Managing Change: A Physician’s Perspective

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• Master Research Agreement and other educational/training grants with Varian Medical Systems

• Other research grants:
  – Cianna Medical
  – LinaTech
  – Standard Imaging

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Field of its own

Multiple well-known experts

Today my perspectives as a Physician and Department Chair
Change is Our Way of Life at UCSD
UCSD 2006

La Jolla

Small Division of Radiology
5 Faculty (3 MD, 2 Physicists)
2 Linacs, 500 patients/year
Skeleton Staff
No Satellites, No Residency Programs, No Research Programs
UCSD 2013

Satellite South Bay
Satellite East County
Satellite Encinitas
La Jolla
Scripps Proton Center

Large Academic Department
52 Faculty (17 MDs, 19 Physicists, 16 Researchers)
7 Linacs, 3500 patients/year
>150 Staff

Multiple Satellites, 2 Residency Programs, Large Research Program Partnership with Scripps Proton Center

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Objectives

• Describe types and components of change
• Define the leader’s role in change
• Describe way to deal with change resistance
• Discuss what makes an effective meeting
Types of Change

• Incremental
   – Targeted at fixing a narrow problem

• Transformative
   – Targeted at modifying fundamental process structures of a system
Incremental Change

• Standardization of Breast Cancer Treatment
  – Who gets enrolled on RTOG?
  – Who gets partial breast versus whole breast?
  – What dose and fractionation do we use?
  – When do we treat the supraclavicular nodes?
  – What dose and fields do we use in post-mastectomy patients?
  – What lung metrics are used to evaluate a plan?
  – When to treat prone?
  – When to use deep-inspiration breath hold?
Incremental Change

• Not a major problem when there is:
  – One doc, one dosimetrist, few physicists, few therapists

• Increasingly a problem when there are:
  – Multiple docs, multiple dosimetrists, multiple physicists, multiple therapists
When does it clearly become a major problem?
When the Chair has to cover for physicians on vacation!
Transformative Example

Dosimetry Reporting Structure

– Inherited a structure whereby the dosimetrists did not report to physics but up through the hospital administration
  • Far from ideal, un-even workloads, lack of accountability
– Implemented a fundamental change whereby the dosimetrists reported directly to physics
Transformative Example

Hospital

Dosimetry

Physics
Transformative Example

- Hospital
- Dosimetry
- Physics
How to make change happen?
How not to make change happen!
Change is a Process
With Multiple Components

- **Cost**
  - Monetary, workload, stress, etc.

- **Incremental Example (Breast Standardization)**
  - Not a financial issue but added stress on the breast faculty who may (will) disagree with the new standards

- **Transformative Example (Dosimetry Re-organization)**
  - Major upheaval in the jobs of the dosimetrists and the physicists
  - Increased compensation/incentives of the involved physics faculty
Change is a Process
With Multiple Components

• Need
  • How painful is the current state of affairs?
• Incremental Example (Breast Standardization)
  – Considerable inefficiencies, decreased quality, decreased clinical trial enrollment, stress on covering faculty, stress on the dosimetry staff
• Transformative Example (Dosimetry Re-organization)
  – Considerable inequities in workload, lack of accountability, hard workers get penalized, lack of alignment with physics’ division goals

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Dosimetry Work Load Metrics

Team Breakdown

<table>
<thead>
<tr>
<th>Date</th>
<th>Efficiency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dos1</td>
<td>1.19</td>
</tr>
<tr>
<td>Dos2</td>
<td>1.08</td>
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<tr>
<td>Dos3</td>
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<td>Dos5</td>
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<tr>
<td>Dos6</td>
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</tr>
</tbody>
</table>

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Change is a Process
With Multiple Components

• End State
  • Is the end state perceived as better or worse?

• Incremental Example (Breast Standardization)
  – Certainly perceived as better by the staff and physics
  – But do the physicians agree?

• Transformative Example (Dosimetry Re-organization)
  – Better distribution of workload, better accountability, no workers get penalized, alignment with physics’ goals
  – But decreased autonomy
Change is a Process With Multiple Components

- **Strategy**
  - Is it ambiguous or clear?
- **Incremental Example (Breast Standardization)**
  - Clearly defined process with input of involved physicians, dosimetrists and physics staff, literature-based
  - Written document with annual updates
- **Transformative Example (Dosimetry Re-organization)**
  - Meetings with individual dosimetrists explaining process and multiple group meetings
  - 360 annual evaluations
Since we are at AAPM...
Change happens when $C < N^E^S$

- Cost of change ($C$)
- Need to change ($N$)
- End state of change ($E$)
- Strategy to affect the change ($S$)
How to Affect Change?

Change happens when $C < N \times E \times S$

- Cost of change ($C$)
- Need to change ($N$)
  - Educate people on why change is needed
- End state of change ($E$)
  - Ensure that the end state is clearly defined to all involved
- Strategy to affect the change ($S$)
  - Clearly define, involve parties and document
Two Aspects For Change to Occur

• Cultural or organizational strategy
  – This is how leadership views the world

• Technical strategy
  – How you’ll get this done given the current infrastructure and resources allocated
Achieving Change – Step 1

• **Assess readiness for change**
  – General interest
  – Perceived chance of success
  – Degree of management support
  – For transformational change, also assess
    • Alignment of change with organizational values
    • Adequate resources (time, money, human capital)
Achieving Change – Step 2

• Create a vision for the change
  – Where are we heading and why?
  – Include a sense of urgency

• Designate a leader
  – Clarify roles, responsibilities and expectations
  – Provide resources and rewards for behaviors

• A steering team can be useful
  – Especially for larger change efforts
Steering Team Characteristics

• Members should have credibility
  – Technical knowledge
  – Personality

• Systems thinking approach
  – Appreciate connectedness of all areas

• Create an implementation plan
  – Deliverables at each phase of the plan
  – Regular report out to the change leader

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Leader Characteristics

• Demonstrate excitement
• Communicate early successes
• Be visible with public commitment
• Able to motivate key stakeholders
• Good liaison to senior leadership
Achieving Change – Step 3

- Pilot test of the change
  - Good for large and small projects
  - Use Plan-Do-Check-Act (PDCA) Strategy
  - Find weak points and fix before proceeding
    - People or procedures
  - Use lessons learned from pilot test to disseminate the change to the wider group
Achieving Change – Step 4

- Institutionalize the change
  - Make it part of everyday life (policy)
  - Perform audits to ensure change has taken hold
  - Acquire baseline data and continued monitoring
  - Communicate successful change at later times
Reasons for Resistance to Change

- Unclear of unfocused end state
- Inappropriate change strategy
- Self-interests
- Office politics
- Historical inertia
  - We’ve always done it that way
- Lack of trust
Dealing with Resistance

• Allow some flexibility
  – Change is not a linear process

• Be prepared to actively manage resistance

• Resistance may not be explicit expressed
  – Look out for “passive-aggressive” behavior

• The change leader and steering team must listen to key stakeholders
  – Understand sources of concern, empathize
Dealing with Resistance

- Reiterate why change is necessary
- Minimize negative reinforcement
  - Should be balanced with positive reinforcement
- Give strokes for doing, not being
- Know that coercion (“The boss rules.”) does not create lasting change
- If you convert an influential resistor, others tend to follow
Running an Effective Meeting

• Comments on managing change would be incomplete without touching on the topic of effective meetings

• Most meetings are poorly run, have inadequate facilitation, little or no decision-making, no closure and little or no followup
Effective Meetings

• Create a clear purpose for the meeting
  – Create a plan
  – Make a decision
  – Share information
  – Solve a problem

• Attendees should know why they are coming to the meeting and what is their part
Effective Meetings

• Send a agenda beforehand
  – Helps keep focus on the task at hand

• Separate roles in the meeting
  – Leader
  – Facilitator
  – Recorder
Effective Meetings

• Leader
  – Person who calls the meeting and sets the agenda

• Facilitator
  – Person who tactfully keeps the meeting on time
    • Cuts off those who run-on but remains neutral
  – Summarizes thoughts for the group

• Recorder
  – One who takes and distributes the minutes
Summary

• Effective strategies exist to facilitate change
  – Know the type of change you’re attempting
  – Apply a change management strategy
  – Use a team and change leader
  – Identify and effectively deal with resistors

• Poorly run meetings can be a point of stress
  – Makes the process of change more difficult