



North West
Leadership Academy

Developing Together

OD Toolkit



Delivered in
partnership with:

NHS Leadership
Academy

The NHS North West Leadership Academy wishes to acknowledge and thank OD leads and practitioners from across the north west for their invaluable help in producing this toolkit.

We particularly wish to thank **Louisa Graham**, Lancashire Teaching Hospitals NHS Foundation Trust, and **Janet Thompson**, Excellence Through People, for their rich contributions.



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I. Introduction

“There is nothing permanent except change”

Heraclitus, Greek philosopher, 6th Century BC

Change is a familiar concept to NHS staff, and with increased emphasis on quality of service, productivity and cost saving. The NHS is now faced with a raft of service reform initiatives, all of which mean change.

In this new, fast-evolving landscape we need to do things differently.

Organisational Development (OD) describes many different activities undertaken to improve the overall performance of an organisation, and is vital in helping organisations maintain their position within the healthcare community and ensure their future success. OD is a strategic tool which is integral to understanding and shaping a cross- community response to meet current and future demands, as highlighted in key documents over recent years;

- High Quality Care for All, 2008,
- Transforming Community Services Enabling New Patterns of Provision 2009
- Equity and Excellence Liberating the NHS, 2010

- Health and Social Care Bill, 2012
- Francis Report – Independent inquiry into care provided by Mid Staffordshire NHS Foundation Trust Jan 2005 – Mar 2009

These reports and legislation have provided further momentum to the growing OD agenda in the NHS, particularly where it is perceived as playing a pivotal role in delivering benefits, such as improving the quality of care for patients.

The Francis Report will exert further significant influence on OD, in setting down clear principles which should guide any redesign of ‘the system as a whole’, which should;

- 1 be patient-centred
- 2 engage staff
- 3 promote good governance and effective leadership
- 4 ensure the role of organisations are clear

These four principles describe the essential elements of OD, and mirror the North West Leadership Academy’s own definition; “Organisational development is about improving organisational performance through implementing a planned process of leading and managing change that aligns key levers such as Vision, Values, Strategy, Structure, Processes, Systems, Ways of Working and People Capabilities”.

Across NHS North West we have a wealth of OD knowledge and experience - the purpose of this toolkit is to share core knowledge, skills and techniques, disseminating good practice and bringing about greater consistency and effectiveness in applying this vital resource across the OD and HR community.



2. The Basics

2.1 Who is this toolkit for?

This toolkit is primarily intended for those working in OD practitioner roles, such as Head of OD or OD Advisors, but will also be of use to those in other roles, such as;

- Chief Executive Officers
- HR or Workforce Directors
- HR Business Partners and/or HR Managers
- Personnel working in a Training and Development type function
- Senior Leaders or Managers

In providing an understanding of what OD is and how to apply this approach, this toolkit aims to support all those directly involved in making a sustained transformation, however large or small.

To be effective an OD approach needs to be embedded into the organisation's culture and be a tool of choice by leaders at all levels in the NHS.

How is it relevant to your role?

Whilst primarily written for OD practitioners to provide a toolkit of advice, guidance and techniques to apply, real benefits do exist for other roles.

Role How can it help

OD
Practitioner

For the experienced OD Practitioner as a 'rubber stamp' confirming your approach reflects best practice principles.

For others, as a 'refresher', encouraging you to think about the way you do things, about introducing different tools and techniques, whether new or perhaps used previously.

For new or less experienced OD practitioners, as a 'How to..' guide – providing you with a key resource setting out the fundamentals of OD, and a cohesive toolkit of techniques to go out and use.

The toolkit can also serve as a self-assessment guide, for you to evaluate your own skill level and competences, as well as identifying and tackling development areas.

Role

How can it help

Chief Executive Officer

As well as setting out OD principles, the toolkit defines the practicalities of using this approach to innovate, to problem solve, to engage staff and to measure the impact of such changes on patient, service user and staff satisfaction - helping you to understand how and where to use an OD approach to add value to your organisation.

HR or Workforce Director

This toolkit will enable you to consider whether you are really implementing OD – acting as a checklist, you can assess whether you are using a pure OD approach, and have the skills and capabilities in your team to take an OD approach. It should also provide information and guidance to help you raise OD up the strategic agenda, promoting the benefits of incorporating this approach into the fabric of the organisation to the Executive Team or Board.

HR Business Partner or HR Manager

In your role you may have experienced issues which are difficult to resolve, have exhausted various different options and tried different techniques without making real progress. This toolkit can help by illustrating how an OD approach to doing things differently can bring about a positive, lasting, tangible difference.

Training and Development Personnel

Staff in these roles are often seen as undertaking OD, but whilst Training and Development is not OD, training and personal development techniques are part of an OD toolkit. This guide can help you to understand the scope of OD, how it might apply to their work and how it could be incorporated into more traditional classroom or development activities.

Senior Leaders or Managers

All leaders and managers undertake OD in its broadest sense - in trying to innovate or problem solve; the first task is taking a baseline and gaining an understanding what is currently going on, often by asking staff or patients for their views; the second task is working with teams or individuals to explore ways to bring about improvements; the third is about implementing changes or ideas; the fourth is about determining the impact or difference the change has made. In providing different ways of working you may not have considered previously, this toolkit offers ideas on how to engage with your staff to innovate and create service improvements.

How to use this toolkit

This toolkit is designed to be either read from cover to cover or used as a key reference resource to which you can return whenever needed. Each section provides a wealth of information and signposts to other useful resources.

The toolkit consists of three core sections –

1. The Basics – this section defines OD, exploring a range of relevant theories and models of OD, how they can be used to inform OD projects and the approach taken.

2. Skills and Capabilities – focuses on the desirable skills, knowledge and behaviours required of effective OD practitioners; provides an overview of the OD Practitioner Competency Framework and its links to leadership; offers developmental tips to help OD practitioners reach their full potential.

3. OD Diagnostic Tools and Techniques – provides a wide range of tools and techniques for use in a variety of settings; an overview of what the tools and techniques could be used for; practical techniques to try and where to find more information.

Useful terms

Understanding some specific terms used in the context of this toolkit:

OD Practitioner – any person experienced in organisational development who works in a consultancy style using OD tools and techniques, regardless of role or band.

Client – the person commissioning the work, to whom an OD practitioner would usually report about the progress and outcomes of their work – sometimes but not necessarily the OD practitioner's line manager, but often occupying a leadership position. May also be referred to as the 'sponsor'.

Project Lead – the person responsible for day-to-day management of a project or programme of work. Depending on size or scope, this could be the OD practitioner, an Executive Director or the Head of OD. This may be someone outside of the OD or Human Resource function, particularly when involving a large corporate project.

OD Intervention – one or more activities bringing about change or improvement, whether to a specific role, a team, or to the whole organisation. This can vary widely, as the Toolkit illustrates - to help diagnose what is happening, using a focus group to gather staff views; to bring about improvements, such as teambuilding events to boost performance; 360 degree feedback to enhance self awareness; assessment centres to ensure robust selection decisions. In practice a series of OD interventions tend to be used at different levels to create positive and sustainable behavioural change.

Diagnosis or Diagnostic Tools – the methods an OD practitioner uses to understand an issue and determine where and what needs to be improved. Most diagnostic methods involve engagement with key stakeholders, often through interviews, focus groups or questionnaires. Some diagnostic work is carried out by using existing data sources such as previous patient or staff satisfaction surveys.

2.2 Defining OD

– Theories and Models

This section will focus on defining OD, exploring the theories and models that can be used to help identify issues and develop interventions that will contribute to the transformation of individual and organisational performance.

The section is broken down into:

Defining OD – the various definitions of OD and what it encompasses.

The Behavioural Science Approach – the underpinning theories and models which support an OD approach.

Diagnostic Models – an overview of a number of models which provide a starting point when trying to diagnose where problems lie, and the aspects of the organisation your intervention needs to tackle to bring about the desired change.

Consultancy Approaches – details models describing how best to lead and manage an OD project, explaining the practical steps you can expect to take when trying to use an OD approach to bring about change.

Defining OD

OD has been variously described in the Chartered Institute of Personnel and Development (CIPD) factsheet as:

- A planned process of change in an organisation's culture through the utilisation of behavioural science technology, research and theory (Warner Burke).
- A long-range effort to improve an organisation's problem solving capabilities and its ability to cope with changes in its external environment with the help of external or internal behavioural-scientist consultants, or change agents as they are sometimes called (Wendell French).
- An effort (1) planned, (2) organisation-wide, and (3) managed from the top, to (4) increase organisation effectiveness and health through (5) planned interventions in the organisation's 'processes', using behavioural science knowledge (Richard Beckhard).
- A system-wide process of data collection, diagnosis, action planning, intervention and

evaluation aimed at (1) enhancing congruence among organisational structure, process, strategy, people and culture; (2) developing new and creative organisational solutions; and (3) developing the organisation's self renewing capacity. It occurs through the collaboration of organisational members working with a change agent using behavioural science theory, research and technology (Michael Beer).

The North West Leadership Academy defines OD as:

“Organisational development is about improving organisational performance through implementing a planned process of leading and managing change that aligns key levers such as Vision, Values, Strategy, Structure, Processes, Systems, Ways of Working and People Capabilities”.

What will be apparent is that there is no single definition of OD - standard practice by one OD practitioner may be outside of the scope of another practitioner's role. The field of OD is broad and complex, principally as OD practitioners work in many different roles –

such as Learning and Development, HR, or Occupational Psychology – and can work within an organisation or as an external consultant.

It is however evident from the definitions provided that conclusions can be drawn about the core characteristics of OD, and more specifically it is “an interdisciplinary and primarily behavioural science approach that draws from fields such as organisation behaviour, management, business, psychology, sociology, anthropology, economics, education, counselling and public administration” - McLean (2005).

Behavioural science, organisational psychology theory and models in conjunction with change management methodology strongly influence OD. The solution to an issue faced may require research into more specific theories of, for example, team dynamics, leadership, culture, employee engagement or ‘the psychological contract’.

The Behavioural Science Approach

This approach sets out that organisational development is a “programme of applying behavioural science to organisations” French and Bell (1999). Understanding behaviours, what causes certain behaviour, what motivates and how to influence or change behaviour is a pivotal part of OD.

Its basic assumptions and propositions are:

1. Organisations are socio-technical systems, in that to sustain and create strong performance

senior leaders need to try and align people with technological systems.

2. Work and interpersonal behaviour of staff is influenced by many factors.
3. Employees are motivated not only by physiological needs but also by social and psychological needs
4. Different people have different perceptions, attitudes, needs and values.
5. Conflict at work is unavoidable
6. Personal goals and Organisational goals must be joined together.

Hundreds of theories and models can be classified as a behavioural science approach – here are just a few:

Theories of Motivation:

Motivation is what causes us all to take action; motivated people are those individuals who have made a decision to devote considerable effort to achieving something that they value.

McClelland (1961) Needs Based Motivational Theory

This theory sets out three types of motivational needs that all people possess in varying different levels:

1. The need for achievement
2. The need for affiliation
3. The need for power or authority

McClelland said that most people possess and exhibit a combination of these characteristics. Some people exhibit a strong bias to a particular motivational need, and this need

consequently affects their behaviour, preferences and leadership style.

According to this model:

1. The need for achievement or nACH - these individuals tend to seek opportunities for them to accomplish or attain goals and objectives. Motivated by achieving challenging tasks or feeling a sense of progression in their job, they value feedback on performance. Accomplishing a task further motivates them to achieve yet more challenging goals.
2. The need for affiliation or nAFF - motivated through relationships they have with people, they will enjoy and be motivated by interactions with those with they feel they have developed a strong rapport or friendship. Feeling liked and held in high regard in turn motivates them to achieve more.
3. The need for power nPOW - this person is motivated by authority, by feeling in control and being able to lead or take charge. They are also motivated by the status and recognition given to the person who is ‘the boss’.

The following diagram shows the behaviours and traits for each of the differing needs and where high or low levels of motivation exist:

nACH

(need for achievement)

HIGH

Must win at any cost
Must be on top and receive credit

LOW

Fears failure
Avoids responsibility

nAFF

(need for affiliation)

HIGH

Demands blind loyalty and harmony
Does not tolerate disagreement

LOW

Remains aloof
Maintains social distance

nPOW

(need for power)

HIGH

Desires control and everyone and everything
Exaggerates own position and resources

LOW

Dependent/subordinate
Minimises own position and resources

How to Use the Model:

This model can help leaders understand the most effective ways to motivate staff by understanding their needs, and thus enabling them to apply the most suitable style of

leadership to get the best results from their team. By appreciating these differences, workplaces, teams and processes can be structured to ensure all staff are motivated.

Other Theories of Motivation

- Maslow's (1954) Hierarchy of needs
- Herzberg (1968) Motivation Hygiene theory
- Vroom (1964) Expectancy theory
- McGregor's (1960) X and Y theory
- Alderfer (1969) ERG Model

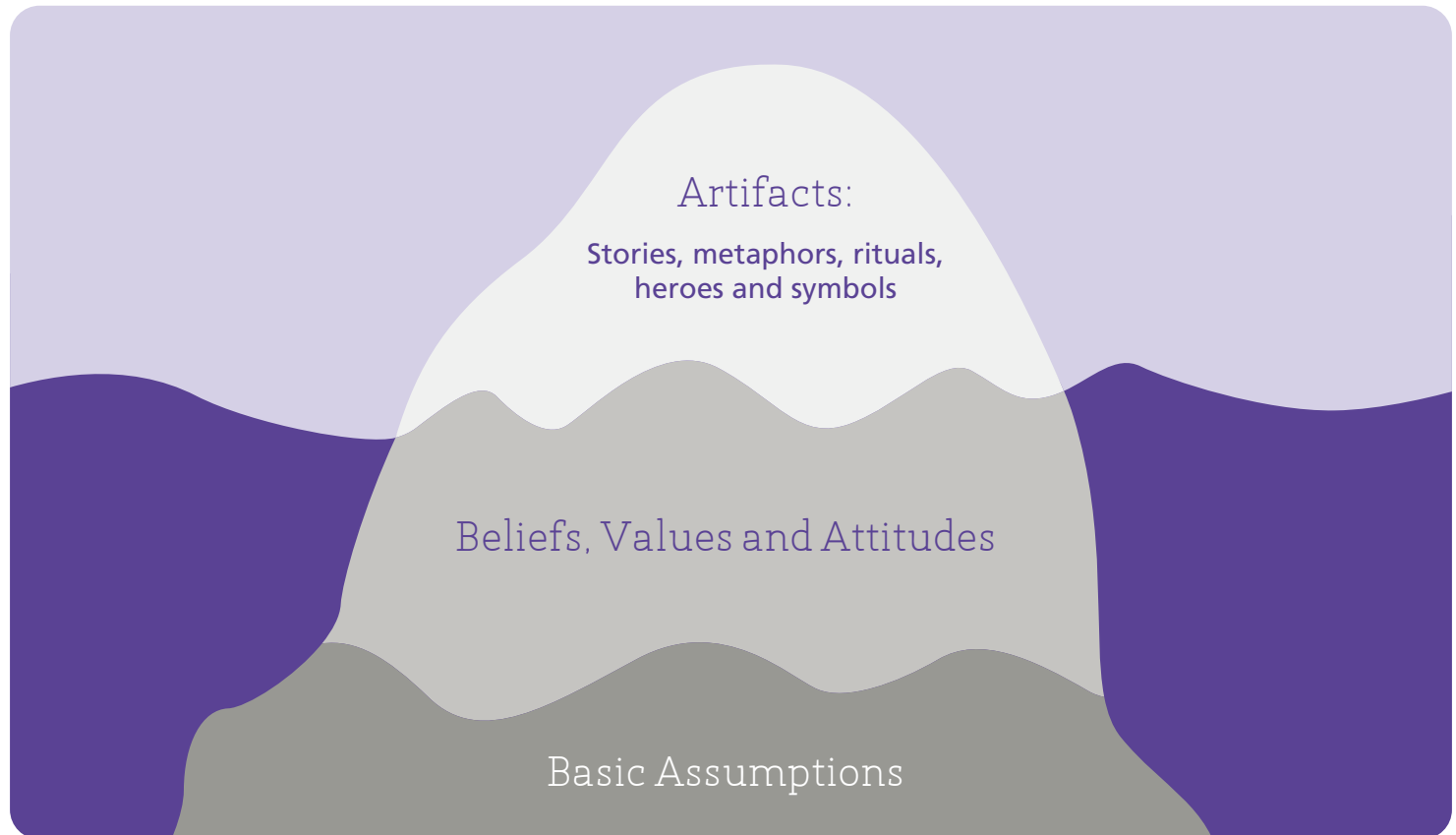
Further detailed information and illustrations of each of these and other models are readily available on the internet.

Theories of Organisational Culture

In his book *Organisational Culture and Leadership* (1992), Schein defined culture as "a pattern of shared basic assumptions that the group learned as it solved its problems of external adaptation and internal integration, that has worked well enough to be considered valid and, therefore, to be taught to new members as the correct way to perceive, think and feel in relation to those problems".

The Details

Organisational culture can be defined as the "way we do things around here", it is the unspoken norms, informal rules which exist within organisations and guide employee behaviour. According to Schein there are three levels of organisational culture, as displayed in the diagram below;



Schein: Culture Iceberg

Artifacts are those aspects of the culture which are visible and on the surface, for example the types of uniforms staff wear, the stethoscope around a doctor's neck, or the physical environment such as private offices for senior managers and open plan offices for staff. They are usually easily discerned as they tend to be tangible, overt or verbally identifiable, yet it can be hard to understand why they exist.

Beliefs, Values and Attitudes are the espoused values of the organisation, setting down the expected standards of behaviour required of staff when interacting with each other, and with patients or service users. These values tend to be expressed in vision and mission statements, or in strategic documents such as the organisation's annual plan.

Basic Assumptions tend to be in a person's unconscious, they are the deeply held beliefs, attitudes and behaviours which make the culture what it is.

How to Use the Model:

According to Schein, culture is the most difficult part of an organisation to change. Most reform tends to focus on changing processes and procedure with some transformation aimed at bringing about change at an Artifact level. This model can help an OD practitioner to determine the level of cultural change the intervention is intending to tackle, as just changing the Artifacts is unlikely to lead to deeper, longer lasting change which impacts on staff behaviours and beliefs.

Other Theories of Organisational Culture

- Deal and Kennedy (1982) – 4 Different Types of Organisations
- Hofstede (1980) – Cultural Dimensions Theory
- Handy (1972) – Relationship between organisational structure and its culture, Handy identified 4 different types of organisational culture

Change Management Models

According to Bridges (1995), "it isn't the change that does you in, it's the transitions". Bridges distinguishes between change and transition - change is situational, for example a move to a new site, whilst transition is psychological, a process in which people internalise and to come to terms with what changes mean for them.

The Detail

Bridges' theory of change management outlines a three phase process to dealing with transition and change. If these three phases are managed well then the organisational change it is more likely to be effective. The three phases are;

Stage 1 - Ending, Losing, Letting Go

To assist staff in moving out of this stage, OD practitioners or managers need to help people

deal with their tangible and intangible losses, and mentally prepare to move on.

It is about getting staff to let go of the old ways and their old identity - the first stage is about drawing a line, creating an ending and dealing with their losses.

Stage 2 – Neutral Zone

An 'in-between' time when the old has gone, but the new is not fully operational. During this stage critical psychological realignments and repatterning takes place. It is about helping people get through it, and potentially capitalising on uncertainty by encouraging them to be innovators.

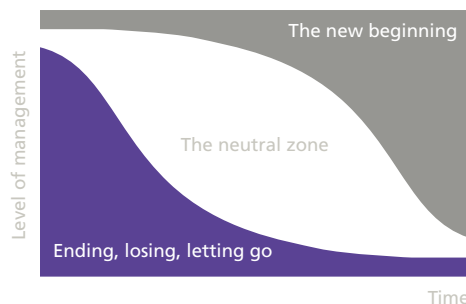
Stage 3 – The New Beginning

This is where the transition period is ending and the new beginning has arrived. During this stage managers and OD practitioners need to try and help people to develop a new sense of identity, a fresh sense of purpose and the energy to help make the changes work.

How to Use the Model

This model is useful whenever change occurs; it can help OD practitioners who have to implement the change, or who are working with groups of staff who are struggling to accept the changes.

The model can be used in coaching, or in one-to-one support sessions with staff, and questions can be developed to help staff understand why they are finding change difficult, and then help them move on psychologically. It can also be a way to help



staff to grieve for what they have lost and have their losses acknowledged openly and sympathetically.

The model may also be used with change managers, as a tool to get them to think about the impact the change will have on their staff. As an OD practitioner you could ask the following questions, which are taken from Bridges' book entitled *Managing Transitions, Making the Most of Change* (1995), to help them to consider the change from their team's perspective:

1. Have I studied the changes carefully and identified who is likely to lose what?
2. Do I understand the subjective realities of these losses to the people who are experiencing them, even when they seem to me to be overacting?
3. Have I acknowledged these losses with sympathy?
4. Have I permitted people to grieve and protected them from well-meant attempts to stop them from expressing their anger or sadness?
5. Have I clearly identified what is over and what is not?
6. Have I found ways to mark the ending?

Other Change Management Models

- Lewin (1947) Three Stages of Change – unfreeze, change and freeze
- Kotter (1995) Eight Step Change Model
- Prosci (1998) The ADKAR model of change management

Diagnostic Models

Which diagnostic model you chose to use will depend very much upon what aspects of the organisation your intervention needs to focus on, in order to bring about the desired change. You may feel that these models often seem to focus on the same core factors but through a slightly different lens – this is indeed true, emphasising the importance of taking a holistic 'whole systems' approach to understand an issue as well as determining the impact an intervention may have on the entire organisation.

In diagnosing any situation, you may find that choosing one model is beneficial – whether based on personal preference, the organisation involved or familiarity with the terminology it uses, as well as your knowledge of the presenting issue.

McKinsey 7Ss Model

The McKinsey 7S Model is strongly aligned with the Behavioural Science approach and the definition of OD put forward by the NW Leadership Academy.

The framework was developed in the early 1980s by Tom Peters and Robert Waterman of the global consulting firm McKinsey and Company, and the model was published in their article "Structure Is Not Organisation" (1980) and in their books "The Art of Japanese Management" (1981) and "In Search of Excellence" (1982).

What is the model about?

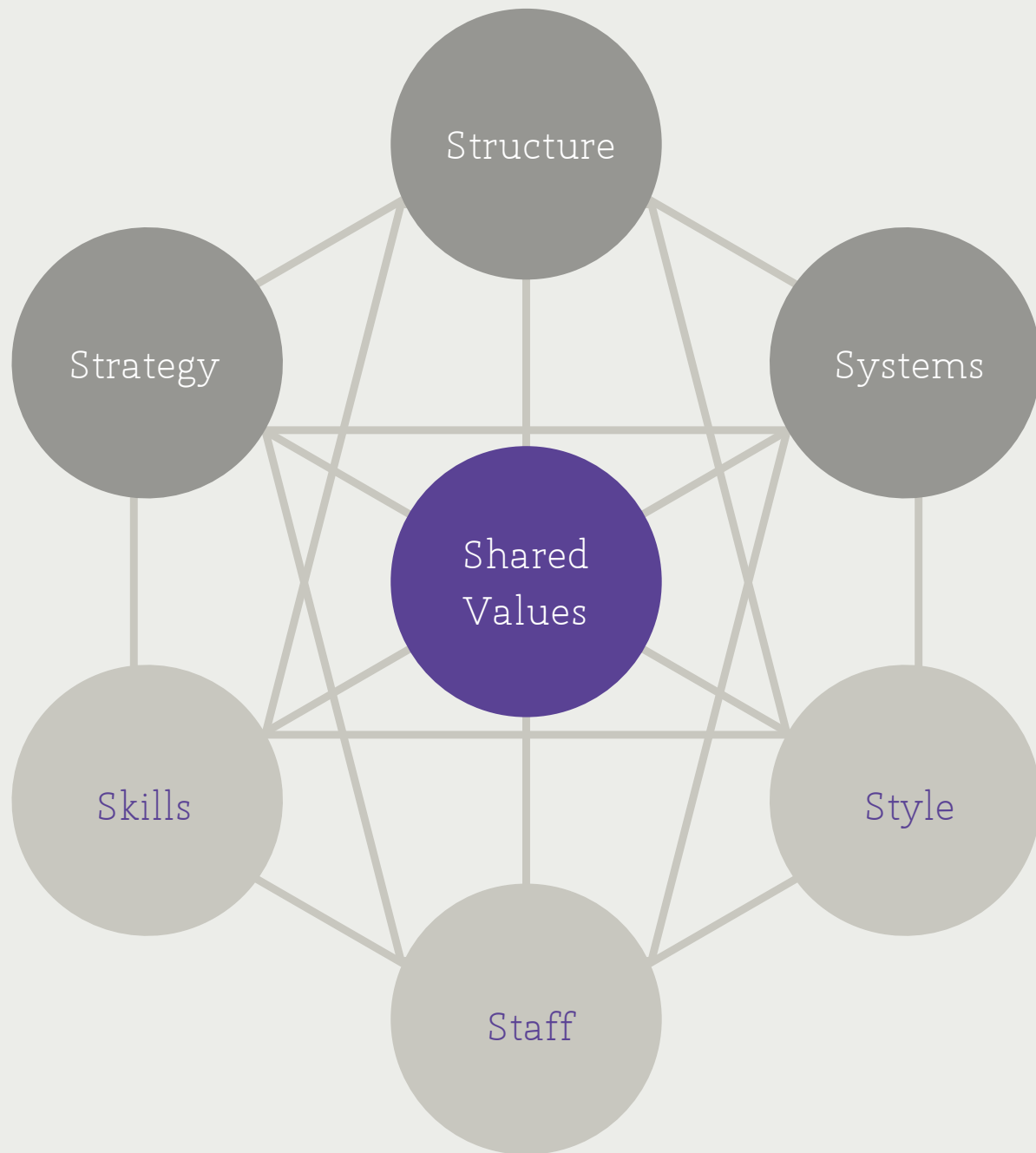
- The premise is that there are seven internal aspects of an organisation that need to be aligned and mutually reinforced to achieve success
- It proposes that an organisation is not just a structure, but consists of 7 interdependent factors which can be broken into two groups:

Hard Factors	Soft Factors
Strategy	Shared Values
Structure	Skills
Systems	Staff
	Style

Hard factors – generally easier to define or identify as they are often either tangible objects, or well documented in reports, plans and strategy statements. They can often be influenced directly by management actions.

Soft factors – tend to be more difficult to describe and comprehend as they are less tangible and more influenced by culture. Capabilities, values and corporate culture are continuously evolving, and therefore planning or influencing their characteristics is less easy. Whilst they are below the surface, they still have a great impact on the hard factors of the organisation.

Both groups are equally as important in determining organisational success, and the diagram below displays their interdependencies, and how change in any element creates a knock-on effect on every other factor.



The Detail

The following section will now look at each of the elements in more detail:

The Hard Ss

Strategy	It is the 'how', the organisational plan, and should detail the actions the organisation plans to take either in response to or in anticipation of changes in its external environment.
Structure	The way the organisation is structured in terms of reporting, often strongly influenced by its size and diversity.
Systems	The daily activities and procedures staff undertake to get the job done, whether formal systems such as Finance and IT, or informal systems such as communication processes.

The Soft Ss

Style	The culture of the organisation, the way people behave and comprising two elements: 1. Organisational Culture: the dominant values, beliefs and norms, which develop over time and become relatively enduring features of organisational life - "the way we do things round here." 2. Management Style: the style of leadership adopted, what managers do and the way they do things, rather than what they say.
Staff	The people, their skill sets and their levels of capability; it also encompasses talent management and staffing plans.
Skills	The ability to do the organisation's work; it should reflect overall performance of the organisation - what it does well, how it shifts and develops to exceed in new areas.
Shared Values	A set of traits, behaviours, and characteristics the organisation believes in – these values would be evidenced in its culture and work ethic, and are often described in the organisation's mission and vision statements. Placed in the middle of the model to emphasise their importance being central to the development of all other elements. The company's structure, strategy, systems, style, staff and skills all stem from why it was originally created, and what it stands for. As the values change, so do all the other elements.

How to Use the Model

This model can provide a useful framework enabling you to step back from a situation, by analysing each essential element independently and finding the root cause. Examining the interdependencies between factors can identify why a specific intervention may not be reaching its potential as limited consideration has been given to one or more of the 7S factors. The model can be used to highlight what needs to be realigned to improve performance, or to maintain alignment (and performance) during other types of change. The 7S model can be used in a wide variety of situations where an alignment perspective is useful, for example to help you:

- Improve organisational performance
- Examine the likely effects of future changes such as introducing new systems or process, leadership changes and restructure
- Align departments and processes during a merger or acquisition
- Determine how best to implement a proposed strategy
- Improve team functioning and effectiveness
- As a diagnostic tool to determine why an intervention or solution is not delivering against its original aims in terms of noticeable benefits or improvements

Using the model to scope out where the problems lie

The model can be used as a diagnostic tool as it can help you when working with key stakeholders to understand and analyse the current situation in each of the various elements. It can also determine where the

stakeholders want to get to, and for you as the OD practitioner to identify the gaps and inconsistencies in order to develop a holistic, whole systems solution that will help reach the desired outcome.

There are a number of questions you can ask to find stakeholders' perspective and enable you to understand the context, the current situation, where there are overt presenting issues and where there may be covert issues yet to emerge;

Strategy

- What is your strategy, your vision or aims?
- How is the organisation/team responding to the changing demands?
- What changes do you see that will significantly affect your organisation/team over the next - years?
- What are your success criteria for this organisation/team?
- What will have to change in order to meet your success criteria?

Structure

- How are decisions made?
- What are the reporting arrangements?
- How would you describe the organisation's structure? Do you feel it is flexible and responsive enough to meet your changing needs?
- How well do the different parts of your organisation work together?
- What are the lines of communication?
- How effective is communication vertically/horizontally?
- Do people have the appropriate levels of authority and responsibility?

Systems

- What systems are used to help run the organisation/team? (For example financial systems, IT, HR)
- Are the systems effective in helping you do your job?
- What internal rules or processes do the team/organisation use to keep them on track?
- What information do you need from outside/inside of your organisation/team that you are not receiving at present?

Style

- How would you describe the leadership/management style in the organisation/team?
- How effective is that leadership?
- Do team members tend to be competitive or cooperative?
- How is conflict handled in your team/organisation?
- How far is risk-taking encouraged?

Staff

- What are the key roles in your team that you could not do without?
- What arrangements do you have in place for developing staff to reach their full potential?
- What positions do you struggle to fill?
- Who are your key people?
- What are their strengths and weaknesses in relation to your organisation's goals?

Skills

- Do current team members have the skills they need to do their jobs?
- Where are their skill gaps?
- How are skills monitored and developed?
- What skills do you need to develop in your team/organisation over the next 2 years in order to perform and function effectively?

Shared Values

- What are the main drivers for this team in the way they do things?
- What is the core purpose on which this organisation/team is built ?
- What do you consider to be the core values of the organisation/team?
- What values need to change to ensure future success?
- How would you describe the culture of where you work?
- What are the positive aspects of the culture?
- What are the negative aspects of the culture?

Using the model to evaluate the effectiveness of your proposed solutions

The model can be used to evaluate effectiveness of the solutions you are proposing, checking that you have considered all aspects of what makes an effective organisation - for example, does the intervention you are proposing consider its effect on each of the 7Ss? You may need to go back and adjust or align different elements of your proposal, then re-analyse how that then impacts on other elements.

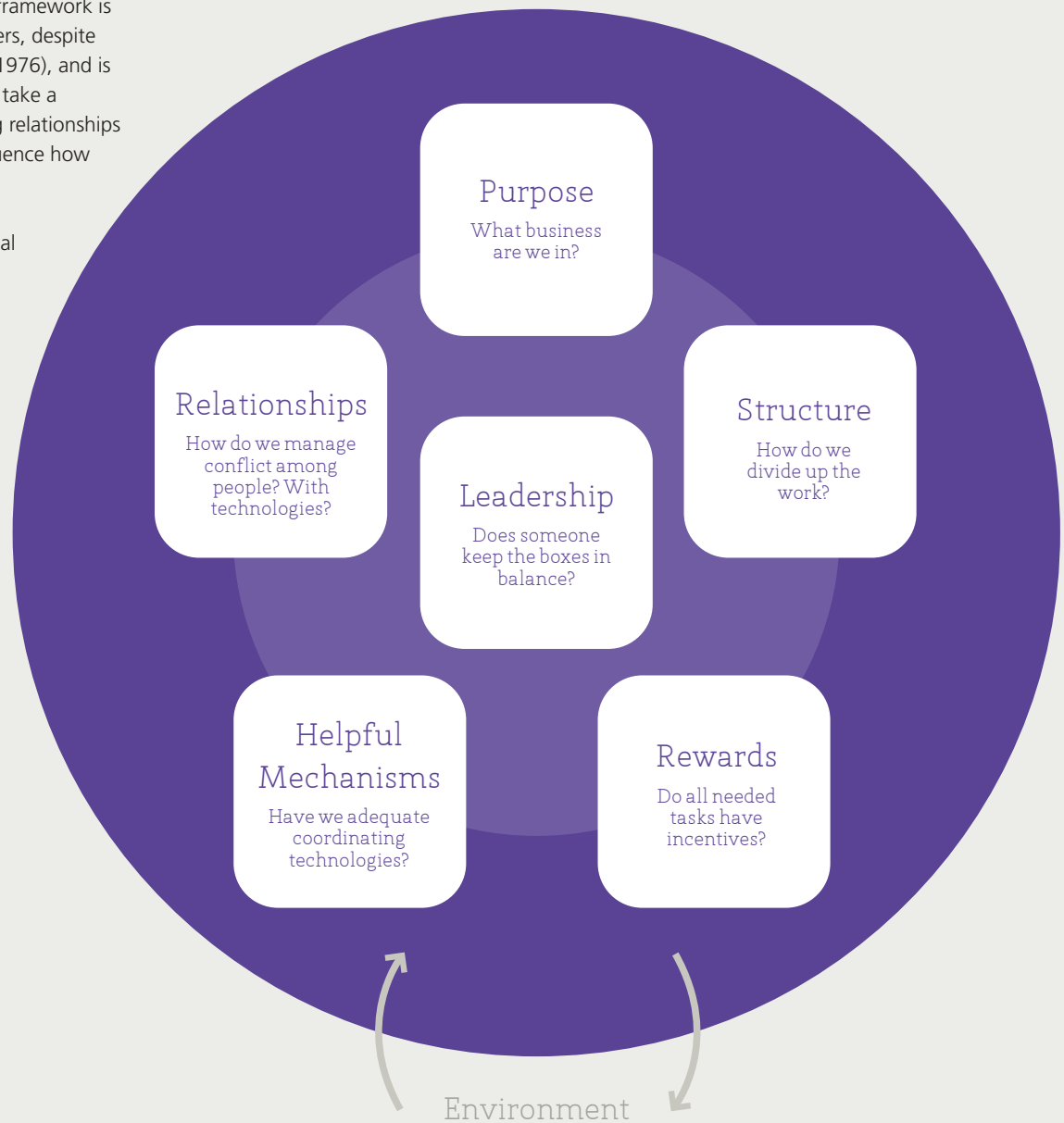
It can also help you when recommending a course of action, by identifying that by making changes in one aspect of the organisation, other elements may also need to be realigned or changed to release benefits. For instance, if you recommend revitalising the organisation's Values, it may also mean changing HR policies and procedures, the introduction of a new appraisal process, or new training programmes to ensure staff have the skills to 'live the values' then incorporated into the organisation's strategy, and vision and mission statement.

live the values

The Six Box Model

The Weisbord six-box diagnostic framework is still widely used by OD practitioners, despite being published some time ago (1976), and is particularly useful when trying to take a systematic approach for analysing relationships between the variables which influence how an organisation is managed.

Weisbord's model of organisational life is made up of six broad categories- Purposes, Structures, Relationships, Leadership, Rewards and Helpful Mechanisms.



Definition of the Six Factors:

Purpose

An organisation's mission and goals.

Structure

The way it is organised, whether by function, by specialist groups, how multi-disciplinary teams work together, project teams etc.

Rewards

The intrinsic and extrinsic rewards that staff associate with their work - intrinsic include having a sense of choice, feeling like they are progressing in their career, whilst extrinsic rewards include bonuses, pay rises etc.

Helpful Mechanisms

Could define as the 'cement that binds the organisation together' making it more than a group of individuals with separate needs - the processes every organisation needs to survive, for example planning, control, budgeting and information systems that every staff member needs to do their job.

Leadership

The typical leadership tasks - maintaining order, defining purpose, managing conflict and defending the organisation's integrity.

Relationships

How people and teams interact with one another, also the way in which staff interact with technology such as IT systems or equipment.

How to Use the Model

In 1980 Preziosi developed an Organisational Diagnosis Questionnaire (ODQ) based on the Six-Box model and designed to provide survey feedback data for intensive diagnostic efforts, and this is freely available on the internet.

The questionnaire generates data in each of Weisbord's suggested six areas as well as in a seventh area which is Attitude Towards Change, added to aid OD practitioners' understanding of how open staff are to change, prior to attempting to initiate a system-wise change.

As with the 7S model, it should be used as a map by which to find where problems lie and to give consideration to which elements of the organisation the intervention needs to be targeted to bring about demonstrable improvements. It is a useful tool in guiding conversations with key stakeholders as it helps them to visualise the organisation as a whole, rather than simply focusing on what they think is the presenting issue. It can help structure scoping meetings by enabling the practitioner to gather information and understand the extent of issues. The practitioner can then correlate what people say in conjunction with other forms of organisational data - for example staff satisfaction surveys, performance data etc - determine the breadth of issues and solutions needed to tackle the problem at the core.

The Burke Litwin Model of Organisational Change

The premise of this model is that "OD interventions directed towards structure, management practices and systems (policies and procedures) result in first order change; interventions directed towards mission and strategy, leadership and organisational culture result in second order change" French and Bell (1999).

It looks at change from two aspects –

First Order Change, or transactional change is about changing features such as systems or process whilst the organisation's fundamental nature stays the same, such as its culture and values. Changing structure or management practice will cause changes in the work climate – defined as the employee's perceptions and attitudes to the organisation – and whether it is a good or a bad place to work, friendly or unfriendly, easy-going or hardworking. These changes require transactional leadership.

Second Order Change, or transformational change is about significantly changing the nature of the organisation, and is often more radical, focusing on bringing about change to the organisation's mission or strategy and how leaders lead. It is about changing the culture in order to produce changes in individuals and organisational performance.

tackle the problem
at the core

The Model



■ First order (transactional) change

■ Second order (transformational) change

A slightly more sophisticated and complex model than the 7S and the Six-Box models, it still incorporates a number of similar essential organisational elements such as systems, policies and structure. It is considered to more closely align to an OD approach by practitioners as often OD interventions are focused more towards bringing about second order change, by transforming the culture and improving performance.

It can help the OD practitioner to assess a situation, determine the type of change required - first or second order - and target interventions towards the factors that will help to produce the desired change. As with the other models considered, it highlights how change in any one of the factors will eventually impact on the others.

Consultancy Approaches

There are various ways to approach and manage an OD programme successfully, and this section will provide a number of effective frameworks. It is impossible to cover every circumstance, but many OD programmes follow a common approach - by outlining the core phases of OD programmes or approaches, used by both internal and external consultants and OD practitioners, pragmatic advice can be given on how to translate it into workplace actions.

Action Research Model

As its name suggests, action research is a combination of two elements, and is problem-centred, client-focused and action-orientated. It takes a collaborative approach by involving

leaders or the facilitators of change, with those who will be affected by it. It aligns with the OD philosophy and values in that if people are involved in decisions that affect them, they are more inclined to adopt the new ways of working (Senior and Flemming 1999).

Action Research is a cycle and does not end once change has been completed, instead seeing change as an ongoing process where the focus is on continuous improvement in order to stay at the forefront and deliver a high quality service. Each of the phases of the model (as with Burke- Litwin's model discussed earlier in this section) can be used to form the OD process.

1. Preliminary diagnosis

Understanding management's perception of the problem, and using available data or information to assess where the potential issues lie.

2. Data gathering from the client group

Asking those staff affected by the current problems and potential change for their view of the situation, the issues and why it has arisen – by questionnaires, focus groups, interviews or observations. This stage establishes what people think, feel and do in terms of the tasks they perform, their ways of working and the relationships they have with each other (Prince 1987).

3. Data feedback to the client group

Occurs after the OD practitioner has drawn together all the key pieces of information to identify the common themes, and presented back the findings whilst

protecting confidentiality, particularly after one-to-one interviews.

4. Exploration of data by the client group

A facilitated discussion with the group, often exploring the themes in more detail and applying closer examination as to why an issue has arisen. An opportunity to hear what others think and to give feedback if they think the OD practitioner has inaccurately captured their thoughts, feelings and ideas, so having ownership of the feedback.

5. Joint action planning by the client group

Requires the OD practitioner to encourage creative thinking techniques to generate potential solutions to the problems. Aimed at gaining the group's commitment to the changes, and to the methods used in its implementation.

6. Implement the change

Introducing and making the changes, often led by the OD practitioner in collaboration with members of the client group.

7. Assess the change

As with the evaluation stage of Burke's model, assesses if the change has been achieved and determining its impact. Where hard objectives and quantifiable performance measures exist it is more straightforward, but softer less tangible objectives such as behavioural or cultural change this can be harder to quantify and may require further surveys, focus groups

or interviews, or reviewing staff satisfaction and retention.

8. Feedback to the client group

Focusing on what has been achieved, and what else needs to be done to ensure it becomes engrained in the organisational culture, Further input from the group can determine how to do this and could require the cycle to start again.

Burke's 7 Phase Model

OD activities are sometimes called interventions and may require management as a project, or part of programme of projects. Key to success from the outset is clarity on its purpose and extent, and support for its implementation. Burke (1994) described a successful OD programme consisting of 7 phases which unfold over time, and to be successful, each phase needs to be effectively executed (French and Bell (1999). In summary, these phases are:

1. **Entry** – the initial contact between OD practitioner and the client commissioning the work.
2. **Contracting** – clarifying what each party expects in terms of key deliverables, outcomes, timescales, available resources and budget.
3. **Diagnosis** – gathering of information and analysis to identify key themes and establish the required intervention.

4. **Feedback** – providing feedback on the diagnosis and exploring the analysis with the client to seek further clarification from the client perspective.

5. **Planning change** – discussing options and interventions in partnership with the client to bring about the desired change, so the client fully owns the solution going forward.

6. **Intervention** – execution and completion of the activities as set out in the plan.

7. **Evaluation** – assessing the effectiveness of the intervention, and its success in meeting the desired outcomes set out in the contracting stage such as enhancing performance, increasing patient satisfaction or changing staff behaviours.

The following table details the 7 phases, actions at each stage and some prompt questions to use when meeting with the client or to ask yourself as the OD lead on the project.

the key to success from
the outset is clarity

Phase

Actions

Some prompt questions

1. Entry - The initial contact between the OD practitioner and the client.

Use open questions to establish context - what the team does, their challenges, presenting problems or need for innovation.

At this stage you may wish to suggest ideas at a high level in terms of what you could provide to help move issues forward or develop more creative ways of working. In determining the parameters of the brief it is vital to agree the level where improvement is required, if you have consent to try something new or different, and what your initial actions.

This stage is important to build your credibility with the client and start to gain their trust.

- What is the aim of the OD intervention and desired outcomes?
- Where do you feel the issues lie?
- What is working well at the moment that we could build upon?
- What leadership support will be given to the intervention?
- Is there a common understanding amongst stakeholders why the OD intervention is required or is further communication work needed?
- How have people been consulted and involved so far? How should this continue in the future?
- What assumptions are being made? What would the impact be if these change during the work?
- What do all those affected already know and what are the ongoing communication plans?
- How will links be made to the overall strategy and other stakeholders working on interdependent OD activities?
- What is the best way to provide feedback on progress?
- What would success look like to you?

2. Contracting - Establishing mutual expectations and clarifying key deliverables, outcomes, timescales, available resources and budget.

Draw up terms of reference document or project plan, which clearly sets out your commitment in delivering and implementing the intervention, and how you will diagnose the issues.

Set out your timescales, what is in scope, what you will be providing and what you expect your client to provide - for example if you need a staff survey, your client will need to commit to facilitating the time for its completion. This is key as your client's focus may be on the problem itself, their expectations can change as a result of your work, and it helps to prevent surprises and ensure shared understanding.

You should provide your plan to the client in draft, and seek feedback prior to sign-off.

- Who will project manage this piece of work?
- What are the key actions and detailed deliverables?
- What are the timescales?
- What is the budget for internal and external resources, time as well as money?
- What are the risks associated with the activity and can these be mitigated?
- What are the constraints around the scope of the work?
- Who will be responsible for overall communication and the role of HR/L&D/OD/other teams involved?
- How will performance ownership be established, and performance managed?
- What evaluation will take place and who will manage this?
- Who will set up any necessary administration and logistics for delivery?

Phase

Actions

Some prompt questions

3. Diagnosis -

Fact-finding through the gathering of information and subsequent analysis, drawing together key themes and highlighting areas requiring intervention.

Diagnosis can take many different forms;

- desk top research, for example review of staff surveys,
- Interviews on a one-to-one basis with key team members
- Focus groups, to collect team views
- Observations
- Questionnaires
- Process mapping
- Benchmarking exercises against other teams/organisations
- Review of literature and best practice, or using knowledge management to identify lessons learnt from past

What will be the communication process for:

- explaining why the research is being done?
- gaining commitment to support the research?
- engaging with the research?
- feedback to those involved the outcome of the research and next steps?
- How have staff responded to focus groups, questionnaires, interviews in the past? Which method do you think would work best with your team?
- What data is available that I might find useful? How can I get hold of this?
- Who else would like to be involved in this stage?
- Who do you think I need to meet, interview, involve in this stage?

4. Feedback -

Providing feedback on Diagnosis and exploring the analysis with the client to seek further clarification from their perspective.

Feedback should be continuous throughout the project whether update reports, regular briefings or more informally through catch up conversations or e mails. Ideally the client should never chase for information.

Initial feedback should include an analysis of what the data says (both quantitative and qualitative), and your understanding of the problem. You may be working on sensitive issues, and it is important to phrase feedback in a way that avoids criticism of your client or their team.

When providing ongoing feedback, progress updates should include how the intervention is being received on the ground, and any further changes needed based on feedback and experience.

- How would you like to be kept informed of progress?
- Who needs to receive what information, when and in what format?
- How will the feedback be used to inform the final decisions?
- How and when will the decisions on the design phase be taken? Who needs to be involved at each stage of the feedback and decision making?
- How will knowledge and learning be cascaded to relevant groups of staff?

Phase

Actions

Some prompt questions

5. Planning

change - Based on Feedback, this stage is about discussing options and interventions to bring about the desired change, in partnership with the client.

Building on the feedback section, you put forward your recommended options, their benefits and disadvantages, and the implications of implementing your preferred intervention.

Open questions to the client will establish the feasibility of the options from their perspective, and how committed they are to your recommendations. You should ask for their feedback and suggestions so they feel able to influence the options you are presenting, as their ownership of the solution is vital.

The types of interventions you recommend will depend upon who your stakeholders are, the degree of urgency, the organisation's culture, the parts of the system that need to be impacted and the types of staff involved. The intervention selected at this stage will depend on levels of organisational readiness - some organisations embrace innovation and radical change, whereas others prefer smaller incremental steps.

- Do the proposals at this stage reflect the brief's requirements?
- Who is responsible for design of the OD intervention and activities and its sign-off?
- Who will form the project team and what will be their roles?
- What budget considerations have to be taken into account?
- Who will select the people, technology or support needed?
- Will new working patterns or travel impact on planning delivery?
- Who will manage & monitor any nominations processes?
- How many deliverers are needed?
- How will consistency and quality of delivery be developed and maintained?
- What metrics and measures should be tracked and fed into the strategic reporting processes?
- Will these detailed plans meet the original brief?

6. Intervention

- The execution and completion of the activities as set out in the plan.

The implementation of the intervention can be complex especially when the project is at a strategic level.

Development of a project plan would be useful, setting out all of the actions you need to take, as project management skills will be needed throughout the implementation stage.

Interventions vary from running a training course, redesigning processes, to whole system change.

If learning, development or group activities are to be delivered:

- How will the learning be delivered? Blended learning: what mix?
- How will content be scoped, designed and delivered? What are the resource implications of these choices?
- What will be the maximum number of participants for anything undertaken face to face, and what support may be needed?
- What feedback is required, and how does this link to expected success measures?
- How will any pilot be managed and reviewed?
- Who will manage ongoing feedback, and its impact on design and delivery?
- Who will assess suitability of existing and new resources to be used? What does evaluation of existing resources tell us?
- What support will deliverers (facilitators, trainers and others e.g. HR) need? How many will be involved and who will manage quality in delivery?

Phase

Actions

Some prompt questions

7. Evaluation - Assessing the effectiveness of the intervention, in terms of its success in meeting the desired outcomes as set out in the contracting stage.

The best way to evaluate whether you have met the original aims is to present a report back to the client, detailing successes and highlighting any further actions that are required to achieve the final objectives.

You may wish to detail what you have delivered in terms of products - for example a new appraisal process, a training course, a team event. You will also want to talk about the impact this intervention has had, such as feedback received from those affected by the change, such as for example feedback from training evaluation, or from a pilot area.

The questions that guide evaluation should have been asked at the outset. By the evaluation stage there will have already been significant learning, and it is vital to reference what has been agreed around evaluation.

- To what extent were the desired outcomes achieved?
- What evidence is there of success factors?
- What unexpected feedback has been received?
- How does this feedback need to be communicated, and built into other OD activities?
- Would this type of OD activity be undertaken again, and why?
- How will the learning and knowledge gained from the OD intervention be captured, shared and embedded in other OD activities?

Additional links or tools you have found helpful

2.3 Practical Tips

This section of the Toolkit includes a lot of information, and before applying models ask your colleagues what has worked best for them and why. This will guide you in making your choices and in what you recommend to others as an OD Practitioner, as a model or approach which worked well in one setting may not be equally as effective in another.

Some colleagues may find the information too theoretical and difficult to apply, so try to think about the key messages and consider all parts of an organisation - people, process and procedures - when identifying where issues lie and what solutions will bring about improvements.

There is specific language associated with these models which can appear as jargon to many people. Therefore, as with all good communication, take care with selecting which messages would be of most interest to your audience and consider carefully how to position those.

In summary, to use the information in this section, remember:

- All OD activity starts with awareness of the extent of your role in bringing about change or improvement, and gaining a genuine understanding of the issue from the client's perspective.
- Always take time to understand the model or approach you are considering, its pros and cons. No single model is perfect, and a combination of several approaches can elicit vital information you need when scoping out an issue.
- Use the information to provide a framework, or a prompt list of areas to consider when fact-finding or developing a solution.
- Ensure you fully understand and can articulate the underpinning ideas and theories for your chosen recommendations.
- Use a model or approach when recommending your proposed solutions and the areas you hope to address - it will contextualise it for the client and highlight where further energies need to be directed.
- Be aware that changes to one aspect of the organisation may have a knock-on effect to other aspects, and ensure you always step back and reflect on the wider ramifications of your recommendations.

2.4 Links and Resources

Background to OD

www.cipd.co.uk/hr-resources/factsheets/organisation-development.aspx

French, W. and Bell, C. (1999) **Organization Development: Behavior Science Interventions for Organization Improvement**, Wendell

Cheung-Judge, M. & Holbeche, L. (2011) *Organisational Development: A Practitioner's Guide for OD and HR*, Kogan Page

Theories of Motivation

www.businessballs.com

Adair, J. (1990) *Leadership and Motivation, The fifty-fifty rule and the eight key principles of motivating others*. Talbot Adair Press

Organisational Culture

Schein Cultural Iceberg

<http://agents2change.typepad.com/blog4/2012/01/examining-culture-6-thats-just-the-tip-of-the-iceberg.html>

For information on Deal and Kennedy (1982) - 4 Different Types of Organisations Mind Tools holds information www.mindtools.com

Hofstede (1980) – Cultural Dimensions Theory <http://geert-hofstede.com/organisational-culture.html> and www.mindtools.com

Handy (1972) – Relationship between organisational structure and its culture, Handy identified 4 different types of organisational culture

<http://www.managementstudyguide.com/charles-handy-model.htm>

Change Management

Bridges, W. (1995) *Managing Transitions, Making the Most of Change*. Nicholas Brealey Publishing

Kotter's 8 Steps to Managing Change can be found in Kotter, John P (1995) *Leading Change*. Harvard Business School Press

Prosci (1998) *ADKAR Employee Models of Behaviour*

<http://www.change-management.com/tutorials.htm>

Lewin, K. (1951) *Field Theory in Social Science*. Harper and Row

McKinsey 7Ss Model

www.mindtools.com

Thomas, M. (2003) *High Performance Consulting Skills: The Internal Consultant's Guide to Value-added Performance*, Thorogood

McKinsey Updates www.mckinseyquarterly.com is an online business journal of Business Management Strategy articles

The Six Box Model

<http://www.marvinweisbord.com/index.php/six-box-model/>

Organisational Diagnosis Questionnaire (ODQ)

<http://g-rap.org/docs/ICB/Preziosi%20-%20Organ.%20Diagnosis%20Questionnaire%20ODQ.pdf>

Burke Litwin Model of Organisational Change

Burke, W.W. & Litwin, J.H. (1992) *A Causal Model of Organisation, Performance and Change*. *Journal of Management*, 18 (3), pp. 523-545

Action Research Model

Senior, B. and Flemming, J. (1999) *Organisational Change*, Financial Times/ Prentice Hall; 3 edition





3. Skills & Capabilities

As with definitions of OD itself, the activities which involve an OD practitioner can also be very diverse, requiring a wide range of skills and capabilities to carry out the role effectively.

This section of the Toolkit will look at:

Working in OD – the range of roles, responsibilities and tasks undertaken by OD practitioners on a day-to-day basis.

OD Core Competencies – the expected competencies of an OD practitioner as set out in the North West Leadership Academy OD Practitioner Competency Framework, including various developmental remedies and advice on how to progress and advance.

Leadership and OD – exploring the significant links between OD and leadership, and how effective leaders work in line with OD principles and practices. In addition we look at how OD practitioners can apply leadership skills and abilities to be effective.

The 6 Core Competencies

1. **Understanding Organisational Context**
2. **Building Impactful Relationships**
3. **Evidence-based Improvement**
4. **Professional Effectiveness**
5. **Business Focus**
6. **Leading, Enabling and Sustaining**

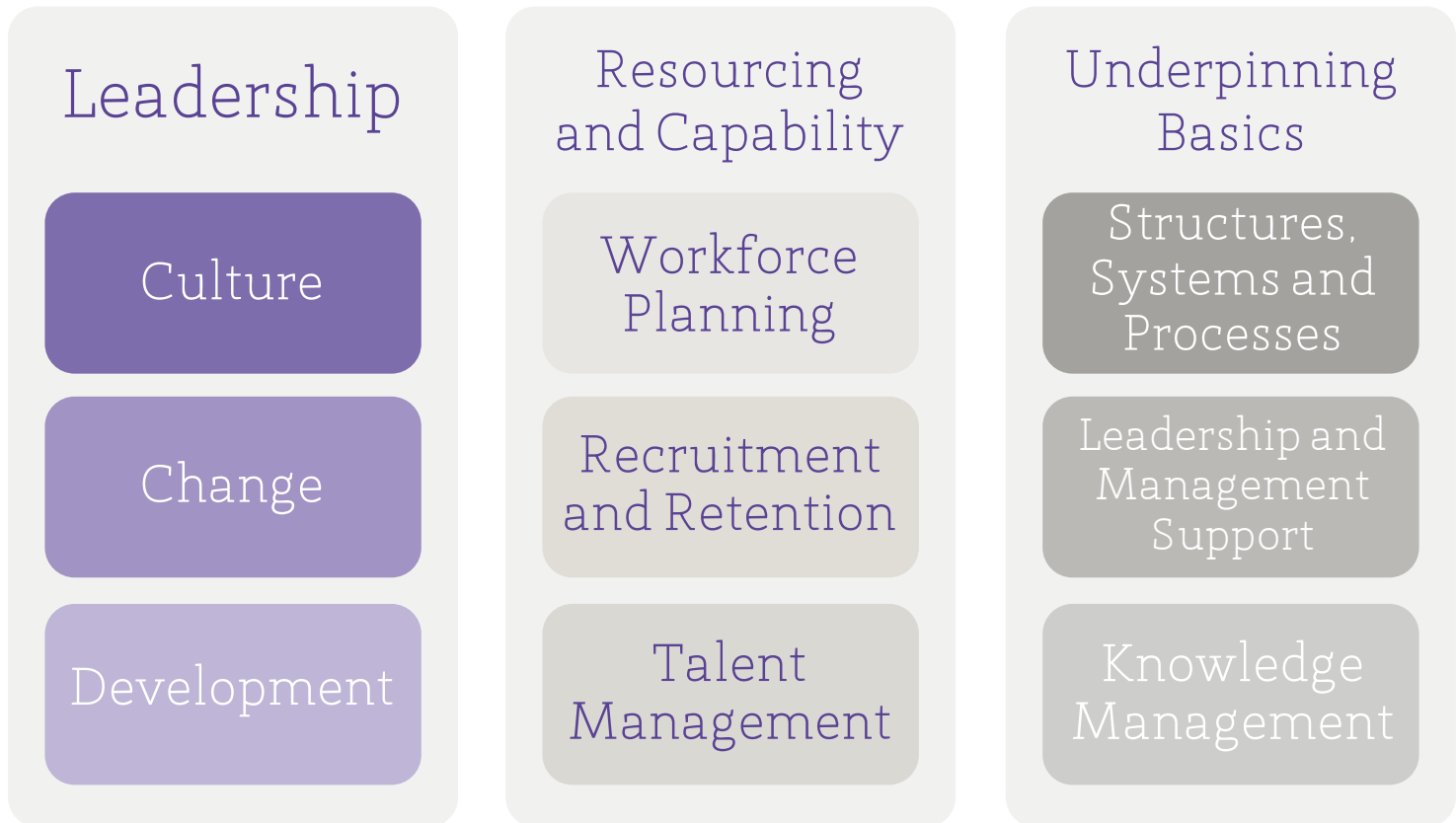


3.1 Working in OD

If you ask an OD practitioner to describe 'a typical day', their likely response would be that they don't exist!

OD practitioners work in many different guises, cover a wide breadth of work and have a

range of job titles. Below is a diagram which depicts some of the areas of work an OD professional may find themselves involved in:





Depending on your role and organisation, you may be involved in some or all of these areas. You will know if you are working in an organisation which has fully embraced the benefits of OD if your work covers a range of these areas rather than just one or two. If not you might want to consider wider promotion of the benefits of OD, the value it could bring and how an OD approach can bring about real improvement and innovation.

Using core elements of OD, below are some typical roles and responsibilities a practitioner may undertake, although this list is by no means exhaustive!

Leadership

Culture

- Diagnosis
- Consultation & influence

Change

- Competency framework
- Process development
- Communication

Development

- Design & deliver programmes
- Analysis
- Evaluation



Leadership

Culture

Diagnosis – OD practitioners are often required to help diagnose the culture – examples might be organisational values, both espoused and lived, organisationally desired and actual behaviours, ‘presenteeism’, ‘hierarchical’ or ‘macho’ cultures – often by reviewing data such as staff satisfaction surveys, developing their own questionnaires, running focus groups and reviewing other metrics such as patient satisfaction levels or complaints.

In addition, the OD practitioner might gain an understanding of contributing factors, such as how leaders model certain behaviours, the systems/processes in place and the stories that are told around the organisation all of which influence the culture. The OD practitioner’s job is about looking at how they can shape the culture to bring about positive changes for patients, service users staff, and stakeholders.

Culture change does not happen overnight, it evolves over time as a result of many other changes in the organisation. Time spent with managers to ensure that values and behaviours are understood and that their behaviours reflect the expectations of the organisation at all times.

Consultation & influence – For OD practitioners the requirement to be able to influence without authority is crucial and this entails the ability to consult widely. Certain characteristics are essential here, being able to build a rapport with people

and gain credibility quickly. Listening to the perspective of others and being able to see the world through their lens is key. As is having an awareness of and using both formal and informal networks, finding allies and champions within those networks, to build forums for consultation and increased momentum for change.

Change

Competency framework – Due to the nature of OD, practitioners are often involved with managing and influencing organisational change. As an example, consider the development of a competency framework to help staff clearly understand what is expected of them within their roles. To achieve this the OD practitioner would establish the core elements of a role, potentially completing a ‘critical incident technique’ – whereby a range of staff including managers are interviewed to find the core skills, attributes and behaviours that should be applied in a set of given situations. Focus groups might then be conducted with staff to obtain further detail with role holders validating and developing the information gathered.

The competency framework would then be written, maintaining consultations with core staff throughout to ensure the framework is both meaningful and user-friendly.

The final stage of developing a competency framework is where change management skills come into play. People need to use the competency framework, incorporate it into their processes - for example

recruitment or appraisal - and ultimately to work in line with the behaviours as set out in the framework. This can mean significant adjustment and behavioural change for some staff, and this is often the hardest type of change to achieve.

Process Development – OD practitioners have a clear understanding of the many models of change process some of which are described in this toolkit. OD practitioners use this knowledge to address the more complex aspects of change those being the psychosocial dimensions entailed within any change process.

Communication – The OD practitioner will need to use their communication skills to raise awareness that the framework exists, and to persuade and influence in selling the benefits of using it. They may then need to advise and help implement changing processes, guide managers and staff on its use, as well as monitoring and evaluating the effectiveness of the framework in bringing about positive behavioural change.

Development

Design & deliver programmes – So far, this Toolkit might give the impression that much of the OD practitioner’s role is research, with emphasis on diagnosis, evaluation and report writing. Whilst these elements do play an important part, most OD practitioners find themselves rolling their sleeves up and getting directly involved in the delivery of interventions, certainly when development is needed. For example, facilitation, master classes, focus



groups, coaching and mentoring. OD practitioners are often involved in the design and delivery of leadership programmes - the practitioner will often have completed a scoping and diagnostic exercise prior to the design and delivery of a leadership programme, identifying specific diagnostic development required to enhance leadership skills. Many OD practitioners have advanced facilitation skills and/or educational qualifications and are able to deliver programmes in conjunction with specialist trainers.

Analysis – The OD practitioner may have completed a specific training/learning needs analysis to fully understand where the skills gaps lie, as well as establishing a baseline of current levels of knowledge and skills. The practitioner will then design the programme, ensuring at each stage that the content and delivery methods will bring about the desired changes and deliver a return on investment.

Evaluation – On the programme's completion the OD practitioner will undertake a training evaluation to measure whether its objectives have been met and that programme had made a tangible difference.

Resourcing and Capability

Workforce Planning

- Analysis and Identification
- Future Proofing
- Commissioning and Procurement

Recruitment and Retention

- Robust selection & Induction
- Reward & recognition schemes
- Appraisals & Employee Engagement

Talent Management

- Recognising talent
- Recording talent
- Promoting and diffusing talent
- Skills and development



Resourcing and Capability

Workforce Planning

Analysis and Identification – Workforce planning requires OD practitioners to work alongside HR colleagues and service managers to systematically analyse the type, capacity, knowledge base, desired work experience and overall capability of the workforce required, and to then identify the steps to get the right number of right people in the right place at the right time.

Future Proofing – This requires the OD practitioner to fully understand the size, shape, age profile and overall demography of its workforce, and the way in which the workforce reflects the diversity of its local population and its ability to meet its future healthcare, health and well-being needs, wishes and aspirations. This requires the OD practitioner to understand population trends, and locally produced joint health needs assessments.

Commissioning and Procurement – OD practitioners working within large complex organisations and or at regional and sub-regional levels need to understand the processes for commissioning and procuring education and training programmes, using differing delivery models and methodologies. In addition, they are required to understand the timescales, funding flows and legalities associated with those processes, be they in higher or further education institutions, the public, voluntary or commercial sectors.

Recruitment and Retention

Robust selection and Induction – Many OD practitioners are trained in psychometric testing and have a background in recruitment or psychology. In conjunction with HR, the OD team will often be required to design and run assessment centres as part of selection processes for certain roles.

OD practitioners can work with the recruiting manager to determine the potential benefits of using an assessment centre and the criteria against which the prospective candidates are assessed, for example the NHS Leadership Framework. They would also train the observers involved in assessing candidate performance, as well as determining what exercises would give a realistic preview of the required skills, behaviours and attributes to be effective in the role - if the role required leadership and team-working it may involve a group discussion activity, or if it required report-writing or presentation skills, it may be beneficial to include this activity. The aim of the centre is to develop a robust selection procedure which enables a candidate to be assessed whilst carrying out similar activities to those required in the role.


In addition, induction is a vital part of recruitment and retention. All OD practitioners know that an effective induction builds both higher and longer lasting levels of motivation amongst employees. OD practitioners often design induction entitlements for new employees and play a key part in supporting the value-

based and behavioural aspects of these inductions. As with any organisational process OD practitioners will be involved in the evaluation of the effectiveness of the induction of employees.

Reward & recognition schemes – OD practitioners can also develop staff reward and recognition schemes to celebrate and acknowledge outstanding work. Guiding senior managers on suitable award categories will in turn help to influence the culture of the organisation, as having awards for say teamwork, leadership, or providing exceptional patient care, sends signals to staff that these are the behaviours which the organisation values. In addition, by showcasing the work in these areas, staff are likely to be motivated to produce further outstanding work.

Appraisals & Employee engagement – Retaining staff commitment, skills, knowledge, productivity and positive working relationships is essential to organisational success.

Employee involvement and engagement strategies, tools and techniques - such as regular and valued one-to-one meetings, appraisals, feedback on work performance, surveys, focus groups, suggestion boxes, newsletters, thanks and celebration events, team and whole service time outs - all create opportunities to ensure the employee voice is heard. They enable the organisation to more fully harness the ideas, creativity and innovation that exists within the workforce for the benefit of patients, service users, carers and fellow colleagues.



Analysis of exit interview data is important in establishing why areas of the organisation have low staff retention levels, and OD practitioners can use this data to explore how improvements might be made to increase job satisfaction and improve retention.

Talent Management

Recognising talent – OD practitioners, as agents of organisational change and enablement, are often involved in identifying particularly talented individuals and ensuring those talents are recognised and utilised effectively. In this way OD Practitioners can contribute to addressing the recruitment of future leaders, creating a more diverse and inclusive workforce, reduce the costs of both recruitment and retention, and harness and diffuse talent more efficiently and effectively throughout the organisation or system.

Recording talent – OD practitioners, alongside their HR colleagues and senior leaders, are required to work together to record where talent sits within the organisation as accurately as possible. This

promotes a more effective approach to succession planning, identifying those individuals ready to take the next step in their careers either immediately, within 1-3 years, 3-5 years, or who might benefit from job rotation or stretch assignment. In addition it identifies those individuals with talent who are happy and remain highly motivated to continue their current role and on whom the organisation may crucially rely on to do so.

Promoting and diffusing talent – Having identified and recorded talent the OD practitioner is now more able, as is the organisation, to use that talent across boundaries, systems and services for the benefit of patients, services users, carers and employees. In addition they may be developed as mentors for emerging leaders, new entrants to the profession and both internal and external coaches, working on organisational, system and on occasion, national platforms.

Skills and Development – In addition to spotting particular talent, a core role of the OD practitioner involves taking a holistic view and considering how all organisational processes, procedures, behaviours are aligned and integrated, seeing OD as a common thread which helps to intertwine all elements of organisational life.

For example, it is key that an organisation's values are fully embedded in its fabric, rather than simply existing in a standalone document. As well as helping design these values, the OD practitioner can look at their incorporation into other processes, such as their communication in induction training, how managers welcome new staff, and how to ensure staff are aware of their direct relevance to expectations around actions and behaviours.





Underpinning Basics

Structures and Processes

- Identification
- Analysis and evaluation

Leadership and Management Support

- Coaching & support
- Consultation & engagement

Knowledge Management

- Data intelligence
- Research
- Policy development
- Planning

Underpinning Basics

Structures and Processes

Identification - OD practitioners, alongside their colleagues in HR and performance, are responsible for the identification of structures, systems and processes that will enable the achievement of organisational objectives within given timescales. This process begins with the identification of the organisation vision, mission, deliverables and expected outcomes. Any such structures, systems or process should be aligned to the organisation vision and one of the key roles of an OD practitioner is to enable all employees to understand how their role contributes to the achievement of that vision. In short, all employees have a line of


sight between their individual objectives and those of the organisation.

Analysis and evaluation - All structures, systems and processes, once implemented, can be analysed in terms of factors including their efficiency, effectiveness, overall impact, financial viability, future desirability and fitness for purpose. It is the role of the OD practitioner to undertake an analysis and evaluation of all of those factors listed above using the tools and techniques identified within this document, such as SWAT analysis, LEAN thinking, 7S framework etc.

Leadership and Management Support

Coaching and support - OD practitioners

are regularly called upon to provide advice and support in a wide range of contexts, using their coaching skills to help managers follow the best course of action for their circumstances. This can involve coaching managers to undertake challenging conversations around performance, dealing with conflict or relationship difficulties, or building greater team cohesion, to name just a few scenarios. An OD practitioner might provide advice around identifying learning and development needs – this could be through one-to-one sessions or by group facilitation sessions with key individuals, using 360 degree feedback mechanisms to identify strengths, areas for development, and advising how to meet specific development needs.



Consultation and engagement - A specific example of how OD practitioners might be involved with consultation and engagement might be advising managers around stress audit results – if results have indicated some high stress risk areas, the OD practitioner's role will be to work with Occupational Health and the management team to establish why staff may be finding aspects of their work stressful and to develop solutions to improve working conditions. This can involve running consultation and engagement sessions with staff to explore their views and creative thinking exercises about making potential improvements.

Knowledge Management

Knowledge management (KM) is vital to a knowledge-based organisation and underpins the operations of an organisation and as such should:

- Inform policy and decision making processes and contribute to the learning culture within the organisation.
- Support individual learning as an integral pillar of a learning organisation with people working collaboratively to share knowledge across the organisation before, during and after projects or interventions.
- Capture knowledge from individuals for easy, timely and meaningful access by others.
- Support working internally and externally

Data intelligence - The OD practitioner's role in gathering data from a wide range of sources including just some of the following:-

- Learning from peers - peer assists are a technique to learn early on in the 'doing' phase, such as a project design meeting
- Learning whilst doing – time for reflection, learning from the last event so that it can be applied to the next
- Learning after doing – at the end of the project review what went well and what could have been done differently
- Finding the right people – know who to ask and have the ability to reach them easily
- Networking and communities of practice (Cops) – people with common interests or disciplines from networks or communities to share their knowhow
- Capturing Knowledge – find a way to capture what has been learned in order that it can be reused by others, sometimes immediately or at a later date
- Embedding it in the Organisation – being prepared to let go, allowing it to become an unconscious competence so that KM is embedded in the core business processes
- Evaluation – being able to measure the effectiveness of KM to the organisation

Research - In addition to those arenas for learning identified above OD practitioners need to gather, analyse and make full use of both hard and softer intelligence gathered through consultation and research mechanisms. This could be

gathered from within the organisation or via more widespread research maybe at a regional, national and international level.

Policy Development and Planning – Using a broad base of data and intelligence enables OD practitioners to more appropriately develop effective and successful policies, plans and practice.

Information – OD practitioners can utilise HR or workforce information when conducting a root cause analysis, identifying apparent trends and themes, or in guiding decision-making. This could include sickness absence intelligence, retention rates and benchmarking information from other organisations of a similar makeup.



3.2 Core Competencies

Having looked at the 'what' an OD practitioner's role and responsibilities may involve, this section will consider the 'how' by examining the relevant skills, knowledge and behaviours required to effectively deliver against the wide range of goals encompassed by the role.

To provide just an overview of what a good OD practitioner might need:

- well developed consultancy skills
- strong organisational and political awareness and understanding
- change management experience and advanced transformational leadership skills
- strong project management expertise
- ability to manage service level agreements
- to be reflective, analytical and evaluative
- to be creative and solution-focused
- advanced facilitation skills
- strong interpersonal and communication skills for challenging conversations, giving sensitive feedback, being supportive, negotiating and influencing and able to market the benefits of an OD approach
- to be emotionally intelligent, read unspoken cues and emotions and moderate own behaviour accordingly
- to apply coaching and mentoring skills to a range of situations and individuals
- to be professional, authentic and act as a role model at all times
- to deliver results and be outcome-focused.

The North West Leadership Academy OD Practitioner Competency Framework

Success as an OD practitioner, like other areas of expertise, requires specific capabilities and to determine what these look like, the North West Leadership Academy, in partnership with a consultancy called OPP, carried out a collaborative exercise with colleagues from all levels across the region. Based on feedback, OPP developed the following OD Practitioner Competency framework to support, enable, identify, recruit or commission OD activity and intervention.

The 6 areas of the OD Practitioner Competency Framework are:

1. Understanding Organisational Context

Shows a clear understanding of the organisation, its activities and structures. Takes this into account during planning and delivery.

2. Building Impactful Relationships

Proactively seeks to engage with key stakeholders to gain their buy-in and support. Uses compelling and clear arguments to influence and convince others.

3. Evidence Based Improvement

Develops OD solutions and approaches based on a thorough analysis of the issues. Drafts and implements plans to achieve agreed outcomes.

4. Professional Effectiveness

Applies professional OD tools and techniques to transform the business. Seeks to enhance individual, team and organisational capability through OD.

5. Business focus

Supports the development of business awareness in the organisation. Develops an understanding of the organisation's position in the healthcare market place and the commercial challenges it faces.

6. Leading, enabling and sustaining

Inspires enthusiasm and belief in others, articulating and sharing a vision. Enables others to bring about and sustain improvements in service delivery.



The framework is set at three levels as depicted below, Level 1 aimed towards more senior OD practitioners who are operating at a strategic level, whilst Level 3 is aimed at staff who have a broader or more junior role. Within organisations the numbers of OD practitioners will vary, with most operating at Level 3, fewer at level 2 and potentially only one individual operating at the strategic Level 1. In addition to seniority, the level at which the practitioner is functioning may also depend upon their own development needs, the organisation's OD requirement, and the development resources available to help individuals to progress.





The Structure of the OD Practitioner Competency Framework

Each competency consists of an overarching description with the desirable skills, knowledge, behaviours and actions listed under each of the three role levels.

Developmental hints and tips are provided for each competency to help you identify potential remedies to develop your capability and move up the levels. All development activities should be planned and reviewed with a line manager, coach, or mentor, as appropriate.

1. Understanding Organisational Context - Shows a clear understanding of the organisation, its activities and structures. Takes this into account during planning and delivery.

Level 3

Awareness

1. Shows awareness of organisational issues that may impact their projects.
2. Alert to the impact of the historical context of initiatives.
3. Notes the views and preferences of key individuals and groups and seeks to influence beyond accountability. Is aware of political factors when developing and delivering projects.
4. Aware of links with other initiatives and draws these to the attention of others.
5. Develops and maintains a local network to share learning and ideas.

Level 2

Scan

1. Scans the horizon for issues and opportunities that impact the achievement of organisational goals and draws these to the attention of senior management.
2. Aware of the context of issues, including their history. Aware how others in NHS NW are dealing with issues.
3. Clarifies the influence and motivations of key individuals and groups, considering political factors
4. Seeks links with other initiatives that may impact current or future activities.
5. Develops and maintains a network across the region to share learning and ideas.

Level 1

Seek

1. Actively seeks to identify emerging and future issues that have implications for OD work streams.
2. Sets the organisation in context using internal and external reference points.
3. Shows political astuteness, shaping the strategy to take account of the influence and motivations of key individuals and groups.
4. Recognises which other initiatives need to be linked to current or future OD work streams. Recognises opportunities for and challenges to transformational change and champions OD's role in making a difference
5. Develops and maintains a network within and across regions to share learning and ideas.






Developmental Hints and Tips

- Read key documents - Annual Report, Board minutes, press releases, newsletters, staff bulletins, Department of Health publications - to increase your awareness of internal and external priorities and drivers.
 - Speak to key influencers with historical knowledge of the organisation. Find out how this has influenced decisions and contributed to where the organisation is now. Use reflective practice and mentoring to explore, understand and articulate the issues.
 - Use psychometric tools to understand different preferences and motivations, and how these may influence your responses to different situations and decision making.
 - Consider using a coach to help articulate development needs, build networks in this area and put in place a development plan.
 - Seek out those with a proven track record in OD and ask for their support and involvement in developing capability, by shadowing, mentoring, coaching or offering the opportunity to reflect ideas and best practice.
- Look for opportunities to explain and advance the understanding of the role of OD.
 - Complete the NHS Leadership Framework 360 degree feedback tool to identify your strengths and areas for further development
 - Consult with key stakeholders to find out what their challenges are when designing an OD Strategy to ensure your proposed interventions will address key priorities
 - Consult with peers in other organisations; find out what their challenges and priorities are. Seek to share knowledge, experience and best practice

gain a clear understanding
of your organisation, its
activities and structures





2. Building Impactful Relationships - Proactively seeks to engage with key stakeholders to gain their buy-in and support. Uses compelling and clear arguments to influence and convince others.

Level 3

Awareness of Own Impact

1. Knows who the stakeholders and customers are, their views of the issues and their levers.
2. Seeks input and ideas from stakeholders and customers.
3. Monitors stakeholder views and reports these to OD colleagues and managers.
4. Asks key questions to challenge thinking and assumptions.
5. Communicates confidently, clearly and succinctly using appropriate methods and language, avoiding jargon.
6. Aware of impact on others and adapts style accordingly.
7. Gives consistent messages and thinks of creative ways to sustain key messages over time.

Level 2

Seeks to Influence

1. Works with stakeholders to maintain buy-in and support in line with agreed stakeholder management plan.
2. Engages with stakeholders to inform, influence, persuade and gather ideas.
3. Monitors stakeholder views and shares these with OD colleagues and managers.
4. Asks key questions to challenge thinking and assumptions.
5. Communicates confidently, clearly and succinctly using appropriate methods and language; avoids jargon.
6. Aware of impact on others and adapts style accordingly.
7. Thinks of creative ways to sustain key messages over time. Develops arguments based on the evidence and linked to key business objectives.
8. Identifies champions and builds alliances.

Level 1

Engages and Negotiates

1. Works with stakeholders to maintain buy-in and support in line with agreed stakeholder management plan.
2. Ensures the development of clear stakeholder management plan based on views, preferences and influence.
3. Confidently engages stakeholders to prepare the way, anticipating positions and arguments.
4. Asks key questions to challenge thinking and assumptions.
5. Chooses the appropriate language, style and methods of communication to get the message across and achieve the desired outcomes.
6. Aware of impact on others and adapts style accordingly.
7. Develops powerful arguments based on evidence to persuade, influence and position stakeholders. Communicates stakeholder positions and ways of working with them to the team to ensure a consistent approach.
8. Identifies champions from various organisations and builds alliances.




Developmental Hints and Tips

- Evaluate the effectiveness of an OD intervention, ask your key stakeholders for feedback on work and what could be improved. Identify what the success factors were and the actions you could take in the future when carrying out similar activities to have a greater positive impact.
- Seek to shadow (from inception to conclusion and review) an OD project lead to understand the types of influencing and negotiating that occurs in and out of meetings, in groups and on an individual basis. As OD activities vary greatly in complexity, this development suggestion can be tailored to suit any level of skill and competence.
- Use psychometric tools to understand different styles (interpersonal and, for example, when negotiating) and working preferences and how these may influence your responses to different people and decision-making.
- Understand negotiating models and individual negotiating preferences. Build development of negotiating skills into development plans. Engage in negotiations as appropriate to skill level and role.

engage with key stakeholders
to gain buy-in and support





3. Evidence Based Improvement - Develops OD solutions and approaches based on a thorough analysis of the issues. Drafts and implements plans to achieve agreed outcomes.

Level 3

Gathers and Drafts

1. Gathers information in a systematic way to inform design of development interventions.
2. Identifies key trends or opportunities and feeds these into the OD team.
3. Adapts delivery to take account of changing priorities and feedback.
4. Efficiently manages resources to achieve deliverables
5. Continuously evaluates initiatives to improve effectiveness of approaches.
6. Drafts and coordinates effective delivery timetables.

Level 2

Identifies and Evaluates

1. Gathers information in a systematic way, ensuring all relevant sources are consulted.
2. Identifies key issues and links within data and draws insightful conclusions.
3. Evaluates alternative options when recommending a way forward.
4. Manages resources efficiently and effectively.
5. Develops appropriate plans and establishes on-going review and monitoring.
6. Takes account of longer term implications and requirements when recommending approaches.
7. Conducts a thorough and methodical analysis of issues.
8. Adapts plans to take account of changing priorities, considering risks and building in contingencies
9. Designs project interventions to focus on organisational objectives.

Level 1

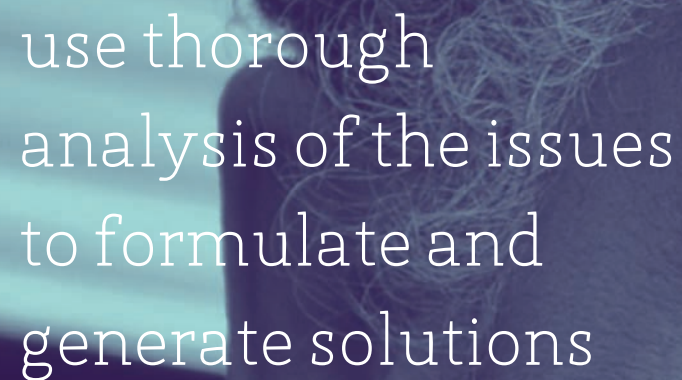
Prioritises and Leads

1. Identifies key management information needs for OD and ensures systems are in place to gather this.
2. Identifies key issues and links within data and draws insightful conclusions.
3. Identifies and prioritises activities based on alignment with the organisation's strategic direction.
4. Secures necessary resources to achieve the OD Plan and manages these efficiently and effectively.
5. Adapts plans to take account of changing priorities and feedback
6. Drafts and maintains an effective OD plan, seeking contributions from the organisation
7. Ensures a thorough and methodical analysis of issues.
8. Identifies risks and ensures these are managed effectively.




Developmental Hints and Tips

- Use your own self-knowledge, previous performance feedback and tools, such as psychometrics, to understand your strengths and development areas for this competency, much of which is based on systems, facts, planning and methodical analysis.
 - Know the management information systems in your organisation. Find out what is measured, how the data is collated, how the data is used and the constraints of the data.
 - Identify those who are considered to be specialists in the gathering, analysis and application of management information and learn from them.
 - Identify those who have strengths in using a methodical and analytical approach to OD activities and consider how to learn from them.
 - Consider your own understanding of continuous improvement and project management. Greater understanding can be achieved through reading, and particularly by applying those techniques.
- Reflect on your own level of comfort with using multiple sources of information, which may conflict, and your skills in analysing the key issues to be able to make informed decisions. Seek advice, support, and development from those with a track record in those areas and supplement this with other development activities such as preparing information for others and getting specific feedback on your performance.
 - Understand the role of risk management in your organisation, how risk is managed in projects and how it is applied to OD activities.



use thorough
analysis of the issues
to formulate and
generate solutions





4. Professional Effectiveness - Applies professional OD tools and techniques to transform the business. Seeks to enhance individual, team and organisational capability through OD.

Level 3

Applies

1. Applies relevant OD tools and techniques when delivering development interventions.
2. Stays abreast of new approaches in design and delivery and uses these to enhance development interventions.
3. Enhances respect for, and acceptance of, OD through professional design and delivery.
4. Maintains a network of appropriate contacts to share best practice and assist on-going professional development.
5. Encourages new thinking to move the organisation forward.
6. Helps individuals and teams to change and perform at a new level.

Level 2

Selects

1. Selects appropriate OD tools and techniques to apply to the task.
2. Stays abreast of developments in OD and seeks to apply these where relevant.
3. Enhances respect for OD through professional behaviour, building credibility and acceptance.
4. Maintains a network of appropriate contacts to share best practice and assist on-going professional development.
5. Increases awareness of OD, its remit and value to the organisation.
6. Focuses on the appropriate level to effect change (e.g. individual, team, organisational).
7. Challenges the status quo where new approaches add value and new thinking is needed.
8. Measures achievement of OD interventions using relevant metrics.

Level 1

Leads and Champions

1. N/A
2. Stays abreast of developments in OD and ensures team does the same.
3. Enhances respect for and use of OD through professional behaviour, building the credibility of the team.
4. Maintains a network of appropriate contacts to share best practice and assist on-going professional development.
5. Champions OD, its remit and value to the organisation at the highest levels.
6. Identifies opportunities for transformation to help the organisation achieve its goals. Shapes service provision by integrating best practice and new ideas from the market
7. Challenges the status quo and assumptions, showing how new approaches could benefit the organisation.
8. Identifies relevant metrics to demonstrate the effectiveness of OD.



Developmental Hints and Tips

- Seek to understand the wide range of OD tools and techniques and how to critically appraise their effectiveness in different situations.
 - Use networking, reading, email alerts, conferences to stay abreast of different trends and learn about new approaches.
 - Challenge the use of familiar, long-established tools and techniques if these have not been selected for use in a considered and rigorous way.
 - Regularly review own networks to ensure they reflect changing needs. Be prepared to leave some, maintain some and join new ones as appropriate.
- When introducing new tools and techniques, research best practice and the learning others have experienced in applying them. Use a dry/practice run to ensure that the process is fully understood and any practicalities can be ironed out before using for the first time.
 - Look outside the NHS to organisations with a track record in using OD tools, as many are used in service improvement and continuous improvement activities. Read press articles, case studies etc. and where practical, see if it is possible to meet people from other organisation to share learning.

utilise tools and techniques to
transform the business



5. **Business focus** - Supports the development of business awareness in the organisation. Develops an understanding of the organisation's position in the Healthcare market place and the commercial challenges it faces.

Level 3

Awareness of Efficiency Issues

1. Seeks ways to enhance the efficient delivery of services.
2. Aware of new commercial opportunities and passes ideas on to managers.
3. Promotes the use of OD solutions, enhancing market reputation.
4. Delivers effectively within time, cost and quality parameters.
5. Shows an awareness of the cost implications of activities and of changes to activities.

Level 2

Supports Business Case Development

1. Shows an awareness of the cost implications of activities, seeking to enhance efficient delivery.
2. Identifies opportunities for revenue generation within the organisation and support others to capitalise on these.
3. Markets services effectively using appropriate channels and methods.
4. Produces accurate specifications for service delivery in order to establish cost and quality controls.
5. Monitors the cost of activities and alerts others to variations that might lead to overspend or over-delivery.
6. Supports others to identify commercially viable rates to capitalise on expertise/Intellectual Property (IP).
7. Contributes to effective business case development, identifying level of investment needed and potential returns.

Level 1

Leads and Develops Business Focus

1. Identifies the cost implications of changes to the OD plan ensuring expenditure is aligned with budget
2. Develops a strategy for revenue generation and encourages an entrepreneurial culture within the organisation.
3. Ensures services are marketed effectively using appropriate channels and methods.
4. Encourages team to enhance the efficient delivery of services.
5. Identifies and secures the necessary budget to achieve OD objectives.
6. Understands the market value of in-house expertise and seeks to add value to the organisation by utilising this.
7. Develops well-constructed business cases which identify level of investment needed and potential returns.
8. Oversees governance issues of business activities to ensure adherence to relevant standards and controls.
9. Ensures business opportunities do not interfere with core delivery.



Developmental Hints and Tips

- Maintain and engage in business networks to extend awareness and understanding of business and commercial issues.
- Take opportunities to listen to, read, and ask for the views of senior people within your, and partner, organisations to highlight issues and broaden your perspective.
- Complete a PESTLE Analysis of your organisation - Political, Economic, Sociological, Technological, Legal, Environmental – a tool which can be used to audit an organisation's environmental influences, be used to guide strategic decision-making.
- Seek a mentor with a background in the private sector.
- Read the Annual Reports and financial information of your organisation and learn, at least, the basics of balance sheets and the management information that they are constructed from.
- Understand the sources of revenue for your organisation, the cost centres and how this impacts on decisions to allocate resources.
- Speak to those in your organisation responsible for business development and seek to understand their perspective.
- Read widely in the business and other press to appreciate more about the role of entrepreneurship and what drives the development and marketing of services.





6. Leading, enabling and sustaining - Inspires enthusiasm and belief in others, articulating and sharing a vision. Enables others to bring about and sustain improvements in service delivery.

Level 3

Leads Own Area

1. Acts as role model for desired culture.
2. Gives tangible examples of how change will bring benefits.
3. Holds others to account for agreed performance and deliverables.
4. Enables others to bring about significant change in their own area through learning and development.
5. Works collaboratively, respecting difference and focusing on shared goals.
6. Shows drive, resilience and enthusiasm.
7. Explains the 'why' of change to gain buy-in.
8. Identifies conflict and seeks to resolve this.

Level 2

Leads Across Areas

1. Act as a role model for the desired culture and leadership behaviour Acts to develop self-awareness by reflecting on impact of own behaviour or seeking out feedback from others.
2. Clearly articulates where the organisation is going, using tangible examples.
3. Holds others to account for agreed performance and deliverables.
4. Coaches to enable others to create sustainable change.
5. Works collaboratively, respecting difference and focusing on shared goals.
6. Shows drive, resilience and enthusiasm
7. Explains the basis and thinking behind the organisational vision to gain the support of others in relation to OD interventions.
8. Identifies and seeks to resolve conflict.

Level 1

Leads Excellence in All Areas

1. Leads by example, modelling the behaviours needed to develop the organisation.
2. Communicates the direction and aims of the organisation in a clear way.
3. Holds others to account for agreed performance and delivery which impacts on OD achievement
4. Coaches to enable others to create sustainable change.
5. Sets the tenor for collaborative working, respecting difference, resolving conflict and focusing on shared goals.
6. Shows drive, resilience and enthusiasm to encourage and motivate the team and to achieve results at the highest level.
7. Articulates a clear vision of the role and contribution of OD to the organisation.
8. Anticipates potential conflict and seeks to pre-empt this.
9. Promotes a sense of collective ownership for the success of OD.
10. Fosters independence, enabling others to transform the business.





Developmental Hints and Tips

- Seek to understand a range of performance management and development techniques, when to apply them and how to ensure ownership of performance is established.
- Take roles or secondments that will give opportunities to develop in OD and in leading OD activities.
- Identify resistance to undertaking OD activities and, with support, plan to engage with the resistance and influence a positive outcome. Extend this to multiple stakeholders and issues, according to the level of development stretch required.
- Seek feedback on own performance through multiple methods and use reflective practice to discern the key trends to act upon.
- Take opportunities to articulate the role of OD and the purpose of specific OD activities. Consider the questions this prompts from others and the insights this provides about level of personal impact.

articulate a shared
vision and inspire others





3.3 OD and Leadership

This section will focus on the relationship between leadership and OD - it could be argued that one cannot exist without the other, as an effective OD practitioner will need strong leadership skills, whilst an effective leader will need an understanding of OD to bring about sustained behavioural change that makes a positive difference on the quality of care and service provided.

With ongoing pressure to streamline activities, improve efficiency and achieve demanding objectives, the ability of senior managers to understand the culture and dynamics of organisations and deliver strong leadership could be the difference between organisational failure and success. Whilst leaders need to understand organisational culture and behaviour, it is likely to be the responsibility of the OD practitioner's to raise their importance in assisting leaders to view their proposals and recommendations from a different more holistic perspective.

What is leadership?

There are many different models and theories describing leadership, such as:

The Trait Model of Leadership – proposes that effectiveness as a leader is dependent upon the qualities and personality possessed by the individual leader – such as being confident, outcome-

focused, decisive and flexible, with physical stamina and a willingness to take responsibility for their actions.

Behavioural Theories – the focus changes from characteristics - what they are - towards what they do – how they behave. This theory focuses on the actions of leaders, not their mental qualities or internal states. According to this theory, people can learn to become leaders through teaching and observation.

Contingency and Situational Leadership Theories – look at how leaders adapt their behaviour to be most effective dependent upon the given situation or task, and the people they are leading – for instance, on occasion it may be appropriate to tell their staff what to do, whilst at other times it may be more impactful if the leader delegates tasks and involves staff in decision- making.

Transformational Leadership Approach – proposes that there are two distinct types of leaders - transactional leaders and transformational leaders.

Transactional leaders focus towards basic management processes of controlling, organising, and short-term planning, motivating staff by appealing to their own self-interest. They exercise power through

their hierarchical position, using it to get staff members to obey their instructions.


In contrast, a **transformational leader** can lead at any level in the organisation without relying on their status to indicate they are the leader. They influence colleagues by being a role model, inspiring others to follow, empowering staff and encouraging them to take greater ownership of their work. They create a compelling vision, and are able to build trust, enable creativity and support individual growth of their staff.

As with OD, leadership is a broad area, full of differing concepts, definitions and descriptions which not only vary enormously, but are also often open to widely different interpretations.

For the purpose of this guide we shall align our definition more towards the transformational leadership approach, and define leadership as **the ability to create a vision and encourage others to commit their energy and creativity to that vision.**

How does leadership align with OD?

Leaders should shape the way people think and behave, leaders should behave consistently with the organisation values and philosophy acting as a role model in all of their



interactions. It is the leader's responsibility to set the agenda and articulate this in such a way that is understood by all. Leaders should influence the organisation's culture and in turn the long-term effectiveness of the organisation. Leaders and managers should set the context within which staff members then strive for excellence and work together to achieve goals and deliver a high quality service.

Anyone with responsibility for managing people or resources is likely to have some OD role, due to involvement in the delivery and continuous improvement of high quality patient care and experience. In the NHS responsibility for OD begins at the top, with the setting of the organisation's vision, and strategy to support achieving that vision. All strategy involves the effective use of resources, within which OD is an integral part, but beyond that NHS leadership can utilise OD as a specialist skill, a key part of which will be communicating and explaining to managers at all levels their own OD responsibilities.

For the NHS to successfully undergo transformational change, it requires leaders at all levels to be committed, involved and able to:

- Recognise influencing or driving factors in their external environment by scanning the environment and political landscape - some common across the NHS, and others unique to specific NHS organisations.
- Understand these factors, their various influences, and use rigorous analysis of them to help create a vision and direction for their NHS organisation.

- Communicate the vision and direction, ensuring all staff groups understand what it means for them and their role.
- Engage staff, encouraging real dialogue to gain their input into the organisation's proposed direction.
- Identify where change can bring significant improvements, and what to maintain or change to continue incremental improvements. Successfully transforming services in challenging environments often means leading different level of integrated change in parallel, rather than working on separate changes in sequence.
- Compile an effective plan from the outset, as detailed execution and implementation will be key to supporting staff and patients through such service transformation.
- Measure and take feedback on plans, and be prepared to be flexible without losing sight of key aims and objectives.

Extensive research shows the link between good organisational practice and excellence in health care outcomes. One example of this is the McKinsey Organisational Health Index (OHI) - the McKinsey Group (2009) identified nine elements of organisational health, as follows:

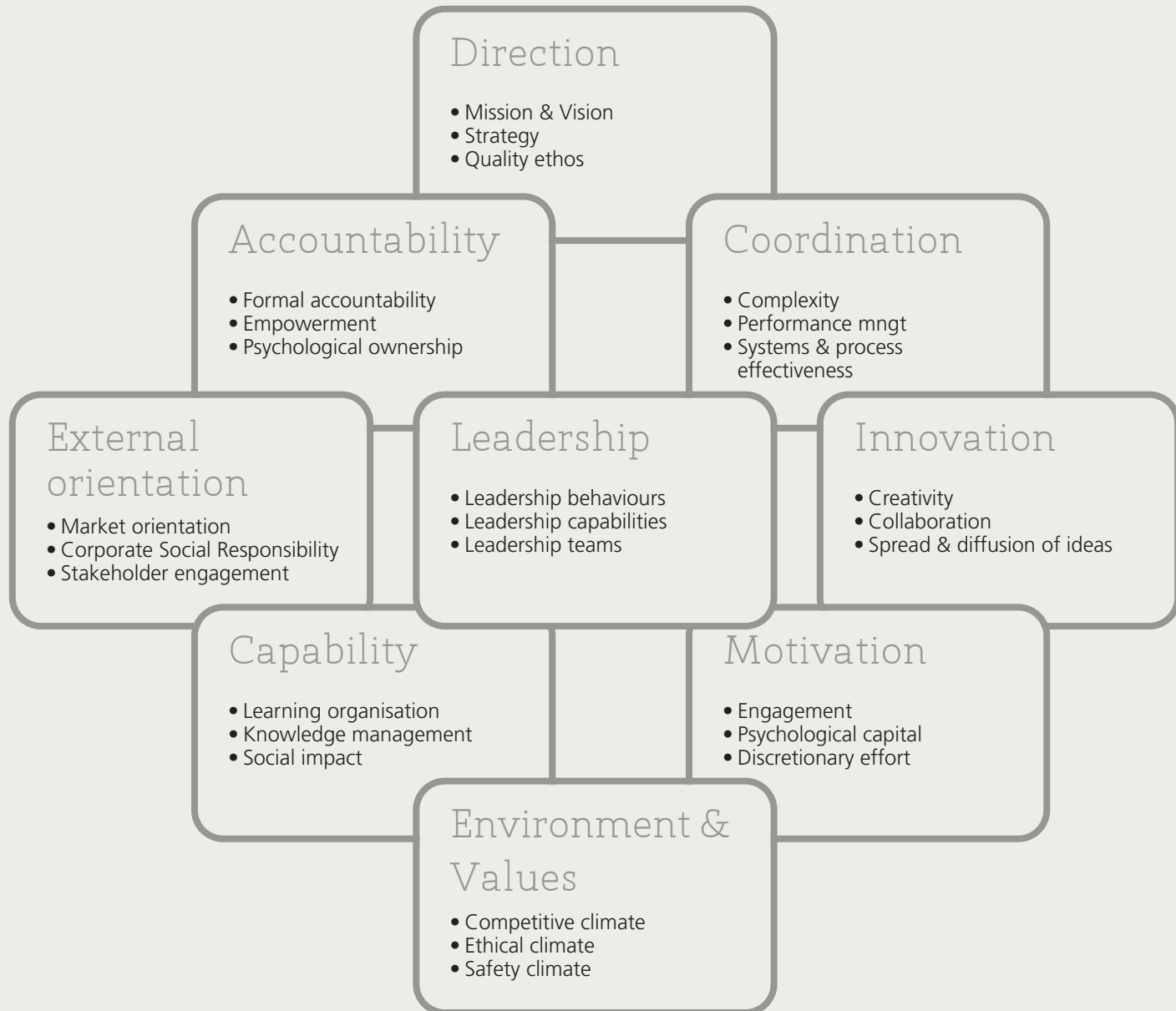
- 1 Direction
- 2 Accountability
- 3 Leadership
- 4 Co-ordination and Control
- 5 Innovation

- 6 Motivation
- 7 External orientation
- 8 Capability
- 9 Environment & Values

The presence of these ingredients enables organisations to be agile, resilient, sustainable and successful. Awareness of these helps both leaders and OD practitioners to consider and decide the most effective way of introducing, implementing and evaluating transformational change.



These elements and ingredients are linked together, with leadership at the centre, as shown below.





The NHS Leadership Framework incorporates all of these ingredients into its model of effective leadership.

The Leadership Framework sets out the standard for leadership to which all staff in health and care should aspire. Reflecting the transformational leadership approach, the Leadership Framework is not restricted to those with designated leadership roles, but is built on the premise that acts of leadership can come from anyone in the organisation. As a model it emphasises the responsibility of all staff in demonstrating appropriate behaviours, in seeking to contribute to the leadership process and in developing and empowering the leadership capacity of colleagues.

acts of leadership can
come from anyone





As the diagram illustrates, the Leadership Framework is comprised of seven domains. Within each there are four categories called elements, under each of which are a series of statements which describe the leadership behaviours and the required knowledge, skills and abilities that staff should be able to demonstrate. For a copy of the full Leadership Framework please go to www.leadershipacademy.nhs.uk

The relationship between the Leadership Framework and the OD Practitioner Competency Framework

To highlight the relationship between leadership and OD, the Leadership Framework domains and elements have been mapped against the OD Practitioner Competency

Framework. It is evident that there is a strong relationship and significant overlap between the two frameworks and that being effective in OD is strongly underpinned by demonstrating leadership qualities, and vice versa.



OD Practitioner Competency Framework

Understanding Organisational Context

Shows a clear understanding of the organisation, its activities and structures. Takes this into account during planning and delivery.

Building Impactful Relationships

Proactively seeks to engage with key stakeholders to gain their buy-in and support. Uses compelling and clear arguments to influence and convince others.

Evidence Based Improvement

Develops OD solutions and approaches based on a thorough analysis of the issues. Drafts and implements plans to achieve agreed outcomes.

Professional Effectiveness

Applies professional OD tools and techniques to transform the business. Seeks to enhance individual, team and organisational capability through OD.

Business focus

Supports the development of business awareness in the organisation. Develops an understanding of the organisation's position in the Healthcare market place and the commercial challenges it faces.

Leading, enabling and sustaining

Inspires enthusiasm and belief in others, articulating and sharing a vision. Enables others to bring about and sustain improvements in service delivery.

Links to domains of the NHS Leadership Framework

Demonstrating Personal Qualities

Working with others

Improving Services

Setting Direction

Delivering the strategy

Demonstrating Personal Qualities

Working with others

Setting Direction

Delivering the strategy

Managing services

Improving Services

Setting Direction

Delivering the strategy

Demonstrating Personal Qualities

Working with others

Managing services

Creating the vision

Managing services

Improving Services

Setting Direction

Delivering the strategy

Managing services

Improving Services

Setting Direction

Creating the vision



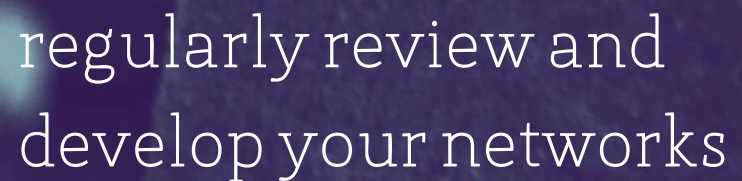


3.4 Practical Tips

This section of the Toolkit again includes a significant amount of information, not all of which will be relevant in every situation. Always consider how best to filter this information both for you and for those with whom you will be working.

In summary, to use the information in this section, remember:

- Increase your understanding and use of the NHS Leadership Framework, as leadership is a vital part of any OD activities.
- Demonstrate your understanding of the links between OD and leadership to others – they may not appreciate that they already undertake many OD activities without identifying them as such. Realisation of previous success should increase people's willingness to engage with OD.
- Consider your OD development needs carefully with your line manager (and coach/mentor if appropriate).
- Select the level of information you work with, according to your own development needs and what you need to perform well in your role.
- Be alert to the opportunities to network and increase your understanding, using this Toolkit as a way of discussing OD with your colleagues.
- Access the considerable coaching and mentoring support services available via the NHS North West Leadership Academy



regularly review and
develop your networks



3.5 Links and Resources

NHS Leadership Framework

www.leadershipacademy.nhs.uk

NHS North West E:WIN

This portal has case studies based on improving workforce quality and productivity.

www.ewin.nhs.uk

NHS Institute for Innovation & Improvement

www.institute.nhs.uk

There is a Handbook of Quality and Service Improvement Tools which provides helpful information about tools as well as change and project management. It also references specific reading and further information in, for example, Improvement Leader Guides.

NHS North West Leadership Academy

www.nwacademy.nhs.uk offers a number of development activities to support the development of leaders across the NHS in North West and the development of OD. The OD Practitioner Competency Framework can be located here.

CIPD

www.cipd.co.uk The HR and development professional body. There is a large amount of information on this website about OD and development activities for OD skills.

Additionally, there are a large number of journals with a broad readership (e.g. Harvard Business Review) and specialist publications which can be obtained, sometimes free, via this website by those who are members of the CIPD.

Books

Harley, J. & Bell, A. (2009) Placing Ladders: Harnessing our leadership potential, Kingsham Press.


Bridges, W. (1997) Creating You & Co.: Be the Boss of your own career, Nicholas Brealey Publishing

Social Networking Sites

LinkedIn www.linkedin.com has a number of useful networking groups which are available to its members - some examples of potentially useful groups include:

- Organisational Development Group – for OD professionals to discuss and share experience and expertise.
- Organisational Development Professional Group – for anyone in OD, leadership and management consultancy, performance management and business change.





4. OD Diagnostic Tools and Techniques

This section has a practical focus and aims to provide you with a range of potential interventions to utilise in your place of work.

To help you determine the most suitable intervention, the table overleaf provides an overview of various tools and techniques to diagnose the situation you are facing, as well as ideas for potential interventions.

At this stage it is important to note that whilst all of the tools discussed in this section are proven in bringing about improvements, they must be appropriate for presenting the issues - tools which have worked well for you in the past, and which may be your 'favourites,' may not prove as effective in your current situation. By ensuring you fully understand your objectives, you will be able to choose the tools best able to support you in achieving the desired outcomes and benefits.

This section is broken down into the following areas:

Diagnostic Tools – the methods you need to get a clear understanding of the presenting issues and find out what is really going on. It provides various employee engagement and consultation tools to establish what staff think and feel about their current situation, and the way forward.

OD Interventions – the activities to bring about innovation, improvement and change. A number of different approaches are highlighted to consider when developing a proposal and taking action.

OD Evaluation Tools – the heart of OD is about evaluation, measuring to see if the intervention has made a difference. This section provides an overview on how to complete an evaluation, and how to evaluate the impact of a change on those affected by the proposal from an equality perspective.

Themes	OD Diagnostic Tools and Techniques	OD Intervention
<p>Service Improvement</p>	<p>Observation Review of organisational metrics (patient satisfaction, complaints) Survey or questionnaire of staff and key stakeholders Focus groups Benchmarking exercises Research 7S model 6 Box Model Burke - Litwin Model Knowledge Management</p>	<p>Training/learning needs analysis Lean Process Mapping Role redesign Creative thinking tools Facilitated events Focus groups Force field analysis Stakeholder analysis SWOT</p>
<p>Staff Engagement and Consultation</p>	<p>Survey or questionnaire (e.g. Staff Survey) Focus groups Interviews 7S model Knowledge Management</p>	<p>Appreciative Inquiry Creative thinking tools Facilitated events</p>
<p>Culture</p>	<p>Organisational metrics (e.g. staff turnover and retention figures, staff survey results, exit interview feedback) Survey Focus groups Interviews 7S model 6 Box model Burke-Litwin Model Transactional vs Transformational Evaluation Knowledge Management</p>	<p>Training needs analysis Large scale consultation exercises Appreciative Inquiry Team building SWOT Staff Engagement Activities</p>

Service Improvement

Observation
 Review of organisational metrics (patient satisfaction, complaints)
 Survey or questionnaire of staff and key stakeholders
 Focus groups
 Benchmarking exercises
 Research
 7S model
 6 Box Model
 Burke - Litwin Model
 Knowledge Management

Training/learning needs analysis
 Lean
 Process Mapping
 Role redesign
 Creative thinking tools
 Facilitated events
 Focus groups
 Force field analysis
 Stakeholder analysis
 SWOT

Staff Engagement and Consultation

Survey or questionnaire (e.g. Staff Survey)
 Focus groups
 Interviews
 7S model
 Knowledge Management

Appreciative Inquiry
 Creative thinking tools
 Facilitated events

Culture

Organisational metrics (e.g. staff turnover and retention figures, staff survey results, exit interview feedback)
 Survey
 Focus groups
 Interviews
 7S model
 6 Box model
 Burke-Litwin Model
 Transactional vs Transformational Evaluation
 Knowledge Management

Training needs analysis
 Large scale consultation exercises
 Appreciative Inquiry
 Team building
 SWOT
 Staff Engagement Activities

Themes

	OD Diagnostic Tools and Techniques	OD Intervention
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Leadership Development

Training needs analysis
Appraisal
Self evaluation against the NHS Leadership Framework

360 degree feedback
Personality testing
Assessment or development centres
Training programme
Action learning
Coaching or mentoring
Career Coaching
Training Evaluation
Project management

Team Development

Interviews
Observation
Questionnaire

Team building exercises (for example experiential exercises)
Facilitated group discussions
Creative thinking tools
SWOT
Personality testing and use of psychometric team tools

take opportunities to
listen, observe and ask

4.1 Diagnostic Tools

Questionnaire

What is it used for?

Questionnaires are used widely by OD practitioners to gather large volumes of qualitative and quantitative data from staff and stakeholders on a range of topics. They tend to be used when initially diagnosing problems, when assessing levels of satisfaction, and when evaluating the impact of an intervention on a project.

Overview

The key to good questionnaire design is absolute clarity around your objectives - as it is only as good as the questions it asks, follow these principles:

1. Choose your questions carefully

Think about what you are going to use the information for and the overarching goals behind asking the questions - it is important to ask only the questions that will help achieve your goals, not simply because it would be 'interesting to find out'.

At this stage you should list all your potential questions.

2. Select the question type and response scale

Review the questions you have listed, consider the best way to ask each one and what response scale or option would provide the most useful information.

Open questions in which the respondent has a free text box will encourage free thought and expression and provide rich qualitative data, but are harder to analyse, more likely to be misinterpreted and on a practical level can reduce participation from respondents facing time pressures.

Closed questions which use rating scales of say 1-5, or selection from predetermined answers are quicker to complete, analyse and compare answers from different groups. They do however produce less qualitative data, potentially encourage less considered answers from respondents not fully engaged in the process.

3. Design the layout and question sequence

A brief introduction describing what the questionnaire is about and why their opinions are important to you will create engagement

from respondents, as will stating how you intend to use the data, the purpose behind it, who you will share it with, and the levels of confidentiality/anonymity. Your contact details will allow any concerns or queries to be dealt with.

Best practice in terms of sequencing indicates that starting with more straightforward questions is beneficial to get the respondents 'in the swing of things' and not feel daunted by the first few questions.

Your most important questions – those key to helping you to achieve your goals – should follow, as by having these at an early stage you will ensure you capture the respondents' views when they are still paying their full attention to the questions.

You can then complete your questionnaire by returning to 'easier' questions - for example demographic questions, as respondents are more likely to provide personal information having already gone to the trouble of completing the questionnaire.

Questions should be structured under subheadings all based around the same topic.

Where can I find out more?

The University of Leeds

<http://iss.leeds.ac.uk/info/312/surveys/217/...design...questionnaires/5> new links

The University of Loughborough

<http://www.lboro.ac.uk/services/library/skills/topicslist/topic---questionnaire-design.html>

Both provide some useful guides for their students on questionnaire design, which is transferable when designing a questionnaire as an OD practitioner within an organisation.

The Hillingdon Hospital

http://www.thh.nhs.uk/documents/_Departments/Research/InfoSheets/17_questionnaire_design.pdf

A useful information sheet is available on the internet on how to design a questionnaire.

Focus Group

What is it used for?

Focus groups are a useful and effective consultation tool often used as a staff engagement activity, giving them a real voice. Used in the exploratory stages as a fact-finding tool, they can develop a particular programme of activities as well as being an evaluation tool to assess impact or generate further recommendations. They can be used either as a method in their own right or as a complement to other methods such as a questionnaire, for triangulation and validity checking,

Overview

Focus groups are a structured method of obtaining thoughts, feelings, experiences, attitudes, beliefs and reactions from staff or stakeholders. It should be an organised discussion whereby the facilitator uses a range of tools and techniques to gather valuable feedback.

They are particularly useful tools in obtaining varying perspectives at one time. If cultural issues exist within the team/organisation - for example, power differences between the participants and decision-makers - or where everyday experiences and culture of particular groups is of interest, and you wish to explore perceptions and the degree of consensus on a given topic.

When deciding on which participants to invite, you will need to consider the topic under discussion as this will strongly influence how your group brings together different roles and professions - for example, junior staff may not feel able to talk openly in front of more senior managers, despite your assurances that all views are equally valid. Similarly having staff and their direct line managers together might restrict open discussion, depending on the relevant topic. In addition, a richer discussion could result from grouping the same professions together to share experience, whilst on some topics mixing professions, bands and roles could encourage a more diverse discussion.

Where can I find out more?

The NHS Institute for Innovation and Improvement have published a booklet titled 'A Handy Guide to Facilitation – an overview of facilitation with helpful tools and techniques.' It provides a range of advice and tools on how to facilitate group discussions such as those that take place in a focus group.

Interview

What is it used for?

Interviews tend to be used when trying to scope out a problem and determine which solution would bring about the desired change, and also as an evaluation tool.

Overview

Interviews are conducted on a one-to-one basis, and tend to be used when the OD practitioner requires a full and detailed understanding of the presenting issues. They are useful when exploring more sensitive or complex issues, interview data provides insight into how a person feels, their motives, understanding and perspective, as interviewees tend to be more honest on a one-to-one basis, when less affected by peer pressure or other constraints.

Interviews tend to fall into the following three categories – Structured, Unstructured and Forced Choice.

- Structured Interviews – where the interviewer has a fixed list of questions to be answered – its benefits are that it ensures all topics are fully covered whilst still allowing the

interviewee to express how they feel, or what they consider is important.

- Unstructured Interviews – where the interviewer asks one or two opening questions to set the tone around the topic to be discussed, but then only uses probes to seek clarity and elaboration – its benefits are that it provides the interviewee with complete control of the direction of the discussion, and to express their views.
- Forced choice – in essence, basically surveys/questionnaire without the pencil or paper. Whilst an element of forced choice or using closed questions can be a useful way to get a definitive answer, other methods such as an online questionnaire would elicit the same information in a more cost-effective manner.

Where can I find out more?

Search the internet using terms such as ‘using interviews in research’ and ‘interviews as a qualitative research tool’ for further information.

Training / Learning Needs Analysis

What is it used for?

As a diagnostic tool in the scoping phase, to understand training needs and then develop solutions and interventions to address the skills gap.

Overview

A needs assessment is the process of identifying performance requirements and the gap between the levels of performance required and that which presently exists. A

training/learning needs analysis (TNA/LNA) is a review of learning and development needs; it considers the skills, knowledge and behaviours that staff need, and how to develop them effectively.

A TNA/LNA should be undertaken at 3 levels:

- Organisational level
- Team/departmental level
- Individual level

At each level you should ask –

- What is the problem? A lack of the right skills, or is it a case of a lack of will?
- Is it a training problem? Can the problem be solved by running a training course, or will it require a different or combined approach? Training may not be the answer, or the only answer.
- What skills and knowledge should be included in the training program? It is important to analyse the tasks that need to be completed and the competencies required to be effective.
- Who needs to be trained? Is it just leaders or all staff? Who needs to be trained to make the greatest impact?

Analysing training needs is a vital prerequisite for any effective training programme or event. Simply ‘throwing’ training at individuals may miss priority needs, or even cover areas that are not essential. A TNA/LNA enables organisations to channel resources into the areas where they will contribute the most to employee development, enhancing morale and organisational performance.

The data gathering process will involve the OD

practitioner using a range of tools and techniques which include - observation of individuals in action in their role/task, interviews, surveys, questionnaires, focus groups and also review of data, as for example patient satisfaction data to could reveal why there are high levels of patient complaints.

Where can I find out more?

CIPD Fact Sheet – ‘Identifying learning and talent development needs’

<http://www.cipd.co.uk/hr-resources/factsheets/identifying-learning-talent-development-needs.aspx>

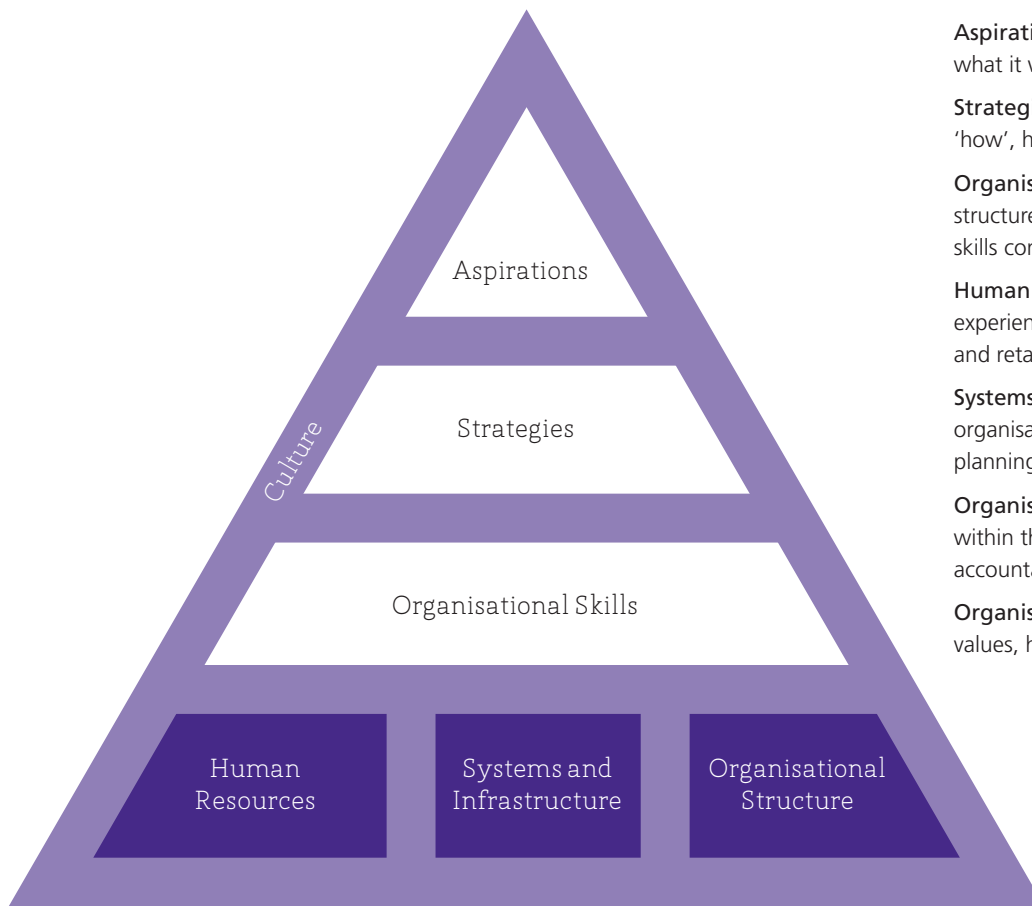
Connecting for Health website sets out Education, Training and Development Standards and Templates which can be found at
<http://www.connectingforhealth.nhs.uk/systemsandservices/icd/informspec/etd/standards>

For information on the four steps to conducting training needs assessments the following website provides a good overview
http://alumnus.caltech.edu/~rouda/?T2_NA

Organisational Capacity Assessment

What is it used for?

An organisational capacity assessment can be used to evaluate the capability of an organisation to perform core functions, solve problems and achieve their strategic objectives. It should be an ongoing assessment of an organisation’s ability to assess and react to future needs in order to maintain relevance and effectiveness over time.



Overview

A capacity assessment is aligned with the McKinsey 7S model and tends to look at the following areas;

Aspirations - the organisation's vision, mission and goals, what it wants to achieve.

Strategies - the strategy and performance targets, it is the 'how', how the organisation will achieve its goals.

Organisational Skills - includes the composition of staffing structures, for example competence levels, skill mix, and the skills composition of senior teams.

Human Resources - the collective capabilities and experiences of its people, it includes how talent is managed and retained.

Systems and Infrastructure - includes the systems the organisation has in place which aid decision-making and planning, such as technology, finances systems, HR systems.

Organisational structure - refers to the levels of hierarchy within the organisation, levels of responsibility and accountability, the effectiveness of inter-team working.

Organisational culture - for example shared beliefs and values, how these are 'lived' in the organisation.

Where can I find out more?

The McKinsey and Company have made available to 'not for profit' organisations an Occupational Capability Assessment Tool (OCAT) which is available free via <http://www.vppartners.org/learning/reports/capacity/assessment.pdf>

Transformational versus Transactional Evaluation

What is it used for?

The transactional vs. transformational evaluation can be used to determine the current position or "state" the organisation is tending to lean towards. As with transformational and transactional leadership, the premise behind this evaluation tool is to determine if the organisation tends towards a more transactional approach, focused on structure, systems, management practices, rather than a more transformational approach concerned with vision, strategy, leadership and culture.

Overview

The tables at the end of the document provide an overview of the types of areas which would make up a transactional or transformational approach. As an OD practitioner you can use the table and the key questions when meeting with your client or key stakeholders during the scoping phase of an OD project.

An additional column on the far right could be entitled 'Evidence' might then be used to track each of the categories and could then be colour-coded:

- Red:** No evidence – urgent development is needed
- Amber:** Evidence – development is required
- Green:** Evidence – development would enhance current position.

The colour-coded table could then be made available to the client during the feedback session regarding the presenting issues as an effective visual tool for the client to identify where the problems lie and to what extent.

As with some of the other diagnostic tools, this model is closely aligned to the Burke Litwin model of organisational change, which identified 'First Order' or transactional changes such as systems, policies, structures and performance, as well as 'Second Order' or transformational factors which included factors such as culture, mission and strategy.

Knowledge Management and Organisational Learning

What is it used for?

Knowledge management is a method of gathering, retaining and disseminating organisational knowledge, whether about past projects, organisational changes, problems or successes. It is the effective management of

knowledge and information, and furthermore about developing an effective organisational memory, which is relied upon to help inform future decisions and changes.

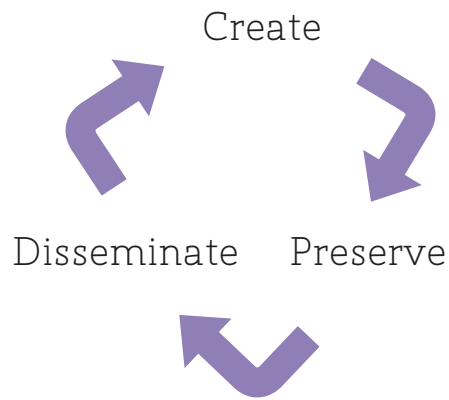
Knowledge management should be an integral part of any OD intervention. It is useful in the scoping stages when finding out what has gone before, understanding what works, what is best practice and also has a pivotal role in the evaluation stages of a project when evaluation data helps to develop a new organisational memory.

Overview

Knowledge management is defined as "the deployment of a comprehensive system that enhances the growth of an organisation's knowledge" Salisbury (2003). It is an ongoing cycle of creating, using and disseminating organisational knowledge.

As defined by Aggestam (2006), knowledge management refers to "the process in which organisations assess the data and information that exist within them, and is a response to the concern that people must be able to translate their learning into usable knowledge".

Knowledge management is considered to be an ongoing process as displayed below -picture taken from Salisbury (2003)



Knowledge management helps an organisation to learn, to innovate, to develop and grow. Effectively managing knowledge helps the organisation to create a learning culture, where it is seen as the norm to learn from past mistakes, to continually scan for the horizon for new developments, to create new information and encourage the transfer of information from individuals to teams.

For knowledge management to be effective it needs to focus on both hard and soft issues, as identified in the McKinsey 7Ss model, and the First order and Second order factors as highlighted in the Burke Litwin model of change management.

Where can I find out more?

Within your own organisation, if you have a library services ask them if they have a knowledge management system. Speak to colleagues find out what they know. Ask the client what decisions, actions have gone before.

Aggestam, L. (2006) 'Learning Organization or Knowledge Management – Which came first, the chicken or the egg?' Information Technology and Control, Vol. 35, No. 3A. (2006), pp. 295-302

Salisbury, M. (2003), 'Putting theory into practice to build knowledge management systems'

Journal of Knowledge Management, Vol. 7
Iss: 2 pp. 128 - 141

gather as much
organisational knowledge
as possible, both formally
and informally

4.2 OD Interventions

Facilitation

What is it used for?

Facilitation is used to bring groups together to think about, plan and make decisions around service improvement and shared issues. They go beyond focus groups that tend to be used as a diagnostic technique and predominantly concerned with the resulting data. Facilitation is much more about the outputs and the way the group function together, bringing about a shared understanding and engaging with and encouraging staff to collaborate.

Overview

As defined by Roger Schwarz (2005) "Group facilitation is a process in which a person whose selection is acceptable to all the members of the group, who is substantively neutral, and who has no substantive decision-making authority diagnoses and intervenes to help a group improve how it identifies and solves problems and makes decisions, to increase the group's effectiveness".

Facilitation is a way of working with groups of people to help them to achieve their objectives, assisting by providing them with effective processes and structures. The facilitator's responsibility is to design and plan the process, perhaps by activities or tasks to help them

progress as well as provide guidance and control. This means ensuring there is mutual respect towards each other, everyone can participate, there is shared understanding, people listen to one another and all take shared responsibility for the outcome.

Where can I find out more?

<http://www.mindtools.com/pages/article/RoleofAFacilitator.htm> Mind Tools has a section dedicated to the role of a facilitator and how to guide an event through to a successful conclusion.

The NHS Institute for Innovation and Improvement have produced a booklet called 'A Handy Guide to Facilitation' which is available on their website. In addition as part of their Improvement Leaders' Guides the booklet 'Working with groups' also provides useful information and tips. Further information can be found for now on www.institute.nhs.uk.

Appreciative Inquiry

What is it used for?

Creative thinking, problem-solving, group facilitation, staff engagement action learning, consultation and staff engagement in bringing about change.

Overview

Appreciative Inquiry (AI) was pioneered in the 1980s by David Cooperrider and Suresh Srivastva, and is a process of facilitating positive change in human systems. It works on the premise that within every system, team or organisation there are some things that work well and are 'right'. AI builds on the factors which make an organisation or team successful and effective, as a positive energy approach helps to build on strengths, just as conventional problem-solving can help to manage or eliminate weaknesses. By taking a positive perspective it should help the organisation to view itself in a more positive way, as with some problem-solving activities the focus tends to be more towards what is not working, rather than what is.

AI as a facilitation and problem solving approach consists of 5 'Ds':

Define – the purpose of this stage is to try and define what you are looking at in a positive manner. It is about taking a problem, for example "to try and find ways to improve staff satisfaction levels" and turning it into a more positive statement such as "to make this organisation be a great place to work". The subtle change in wording can have huge implications on what you focus on.

Discovery – this stage is about looking at what has happened in the past and what is working well. So in the case of improving staff satisfaction levels, it would be about the group providing examples of what makes them satisfied at work, telling stories’ to highlight examples.

Dream – this is ‘what might be’, it is about taking all the positives from the Discovery phase and then brainstorming how the team or organisation could accomplish the desired state. Dream stage is about thinking what the vision is.

Design – during this phase the group think about the practicalities, in terms of what practical actions need to be completed to help achieve the vision.

Deliver – is the implementation stage.

Where can I find out more?

AI Commons

<http://appreciativeinquiry.case.edu/> is a worldwide portal devoted to sharing academic resources and practical tools on AI.

Creative Thinking

What is it used for?

Creative thinking is used to help encourage people to think differently and come up with new solutions and perspectives to issues, problems and opportunities. Using creative thinking tools can help staff to view situations from different perspectives and to think more about solutions before considering barriers.

Overview

Creative thinking tools and techniques are often used in facilitated group events, helping individuals to take a different perspective and develop alternative ways of getting things done.

According to the NHS Institute for Innovation and Improvement creative thinking consists of three steps:

1. For the individual or group to focus attention on something they do not normally focus on
2. Escape from traditional ways of thinking (e.g. think outside the box)
3. Suspend judgment (if it will or will not work) and allow imagination to explore all possibilities.

Tools and techniques that can help to do this are:

- Brainstorming – is group idea generation, where no ideas are a bad ideas, the group should be encouraged to come up with ‘wild’ ideas and to build on each other’s ideas.
- De Bono – 6 Thinking Hats – a systematic method of thinking in a completely new and different way, by wearing a metaphorical “thinking hat” which has a different focus, which should help force the individual to think in a way that is different to their preferred style.
- The 5 Whys – helps to get to the root cause of a problem, by asking ‘Why?’ five times.
- Appreciative Inquiry – please see section on Appreciative Inquiry.
- Ishikawa (fish bone) diagram – by helping to

identify the cause and effect of a problem, it can get to the root cause and identify where and why something may not be working.

- That is impossible – consider something we think is impossible to do and asking how we could make it possible.
- Force Field Analysis - helps you to make a decision by analysing the forces for and against a change, and exploring the reasoning behind your decision.
- Stop before you start – instead of rushing into generating ideas, this asks you to think about how the group are framing the issue and consider ways to reframe it differently in order to open up possibilities.
- Others’ point of view or ‘fresh pair of eyes’ – thinking about how other people or another industry might view or describe the situation.
- Breaking the rules – is about first identifying the underlying rules, norms and assumptions we have about a given situation and then deliberately thinking around them to create new ideas.
- Stepping Stones – are where an extreme or outrageous approach to an issue is presented and the group try to suspend judgement and think about connections or associations and identify the underlying concepts within the idea.

A great deal of information on each of these tools and techniques can be found by searching on the internet.

Where can I find out more?

The NHS Institute for Innovation and Improvement have produced a booklet called The Handbook of Quality and Service Improvement Tools which is available on their website. Chapter 7 contains a number of creative thinking techniques.

In addition the booklet titled Thinking Differently also offers a range of creative thinking techniques. Further information can be found for now on www.institute.nhs.uk.

Psychometric Testing

What is it used for?

Psychometric testing can be defined as “carefully chosen, systematic, standardised procedures for evoking a sample of responses from a candidate, which are evaluated in a quantifiable, fair and consistent way” Smith and Smith (2005). It is used in a variety of settings including selection and recruitment procedures such as an assessment centres, as well as in development centres, career coaching, coaching, mentoring, educational programmes, talent management and in team development settings. Tests are designed and administered to ensure that everyone’s experience is equal with the same process, questions and feedback techniques being employed for everyone, regardless of the context in which it is used. Psychometric tests should be administered and fed back by a person who is trained to British Psychology Society standards.

Overview

Psychometric testing consists of:

- Ability or Aptitude Tests - tests of a person’s mental ability and are used to predict potential and future performance. They specifically focus on narrow skills with a clear connection to the world of work such as numerical analysis, verbal comprehension, error checking or diagrammatic reasoning. This type of test tends to be used in assessment or development centres.
- Critical Thinking Tests - assess a person’s ability to look at a situation and clearly understand it from multiple perspectives, whilst separating facts from opinions and assumptions. Again tends to be used in assessment or development centres.
- Personality testing - a standardised questionnaire that helps to reveal aspects of a person’s personality or character, often used as part of learning and development programmes, talent management, coaching, recruitment and selection as well as in team building exercises.
- Emotional Intelligence Testing - assesses the person’s ability to identify, assess, and control the emotions of oneself, of others, and of groups. This tends to be used in a development setting such as coaching or one-to-one work.
- Motivation and Interest Tests - look at what motivates or drives a person in life or work, examines a person’s values and the contexts in which they are likely to feel most satisfied. These can be used in assessment centres, but more often is used in a developmental setting, for example in career coaching or as part of a talent management intervention.
- Team Development Tests - used to diagnose the characteristics of a team, and can include

looking at the similarities or differences between team members in terms of their preferences as they go about their work. They can also look at how teams deal with conflict, respond under stress and communicate with one another. Can be used as a diagnostic tool and to raise awareness of strengths and gaps in teams.

Where can I find out more?

The British Psychological Society Psychological Testing Centre www.psychtesting.org.uk contains details on a wide variety of personality tests available.

Smith and Smith (2005) ‘Testing People at Work, Competencies in Psychometric Testing’, Blackwell Publishing.

360 Degree Feedback

What is it used for?

It is used to help an individual gain feedback regarding their strengths and areas of development from a range of people they work with, which typically includes their line manager, staff members and peers. It can be used to enhance self-awareness and tends to be incorporated in development activities such as leadership programmes and in team development interventions.

Overview

In the NHS all leaders have access to the NHS Leadership Framework 360 degree feedback tool. The 360 degree feedback questionnaire is structured around the 7 domains set out in the

Leadership Framework, and provides an individual with an insight into other people's perceptions of their leadership abilities and behaviours.

All doctors are now required to undertake a 360 degree feedback questionnaire every five years as part of their revalidation process, inline with General Medical Council requirements, and as part of this process are required to ask their patients for feedback on the quality of care they have received.

Where can I find out more?

The Leadership Academy website contains full details of the Leadership Framework and how to access the 360 degree feedback tool.

<http://www.leadershipacademy.nhs.uk/develop-your-leadership-skills/leadership-framework/the-framework-overview>

The General Medical Council have published information pertaining to using 360 feedback or Multi Source Feedback Tools as part of revalidation, further information can be found www.gmc-uk.org/publications/13050.asp

Coaching and Mentoring

What is it used for?

Coaching and mentoring are used as development tools, usually on a one-to-one basis, and they can be useful at various stages in a person's career. They are generally provided by someone who is trained in either coaching or mentoring skills.

Overview

The table below provides descriptions of coaching and mentoring, their similarities and differences, and what they respectively have to offer.

Coaching

Relationship generally has a set duration.

Generally more structured in nature and meetings are scheduled on a regular basis.

Short-term, sometimes time-bounded and focused on specific development areas/issues.

Not generally performed on the basis that the coach needs to have direct experience of their client's formal occupational role, unless the coaching is specific and skills focused.

Focus is generally on development/issues at work.

The agenda is focussed on achieving specific, immediate goals.

Coaching revolves more around specific development areas/issues.

Mentoring

Ongoing relationship which can last for a long period of time.

More informal and meetings take place as and when the mentee needs some advice, guidance and support.

More long-term and takes a broader view of the person.

Mentor is usually more experienced and qualified than the client. Often a senior person in the organisation who can pass on knowledge, experience and open doors to otherwise out-of-reach opportunities.

Focus is on career and personal development.

Agenda is set by the client, with the mentor providing support and guidance to prepare them for future roles.

Mentoring revolves more around developing the mentee professionally.

Coaching and mentoring can be used as an OD solution in a range of situations - leaders/managers may have individual development needs that require addressing on a one-to-one basis; as a follow-up tool resulting from 360 degree or personality feedback identifying areas for development; incorporated into training and development programmes to provide additional more personalised support and advice.

Coaching and mentoring can also be used to help improve a person's job performance, their motivation to engage with their work, and provide them with the opportunity to deploy their ideas, abilities and knowledge effectively.

Where can I find out more?

The North West Mentoring Scheme ran by the North West Leadership Academy has details on mentoring, what it comprises, and maintains a database of trained NHS mentors who would be willing to support potential mentees. <http://www.nwmentoring.nhs.uk/>

The Northwest Leadership Academy also has information on coaching, its benefits, and holds a database of trained coaches who are willing to provide coaching to senior leaders. <http://www.nwacademy.nhs.uk/sites/>

Career Coaching

What is it used for?

Career coaching can be used as a tool to support individuals wishing to change their career direction, are looking for promotion, or those redeployed, put at risk or made

redundant leading to them having to make changes to their career direction. It tends to be used on a one-to-one basis.

Overview

Career coaching is all about equipping individuals with practical guidance on how to move up, across or into a completely new field altogether. It helps the individual to understand their career 'needs and wants', and how to focus on identifying their transferable skills, knowledge, abilities and personal strengths. This information is then used to help them explore and decide on their options.

Career coaching uses a combination of coaching skills combined with personality testing (for example MBTI, Hogan, Saville Wave) as well as utilising a range of tools to help the coachee understand their strengths, preferences, values and motives. Some example tools include Schein's Career Anchors, Holland's Codes and competency analysis.

Career Coaches tend to be trained coaches who have also completed specific training in career coaching.

Where can I find out more?

www.mindtools.com Has dedicated sections on career coaching as well as information on Schein's Career Anchors, Holland's Codes, as well as other career development techniques.

Team Building

What is it used for?

Its main goal tends to be to improving team effectiveness by enhancing relationships, better managing demands or tasks and improving team processes. Team building activities can be used with all teams, from board level teams through to small teams as well as cross functional or departmental teams.

Overview

Team building activities should help teams to take an inward look at their own performance in terms of behaviours, culture and processes. The ideal outcome should be strategies to improve how the team functions, with buy-in from the team members.

To achieve these outcomes, the OD practitioner needs a variety of tools and techniques to help the team openly analyse its strengths and areas for development, already highlighted in this section. There is no 'off the shelf' solution, and the nature of an effective team building activity will be very much dependent on the team, the issues and desired outcomes.

Where can I find out more?

The NHS Institute for Innovation and Improvement have produced a series of Improvement Leaders' Guides; the booklet titled 'Working with groups' provides information on facilitating group sessions and some sample activities. Further information can be found for now on www.institute.nhs.uk

Strengths Weaknesses Opportunities and Threats (SWOT) Analysis

What is it used for?

A SWOT analysis can be used in a variety of situations, including coaching when assessing development needs and in team building identifying potential service improvements, and at a more corporate level to help determine strategic priorities.

Overview

A SWOT analysis normally consists of a 2x2 matrix:

Strengths	Weaknesses
Opportunities	Threats

The OD practitioner/facilitator/coach would draw out from the individual (or group) what they think should fall into each category.

Prompts to use when facilitating a SWOT analysis:

Strengths:

- What advantages does your team/service have?
- What do you do better than anyone else?
- What unique resources can you draw upon that others can't?
- What do people in your market see as your strengths?
- What is your service/team Unique Selling Position (USP)?

Weaknesses:

- What could you improve?
- What should you avoid?
- What would others see as your weaknesses?
- What factors could lose you business?

Opportunities:

- What good opportunities can you spot?
 - What interesting trends are you aware of?
- Useful opportunities can come from:
- Changes in technology and markets on both a broad and narrow scale.
 - Changes in government policy related to your field.
 - Changes in social patterns, population profiles, lifestyle changes, and so on.
 - Local events.

Threats

- What obstacles do you face?
- What are your competitors doing?
- Are quality standards/specifications for your job, products or service changing?
- Is changing technology threatening your position?
- Could any of your weaknesses seriously threaten your business?

Where can I find out more?

www.businessballs.com and www.mindtools.com have guides on how to complete a SWOT analysis.

what do you do better
than anyone else?

Assessment and Development Centre

What is it used for?

Assessment and development centres consist of exercises designed to assess the full range of skills, attributes and behaviours required for specific jobs or roles. Assessment centres are used in selection or recruitment processes to help inform selection decisions, whereas development centres are used to assess a person's level of skill and desirable behaviours in order to aid their personal development. Development centres are often incorporated in talent management interventions and in some leadership development programmes.

Overview

Assessment centre – typically involves participants completing a range of exercises which simulate the activities carried out in the target job. It is often used in conjunction with other selection methods such as psychometric testing, personality testing and interviews. The theory behind it is that best way to predict future job performance is to get the individual to carry out a set of tasks similar to those required and evaluate their performance. The outcome from an assessment centre is to inform either an interview shortlist (the next round in the selection process), or a 'yes' or 'no' decision as to whether the individual has been successful in their application.

Development centres – participants also complete exercises simulating the activities carried out in a target job, but are however not 'pass' or 'fail' events. Their outcome is instead

to identify potential areas for development and training needs, often in conjunction with personality testing or 360 degree feedback to help validate the feedback from the development centre. Participants usually receive a feedback report as a result of attending, with the results are usually being discussed in a coaching setting.

Both methods involve;

- Group assessment activities
- Participants applying a range of skills and attributes in exercises designed to replicate workplace activities as far as possible
- Trained observers looking at group interactions, individual behaviours and evaluating performance against a set criteria
- The set criteria is usually a work-related competency framework, such as a Leadership Framework or a knowledge and skills framework

Where can I find out more?

The British Psychological Society – Psychological Testing Centre have published some best practice guidelines in designing and running both assessment and development centres. www.psychtesting.org.uk

Service Improvement

What is it used for?

Service improvement tools and methodologies are used widely in the NHS to streamline services, reduce waste, improve flow, increase capacity, do more for less and ultimately improve the quality of care for patients.

Overview

Service improvement tools and methodologies (information is taken from the NHS Institute for Innovation and Improvement) include:

Lean - is an improvement approach to improve flow and eliminate waste, developed by Toyota. Lean is basically about getting the right things to the right place, at the right time, in the right quantities, while minimising waste and being flexible and open to change. Lean thinking focuses on what the customer or the patient values: any activity that is not valued is waste. If you remove the waste, the customer or patient receives a more value added service.

Process Mapping – helps the team or OD practitioner to map the whole patient journey or diagnostic pathway with a range of people who represent the different roles involved. Mapping the whole patient journey will help the team/OD practitioner to look for opportunities for improvement by visualising how the whole patient journey currently works and identifying points of inefficiency. It can capture the reality of a process and identify duplication, variation, and unnecessary steps.

Role redesign - is a workforce improvement tool which can help you improve patient services, tackle staff shortages and increase job satisfaction through the development of new and amended roles. It involves reviewing roles and considering whether roles can be extended (for example new responsibilities being assigned to existing roles), if new roles need to be created, or

evaluating whether existing tasks would be more appropriate to be completed by different staff in different professions.

An example of role redesign was the introduction of the Advanced Practitioner role. These role incumbents are experienced clinical professionals who have developed their theoretical knowledge and skill to a very high standard. They can make some decisions and often have their own caseload, carrying out tasks previously performed by another professional, such as nurses and allied health professionals (AHPs) undertaking tasks previously assigned to doctors.

In addition to the above service improvement methodologies, other tools and techniques which can be improved to bring about improvement include SWOT analysis, brainstorming, creative thinking tools, facilitated team events.

Where can I find out more?

A wealth of information is for now available via the NHS Institute for Innovation and Improvement website

<http://www.institute.nhs.uk>. The Institute has a range of resources available for download and purchase.

establish a deep
understanding of
your customers

4.3 Evaluation Tools

Project evaluation tool

What is it used for?

To evaluate the effectiveness of an OD intervention, and provide client reports on whether objectives have been met, making appropriate recommendations moving forward.

Overview

Evaluation measures the extent to which objectives have been met, highlights achievements, identifies areas for further improvement, and makes recommendations on further actions to be taken to fully achieve the desired aims.

Where can I find out more?

NHS Institute for Innovation and Improvement have produced a series of 'Improvement Leader' guides, including 'Measurement for Improvement' which can help in evaluating the effectiveness of an OD project or intervention.

The Joint Information Systems Committee (JISC) website provides useful information on undertaking a project evaluation, providing sample questions and highlighting methods that can be used to evaluate impact.
www.jisc.ac.uk.

The National Science Foundation – Directorate for Human Resources and Education have

made 'The 2002 User-Friendly Handbook for Project Evaluation' available on their website, which is comprehensive document providing information and guidance on completing all stages of a project evaluation.

<http://www.nsf.gov/pubs/2002/nsf02057/>

Training Evaluation

What is it used for?

To evaluate the effectiveness of a training intervention, and to determine the level of return on investment, making appropriate recommendations for improvement to reduce the skills and knowledge gap, and deliver further benefits for the organisation.

Overview

The CIPD defines training evaluation as a process which "involves the formal or informal assessment of the quality and effectiveness of an employer's training and learning provision, usually either by some measure of the merit of the provision itself (the input, for example the quality of course content and presentation) and/or by monitoring its impact (the outcomes, for example improved skills/qualifications or enhanced productivity/profitability)".

According to Kirkpatrick, evaluation takes place at four different levels and goes beyond using "happy sheets" at the end of training sessions. Kirkpatrick (1959) put forward a

model which still has significant relevance today, outlining four levels for training evaluation:

- reactions – the degree to which participants like or react favourably to the training programme
- learning – have the participants acquired the intended knowledge, skills, attitudes, confidence, and commitment based on their participation in a training event?
- behaviour – the degree to which the participants have applied their learning to their jobs
- results – from an organisational perspective, how performance has improved as a result of participants applying their learning, such as increased productivity, or reduced customer complaints

To evaluate the effectiveness of a training programme, using surveys, questionnaires, interviews, focus groups, development centres and observations can all help to determine if the programme has helped to create the behavioural change improving organisational performance.

Where can I find out more?

www.businessballs.com – See to section on Human Resources – Training Programme Evaluation.

www.cipd.co.uk - The CIPD paper 'Value of learning: assessing and reporting on the value of learning to your organisation' provides practical tools to assess and report on the value of learning and training to the organisation. The website also features a useful Factsheet entitled 'Evaluating learning and talent development', setting out what training evaluation is, its purpose and an overview of how to complete an evaluation.

www.kirkpatrickpartners.com - the official website for the Kirkpatrick model, providing a range of resources and guides on how to complete a training evaluation.

Equality Impact Assessment

What is it used for?

An equality impact assessment examines the potential effects of policies or services on people in respect of age, disability, ethnicity, gender, gender identity, religion or belief and sexual orientation as well as socio-economic disadvantage and human rights. It helps ensure that the needs of everyone are taken into account when developing and implementing a new policy or service, or changing a current policy or service.

Equality impact analysis is a way of considering the effect on different groups protected from discrimination by the Equality Act, such as people of different ages. There are two reasons for this:

- to consider if there are any unintended consequences for some groups
- to consider if the policy or change will be fully effective for all target groups.

Using equality information, and the results of engagement with protected groups and others, can help understand the actual or potential effect of your functions, policies or decisions. By identifying practical steps to tackle any negative effects or discrimination, you can help advance equality and foster good relations.

Overview

Equality impact assessments should cover all strands of diversity and can help organisations gain a better understanding of the impact of its functions and the way it makes decisions, by:

- considering the current situation
- deciding the aims and intended outcomes of a function or policy
- considering what evidence there is to support the decision and identifying any gaps
- ensuring it is an informed decision

All NHS organisations will have a standardised process in place for carrying out these assessments internally, and as an OD practitioner you would use this tool when considering the proposal for change you are putting forward, prior to its implementation, allowing you to step back and consider its implications on all groups.

Where can I find out more?

<http://www.nsf.gov/pubs/2002/nsf02057/> NHS Employers website contains guidance and template documents to use when carrying out an impact assessment.

Department of Health (2011) Paper titled – 'Improving Outcomes: A Strategy For Cancer, Assessment of the Impact on Equalities.' <https://www.gov.uk/government/publications/the-national-cancer-strategy>

Transactional versus Transformational Evaluation for Organisations

Transformational Elements:	Leadership	Customer	Business	Delivery
External Environment Key questions <ul style="list-style-type: none"> • What are the key external drivers? • How are these likely to impact on the organisation? • Does the organisation recognise these? 	Understand how leadership influences decision-making?	Understand level of customer commitment?		Detailed delivery model? How to service customers?
Mission & Strategy Key questions <ul style="list-style-type: none"> • What do top management see as the organisation's mission and strategy? • Is there a clear vision and mission statement? • What are employees' perceptions of these? 	Clear vision and purpose? Shared?	Clear on how you will delight the customer?	Aspirations supported by corporate objectives?	Clear alignment in underpinning strategies?
Leadership Key questions <ul style="list-style-type: none"> • Who provides overall direction for the organisation? • Who are the role models? • What is the style of leadership? • What are the perspectives of employees? 	Leadership team identified?	Customer confidence in Leadership?	Detailed operating model?	Compelling Business Plan?
Organisational Culture Key questions <ul style="list-style-type: none"> • What are the clear and covert rules, values, customs and principles that guide organisational behaviour? 	Staff engaged / buy-in?	Staff have customer focus?	Culture defined. Clear view of behaviours and attitudes required?	Capability gaps identified and development plan agreed?
Individual & Organisational Performance Key questions <ul style="list-style-type: none"> • What is the level of performance in terms of productivity, customer satisfaction, quality, etc? • Which factors are critical for motivation and therefore performance? 	Processes to monitor / manage workforce performance? (People held to account)	Processes to monitor / manage customer satisfaction?	Processes to monitor / manage overall business performance?	Mechanism to check & challenge performance?

Transactional Elements:	Leadership	Customer	Business	Delivery
Structure <ul style="list-style-type: none"> • How are functions and people arranged in specific areas and levels of responsibility? • What are the key decision-making, communication and control relationships? • Changes in structure, in the future? 	Defined leadership roles and responsibilities (management)?	Clear Account Management roles?	Clear organisation structure (teams)?	Defined team to service customer?
Systems <ul style="list-style-type: none"> • What are the organisation's policies and procedures, including systems for reward and performance appraisal, management information, HR and resource planning, etc? 	Management info	Customer info (e.g. BI)	Underpinning systems (Back Office)	Delivery info
Management Practices <ul style="list-style-type: none"> • How do managers use human and material resources to carry out the organisation's strategy? • What is their style of management and how do they relate to subordinates? 	Meetings, Comms	Communications	Governance arrangement	Procedures - How customer managed?
Work Unit Culture <ul style="list-style-type: none"> • What are the collective impressions, expectations and feelings of staff? • What is the nature of relationship with work unit colleagues and those in other work units? 	Clear role model behaviours?	Educate customer?	PR	Feedback?

Transactional Elements:	Leadership	Customer	Business	Delivery
Tasks & Individual Skills <ul style="list-style-type: none"> • What are the task requirements and individual skills/abilities/knowledge needed for task effectiveness? • How appropriate is the organisation's "job-person" match? • Staff Competencies? 	Management skills?	Customer skills	Business & Commercial skills?	Delivery skills?
Individual Needs & Values <ul style="list-style-type: none"> • What do staff value in their work? • What are the psychological factors that would enrich their jobs and increase job satisfaction? 	How do leaders need to be different?	How will they be different?	How does the business need to be different?	How will you operate differently?
Motivation <ul style="list-style-type: none"> • Do staff feel motivated? • Do staff feel motivated to take the action necessary to achieve the organisation's strategy? 	Understand what makes staff tick?	Understand what makes customers tick?	How good is business health?	Is the business growing?

The template below is an example of how the information gleaned via use of transactional versus transformational evaluation forms might be recorded in the form of an OD intervention. Other examples of project documents can be found for now via www.institute.nhs.uk

OD Intervention Definition Statement

Name, title and contact details of person requiring OD intervention

Name, title and contact details of person responsible for OD intervention

Background description of rationale for OD intervention

To include relevant quantitative information.

Key stakeholders and their requirements

Please note that if a large OD intervention these stakeholders may be different to the project team members.

Aim of the OD intervention

Desired OD outcomes

Specify what needs to be achieved (high level) to meet the aim.

Key deliverables and timescales

Specify the start and finish points and key tasks that are to be undertaken with timescales. This will form the basis of a project plan.

Success measures

Specify how the OD intervention will be evaluated, including organisational metrics such as those relating to improvements in staff engagement, efficiencies, quality, inclusion and potential return on investment.

Resources

List what will be needed to successfully complete the OD intervention. This should, if relevant to the size of the intervention, include the identification of a Project Manager.

Assumptions

Constraints

Risks

Costs and resources needed

These should be specified in detail and linked to the assumptions being made.

Signature(s) of all key stakeholders

Authorisation for OD intervention:

Cost code(s):



5. Summary

5.1 Using this toolkit

In using the information in this booklet, remember to:


- Challenge and refine thinking and understanding before taking action.
- As potentially considerable resources are applied to OD, it is important to know that the expected outcomes are being achieved, requiring systems and processes that track performance against expectations or benchmarks.
- Some of these may already exist and be extensively used, such as staff surveys, but it may also be necessary to develop measures specifically for the OD being undertaken. A good starting point for deciding on, and assessing the value of, any proposed performance measure is to revisit what has been stated as desired outcomes and success measures. If these do readily lend themselves to (existing or new) performance measures this may mean that they are not well enough defined, or that a less quantitative, but not necessarily less valuable, tracking measure may need to be developed.
- Part of working in OD is helping others to

articulate their requirements, and a thorough discussion and record of the issues is vital. This often prompts further refinement, and creates more effective use of resources. It is important to record what is decided upon as this will focus the aim of the OD, and provide opportunity for review and reflection.

- Plan and test the plans – a higher degree of thinking and planning in the earlier stages will improve implementation throughout the project. Piloting is a helpful part of the testing and refining process.
- For larger OD activities use project management techniques to manage the stakeholders and project.
- Ask what has been successful before and understand the factors that led to that success - seek to replicate and build on that.
- Involve as many people as possible but not too many!
- Use or adapt what you already have, rather than 're-inventing the wheel'.
- Hold regular reviews of progress and act swiftly where matters go 'off-track'. Never

plough on regardless in the face of significant problems - they are unlikely to go away and will need specific action to resolve.

- Remember to celebrate successes.
- Research where expertise can be found internally and externally. Consider the merits of using this expertise while ensuring that skills are transferred into the organisation.
- When planning, aim to achieve early and quick wins in any transition or change. This helps to build confidence and bring tangible, visible, practical meaning to the intervention.
- Be prepared to challenge to test and understand perceptions. Done constructively this can be a very valuable aspect of surfacing and managing conflict with the aim of achieving an improved outcome which is sustainable in the long term.



And take care with the information in this booklet, because...

- Ignoring resistance and conflict will not usually make it go away. Change is often associated with an OD activity, and people respond to change in a variety of ways. It is likely that those involved with leading or managing change will encounter resistance, but it can be anticipated and support put in place to help people through the change.
 - It is unlikely that you will be able to achieve everything at once. Apply time and planning to a considered plan of small and large steps based on achieving the organisational Vision through clear strategy. People will move forward through change at different rates.
 - It is possible to be too rigid. The aim of what is being undertaken should stay the same but feedback may alter the shape and timings of how you achieve it. It is important to be adaptable and flexible while keeping in sight the overall aim.
- It is easy to focus on just getting something going. It is often easier to start an intervention than to maintain, extend and complete it. Different expertise may be needed for the start than for the maintenance and finish. Ensure your plans take account of the need to follow through and embed to be successful and sustainable.



change is often associated
with an OD activity



5.2 Conclusion

OD is a complex subject area which has the very real potential to provide practitioners with broad and diverse work that is both challenging yet very rewarding. We hope you will be able to use this Toolkit as a key resource in your work, providing useful information which will help inform your practice, and assist in your future development both personally and organisationally.

Moving forward, your challenge is applying your knowledge and understanding of OD, the tools and techniques, to make a real difference. It is important that you seek to put into practice what you have learnt and start demonstrating how OD can make a tangible difference to the care provided to patients and service users. This can only be achieved through action.

The North West Leadership Academy wants to hear your stories of how you have embedded OD into your place of work.

As a community of OD practitioners, we need to promote the successes achieved and demonstrate the pivotal role OD has in delivering a high quality service.

It is the intention of the NHS North West Leadership Academy to develop an electronic, interactive online platform by which we can share our knowledge, skills, expertise and experiences and a way of learning from each other.

where is your talent, who
are your champions?



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