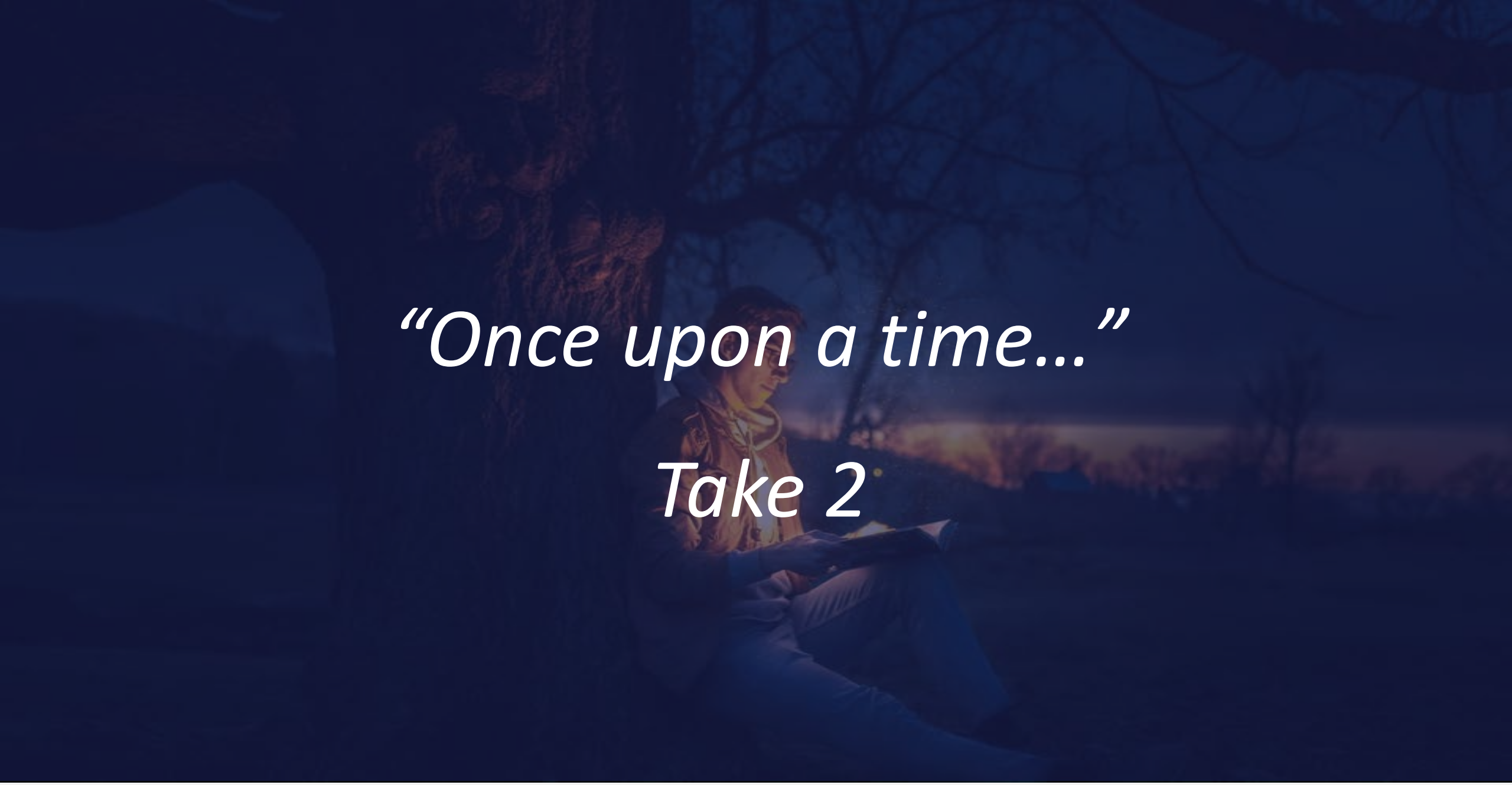
SCQA provides a clear and compelling structure for storytelling because it mirrors the way in which humans naturally process information

Situation	• setting context
Complication	• creating tension
Question	• prompting curiosity
Answer	• delivering resolution

SCQA has many uses:

- a daily check
- a conversation in a queue
- an email structure
- executive summary
- presentation introduction

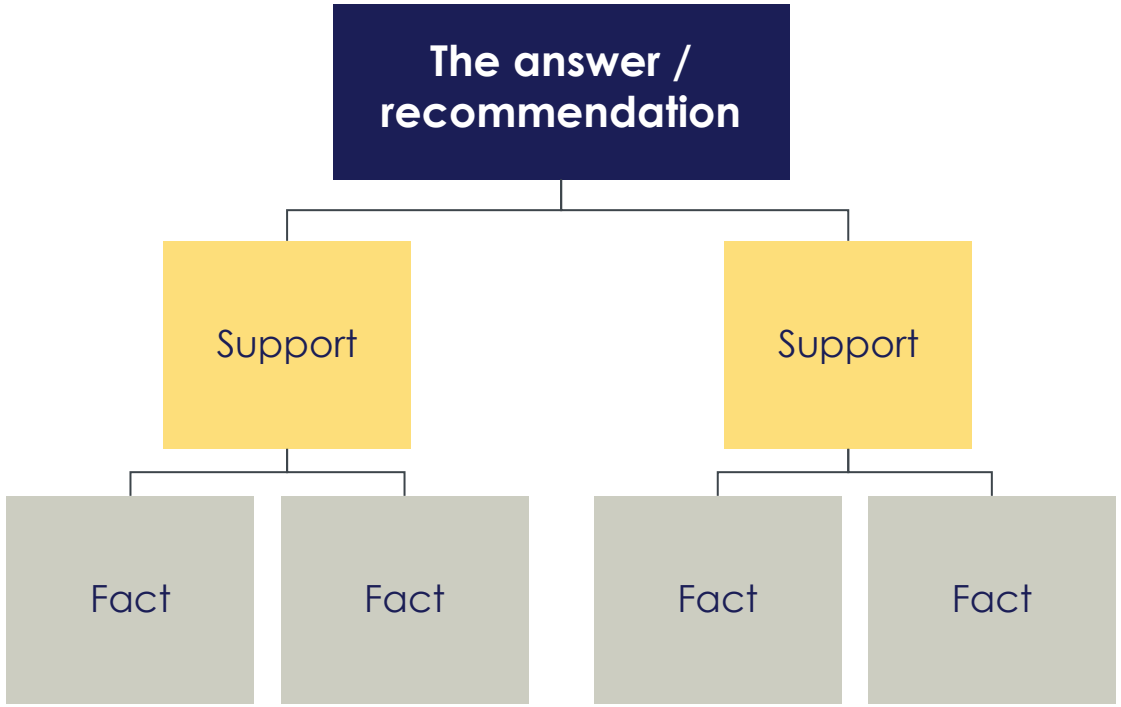
Source: adapted from 'Beyond Bullet Points' by Cliff Atkinson


“Once upon a time…”
Take 2

Storytelling approach #2

Pyramid Principle and inductive .v. deductive arguments

The Pyramid Principle starts with the key message and builds arguments top-down, which aligns with how audiences absorb and retain information



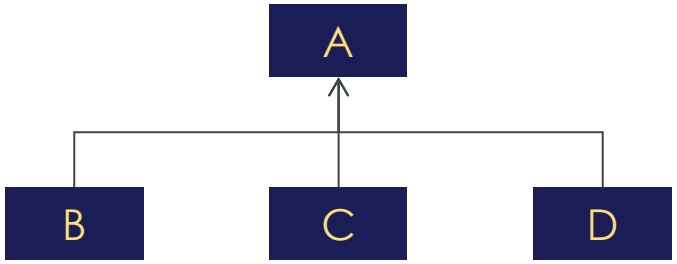
Source: adapted from 'The Pyramid Principle: Logic in Writing and Thinking' by Barbara Minto

Deductive and inductive types of argument represent two very different ways of telling the same story

Deductive

- Step-by-step sequence
- Common for analysis
- Essential if context is needed for recommendation
- Risk of TLDR

Inductive



- Starts with the ‘so what?’
- Common for capturing attention
- Useful to give different levels to different audiences
- Takes effort to do really well

Inductive sentences work well for 'insight' messages – they quickly grab the viewer's attention, and make comprehension easier

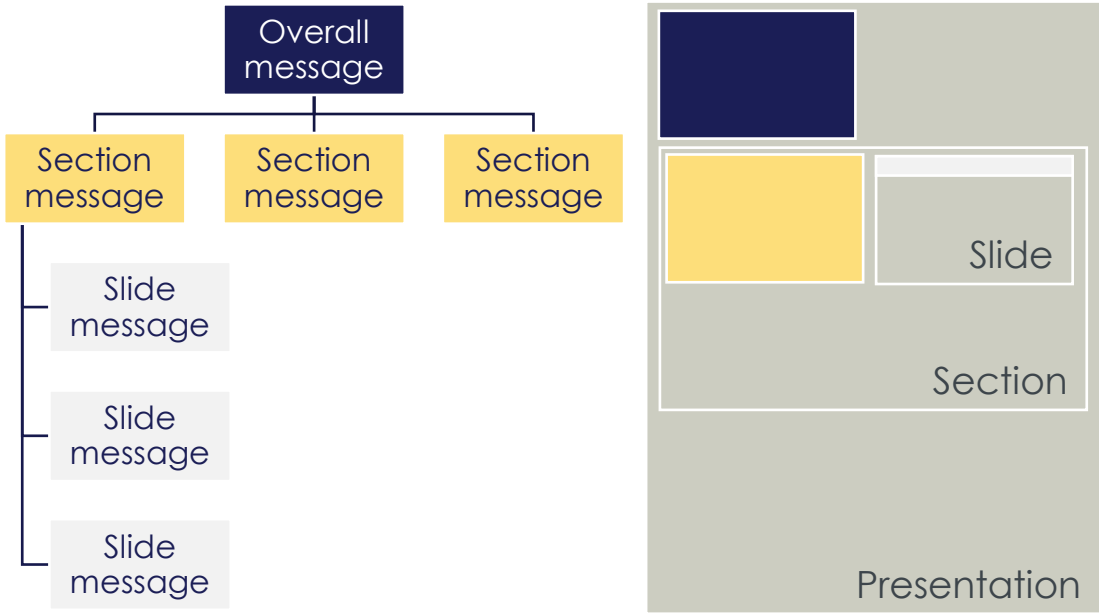
Deductive sentences	Inductive sentences – 'insight messages'
Where in the tropics could an English army doctor have seen much hardship and got his arm wounded? Clearly in **Afghanistan**	Watson has just returned from **Afghanistan**, as he's an English army doctor with an injured arm who has recently been to the tropics.
Although the risk that this patient has lung cancer is small, there is sufficient risk that I should **refer him** for a chest X-ray to rule this out.	I should **refer him** for a chest X-ray to rule out lung cancer – although the risk that this patient has lung cancer is small it is sufficient to justify an x-ray.
The main barrier to setting up a self-administration programme is the **low number** of eligible patients.	The **low number** of eligible patients is the main barrier to setting up a self-administration programme.
Based on the lower costs, and better alignment with other strategic initiatives, the **centralised model option** is recommended, despite the lower responsiveness.	The **centralised model option** is recommended, based on the lower costs, and better alignment with other strategic initiatives, despite the lower responsiveness.

'flip' sentences with the 'so what?' response first, then the supporting information

Start paragraphs, sections, chapters and documents with insight messages to quickly grab the reader's attention and make skim-reading easier

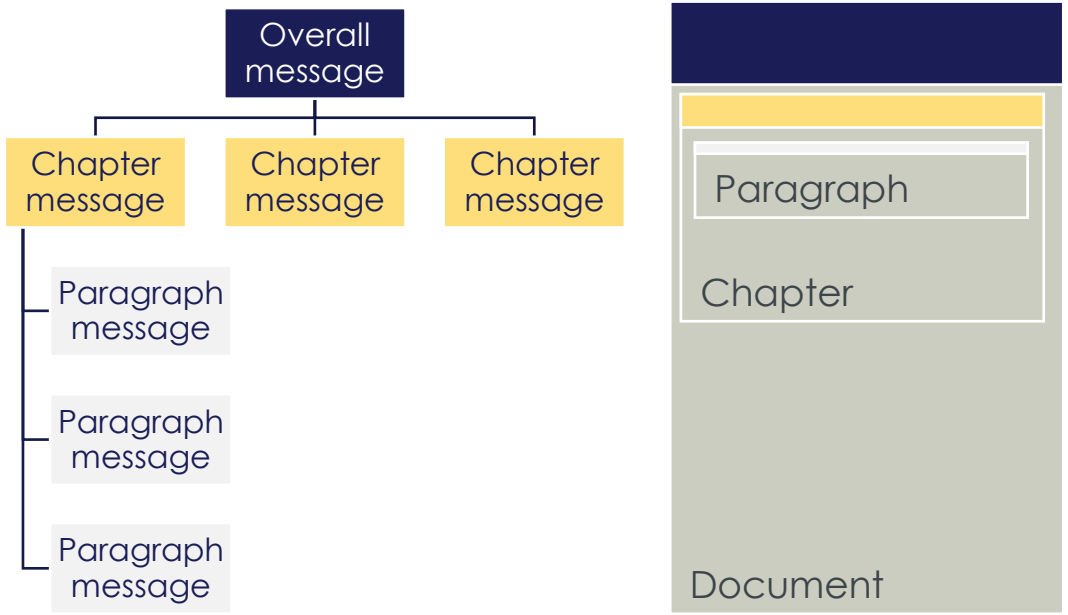
Presentation structure

1. Plan one message per slide, one slide per message
2. Start sections/chapters with their key insight(s)
3. Start the whole document with the key insight
4. If sending as pre-read, start with an executive summary. If only presenting 'live', then finish with one



Written document structure

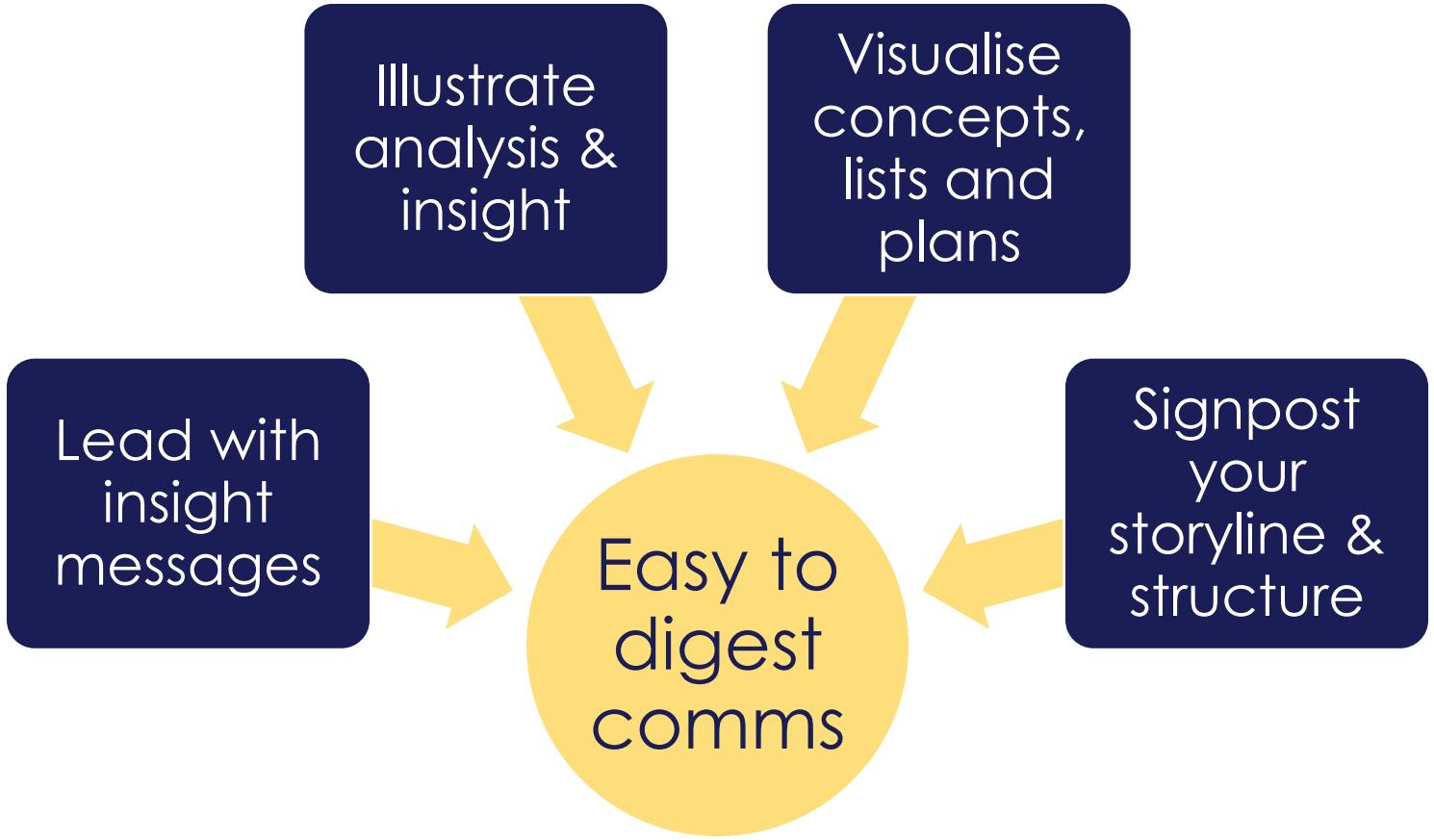
1. Start paragraphs with their key insight
2. Start sections/chapters with their key insight(s)
3. Start the whole document with the overall key insight
4. Start with an executive summary using SCQA



Compelling written & visual communication

Throughout your project, you'll need to communicate with different individuals and groups, for different purposes, in different ways – set your agenda based on your communications objectives and mode

Once your storyline is clear, you'll need to add text and illustrations depending on the format (more text in a document, more illustrations in a slide-pack)

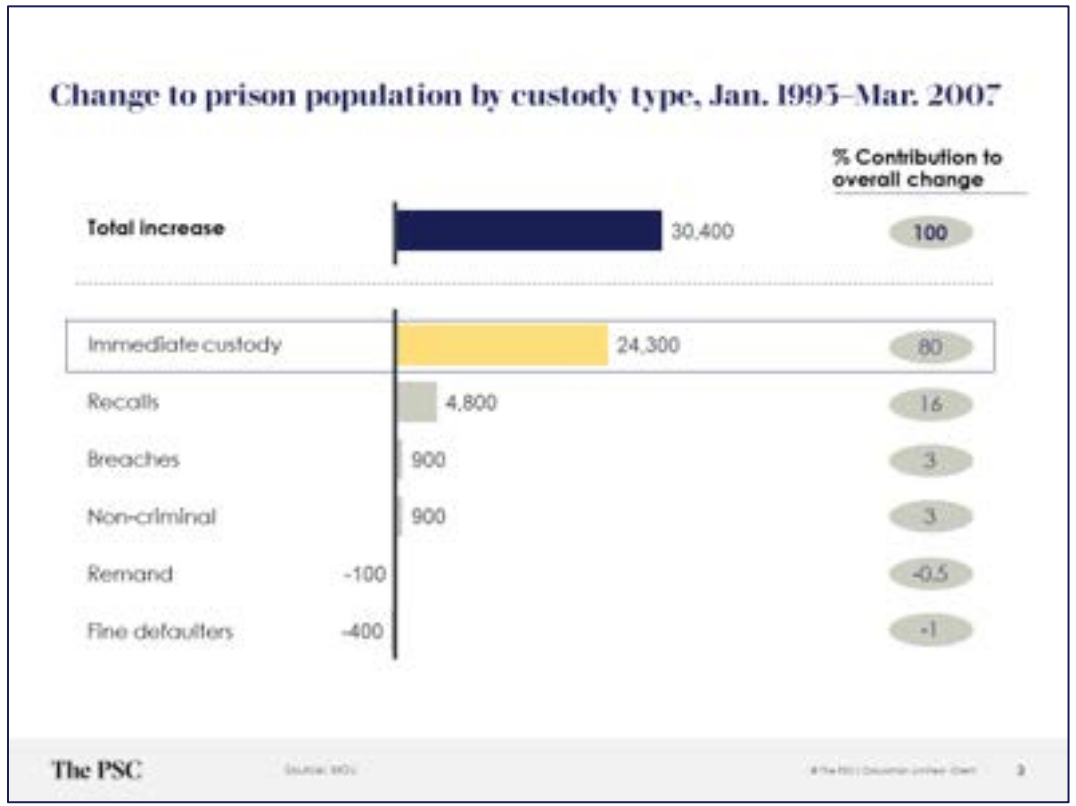


"Do the hard work to make it simple"
GDS design principle 4*

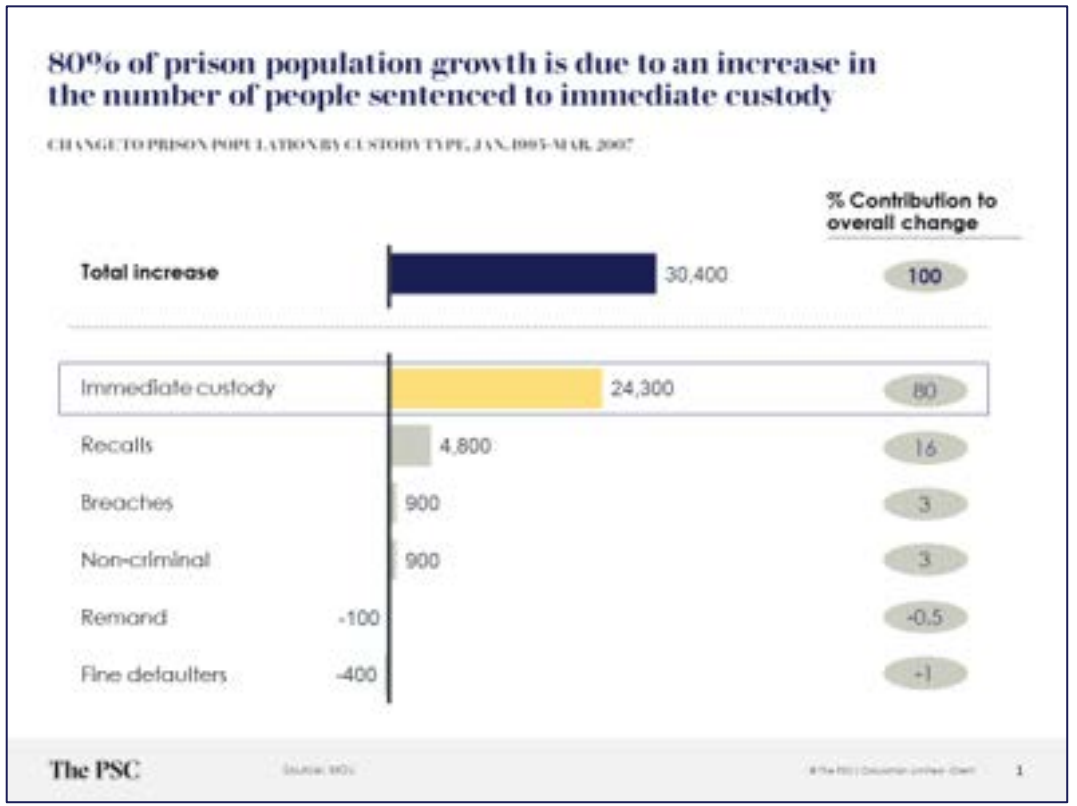
*https://www.gov.uk/guidance/government-design-principles

For presentations, create one slide for each 'key message' and write that as the slide headline if sharing for pre-reading or reference

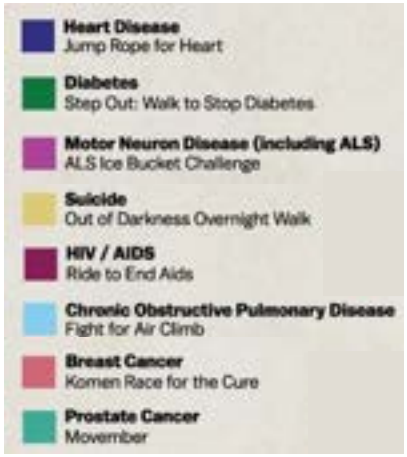
Without explicit key message

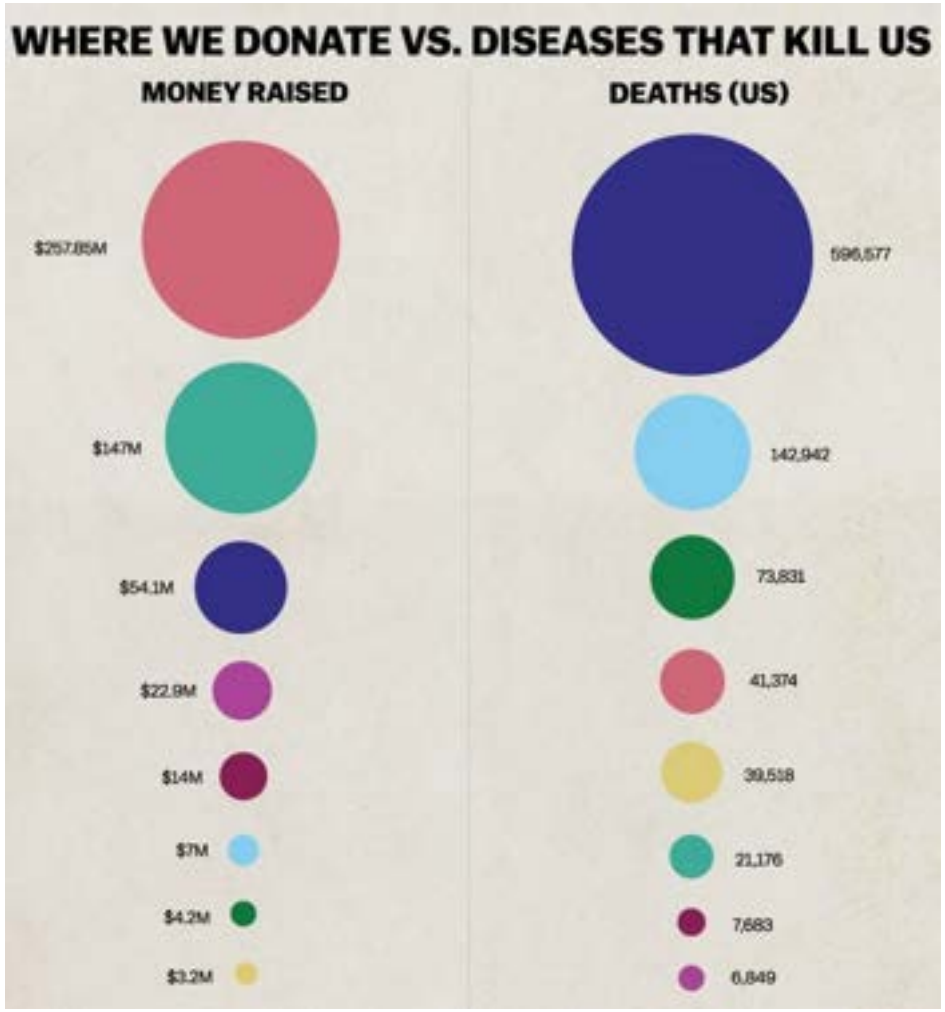


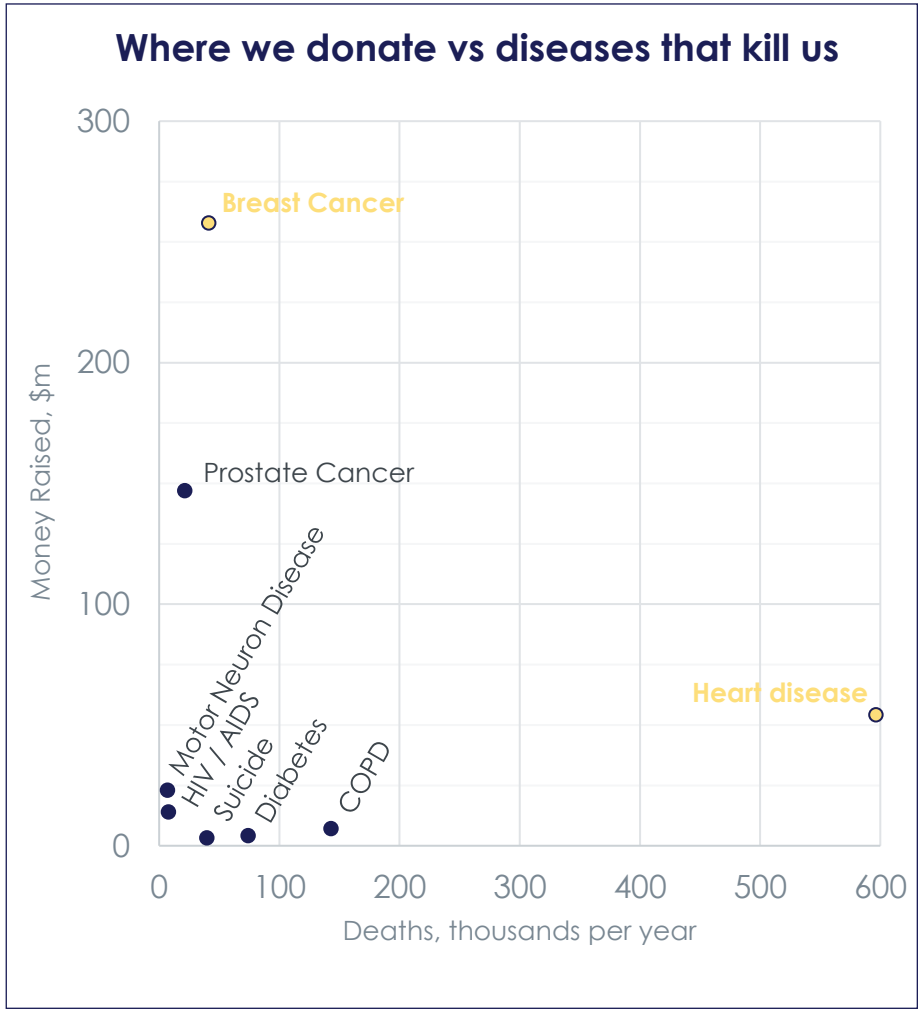
With explicit key message



Create a visual that is the simplest possible illustration of that 'so what' message, and use colour to 'code' the key insight

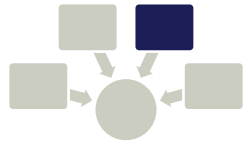






Source: https://www.vox.com/2014/8/20/6040435/als-ice-bucket-challenge-and-why-we-give-to-charity-donate,
based on Death statistics from 2011 CD report, Money raised from listed charities

Which of these are easiest to read, or get a sense of when skimming? When would you use each one?



VISUALISING CONCEPTS, LISTS AND PLANS

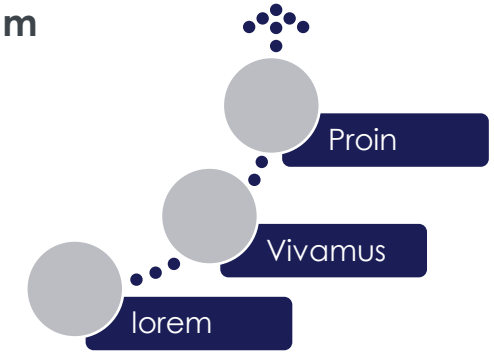
Prose paragraphs

Lorem ipsum dolor sit amet, consectetuer adipiscing elit. Maecenas porttitor congue massa. Fusce posuere, magna sed pulvinar ultricies, purus lectus malesuada libero, sit amet commodo magna eros quis urna. Nunc viverra imperdiet enim. Fusce est. Vivamus a tellus. Pellentesque habitant morbi tristique senectus et netus et malesuada fames ac turpis egestas. Proin pharetra nonummy pede. Mauris et orci.

Bulleted List

- Lorem **ipsum** dolor
- Maecenas **porttito**r.
- Nunc **viverra** imperdiet
- Vivamus a **tellus**
- Pellentesque **habitant**
- Proin pharetra.

Diagram

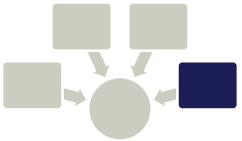


Table

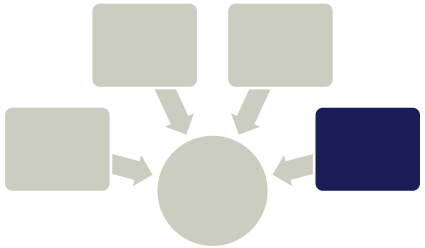
	Outcomes	Actions
Lorem	ipsum	• Lorem ipsum dolor • Maecenas porttitor.
	porttitor	• Nunc viverra imperdiet • Vivamus a tellus
Vivamus	a tellus	• Vivamus a tellus • Pellentesque habitant • Proin pharetra.
	Pellentes	• Maecenas porttitor. • Vivamus a tellus

Plan

Which of these visual formats, visual mini-trackers, numbering and text styles have been used in this course – what did they do?



SIGNPOSTING STRUCTURE & STORY



Lorem ipsum

Nunc viverra

Vivamus a **tellus** erraturm
Pellentesque habitant

1.
2.
3.
4.

- Module 1 – Launching the project
- Module 2 – Structuring the problem and work planning
- Module 3 – Engaging stakeholders
- Module 4 – Developing hypotheses
- Module 5 – Gathering data and conducting analysis
- Module 6 – Creating high-performing teams
- Module 7 – Process improvement & Plan Do Study Act (PDSA)
- Module 8 – Modelling and options appraisal
- Module 9 – Planning for change
- **Module 10 – Developing and communicating recommendations**
- Module 11 – Closing the project

MODULE 10

Now is the time to prepare your team's presentation for the ICB CEO.

Make sure to include some kind of visual aid.

Good luck!

30 min

Use the prompts below to guide your reflection

USE ADAPTIVE ACTION TO REFLECT ON YOUR LEARNING

What?

- What did you notice in your learning?
- What surprised you?
- What's different to what you've learnt about this before? What's the same?
- What are you feeling about this cycle of learning?

So What?

- So what could this mean?
- So what are the implications for you, for your project, for your role?
- So what are your options for action?

Now What?

- Now what will you do?
- By when?
- How will you know when you've got there?

Contents

Where are we in the case?

CASE RECAP

- The ICB CEO feels strongly that reconfiguration of emergency services is the only way forward to resolve the financial and clinical catchment guidelines issues
- You have learned from the Strategy Director at Northside that patients do not want their ability to access emergency services to be impacted
- Data analysis suggests that closing Sunnysouth would have the least impact on patient travel time
- The ICB Medical Director has raised a number of concerns about reconfiguration: (a) meeting clinical catchment guidelines is not a necessity, but an important factor to consider along with other clinical outcomes; (b) the investment required to reconfigure emergency services could be instead used to improve the ICB's commissioning of services
- Whilst there is no perfect solution to resolving both financial and clinical catchment guideline issues, **the team has presented a way forward to the ICB CEO which the CEO has taken on board and decided to implement.**
- **With the project soon drawing to a close, the team wants to support the CEO think about sustaining the change they have decided to implement. The team also needs to spend time learning from the overall project experience.**

This module focuses on working towards sustained change and learning from the project experience

OBJECTIVES AND INTRODUCTION

After this module I will:

- Understand how to wrap-up a project so that it is sustainable
- Understand how to capture project learning in a light-touch but meaningful way

This module includes:

- John Kotter's 8-steps for leading change
- Likelihood of delivery assessments
- Suggested questions to digest the success of and learning from the project

Problem solving and where the tools fit in

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, engaging with stakeholders to understand their view

Frequent review of improvement cycles, evaluating the outcomes of a project, identifying improvements and communicating success

Using quantitative and qualitative data and tools to discover the current state of a process or service, best practice and/or the root causes of a problem.

Establishing a vision for a future state: developing strategic recommendations and/or specific changes using design tools, options generation & evaluation

Using rapid improvement cycles to test changes, planning for implementation, engaging stakeholders in implementation and delivering a sustainable change

Removing barriers, generating short-term wins, sustained acceleration and instituting cross-organisational change are crucial ingredients for momentum

INGREDIENTS 5-8 OF JOHN KOTTER'S 8-STEP MODEL FOR LEADING CHANGE

8. Institute change
"Articulate the connections between new behaviours and organisational success, making sure they continue until they become strong enough to replace old habits. Evaluate systems and processes to ensure management practices reinforce the new behaviours, mindsets, and ways of working you invested in."

7. Sustain acceleration
"Press harder after the first successes. Your increasing credibility can improve systems, structures and policies. Be relentless with initiating change after change until the vision is a reality."

6. Generate short-term wins
"Wins are the molecules of results. They must be recognized, collected, and communicated – early and often – to track progress and energise [your team]."

5. Enable action by removing barriers
"Remove the obstacles that slow things down or create roadblocks to progress. Clear the way for people to innovate, work more nimbly across silos, and generate impact quickly."

Source: https://www.kotterinc.com/methodology/8-steps/

A likelihood of delivery assessment can help to examine and improve (1) the quality of planning in support of sustained change …

LIKELIHOOD OF DELIVERY ASSESSMENT TEMPLATE – (1) QUALITY OF PLANNING

Delivery criterion	Current RAG-rating	Rationale for RAG-rating	Next steps for working towards sustained change
Understanding of the problem			
Understanding of the proposed solution and its impact	Red / Amber-Red / Amber-Green / Green	Space for explanation of RAG-rating	This is the most important column; the assessment is only so good as it generates practical next steps for working towards sustained change.
Understanding of how and when the project will be delivered			
Understanding of requirements to ensure sustainability			

Source: this tool is based on Michael Barber's approach to "Deliverology", developed as Head of the Prime Minister's Delivery Unit under Tony Blair

… where there are clear definitions for the RAG-ratings and where these are collaboratively agreed with relevant stakeholders

LIKELIHOOD OF DELIVERY ASSESSMENT TEMPLATE – (I) QUALITY OF PLANNING – RAG-RATING CRITERIA

Delivery criterion	Red RAG-rating definition	Amber-Red RAG-rating definition	Amber-Green RAG-rating definition	Green RAG-rating definition
Understanding of the problem	The problem being addressed by the project is not yet clearly understood	There is a high-level understanding of the problem being addressed	There is a clear articulation of the problem being addressed, together with some understanding of the causes	There is a clear articulation of the problem being addressed, together with a detailed root cause analysis
Understanding of the proposed solution and its impact	There is not yet a clear understanding of what the solution being proposed will entail	There is a clear understanding of what the solution will entail, but no clear articulation of its expected impact	There is a clear understanding of what the solution will entail, together with a high-level articulation of its expected impact	There is a clear understanding of what the solution will entail, together with a detailed articulation of outputs, outcomes & impact
Understanding of how and when the project will be delivered	Phases of work and milestones are not yet understood	There is some understanding of the phases of work and milestones required, but a lack of clarity on project interdependencies	The phasing of work and milestones required are fully understood, with partial clarity on project interdependencies	Phases of work and milestones are fully set out, together with a clear and comprehensive view of project interdependencies
Understanding of requirements to ensure sustainability	Requirements to ensure sustainability are not yet understood	There is only a high-level understanding of what is required to ensure sustainability	Requirements to ensure sustainability are understood, but it is unclear whether resourcing and enablers can be put in place to support	Requirements to ensure sustainability are fully understood, with assurance that resources and enablers can be put in place to support

Source: this tool is based on Michael Barber's approach to "Deliverology", developed as Head of the Prime Minister's Delivery Unit under Tony Blair

A likelihood of delivery matrix can also help to examine and improve (2) the capacity to drive implementation in support of sustained change

LIKELIHOOD OF DELIVERY ASSESSMENT TEMPLATE – (2) CAPACITY TO DRIVE IMPLEMENTATION

Delivery criterion	Current RAG-rating	Rationale for RAG-rating	Next steps for working towards sustained change
Skills for implementation			
Accountability through effective governance	Red / Amber-Red / Amber-Green / Green	Space for explanation of RAG-rating	This is the most important column; the assessment is only so good as it generates practical next steps for working towards sustained change.
Leadership			
Stakeholder engagement and buy-in			

Source: this tool is based on Michael Barber's approach to "Deliverology", developed as Head of the Prime Minister's Delivery Unit under Tony Blair

… again where there are clear definitions for the RAG-ratings and where these are collaboratively agreed with relevant stakeholders

LIKELIHOOD OF DELIVERY ASSESSMENT TEMPLATE – (2) CAPACITY TO DRIVE IMPLEMENTATION – RAG-RATING CRITERIA

Delivery criterion	Red RAG-rating definition	Amber-Red RAG-rating definition	Amber-Green RAG-rating definition	Green RAG-rating definition
Skills for implementation	It is not clear what the required skills and capabilities for implementation are	It is clear what the required skills and capabilities for implementation are, but these are not easily available in the organisation	It is likely that required skills and capabilities can be made available for implementation, but not necessarily in the shape of dedicated resource	Dedicated skills and capabilities can be allocated to ensure implementation
Accountability through effective governance	It is not clear what the governance and reporting routes will be	There are plausible governance and reporting routes, but it isn't clear that these will ensure robust accountability	Governance and reporting routes are agreed, with some work to do on ensuring robust accountability	Tried and tested governance and reporting routes can be put in place to ensure fully robust accountability
Leadership	There is no established leadership at either day-to-day or senior level	There is some leadership in place – more likely at day-to-day than senior level	There is clearly identified leadership in place at both day-to-day and senior level, but there are question marks about capacity to take on full responsibility	There is visible leadership at all levels, with a high degree of commitment to role-modelling any behaviour changes required
Stakeholder engagement and buy-in	There is, or is likely to be, active opposition to the project	There is no obvious opposition to the project, but positive engagement of stakeholders has been limited	There are clear signs of engagement with and buy-in to the project, but this is not widespread across all stakeholders	There is widespread engagement with and buy-in to this project across all stakeholders

Source: this tool is based on Michael Barber's approach to "Deliverology", developed as Head of the Prime Minister's Delivery Unit under Tony Blair

Use the Digest phase to discuss as a team – and ideally with the client – what went well and what could have been better

DIGEST PHASE – SUGGESTED REVIEW QUESTIONS

"What went well? And what could have been better?"

It's important not to leave discussions like this until the end of a project. Instead, we suggest regularly reviewing team ways of working throughout. Prompting questions could include **what is working well**, as well as **what could be improved**.

Project impact & delivery

To what extent did the project…

- … deliver what was asked for?
- … achieve its intended impact?
- … secure buy-in of key stakeholders?
- … receive positive feedback?
- … have in place a robust tracking system?
- … have in place a clear sustainability plan?

Project management

To what extent did we…

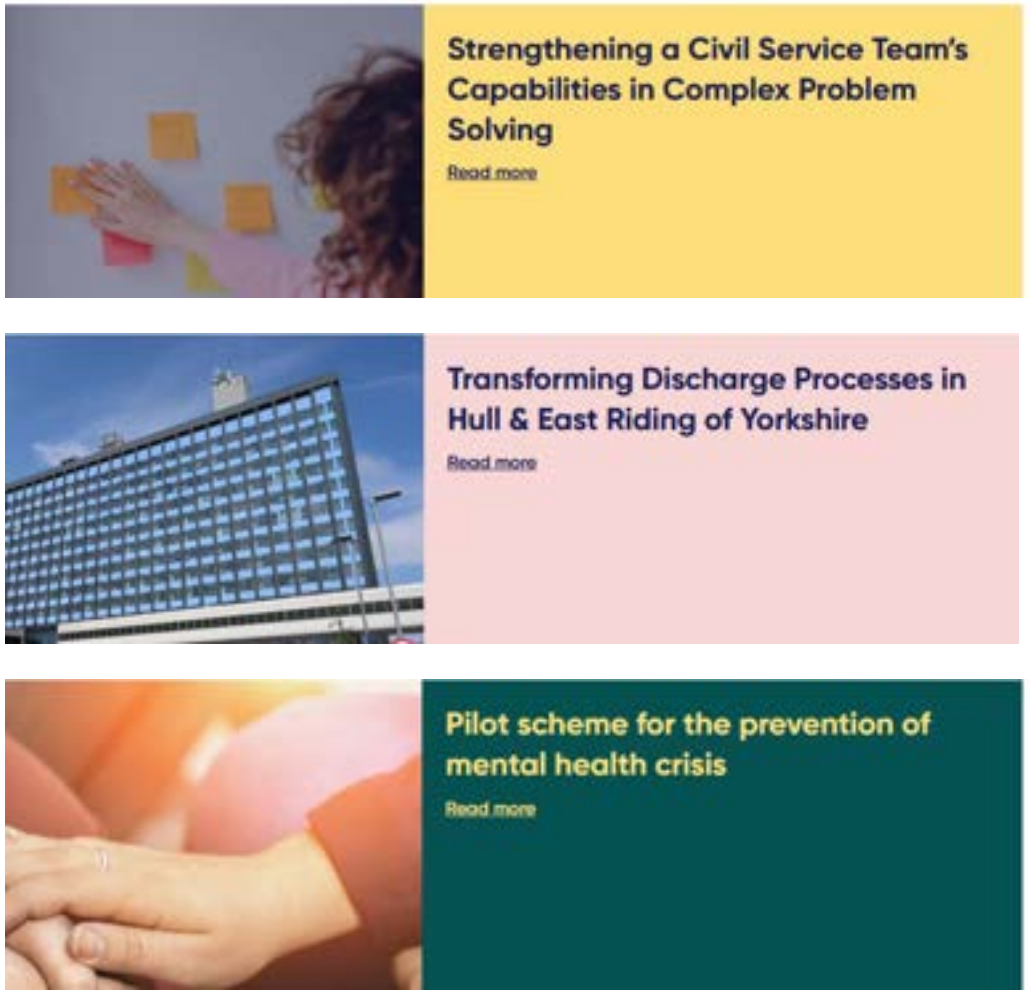
- … delight our clients?
- … enjoy ourselves?
- … create a psychologically safe team environment?
- … incorporate user & lived experience perspectives?
- … divide up roles and workload equitably?
- … enable learning & development of colleagues?

Writing up a case study can help the project team to digest their learning, as well as helping to share the learning more widely

Suggested case study headings:

- The challenge
- The approach
- The impact (including client feedback)
- The learning taken for next time

Or try SCQA – Situation-Complication-Question-Answer
(see Module 10)



Find all The PSC's project case studies here for examples of write-ups

Use the prompts below to guide your reflection

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Final Day
WRAP UP

We've now introduced you to the whole of the D5 cycle, ready for you to practice & learn more on your projects

THE D5 APPROACH

Defining the problem to be addressed, setting the scope and KPIs, planning the work, engaging with stakeholders to understand their view

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Using rapid improvement cycles to test changes, planning for implementation, engaging stakeholders in implementation and delivering a sustainable change

Frequent review of improvement cycles, evaluating the outcomes of a project, identifying improvements and communicating success

What have you taken from our three days together?

GROUP DISCUSSION

Please share:

1. A valuable insight from the course
2. Something you will commit to doing differently in the future

Before you leave....

END OF FINAL DAY TASKS

- Complete your reflection forms from today's modules
- Complete the following feedback form to rate your confidence with different elements of project work, and provide feedback on the overall training course
  - **Link to post-course survey: https://forms.office.com/e/WJFJpRbDRi**
  - **You can also follow the QR code** below to access the form:

You can scan the QR code with a **mobile device camera** to access the form