



**E.C.L.O.**

**European Consortium for the Learning Organisation**

## Creating the Capacity for Change – Glasgow, 2006

### **Personal Experience of Large Scale Change in the Health Sector - Insights for Creating Capacity for Change**

The Health Service Executive (HSE) in Ireland has been engaged in a comprehensive reform process since 2003, which involves merging eleven organisations and specialist organisations into one organisation creating a unified health service and thereby becoming the largest employer in the Irish State. A Change management team were established. The manner in which this reform progressed through a Change Management Team is the area of interest in this study. The presenters were both members of this team.

This presentation will outline the framework and background to undertaking a phenomenological approach in analysing the experience of the change management team. Phenomenology aims to discover the individual's own experience of an aspect of their lives, to provide a clear picture from the participant's point of view. Qualitative data describe and communicate someone else's experience, 'so that we know what it was like to have been there' (Quinn Patton, 2002). The presenters will use personal construct theory to provide a framework for exploring our experiences of the change programme.

Therefore, the learning from this study will highlight lessons which the Health sector (and other organisations) can learn from the participants experience in the Change Management Team with regard to undertaking major scale change.

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## The Role of Leadership in Creating Capacity for Change

How does change happen? Why do some individuals adapt faster than others? How can some groups make a transition, while others seem to get 'stuck'? Why do some organisational systems stubbornly resist change? What do specific clients need and to what degree does this call for flexibility? Does leadership have a role in creating, initiating, driving or enabling change? If so what and how?

In this presentation, Joe Lafferty draws from his consultancy work, along with his research and learning from a wide range of perspectives on leadership, complexity and organisational dynamics (in particular Heifetz and Koestenbaum). The questions posed are complex and difficult – and while there is no single solution or answer to these problems, the goal is to stimulate thinking around the idea that one of the key 'tasks' of leadership is creating capacity for change. Therefore, the presentation will have a practical outcome, not so much with 'tips' for leadership, but a considered framework for what leaders need to do to create capacity for change in themselves and also in the organisations they have a responsibility to lead or steward.

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## Embedding Innovations

Diane McDonald, Paul Maharg, University of Strathclyde and Martin Owen, Futurelab

The University of Strathclyde has built a considerable reputation in innovative technology enhanced learning with projects such as the Transactional Learning Environment (TLE), DIDET and REAP. These highly innovative approaches tend to develop from the bottom up within devolved departmental structures. How to embed such innovative approaches to learning across loosely coupled organisations such as a university is challenging. Providing the right level of leadership, support, incentives, good practice advice and change management is crucial to success.

TLE aims to try to address these issues and develop new insight and knowledge into how best to achieve these. The project, part of a UK-wide programme to improve the institutional wide embedding of innovative technology, aims to roll out a transactional learning approach to teach professional practice and build professional competencies across the University and partner institutions across the UK.

Using the ongoing TLE project as a detailed case study, we examine how large/decentralised organisations can engender change using both activity theory and insights from complex systems to provide theoretical underpinning for the approach adopted. In particular, we examine the role of ongoing evaluation processes in change management and the reconciling of differing contexts drivers, success factors within devolved organisational structures.

### Additional details

This contribution will combine academic paper with a practitioner-based case study that implements an approach drawing on activity theory and insights from complex systems. The session will take the form of a 15-20 minute presentation which presents our work to date and will finish by posing some question designed to stimulate audience discussion on the approach presented and its relevance to other public sector organisation. An accompanying paper will provide attendees with more detailed background information for later reflection and reference.

PowerPoint will be used along with handouts and access to flip charts would be desirable.

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## Planning and Delivering Major Contributions to a City's Regeneration Programme

My presentation would be based on my direct experience of current work with a large Acute Health Trust to plan and deliver major contributions to a city's regeneration programme. It will include perceptions of the impact of political, economic and social dynamics on organisational learning and change within the Trust.

The focus is on the Central Manchester and Manchester Children's University Hospitals NHS Trust. The Trust currently employs in excess of 8000 staff. This will rise to 11,000 staff by 2010 when the current £500,000,000 PFI redevelopment programme is complete. Manchester Royal Infirmary, the Children's Hospital, the Eye Hospital and Medical School have well established reputations, as have the state-of-the art, co-located biomedical, genetic and stem cell research facilities.

These beacons of health service provision lie within five of the most socially and economically deprived wards in the UK, where unemployment lies above 30% and drug related and gun crime is endemic. The challenge for the Trust is to turn around the public perception of its Ivory Tower status and contribute directly to the development of the economic and social well being of the city, particularly for those residents in the five local wards.

The Trust's programme is driven down five parallel channels, all supported by Trust Board members and key elected members and officials in the city council:

- Aligning Trust policies and resource utilisation with that of its key partners, such as the city council and local Universities
- Increasing access to employment within the Trust for residents in the five key wards
- Increasing access to procurement opportunities within the NHS for owner/managers of small and medium size enterprises in the city, particularly those owned/managed by members of the black and other minority ethnic communities
- Generating income for further research and development to drive forward the world class status of the Trust
- Investment in the development of its own staff to drive up skills, further develop service quality and make the Trust a preferred place to work and have a career in health.

This scenario encapsulates the political, economic and social dynamics inherent in all regeneration programmes and the tensions that lie in the spaces between the different major agendas of powerful organisations that are still learning the real meaning of partnership in the public sector and the critical requirement for well led, well managed multi-disciplinary and multi-agency working.

The examples chosen to illustrate these key points will be drawn from the drivers for social and economic regeneration and the crucial need to address the long term issue of recruitment and retention of local, well qualified and committed staff within the NHS.

David Settle

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