



OE

ORGANIZATIONAL | EFFECTIVENESS

Organizational Effectiveness Handbook

Version 5.0

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- GG. Strategic Partnerships
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- JJ. Role Clarification**
- KK. Strategic Staff Development**
- LL. Anchoring Values in Practice Supervision and Leadership**



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APHSA Overview

The American Public Human Services Association (APHSA), founded in 1930, is a nonprofit, bipartisan organization of state and local human service agencies and individuals who work in or are interested in public human service programs. APHSA pursues excellence in health and human services by supporting state and local agencies, informing policymakers, and working with our partners to drive innovative, integrated and efficient solutions in policy and practice.

APHSA's Organizational Effectiveness (OE) team provides consulting products and services to help state and local public human services agencies continuously improve their performance and capacity. APHSA's OE consultants have facilitated more than 70 improvement projects with public human service organizations in over 30 states. This handbook is a compilation of tools and materials developed in the course of completing and reflecting on those projects.

Organizational Effectiveness Team

Phil Basso

Phil Basso is APHSA's Director of Practice Innovation and Organizational Effectiveness. Since 2004, Phil and his team have completed over 70 improvement projects at the state, regional and local levels within more than 30 states. Phil is the primary author of national child welfare guidance for Strategy and Change Management and he developed the DAPIM™ and Pyramid of Influence models for continuous improvement. Prior to joining APHSA, Phil spent 15 years in the corporate sector, including eight years as a human resources and general management executive with PepsiCo, Citigroup and Lexis-Nexis. Phil earned a BA with Honors in Sociology from SUNY-Binghamton, a Masters in Industrial and Labor Relations from Cornell University, and 18 doctoral credits in Educational Planning, Policy and Leadership from the College of William and Mary.

Melissa Kanaya

Melissa Kanaya, APHSA Senior Program Associate, has main oversight responsibility for the Positioning Public Child Welfare Guidance, a project to develop standards and guidance for the field of public child welfare, and responsibility for a broad range of project management efforts at the Association. Prior to this position, Melissa worked in direct service to start an AmeriCorps Program and was a Program Coordinator of a welfare-to-work program. Melissa has a Bachelor of Arts degree from the University of Washington, a Master's degree from Georgetown University, and a Master's degree from American University.

Kathy Jones Kelley

Kathy Jones Kelley, APHSA Organizational Effectiveness Consultant, specializes in products and consulting services that focus on the continuous improvement of organizational performance and performance capacity. Kathy has worked in the human services field since 1983 and since 1992 has focused on the development and delivery of training curriculum, transfer of learning, and organizational effectiveness products and services for the child welfare field. Kathy has led major improvement efforts in Pennsylvania promoting workforce development, leadership development and organizational effectiveness and their impact on child and family outcomes in child welfare.

Robin O'Brien

Robin O'Brien, APHSA Organizational Effectiveness Consultant, has 15 years experience managing projects and programs in the nonprofit, public and corporate sectors. Since joining APHSA in 2005, Robin has spearheaded OE product development and marketing efforts and led or facilitated strategic planning, workforce capacity building, and continuous performance improvement efforts for a range of state and local human services agencies. Robin received BA's with honors in History and Government & Politics from the University of Maryland at College Park and a Masters in Industrial-Organizational Psychology from Baruch College, City University of New York.

Jon Rubin

Jon Rubin is an Organizational Effectiveness Consultant with APHSA serving state and local members by providing program development consultation and continuous improvement support. After receiving his Masters Degree in Social Work from Temple University, Jon began his career as a social worker in the child welfare field, eventually becoming a supervisor and Administrator for Child Protective Services at the county level. During that time, Jon frequently provided training and technical assistance regarding child protective services to staff and the local community along with his other duties. After 15 years of

direct service practice, Jon became an Organizational Effectiveness Specialist for Pennsylvania's Child Welfare Training Program and prior to joining APHSA served as the Interim Director for the Training Program. Jon is also an experienced therapist, having provided individual, family, and group therapy.

Contact Us

For additional information on APHSA and/or the Organizational Effectiveness Department visit our web-site at www.aphsa.org or email us at oeinfo@aphsa.org.

Acknowledgments

APHSA is continuously improving its Organizational Effectiveness (OE) products and services based on the real life experiences of the states, counties, and organizations that have engaged in continuous improvement efforts with our OE staff. We would like to acknowledge the following states, counties, and organizations for the contributions they have made:

Arizona Department of Economic Security

- Workforce and HR Functional Capacity-Building Institute
- Supervisor and Manager Development- Various Local Offices
- Sustainability- Developing an Internal OE Consulting Team

Arkansas Department of Human Services Division of Child and Family Services

- Child Welfare Supervisor Practice Model

California Health and Human Services Agency

- Workforce and HR Functional Capacity-Building Institute
- (for both the State and LA County)
- Comprehensive Organizational Assessment- Ventura County
- HR Functional Assessment and Improvement Planning- Ventura County
- Supervisor and Manager Development Program- Ventura County
- Executive Team Assessment and Improvement Planning- Santa Cruz County
- Positioning Public Child Welfare Guidance Institute- Calaveras County
- Sustaining TANF-Child Welfare Collaboration (Linkages)

Casey Family Programs

- Building Workforces Capacity through a Child Welfare Practice Model
- Developing an Internal OE Consulting Team (Technical Assistance Unit)
- Developing a Child Welfare Alternative Cost Modeling Approach

Center for Workers with Disabilities

- Stakeholder Assessment and Planning- Rhode Island Summit

Colorado Department of Human Services

- Positioning Public Child Welfare Guidance Institute- Larimer County
- State-wide Practice Model Development and Implementation

Connecticut Department of Child and Family Services

- Practice Model Implementation – Regional Support

Delaware Department of Health and Social Services

- Strategic Support Function Improvement- Policy Support

District of Columbia Child and Family Services Agency

- Positioning Public Child Welfare Guidance Institute
- Workforce and HR Functional Capacity-Building Institute

District of Columbia Department of Human Services

- Major System Transformation

District of Columbia Department of Disability Services

- Leadership Team Development and Agency Continuous Improvement

Florida Department of Children and Families

- HR Function Team-Building

Hawaii Department of Human Services Child Welfare Services

- Communication and Empowerment

Ohio Department of Job and Family Services

- Retention and Succession Planning- Greene County

Kansas Department of Social and Rehabilitative Services

- Strategic Planning and Linkage to Regional Office Planning
- Positioning Public Child Welfare Guidance Institute

Idaho Department of Health and Welfare

- Workforce and HR Functional Capacity-Building Institute

Louisiana Department of Social Services

- Strategic Planning

Lutheran Immigration and Refugee Services

- Supervision Standards and Practices

Maryland Department of Health and Mental Hygiene

- Executive Team Development and Services Integration Planning-
- Montgomery County

Maryland Association of County Human Services Administrators

- Strategic Planning

Maryland Department of Human Resources

- Positioning Public Child Welfare Guidance Institute- Baltimore County

Michigan Department of Human Services

- Practice Model Development and Implementation

Minnesota Department of Human Services

- Linking State-wide and County-level Strategic Planning
- Practice Model and Training System Innovation
- Executive Team Assessment and Improvement Planning - Hennepin County

Mississippi Department of Human Services

- Comprehensive Organizational Assessment, Strategic and Improvement Planning
- HR Service Delivery and Program Improvement Planning
- Performance Based Contracting Implementation Planning
- Workforce Capacity Planning

National Campaign to Prevent Teen and Unplanned Pregnancy

- Institute to Strengthen Pregnancy Prevention Services for Youth in Foster Care

Nebraska Department of Health and Human Services

- Executive Team Development
- Strategic Support Function Development

New Mexico Children, Youth, and Families Department

- Practice Model Development and Implementation

New York State Department of Family Assistance

- Workforce and HR Functional Capacity-Building Institute
- Executive Team Assessment and Development
- Leadership Team Assessment and Development - Yates County

North Carolina Department of Health and Human Services

- Comprehensive Organizational Assessment; On-Line Tool Development and Implementation- Association of County Directors
- Planning for Multi-Year Improvement of Work Support Strategies

North Carolina Children and Family Services Association

- Strategic Planning

Pennsylvania Department of Public Welfare and the University of Pittsburgh School of Social Work

- Strategic and Improvement Planning; Development of Organizational Effectiveness Practice Team- Child Welfare Training Program (University of Pittsburgh)
- Embedding Continuous Improvement Practices at the Central Office, Regional Offices, Various Counties, and the Quality Assurance Function
- On-going Capacity Building of Organizational Effectiveness Practice Team, Supervisors, and Leadership - Child Welfare Training Program (University of Pittsburgh)
- Strategic Planning for Continuous Improvement- Pennsylvania Office of Children, Youth and Families
- Child Welfare Practice Model Supervisory Skills Development - Pennsylvania Office of Children Youth and Families
- Strategic Planning/Communications - Pennsylvania Children and Youth Administrators

Public Consulting Group

- Building OE Capacity
- Strategic Retreat Facilitation
- Workforce Capacity Building for Child Welfare and Juvenile Justice Division
- Workforce Capacity Building for Massachusetts Department of Children and Families Revenue Unit (Outsources Services Provision Unit)

SNL Financial (for-profit financial institution)

- Workforce Capacity Building- Strategic Assessment and Improvement Planning
- HR Function Continuous Improvement
- Executive Coaching

Tennessee Department of Children's Services

- Workforce and HR Functional Capacity - Building Institute
- Mission, Vision and Values Development

Tennessee Department of Human Services

- Supervisor and Manager Team Development - District 6

Texas Department of Family and Protective Services

- Leadership Team Development- All Child Protective Services Regions
- Staff Retention and Culture Change - Houston Region
- Continuous Improvement: Retention and Disproportionality- Child Protective Services
- Sustainability - Developing an Internal OE Consulting Team

Virginia Department of Social Services

- Workforce and HR Functional Capacity - Building Institute
- Comprehensive Organizational Assessment - Hampton County
- Senior Leadership Team Development and Communication Planning – City of Hampton
- Practice Model Development and Implementation – City of Hampton
- Positioning Public Child Welfare Guidance Institute - Charlottesville

United States Marine Corps, Family Services Unit

- Strategic Performance Management

Washington Department of Social and Health Services

- Workforce and HR Functional Capacity-Building Institute

West Virginia Bureau of Families and Children

- Succession Planning- Initial Business Case Development

Wisconsin Department of Children and Families and the University of Wisconsin at Madison

- Practice Model Development and Alignment
- Embedding Practice Model and Continuous Improvement - Various Counties
- Training System Innovation and Building OE Capacity

Guiding Principles of our Practice Model

Open Systems

Social systems, including agencies, are comprised of inputs, performance capacity (leverage of inputs), performance actions and outputs, client impacts, and relationships within their environment, all of which are dynamic and interrelated.

Functional Capacity

Building and sustaining organizational capacity requires a rational organizational structure with well-aligned departments, roles, functions and hierarchical levels.

Effectiveness

Results are best achieved through identifying and improving upon the processes and activities that lead to them, vs. focusing primarily on the results themselves.

Experiential Learning: “Learning by Doing”

Learning is best accomplished by reflecting on one’s own concrete experiences, forming new ideas about them, making specific changes to one’s actions and behaviors, considering the impact of those changes, and making related adjustments. This process, when working effectively, constitutes an ongoing cycle.

Readiness

Readiness to learn, change and perform progresses through stages, with each stage enabling faster and more comprehensive change, requiring less support.

Empowerment

Energy and buy-in for change that is aligned to system goals is best accomplished through increasing participation in decisions, sharing information, and enabling discretion within clear and healthy boundaries.

Relationship-Task Balance

Proficiency in fostering relationships and accomplishing tasks are not either-or or zero-sum propositions. Each benefits from advances in the other or suffers from the lack of those advances.

Facilitation

Effective consulting and facilitation is based on techniques that rely on participant safety, energy, induction and context focus, leading over time to participant accountability, deduction and more systemic generalizations and connections.

Evaluation

Professional development interventions should not be evaluated with a presumed cause and effect that links participant satisfaction, retention of concepts and knowledge, performance, and impact on the overall agency and its clients. These interventions should be directly connected to their impact on performance in alignment with agency or system goals.

Organizational Effectiveness Theory and APHSA Contribution

In formulating our strategy and continuously improving our products and services, the APHSA OE team draws on our experiences working with the agencies acknowledged above and on our review of several theoretical perspectives to identify the basic principles conducive to guiding OE initiatives. Members bring to the team a range of intellectual influences. We examine these influences as a team to identify the value they provide to the agencies we serve and develop models, tools, and methods to put that value into practice. We then refine these models, tools, and methods in partnership with our clients. At times, this process leads us to contribute something new to the theory and practice of OE.

The following are the primary academic and applied sources that have influenced the development of the models, tools, and methods in this handbook. These theories provide the essential conceptual framework and support for APHSA's current technical assistance efforts to help human service agencies' improve their OE capacity.

Theory and APHSA Contribution	“Academic” Sources	“Applied” Sources
<p>Relationship-Task Balance</p> <p>Proficiency in fostering relationships and accomplishing tasks are not either-or or zero-sum propositions. Each benefits from advances in the other or suffers from the lack of those advances.</p>	<p>Daniel Goleman</p> <p>Megan Tschannen-Moran, <u>Trust Matters</u></p> <p>Lee Bolman and Terrance Deal, <u>Reframing Organizations</u></p>	<p>Ken Blanchard</p> <p>Noel Tichy</p> <p>Joseph Grenny, <u>Crucial Conversations</u></p>
<p>Open Systems</p> <p>Social systems, including agencies, are comprised of inputs, performance capacity (leverage of inputs), performance outputs, client impacts, and relationships within their environment (e.g., stakeholders), all of which are dynamic and interrelated.</p> <p>APHSA is defining and testing core “drivers” of performance capacity as well as “levers” that cut across all drivers, including Time Management, Partnership and Collaboration, and Communication.</p>	<p>Wayne Hoy and Cecil Miskel, <u>Educational Administration</u></p>	<p>Peter Senge (Open Systems)</p> <p>Literature on Systems of Care and Services Integration (parallel processes)</p>
<p>Functional Capacity</p> <p>Building and sustaining organizational capacity requires a rational organizational structure with well-aligned departments, roles, functions and hierarchical levels.</p>	<p>Henry Mintzberg</p> <p>Abraham Maslow</p>	<p>David Ulrich</p>

<p>APHSA is defining and testing a model through which organizational activity and the capacity and credibility of its strategic support functions can best be understood and improved.</p> <p>APHSA is defining and testing a range of effectiveness indicators for building an organization’s workforce, data and analysis, finance, quality, and service capacities.</p>		
<p>Experiential Learning</p> <p>Learning is accomplished best by reflecting on one’s own concrete experiences, forming new ideas about them, making specific changes to one’s actions and behaviors, considering the impact of those changes, and making related adjustments. This process constitutes an ongoing cycle when it works effectively.</p> <p>APHSA is defining and testing methods for removing barriers to and enabling experiential learning for teams of adult professionals, including working inductively and “inside-out.”</p> <p>APHSA is defining and testing how experiential learning can be combined with classroom-based training for maximum impact on performance.</p>	<p>John Dewey</p> <p>Chris Argyris (double-loop learning)</p> <p>David Kolb and Roger Fry (single-loop learning)</p> <p>Malcolm Knowles</p> <p>Cognitive Learning and Development Theories (e.g., Jean Piaget)</p>	<p>“Knowing-Doing Gap”, “Learning by Doing,” and “Execution” (Harvard Business Review)</p> <p>Kaplan and Norton W.E. Deming</p> <p>Six Sigma</p> <p>Literature on Therapeutic Practice (a parallel process)</p>
<p>Readiness</p> <p>Readiness to learn, change and perform differently progresses through stages of awareness, application, success, and internalization.</p>	<p>Anita Barbee</p>	<p>See <u>Why CEOs Fail, Fortune</u>, June 1999</p> <p>See <u>Good to Great</u></p>

<p>APHSA is defining and testing a model for determining a client’s readiness and the appropriate type of engagement for them to progress through readiness stages.</p> <p>APHSA is also defining and testing factors for readiness to apply and become self-sufficient with ongoing experiential learning.</p>		<p>Peter Senge (Learning Organizations)</p>
<p>Empowerment</p> <p>Energy and buy-in for change aligned to system goals are achieved best through enabling discretion within clear and healthy boundaries.</p> <p>APHSA is defining and testing specific techniques for clients to use in creating a culture of empowerment.</p>	<p>Rensis Likert</p> <p>National Implementation Research Network (NIRN)</p>	<p>Peter Drucker</p> <p>Literature on Therapeutic and Family Engagement Practices (parallel processes)</p>
<p>Impact Evaluation</p> <p>Professional development interventions should not be evaluated as products with presumed cause and effect links between participant satisfaction, participant retention of concepts and knowledge, later participant performance, and impact on the overall organization and customers.</p> <p>APHSA will be defining and testing an alternative to the Kirkpatrick model for evaluating staff development and training efforts, based on the precept that the impact of professional development services must be focused on participant performance itself.</p>	<p>Michael Fullan, <u>Leading in a Culture of Change</u></p> <p>Donald Kirkpatrick (see for a formative but contrary viewpoint)</p>	<p><u>The Making of an Expert</u>, HBR, July-August ‘07</p>

<p>Facilitation</p> <p>Effective consulting and facilitation rely on participant safety, energy, induction and context focus, leading to participant accountability, deduction and more systemic generalizations and connections over time.</p> <p>APHSA is defining and testing specific, replicable techniques for facilitation along these lines.</p>	<p>Expectancy Theory</p> <p>Mihaly Csikszentmihalyi’s Theory of Flow</p> <p>Amy Edmondson’s Safety and Accountability Model</p>	<p>Tim Gallwey</p>
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Based on the theoretical and field practice perspectives in the table above, we have developed an Organizational Effectiveness practice of models, tools, and methods to help organizations continuously improve their performance, performance capacity and client outcomes. Key OE models include the following:

1. DAPIM™ model, which identifies the steps of systematic continuous improvement (Define, Assess, Plan, Implement, Monitor);
2. Organizational System model, which identifies how the major work of organizations leads to positive outcomes for their clients;
3. Pyramid of Influence model, which identifies how strategic support functions build capacity and credibility through Operations, Key Processes, Structure and Culture, and Strategy work;
4. Learning by Doing, which identifies how adults learn through concrete experience and structured reflection; and,
5. Readiness model, which identifies indicators of organizational preparedness for OE work.

The learning by doing model was first developed by David Kolb; the other models were developed by the OE team.

We have found that the key to success in applying these models and related tools and methods is an adherence to the *principles* in the table above while remaining free to customize models, tools, and methods in this handbook, experiment with novel models, tools, and methods not currently in this handbook, and develop whole new models, tools, and methods to meet client needs. This is precisely how this Handbook was developed, and how it is continuously improved upon at APHSA. While the specific application of these models and the tools that translate them into practice are explained later in this handbook, we want to emphasize the importance of this central point – while the principles of OE are universal, the application of OE differs from client to client, and should continuously evolve based on lessons learned from experiences working with clients.



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Purpose of the Organizational Effectiveness Handbook

The Organizational Effectiveness Handbook (OE Handbook) is a compilation of tools and materials developed by APHSA's OE team since early 2004. The OE Handbook has multiple purposes and uses based on the individual needs of our clients. The overarching purpose of the handbook is to help an organization make continuous improvement a way of doing business.

The OE Handbook can be used in its entirety by facilitator(s) (either internal or external to the organization) guiding an organization through a continuous improvement effort. The handbook can also be used in smaller pieces, as individual chapters are designed to enable facilitators and/or leadership teams to drive continuous improvement in specific parts of their organization or in areas of particular challenge.

Whichever use the client chooses, it is important to understand that aspiring OE facilitators and/or leadership teams cannot simply read the OE Handbook and be prepared to implement OE. Through years of work with state and local human services agencies, APHSA has found that the best way to learn continuous improvement is through a live learning by doing process in which experienced facilitators help participants draw on their knowledge and background to troubleshoot a real life situation in a hands-on way. Through this experience, participants become familiar with the models, tools, and methods in the OE Handbook and see how they play out in real life situations. After experiencing the continuous improvement process first-hand, the participant newly proficient in OE can return to the handbook again and again as a now familiar resource when facilitating and/or leading continuous improvement efforts, marking it up, adding to it, commenting upon it, and continuously improving it as they go.

Introduction to Organizational Effectiveness

Organizational Effectiveness (OE) is a systemic and systematic approach to continuously improving an organization's performance, performance capacity and client outcomes. "Systemic" refers to taking into account an entire system or in the case of OE an entire organization; "systematic" refers to taking a step-by-step approach. In simple terms, therefore, OE is a step-by-step approach to continuously improving an entire organization.

Organizations operate as systems that are made up of the following interconnected moving parts: the **strategy** shared and seen as important by staff within the organization and organization; resources put into the organization to achieve the strategy; and the organization has to advance toward outcomes using available resources



ORGANIZATIONAL | EFFECTIVENESS (performance capacity); activities of the organization towards outcomes (**performance actions**); results of system performance (**outputs**); changes in lives as a result of system performance (**outcomes**); and feedback from clients, staff, partners, key other stakeholders, and the community about how well the organization is achieving its desired outputs and outcomes (**feedback from the environment**). Feedback drives continuous improvement of strategy, which in turn drives continuous improvement of inputs, performance capacity, and performance actions, which in turn drives continuous improvement of outputs and outcomes.

D A P I M TM M O D E L	APHSA has developed a systematic approach called the “DAPIM TM ” approach to continuous improvement that enables real life work teams to drive continuous improvement. The approach involves defining priority improvements in operational terms; assessing observable, measurable strengths and gaps and identifying root causes and general remedies for priority gaps; planning quick wins, mid-term, and longer-term improvements; implementing action plans while managing communication and capacity; and, monitoring progress, impact, and lessons learned impact for accountability and on-going adjustments.
DEFINE	
ASSESS	
PLAN	
IMPLEMENT	
MONITOR	

The seven interconnected parts of the organizational system and five steps of the DAPIMTM continuous improvement approach contain within them many discrete tasks and individual and group areas of work. All organizations have strengths and gaps across this array of systematic and systemic work. This handbook is designed to help organizations leverage their strengths, close their gaps, and continuously improve across all areas of work.

Overview of the Organizational Effectiveness Handbook

<hr/> OE HANDBOOK <hr/>	The OE Handbook is divided into four major chapters:
Chapter I <hr/>	Chapter One: Systemic Continuous Improvement Work
Chapter II <hr/>	Chapter Two: Systematic Continuous Improvement Work
Chapter III <hr/>	Chapter Three: Facilitating Continuous Improvement
Chapter IV <hr/>	Chapter Four: Continuously Improving from the Inside Out - Tip Sheets, Templates, Tools, and Resources

Chapter One: Systemic Continuous Improvement Work introduces facilitators and leadership teams to models, tools, templates, and methods to assess strategic readiness through reflective thinking and define the aim and game plan of the organization through strategic planning. It provides more detailed guidance on how to define particularly challenging aspects of strategy – vision/mission/values, organizational roles, and use of strategic support functions. Resulting work products include a high level organizational assessment and a strategic playbook. The assessment identifies the organization’s strengths, gaps, and priorities for systematic continuous improvement at a high level. The strategic playbook outlines what the organization is, what it intends to do and why, how it will do it, and what it needs to succeed.

Chapter Two: Systematic Continuous Improvement Work introduces facilitators and leadership teams to the DAPIM™ and learning by doing approaches to systematic continuous improvement. Teams engaged in a facilitated learning by doing project or institute become familiar with models, tools, templates, and methods to continuously improve in priority areas, e.g., those identified using chapter one. Work products include the development and implementation of rapid and long-term continuous improvement plans as well as related communication and capacity plans. Participants also learn and practice monitoring techniques to assess their progress and adjust their continuous improvement work as needed.

Chapter Three: Facilitating Continuous Improvement introduces facilitators to the art and science of continuous improvement facilitation. This chapter can benefit organizations seeking to develop in-house facilitation teams, training organizations aiming to become more consultative and facilitative in their practice, and organization leaders seeking to strengthen their own facilitation skills. Participants are introduced to markers of effective facilitation, the flow of continuous improvement projects using the DAPIM™ approach, typical challenges OE facilitators face and ways to overcome them, and tools and techniques to help facilitators be successful.

Chapter Four: Continuously Improving from the Inside Out - Tip Sheets, Templates, Tools and Resources compiles an array of tools that a facilitator needs to facilitate team activities and drill down continuous improvement efforts in specific areas of challenge. Since each effort using the DAPIM™ approach is unique to the client and its real life situation, facilitators must be prepared to adapt pre-set agendas and other materials to emerging and evolving needs of participants. Chapter four provides a tool kit of team activities, templates, tools, and resources covering the areas of drill down continuous improvement encountered most frequently by APHSA's OE facilitators. Any OE facilitator needs to know how to identify and facilitate the right team activities based on the root causes and remedies that emerge from clients' continuous improvement efforts and the facilitator's evolving understanding of the client's strengths and gaps. OE facilitators are encouraged to add to this tool kit based on their own experiences.

In closing, the materials in this handbook aim to help facilitators and leadership teams guide an organization through a continuous improvement process. In keeping with the APHSA OE Department's core belief that adults learn best by doing, the OE Handbook is meant to serve as a resource for reinforcement and sustainability after individuals and teams have experienced a learning by doing continuous improvement effort first hand.

Acronym List

The following is a list of acronyms in the Organizational Effectiveness Handbook:

- AAR** – After Action Review
- APHSA** – American Public Human Services Association
- CI Team** – Continuous Improvement Team
- DAPIM™** – Define, Assess, Plan, Implement, Monitor
- HR** – Human Resources
- OE** – Organizational Effectiveness
- OE Handbook** – Organizational Effectiveness Handbook
- PPCWG** – Positioning Public Child Welfare Guidance



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Chapter One: Systemic Continuous Improvement Work



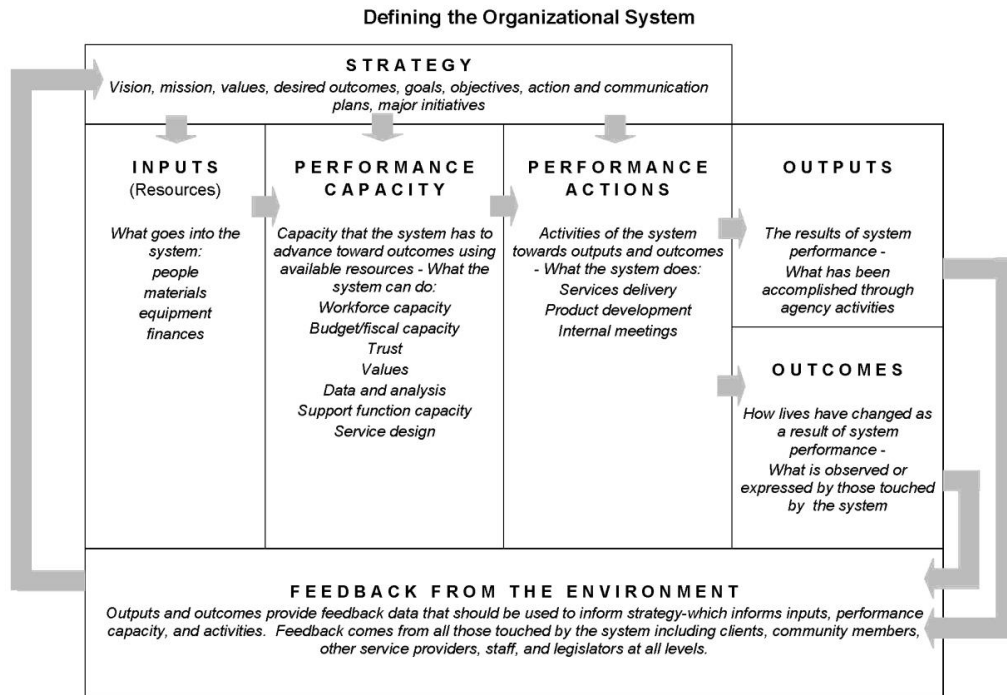
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Overview

This chapter is designed to help facilitators and leadership teams view their organizations as systems of interconnected moving parts, assess their general strengths and gaps across the system, and define the aim and game plan to maximize the organization's performance and performance capacity. Specifically, the chapter introduces models, tools, templates, and methods to assess strategic readiness through reflective thinking and define the aim and game plan of the organization through defining strategy. Resulting work products may include a high level organizational assessment, a strategic playbook, and a roadmap for change. The assessment identifies the organization's strengths, gaps, and priorities for systematic continuous improvement at a high level. The strategic playbook outlines what the organization is, what it intends to do and why, how it will do it, and what it needs to succeed. The roadmap for change identifies how the organization or a community of independent but linked organizations plans to get from where it is currently to where it wants to be. Once an organization or set of partnering organizations has completed the work outlined in this chapter, it is positioned well to drive systematic continuous improvement in high priority areas using the guidance from chapters two, three, and four.

The Organizational System

As introduced in the Preface, organizations operate as systems of the following interconnected moving parts: the aim of the organization (**strategy**) shared and seen as important by staff within the organization and stakeholders external to the organization; resources put into the organization to achieve the strategy (**inputs**); ability the organization has to advance toward outcomes using available resources (**performance capacity**); activities of the organization towards outcomes (**performance actions**); results of system performance (**outputs**); changes in lives as a result of system performance (**outcomes**); and feedback from clients, staff, partners, key other stakeholders, and the community about how well the organization is achieving its desired outputs and outcomes (**feedback from the environment**). Feedback drives continuous improvement of strategy, which in turn drives continuous improvement of inputs, performance capacity, and performance actions, which in turn drives continuous improvement of outputs and outcomes.



Relationship-Task Balance

High performing organizations strike a balance between task and relationship orientation. Organizations that focus too much on tasks can be viewed as autocratic and unfeeling about things like staff motivation and work-life balance. Organizations that focus too much on relationships can be viewed as overly permissive, unreliable in follow-through, and generally laissez faire. Organizations that find a balance between task and relationship are often consultative and/or participative in the way they get things done, with an emphasis on getting things done in sustainable ways. Looking across the organizational system and considering adjustments to ensure relationship-task balance is one key element of an effective, systemic continuous improvement effort.

Reflective Thinking

Reflective thinking involves using a basic set of probing questions to conduct a high level assessment of an organizational system. Reflective thinking can help an organization gain a clear view of its current state, desired state, critical strengths and gaps, and key strategic priorities for reaching desired outcomes.

Organizations can engage in reflective thinking in multiple ways:

First, the leader of an organization may use reflective thinking independently to think through an organization's future. For example, the leader might use insights gained from reflective thinking to secure resources for the organization from a better understanding of its needs.

Second, the leader of an organization may use reflective thinking to help his or her leadership team think together when planning for the future.

Third, a unit within the organization may use reflective thinking to understand more fully understand how it contributes to the organization's overall success.

Fourth, a facilitator of a team continuous improvement process may use reflective thinking to help a team gain full participation of all members and insight from an objective third party.

An Organizational Assessment Reflective Thinking Guide included in the appendix of this chapter can help organizations complete reflective thinking in any of these ways. Regardless of which method is used, reflective thinking can help an organization develop a broad understanding of its current strengths and needs. Taking time to think critically about the organization, whether independently or as a team, is the very work of leadership.

Reflective thinking can also help an organization decide how to pursue continuous improvement. A "soup to nuts" approach is broad-based and recommended for organizations seeking to drive comprehensive system reform, for example in alignment with a strategy like services integration that fundamentally changes the way the organization serves clients. This approach involves defining and assessing the organization's effectiveness across the seven parts of the organizational system, then planning, implementing, and monitoring a similarly broad array of improvements.

An "inside out" approach targets continuous improvement in areas that have persistently needed improvement and/or have high buy-in from staff and external stakeholders. This approach involves defining and assessing the organization's effectiveness more narrowly, then planning, implementing, and monitoring a more focused array of improvements. Examples of typical focus areas for inside out

improvement work include communication, supervision, and targeted business process improvements. A “hybrid” approach combines multiple specific areas of focus into a more systemic package of improvement work, tackling change at multiple levels of an organization or addressing multiple root causes or gaps simultaneously. A typical example of a hybrid approach is development and implementation of a new practice model or model of service. Chapters two, three, and four contain targeted reflective thinking guides for specific continuous improvement topics that can either be elements of a soup to nuts or hybrid improvement effort or the focus of an inside out improvement effort.

Each approach can lead an organization or community of partnering organizations to success, and the three approaches are not mutually exclusive. APHSA has found that the key to sustained organizational effectiveness lies not in where improvement efforts begin, but in whether organizations make continuous improvement a way of doing business, sustaining systematic improvement work over time and slowly but surely expanding the scope of improvement work to be more systemic.

Defining Strategy

Defining strategy involves laying out in a clear, orderly flow the answers to a range of questions about how an organization will achieve outcomes for and with children, youth, families, adults, and communities. The following guidance for defining strategy was authored by APHSA in partnership with a working group of leaders in the field of child welfare. The work was completed with support from Casey Family Programs as part of creating the Positioning Public Child Welfare Guidance, which is available in its entirety online at www.ppcwg.org.

A strategy tells the story of an organization’s aim and game plan in a way that is comprehensive and concrete, yet collaborative and flexible -- much like a “playbook” does for a sports team that must prepare for games without expecting everything to go as imagined. The feel of the plan should be portable, adaptable, and user-friendly so it is accessed continuously and refined often as agencies learn by doing their work, monitoring results, and planning more strategically over time.

The strategic playbook helps to communicate with staff, stakeholders, partners, and the community about who the organization is, what it intends to do and why, how it will do it, and what it needs to succeed. This may result in stronger partnerships, more secure funding and other forms of support, better orienting of new staff, better planning of new initiatives, clarifying roles and expectations throughout the organization, and promoting an overall positive image of the organization and its work.

In the process of developing a strategic playbook, strategic initiatives as well as various activities that can support the development of effective strategy, such as enhanced client or staff surveys, begin to emerge. In APHSA’s experience it is useful for a strategic planning team to begin implementing such efforts at the same time as it is developing a playbook, versus waiting until strategic planning is

complete. Early, concurrent implementation of some plan elements serves to test the thinking of the group, such as when improved survey input is received. It also reinforces a culture of action and follow-through and builds energy for longer-term implementation, as short-term benefits are experienced and the playbook is viewed as driving real action and progress.

A strategic playbook generally consists of the following elements:

1. Vision, Mission, and Values

A vision statement describes how the future will look when an organization's desires and aspirations are realized. Because they encourage people to feel and to dream, effective vision statements help build and sustain motivation, commitment, and collaboration. Examples of vision statements include *Giving Children Back Their Childhood* (Youthville, a private provider in Wichita, KS) and *Children first: Protected and Connected* (Texas CPS). It is easier to forget why we are all here without the vision statement.

A mission statement describes the particular role an organization plays in realizing that vision. Different parts of a community play different and complementary roles in the lives of children, youth, families, adult, and communities. Mission statements clarify what role the organization particularly plays, which also begins to clarify what other roles are needed to achieve the vision. Here is an example of an organization's mission statement:

The Department of Children, Youth and Family Services will, with our community partners, provide a comprehensive child protection system of prevention, preservation and permanency to ensure that children grow up safe, physically and emotionally healthy, educated and in permanent homes.

A statement of an organization's values lets employees, partners and those it serves know the underlying behaviors -- the ways we will treat each other -- that are needed and expected to achieve the mission for and with everyone involved. These values tie directly to how an organization hires, develops and manages the performance of its staff, creates an inclusive and fair culture, and sets healthy boundaries with all of its stakeholders. Typically, an organization's values are further defined through a set of operational principles that describe the value in greater detail.

2. Environmental Challenges and Opportunities

An environmental scan describes the broader community within which an organization operates. It identifies all of the people and organizations that are relevant in achieving an organization's vision and mission, and describes them well enough for the organization to know how best to approach and work with them. Stakeholders such as funders, partners, clients, competitors, media and vendors should all be considered a part of this scan. The scan also

identifies barriers to overcome in the current environment and mandates from the environment such as local, state, tribal and federal requirements or consent decrees which an organization must incorporate into its plans and priorities.

3. Client Analysis and Desired Practice Model

The children, youth, families, adults, and communities served are an organization's clients. Human services clients may first come into contact with the organization voluntarily (e.g., SNAP, Medicaid, TANF) or involuntarily (e.g., Child Welfare). Regardless of how clients first come in contact with the organization, they are most likely to engage in services, accepting supportive services and fulfilling their part in achieving a shared vision, if they believe that the organization's services are of benefit to them. Clients believe what they do about an organization based on both the particular experiences they have with organization staff and services and overall perceptions of the organization in the community. Engaging clients in a meaningful dialogue to understand what they want and need to provide and care for themselves and their families helps an organization determine what to offer and how best to deliver it, resulting in the organization's practice model.

Effective practice models typically include an organization's vision and mission along with an operational set of values and principles that guide practice decisions. Frequently, practice models also include operational practice standards and a description of the skills required to implement desired practice. Some practice models go as far as to describe specific actions and strategies organizations have put into place to implement the practice model. More information regarding Child Welfare practice models can be found on the Positioning Public Child Welfare Guidance described above (www.ppcwg.org).

4. Desired Organization Structure, Culture and Leadership Platform

When an organization is clear about what it wants, with whom it is working, and those it serves need, its leadership can determine how best to structure the organization to get the job done. There are many options for an organization's structure, including by function, program, geography, type of client, or some combination. New or modified roles might be needed, e.g., establishing a community partnership role or office. Project-specific teams such as taskforces and working committees are also part of structure.

Many new leaders opt initially to change their organizational chart, but these changes typically fail to improve organization performance. Any organization structure will have both strengths and liabilities, so it is essential for organization leaders to foster an effective leadership platform and organization culture so that whatever structure it employs is used to the best advantage. The principles and beliefs by which the organization's leaders operate define a shared language and philosophy for the organization as a whole. Cultures can be relatively authoritative or relatively laissez-faire. Human services work requires a strengths-based,

solutions-focused culture that is based on empowerment, characterized by discretion and collaboration within well-defined boundaries.

5. Organizational Strengths, Gaps and Capacity to Change

Identifying the desired practice model and organizational platform enables an organization to compare its current state to the desired one. This comparison, or baseline assessment, translates into a set of observable or measurable statements about an organization's strengths and gaps. As an organization asks why it has gaps, the baseline assessment further translates into a focused set of priority root causes and the general interventions needed to address them. An organization's available resources for and proven ability to implement these types of remedies should then be carefully considered, further focusing its resources and energy for change.

6. Strategic Goals, Objectives and Initiatives

When an organization knows what it wants to accomplish and needs to improve, it can then establish goals, objectives, and initiatives. Goals are the measurable outcomes an organization uses to monitor the impact of its efforts. Objectives focus on general activities and efforts most likely to lead to those outcomes. Initiatives are projects, both large and small, that an organization launches to support these activities. Some small and quickly achievable initiatives, such as a straightforward communication effort, go far in addressing certain improvement areas. Goals, objectives and initiatives should address the full range of an organization's assessment results, including resources (e.g., finances, technology, facilities), workforce capacity, front line practice and stakeholder relationships (e.g., partners, legislators, media).

For example, a goal might be to reduce child abuse, a related objective might be to improve the coping skills of families at risk, and a related initiative might be to collaborate with community partners to deliver a family assistance program focused on abuse prevention. Another goal might be to reduce the high proportion of African American children entering foster care, a related objective might be to improve the objectivity of caseworker decisions, and a related initiative might be to revamp caseworker decision-making tools and techniques. Yet another goal might be to reduce staff turnover, a related objective might be to improve supervision, and a related initiative might be to revamp supervisor selection and development techniques.

7. Major Projects or Work Plans and Commitments

To strengthen follow-through and accountability, objectives and initiatives should translate into concrete action plans and commitments. While an organization's playbook would not include these down to the individual employee level, it should do so for each distinct department or function in the organization. In turn, these departments and functions should align their more specific projects and daily work plans to those identified here.

8. Performance Measures, Timeframes and Governance

The final section of an organization's playbook establishes how progress will be measured and monitored. When an organization monitors its plans and commitments with accurate data that measures what it truly seeks to measure (validity), and then periodically reviews its plan progress, impact on the measures, lessons learned and adjustments to make, its playbook will be a vital, dust-free and "living" document.

A template for developing a strategic playbook is provided in the appendix of this chapter.

Particularly Challenging Elements of Strategy

In APHSA's experience, the following four parts of strategy work are particularly challenging for many organizations:

- Defining mission, vision, values, and practice model;
- Roles to objectives and key initiatives;
- Connecting strategy and change management; and,
- Building strategic support function effectiveness.

Organizations generally do some quality work in these areas but leave out critical steps that prevent everyone in an organization from understanding what is expected of them and how their work contributes to the organization's overall effectiveness.

Vision, Mission, Values, and Practice Model

Vision and mission help everyone internal and external to an organization understand the impact of the organization's work on clients served and society at large. Values help everyone know the behaviors all internal staff are expected to exhibit while performing their work. Practice Models help everyone know how the organization serves its clients. Practice Models include the following elements: desired outcomes, principles, theory of change, evidence informed practice, process and quality of care, and service array.

While many organizations develop written statements of some kind in each of these areas, few communicate them effectively throughout the organization and the community as well as make them operational for use day-to-day. Effective organizations do the following to help vision, mission, values, and other practice model components guide their daily work:

- Define the specific behaviors expected from staff and senior leaders associated with each core organizational value; descriptions of the behaviors should be specific for levels of the organization and job function;
- Develop and align the organization to practice models to support the vision, mission, and values;
- Gather input from internal staff, clients, and key stakeholders when developing and/or updating the vision, mission, values, and practice models for the organization;
- Present new staff members copies of the vision, mission, values, and practice models statement early in their orientation to the organization and discuss how their roles support the vision and mission as well as what the values look like in day-to-day performance;
- Have written copies of vision, mission, values, and practice model statements for reference at each executive team, other leadership team, and work team meeting;
- Reference vision, mission, values, and practice models when making major organizational decisions;
- Cite vision, mission, values, and practice models explicitly in organization-wide communications (for example, when explaining shifts in policy or practice or announcing a major new hire); and,
- Share vision, mission, values, and practice models statements when communicating with external stakeholders and the public at large.

An activity to help teams develop Vision, Mission, and Values statements and make them operational for staff is included in the appendix of chapter four. Guidance to help teams develop a Practice Model is included in the Positioning Public Child Welfare Guidance available online at www.ppcwg.org.

Organizational Roles

Defining organizational roles is another area of work that trips up many organizations. Defining roles involves defining the scope of responsibility for workers at various levels and across various departments of the organization and the knowledge, skills and behaviors required to perform job tasks effectively.

One way to define roles is to identify groups of performers who have generally similar work responsibilities. The **executive team** and its individual members (typically the organization's director and his or her direct reports) generally are responsible for the following work:

- Defining the organization's strategy, including direction, priorities, and goals;
- Creating high level, long range plans for implementing the strategy;
- Creating and managing budgets;
- Securing funding;
- Evaluating the organization's programs, products, and services;
- Building and maintaining working relationships with key external stakeholders;

- Communicating the direction, priorities and overall strategy to staff inside and stakeholders outside of the organization;
- Making timely programmatic and fiscal reports to all appropriate authorities;
- Integrating and coordinating the organization's programs, products, and services;
- Defining initiatives around programs, products, and services;
- Making decisions and changes within the organization;
- Designing the organization for optimal implementation of its strategy;
- Ensuring understanding of how program initiatives impact various parts of the organization (intra-departmental collaboration);
- Ensuring that there are policies, guidelines and processes in place that assist in getting work done in a timely and organized manner; and,
- Securing resources that allow the organization to implement its strategy.

Middle managers are generally responsible for the following work:

- Explaining the organization's strategy, products and services, initiatives, decisions, and changes to supervisors and individual staff members;
- Gathering input about the organization's strategy, products and services, initiatives, decisions, and changes from supervisors and individual staff members and communicating them to senior executives;
- Ensuring that departmental and/or local initiatives and projects are aligned with the overall strategy of the organization;
- Modeling the organization's values and team norms, e.g., by coaching and reinforcing teaming behaviors among departments;
- Developing processes and charters to guide the work of departments, individuals, and work teams; and,
- Ensuring the availability of development opportunities that provide staff with the skills necessary to achieve desired outcomes.

Frontline supervisors are generally responsible for the following work:

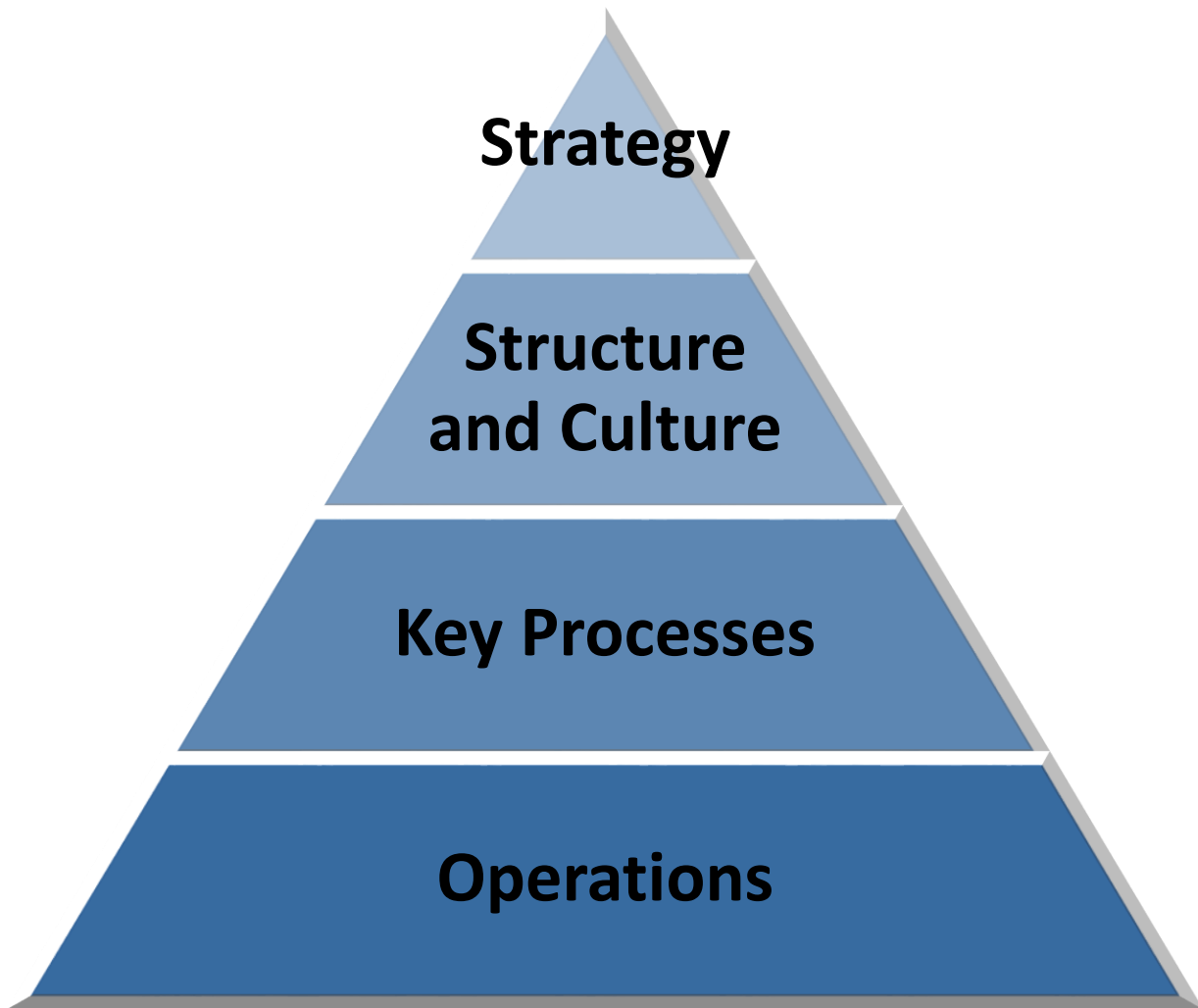
- Explaining the organization's strategy, products and services, initiatives, decisions, and changes to individual staff members;
- Gathering input about the organization's strategy, products and services, initiatives, decisions, and changes from individual staff members and communicating them to middle managers and senior executives;
- Ensuring that individual and unit work and special projects are aligned with the overall strategy of the organization;
- Ensuring staff understand how the various parts of the organization fit together;
- Planning for the accomplishment of goals;

- Modeling the organization's values and team norms, e.g., by coaching and reinforcing teaming behaviors among work units;
- Coaching and mentoring individual staff members;
- Conducting professional development goal setting and providing each individual staff member opportunities to develop their skills;
- Implementing reward and recognition systems;
- Developing charters for work teams; and,
- Monitoring continuous improvement of the unit and its individual members.

Individual Contributors are generally responsible for the following work:

- Explaining the organization's strategy, products and services, initiatives, decisions, and changes to clients;
- Gathering input about the organization's strategy, products and services, initiatives, decisions, and changes from clients and communicating them to supervisors, middle managers and senior executives;
- Providing feedback about results of projects, tasks and processes;
- Meeting client requirements and providing services and products of value to the client;
- Tending to client needs and concerns;
- Ensuring clients understand how the various services of the organization fit together;
- Accomplishing the goals and tasks of the organization's products, services, initiatives, and projects;
- Ensuring that goals and tasks completed are aligned with the mission and vision of clients served and are aligned with work that other staff members are completing; and,
- Recommending and, where permitted, trying out improvements and innovations to projects, initiatives, processes, charters and products.

Another way to define roles is to categorize an organization's complete set of work and then identify which workers are responsible for which categories of work. The following model identifies four major areas of organizational work:



Strategy work, as noted above, involves defining the aim and game plan of the organization -- what the organization is, what it intends to do and why, how it will do it, and what it needs to succeed.

Structure and culture work involves modeling values and defining and communicating departments, jobs, levels, work teams, policies, and performance expectations. **Key processes** work involves defining specific processes and procedures that translate strategy and desired structure and culture into guidance for day-to-day work. **Operations** work involves implementing key processes, providing services to clients, and managing individual performance.

These categories generally describe work done at discrete organizational levels. Strategy work is generally completed by the organization's executive team. Structure and Culture work is generally completed by leadership teams of specific divisions, department, regions, or offices, depending on the structure of the organization. Key processes work is generally completed by mid-level managers and frontline supervisors. Operations work is generally completed by frontline supervisors and frontline staff.

While organizational work can generally be categorized by level of the organization, there are significant exceptions. First, organizations vary in size and structure and in smaller organizations leaders and staff often needs to complete work across various levels of the organization. The key is for leaders to be aware of the differences between levels and to ensure that at any given time they and their staff are focusing on the appropriate subsets of work.

Second, while the purpose of the operations category is primarily to bring into focus work completed at the point of service with clients, there are aspects of this work that are important for everyone in the organization who supervises staff. Examples include coaching direct reports for individual development and implementing key workforce processes like performance management.

There is one more dynamic regarding Organizational Roles that affects many organizations and is a significant barrier to organizational effectiveness. In organizations in which staff are generally promoted from within and then provided with limited training and guidance to master their new roles, staff tend to focus day-to-day on work with which they are most comfortable, the work of staff one or two levels below their new role. This tendency, sometimes called “unconscious demotion”, leads to micromanagement and inadequate attention to strategy and structure and culture work.

Clarifying roles and responsibilities within the organization allows individuals to focus on what they are responsible for without duplicating or interfering with others’ areas of responsibility, thereby maximizing efficiency and overall effectiveness of the organization. A template on defining roles is provided in the appendix of this chapter.

Connecting Strategy and Change Management

Connecting strategy and change management is another area of work that trips up many organizations. Sustainable change management requires all levels of an organization to be forward thinking and willing to work towards goals and desired outcomes in ways that connect all the way through an organization from the director to his or her management team, supervisors, strategic support staff, and direct service workers. Strategy and change management work are not separate and distinct as much as they are a spectrum of work, where greater emphasis is initially on strategic considerations and later on change management ones. “Macro” change management establishes continuous improvement priorities for senior managers, within and among particular agency functions, at the local office, program-specific or regional level, and with community partners. “Mezzo” change management translates these priorities into lasting changes in the organization. This mezzo aspect of change is best accomplished through project-driven initiatives managed by continuous improvement teams who align to clear direction from overall sponsors of improvement efforts.

As continuous improvement methods and techniques become internalized and intuitive for staff throughout the agency, they become the basis for ongoing, organic reflection, critical thinking,

improvement making, innovation, and creativity. These methods also serve as the foundation for the agency's quality assurance process and practices. Not all improvement and innovation efforts have to be centrally managed to be important. In fact, it is at this "micro" level of self-correction and change that many of the best ideas for improvement and innovation begin to influence strategic thinking and agency-wide improvement and innovation. As continuous improvement methods become fully embedded within the organization, they naturally reinforce the principles and practices advanced more formally by the organization's strategic plans and practice model.

As noted above, leaders can choose to begin driving change in any number of ways. Leaders may wish to begin with "mezzo" level change work focusing on areas that have persistently needed improvement and/or have high buy-in from staff and external stakeholders, then expand the scope of change efforts once early successes generate energy and an appetite for more systemic change. Alternatively, leaders may wish to begin with "macro" level work if they have identified a need for major systemic change (e.g., development and implementation of a new approach to serving clients, integration of services across a community of partnering but independent agencies) and they have evidence that their staff and stakeholders are ready for it.

An organization or community of organizations aiming to drive major systemic change should consider developing a Roadmap for Change that spells out the overall game plan for reform, with a first major phase of work focused on getting the organization or community of organizations ready for change, and subsequent phases including an array of linked, "mezzo" level change efforts choreographed in a well thought out way, actively managed by a central team, and overseen by a well defined group of sponsors drawn from across the organization or community of organizations. To get started developing a Roadmap for Change, leaders can reflect on the following:

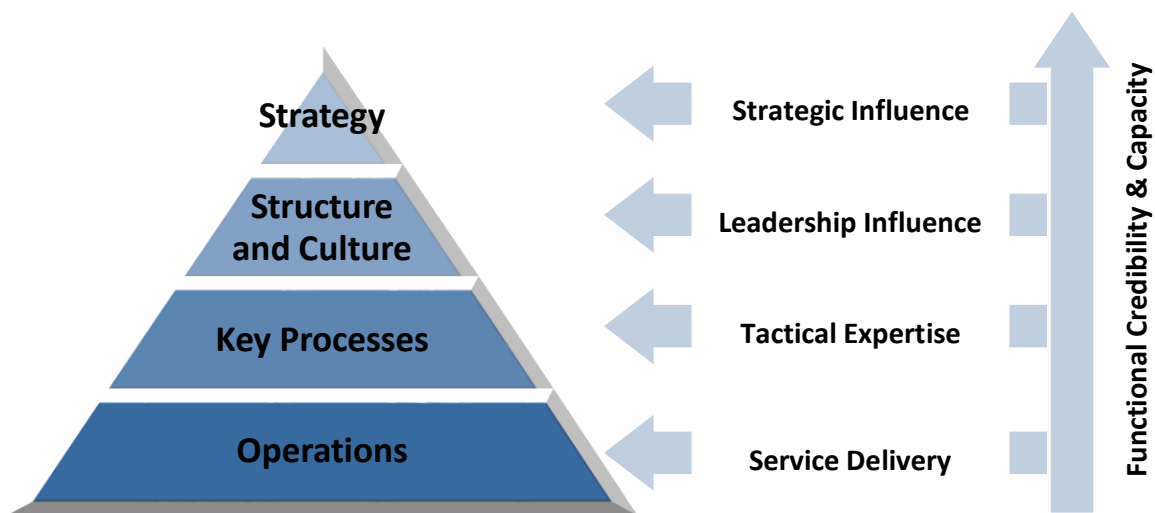
- Strategic direction of the organization(s) (to identify the link between the change effort, the agency/community's overall strategy, and other initiatives already underway)
- Organizational/community strengths, gaps, and readiness for change (to reflect on how ready the agency is to drive sustainable change)
- Resources and general tactics for change and innovation (to consider the applicability of a number of factors and tactics for improving readiness)
- Specific plans, commitments, and priorities (to adjust existing plans for strategy work based on an updated assessment of readiness factors, resources, and tactics and plan how to sequence and phase major change efforts over time)
- Timeframes, milestones, and governance (to establish teams to manage the change efforts, identify timeframes for completing change work, and plan how to communicate and celebrate achievement of milestones)
- Data, measures, and related methods (to plan how sponsors and continuous improvement team members will track progress, impact, and lessons learned of the change efforts)

A template for developing a Roadmap for Change that includes more specific reflective thinking questions in each of these areas is provided in the appendix of this chapter. The tools and methods for mezzo and micro change management are presented in chapters two, three, and four.

Strategic Support Functions

Most organizations have strategic support functions to help make the core work of the organization happen. Typical support functions include Human Resources, Training/Staff Development, Organizational Development, Quality Assurance, Policy, Budget/Financial Management, Communications/Public Relations/Public Liaison and Information Technology. Depending on their size and scope, these functions may be internal departments dedicated solely to the organization's support, may be outside the organization and support a large number of departments/divisions, or some combination.

Regardless of the organization's structure, the quality of support function work has a significant impact on the quality of work in the four major areas at the center of the following pyramid. The right side of this model identifies how strategic support functions add value to the larger organization:



Service delivery work involves the most foundational work a support function is expected to complete. This work generally involves managing key organizational information (e.g., personnel records, performance data, financial records) and delivering core services in a timely and high quality manner. If a function completes its service delivery work effectively, the organization's leaders will generally ask for its **Tactical Expertise** in helping design key processes. This work involves gathering input from internal staff at various organizational levels and designing specific processes and procedures. If an organization's leaders see these processes and procedures adding value, they will seek guidance to help them improve their effectiveness as individual leaders. This **Leadership Influence** work generally

involves giving advice to individual leaders proactively to help the leaders leverage strengths, close gaps, and pursue strategic priorities as well as in response to ad hoc questions. If these leaders see the advice as consistently valuable, they will invite the support function's leaders to help complete the organization's strategy work. This **Strategic Influence** work generally involves participating in strategic planning and other executive team meetings and providing expert input regarding the advantages and disadvantages of different approaches to the organization's work. Continuous improvement of strategic support work, therefore, generally flows from the bottom of the pyramid up – functions first improve service delivery, then tactical expertise, then leadership influence, then strategic influence.

As they evolve, strategic support functions need to streamline and innovate how they do their foundational work so they can devote more and more capacity to adding higher levels of value. Examples in service delivery include automation and staff self-service (e.g., giving staff the ability to update their contact information through a web interface). Examples in tactical expertise include providing products and services that enable prevention (e.g., supervisor development programs that prevent employee relations issues) versus those that address staff problems and gaps that already exist.

Strategic support functions also need to develop the capacity to help the organization drive incremental, continuous systemic change using the OE framework. APHSA's Building OE Capacity Guidebook provides guidance and tools for human services agency and strategic support function leaders interested in building OE capacity within their support functions. The guidebook is available in its entirety at http://www.aphsa.org/OE/OE_Products.asp.

Once an organization has identified priorities for systematic continuous improvement through a combination of reflective thinking and defining strategy, it can use chapter two to start leveraging strengths and closing gaps using a step-by-step approach that creates the conditions for improvements sustainable over the long term.

Organizational Effectiveness Handbook

Chapter One Appendix (Templates and Guides)

1. Organizational Assessment Reflective Thinking Guide
2. Strategic Playbook Guide
3. Defining Roles Template
4. Organizational System Model
5. Organizational Roles Model
6. Roadmap for Change Template
7. Strategic Support Function Capacity Model

Organizational Assessment Reflective Thinking Guide

This guide is designed to help the organization gain a clear view of itself in terms of its current state, desired state, critical strengths and gaps, and key strategic priorities for reaching desired outcomes. It provides a basic set of probing questions around a thorough, systems view of an organization.

Organizations can engage in reflective thinking in multiple ways:

First, the leader of an organization may use reflective thinking independently to think through an organization's future. For example, the leader might use insights gained from reflective thinking to secure resources for the organization from a better understanding of its needs.

Second, the leader of an organization may use reflective thinking to help his or her leadership team think together when planning for the future.

Third, a unit within the organization may use reflective thinking to understand more fully understand how it contributes to the organization's overall success.

Fourth, a facilitator of a team continuous improvement process may use reflective thinking to help a team gain full participation of all members and insight from an objective third party.

Regardless of which of the above methods is utilized, the guide will assist the organization in developing a better understanding of its current strengths and needs. Taking time to think critically about the organization, whether independently or as a team, is the very work of leadership.

This guide is organized into seven question sets. The question sets relate directly to the areas of an organization critical to strategic and effective operation. These seven question sets are as follows:

- Strategy;
- Inputs/Resources;
- Performance Capacity;
- Performance Actions;
- Performance Outputs;
- Performance Outcomes; and,
- Feedback from the Environment.

These question sets drill down on the seven parts of the organizational system model flow chart. This chart – also located in the appendix to chapter one of the OE handbook – provides a nice visual to help facilitators and their clients see how the components of the system work together.

This guide is designed to help users reflect on the organization. It is not designed for every question to be answered. **Facilitators should work with their clients to identify 5-10 questions from each of the seven question sets** that help them think about and/or discuss the following overarching questions:

- What is your organization’s desired state for this part of the system?
- What is your current state?
- Based on your current and desired state, what are the most critical gaps for your organization in relation to this part of your system?
- Compared to other parts of the system, is this an area of strength for your organization to build on?
- Given these gaps and strengths, what prioritization and sequence do you think would make the most sense as you work on closing system gaps and improving performance?

Thinking through these basic questions around each of the parts of an organizational system can lead to improvement planning that builds on the organization’s strengths, addresses its gaps, supports its strategy, and achieves desired outcomes.

Assessment Area #1: Strategy

A strategic plan lays out in a clear, orderly flow the answers to a range of questions about how an organization will achieve outcomes. It tells this story in a way that is comprehensive and concrete, yet collaborative and flexible. The feel of the strategy should be portable, adaptable and user-friendly so it is accessed continuously and refined often as agencies learn by doing their work and planning more strategically over time.

The strategy helps to communicate with staff, stakeholders, partners, clients and the community about who you are, what you intend to do and why, how you will do it, and what you need to succeed. This may result in stronger partnerships, more secure funding and other forms of support, better orienting of new staff, better planning of new initiatives, clarifying roles and expectations throughout the organization, and promoting an overall positive image of the organization and its work

In its simplest form, a strategy is a statement of why the organization exists and what it wants to accomplish. Effective organizations use their strategies to guide all key organizational decisions and explain them to internal staff and external clients and other stakeholders. An organization without a strategy is like a ship without a rudder, drifting in a haphazard direction, and unlikely to reach any kind of desired destination.

Because it is so critical to an organization's ultimate success, fleshing out, communicating, and periodically updating strategy based on system performance toward desired outcomes are some of the most important tasks an organization completes.

Strategy work includes developing a specific vision, mission, set of values, and practice model to guide the way work is accomplished. Desired outcomes for the clients being served should be the driver of strategy and achievement of those outcomes through strategy should significantly influence the resources acquired, the development of performance capacity, and what performance actions the organization performs.

No major communication plans, action plans, or new initiatives should occur without leadership first assuring that the work is in alignment with the organization's strategy.

Finally, the strategy should itself be influenced by feedback from the environment in which it operates, particularly as it sheds light on system performance. This feedback is discussed later in this assessment guide.

In order to assess an organization's performance within the strategy domain, ask the following questions:

1. Does the organization have clearly articulated vision, mission, and values?
2. What are the vision, mission, and values? Do they align with any larger system within which the organization operates? How were they created? Who was involved? How do they impact the work that happens?
3. How does the organization communicate them? In and out of the organization? In the community?
4. How does the organization operationalize them? In and out of the organization? In the community? With clients?
5. Are they as relevant now as ever or do they need revisiting?
6. Is there fit, clarity, commitment, and agreement from everyone about them?
7. Are there examples of "tough calls" upholding the organization's values even when competing interests might have led to making a decision against them?
8. How has leadership anchored these values in behaviors? How are people accountable for them?
9. Does the organization's strategy support the strengths and needs in its community? Are there particular environmental challenges and opportunities?
10. What role do the community, partners and clients play in defining services?
11. Is there a feedback loop from community, partners, clients and stakeholders that will inform and influence strategy? Does this feedback loop relate strategy to client outcomes? Who does the organization serve? What do they want and need from the organization? How does that inform the work?
12. Are there things (activities, staff development, data collection, major initiatives) that the organization would prioritize if it had the support, means, and capacity that are now not planned for? What would those things be?
13. What initiatives is the organization currently involved in? Are they aligned with strategy towards desired outcomes? Where did they come from? How are resources impacted by these initiatives?
14. What are the organization's strategic goals, objectives, and main initiatives? Are the goals and objectives clear and measurable enough to create accountability and responsibility for their achievement?
15. What are the individual performance goals and objectives of leadership and how do they connect with the organization's overall ones?
16. How well is the organization doing in achieving goals and objectives? What are the organization's greatest strengths? How are these strengths achieved? How are they used to best achieve outcomes?
17. Does the current organization structure, culture, and leadership platform support the current strategy?
18. What major service gaps currently exist for clients that are not addressed in the organization's strategy?
19. Does the strategy contain a practice model that services are aligned to?
20. Does the strategy take into account the impact of initiatives on the workforce?

Assessment Area #2: Inputs

Inputs are resources put into the organization to support its strategy. Resources should be put into place based on thoughtful consideration of the best way to achieve desired outcomes. Resources should change as strategy and the environment in which the organization works changes. When completing this assessment, think about all inputs the organization has available and uses as resources.

The following are typical inputs and useful types and sources of data for an assessment:

People:

- Demographic information to be used is often straightforward and may be captured in advance to begin the assessment in good form. Degrees, gender, ethnicity, and age-related data can often be obtained from the Human Resource office.
- Consider broader definitions of people. Include contractors, vendors, boards, interns, volunteers, multi-disciplinary teams, foster parents, kinship families, families and youth, and community partners.

Materials and Equipment:

- Include physical space, phones, cell phones, computers, paper, transportation, etc.
- Material needs may also include those of client families and broader communities.
- Technology -- assess the organization's current use of available technology and access to technology, including technical service/help desk and ability to collect good data.

Finances:

- Refer to existing and planned budgets and business cases or proposals.

Policy:

- Policies that are non-negotiable that influence inputs and how they are used.

In order to assess an organization's current state within the inputs domain, ask the following questions:

1. What resources does the organization have? List them.
2. How flexible/adaptable are the resources?
3. What state or condition are the resources in now? Is the resources pool growing or shrinking? Are they easy or hard to access?

4. Who are the people that help achieve the desired outcomes for clients and are necessary to achieve the organization's mission? (This group differs for each individual community and is larger than organization staff.)
5. Does the organization receive their full cooperation to achieve outcomes? Are their goals and missions aligned with the organization's goals and mission?
6. Does the organization have sufficient numbers of staff in each service area to achieve desired outcomes?
7. Does the organization have sufficient contracted providers to meet its needs?
8. Does the organization consider mission, vision, and values when evaluating potential new hires?
9. Does the organization have the physical space and materials to accomplish desired outcomes?
10. Are services in a good physical location to meet the needs of the community?
11. Does the organization have the materials needed to meet the needs of client families and the community? What do these include?
12. Does the organization have the financial resources to meet current strategic goals? Is there concern for the future of financial resources?
13. Does the organization have resources that are as yet untapped to increase revenues to meet strategic goals?
14. Is the organization budgeted for future growth and expansion of services?
15. Has the organization considered what resources used currently are unnecessary or wasteful?
16. Does the organization have the technology in place to measure needs, record progress, and measure outcomes?
17. Does the organization have the technology in place to effectively make upgrades in its processes and keep track of records?
18. Does the organization have the capacity to increase its use of technology if necessary?
19. Does the organization have the staff in place that it needs to maintain the use of current technology and expand the use of technology as needed?
20. In general, what does the organization need but currently not have to provide effective services, now and in the future, in alignment with strategic goals?

Assessment Area #3: Performance Capacity

Performance capacity is an organization's capacity to convert inputs (e.g., people, equipment, finances) into performance, resulting in desired performance actions, outputs, and outcomes. The following are some of the elements that make up an organization's performance capacity:

Workforce Capacity:

- The current workforce's combined knowledge, skills, and abilities in relation to achieving desired outcomes.
- The capacity of contracted vendors or other providers combined with the organization's workforce that provides services towards achieving the organization's mission.
- The flexibility of the organization's staff.
- The levels of organizational hierarchy. Are there too many? Too few? Why?

Budget/Fiscal Capacity:

- Processes in place to assess the organization's financial capacity to achieve desired outcomes.
- Processes in place to adjust budgets and the allocation of resources towards better achieving these outcomes.

Trust:

- Staff perceptions, climate studies, and staff satisfaction surveys can assist in defining and assessing trust.
- Strategic partnerships, cliques, or subcultures that support or inhibit work being accomplished in alignment with the mission.

Functional Capacity:

- Use of strategic support functions to improve overall organization performance. Strategic support functions include but are not limited to: training, fiscal, human resources, information technology, office management, quality assurance, and policy development.

Service Design:

- The programs, processes and tools in place to serve clients in relation to achieving desired outcomes.

In order to assess an organization's performance within the performance capacity domain, ask the following questions:

Workforce Capacity:

1. Does the current staff (at all levels) have the necessary knowledge, skills, and abilities to perform their expected activities aligned with the organizational strategy? What are the strengths and gaps in regard to staff knowledge, skills, and abilities?
2. Is there a current organizational chart? When was it last revised?
3. What is the organization's current structure and is it the best structure to meet current organizational needs and strategic outcomes?
4. Is the current structure in place mainly because of resistance to change?
5. Can we chart a decision through the organizational structure? Are decisions generally made at the right levels of the organization?
6. What alternative structures can we consider to meet our outcome objectives?
7. Are there a significant communication gaps within the organization that relates to culture, cliques, or strategic partnerships?
8. How and what does the organization communicate with staff regarding desired outcomes and strategy? Does staff feedback have any influence on either?
9. Are there processes in place to understand current and future workforce needs that include identifying the knowledge, skills, and abilities needed in each role?
10. Is the organization equipped to properly develop staff to perform their duties? How are new staff trained? Do staff members have opportunities to develop on the job (e.g., coaching, mentoring, special project assignments)? Is there an organizational development plan linking key knowledge, skills, and abilities with appropriate training and development programs? How effective is the training? How do you know this to be true?
11. Is there a leadership development program within the organization? Does the program include frontline supervisors as well as senior managers? How effective is the leadership development program? How do you know this to be true?
12. Are hiring and performance management done in alignment with the organization's strategy?
13. How effective are reward and recognition processes and procedures in rewarding exemplary performance and/or behaviors? Do high-performing staff members have an opportunity to expand their learning and impact on the organization (e.g., take on additional responsibilities or transfer into a different role)?
14. Do we investigate, document, and respond decisively (including, when necessary, termination) to unacceptable performance and behaviors?

Budget/Fiscal Capacity:

15. Is the organization sufficiently funded to meet its outcome goals?
16. Have alternative sources of funding been explored? Why or why not?
17. Is the funding expected to grow or shrink in the coming years?
18. Can someone reading our budget for the first time see how it supports our organizational vision, mission, values, and practice model?

Trust:

19. Is trust a barrier or a strength within the organization? Why?
20. Are there cultural forces within the organization at work that are either supportive of the organization's mission or a complicating factor to making changes and improvements? If asked, would staff say there is an "us" culture in our organization versus a "we-they" one? If asked, would your staff say that upper management follows through on promises?
21. When strong disagreements are surfaced, does staff at all levels resolve them in healthy and constructive ways?
22. When the agency has bad news to tell, does it tell it promptly and openly to staff? To clients? To community partners?
23. When discussing and setting strategic priorities and making key decisions, do leaders think of ways to collaborate for the good of the whole (e.g., giving up resources to other units) versus protecting their own turf?

Functional Capacity:

24. What is the current quality assurance process? How has that impacted the organization?
25. Do purchasing/contracting processes increase rather than decrease competition? Do they define performance expectations? Can they withstand a legal challenge?
26. Do supervisors and frontline staff believe that financial and purchasing/contracting processes are designed to help them do their jobs? Do these processes help or hinder general organizational effectiveness?
27. Are data sources quick and easy to access when needed?
28. Do all key data systems or databases effectively "talk with each other"? If no, are there effective ways to overcome this issue?
29. Is there a policy manual that the organization currently uses? When it was last reviewed? How is it updated? Are there policy gaps? Is it accessible to staff? How does this manual impact performance?
30. In what capacity building activities is the organization engaged? Personal? Management? Workers? New staff?
31. Does the organization have short term, midterm, long term plans for building or changing its performance capacity?
32. How do you continuously improve and leverage your capacity?
33. Does the organization have barriers/issues with capacity building, e. g., unions, employee relations, labor market constraints, budgets, stakeholder support? How effectively does it manage these barriers/issues?
34. Do strategic support functions (e.g., Human Resources, Information Technology, Training/Development, Quality Assurance, Budget & Finance) develop solutions for problems and contribute to continuous improvement of tools, policies and procedures?

Service Design:

35. Can we chart the flow of a case through the organizational structure? Does this activity raise any areas of concern such as cases sitting for a long time waiting for transfer or gaps in services to clients?

Assessment Area # 4: Performance Actions

Performance actions are the activities of the organization expected to lead to performance outputs and desired outcomes. Performance actions should be strategically aligned with desired outcomes and within any non-negotiable elements of the organization's expected scope of work. Performance actions include all levels of the organization as they apply to achieving outcomes including service delivery, product development, internal and external meetings, documentation of work efforts, and actions to implement plans.

Major initiatives, improvement planning efforts, communication plans, and key processes for the organization are included as performance actions for the purpose of this assessment.

In order to assess an organization's performance within the performance actions domain, ask the following questions:

1. What key activities does the organization's staff engage in? Are the current activities any different than the key activities the staff engaged in last year? How are they different and why?
2. Can all of the key staff activities be related to achieving strategic outcomes?
3. How do organizational products and services fit in with the needs of the community in which it serves? How do they fit with other service providers in the community?
4. Are there "non-negotiable" initiatives and activities required of the organization? Where are they coming from?
5. What key initiatives have most of the organization's attention? Why? What are the internal and environmental obstacles impacting these initiatives?
6. Are performance actions evaluated in regard to their impact on client outcomes?
7. What performance actions need to be changed and/or improved upon in regard to the organization achieving desired outcomes and why?
8. Are performance actions generally developed based on client needs, organizational needs, or programmatic needs?
9. Do policies currently in place direct performance actions? Who should be reviewing policy in regard to performance actions and how often does this occur?
10. Does the organization produce products? Are those products considered to be in alignment with the strategy? How does the development of the organization's products advance the organization toward its desired outcomes?
11. Does the organization have what it needs to execute initiatives and complete performance actions toward strategic output goals?
12. What staff developmental needs exist due to specific performance actions? Are those needs met? Is staff development connected to specific skills to perform organizational activities?
13. What performance actions does the organization not perform that the community believes should be within the work scope of the organization?
14. What activities does the organization perform that it should not?

15. Are internal meetings well planned and executed?
16. Do internal meetings advance the organizational outcomes or seemingly serve as a waste of time? Which meetings fit in which category?
17. Are decisions made in meetings communicated effectively throughout the organization? To stakeholders? To clients?
18. Do staff and supervisors use the organization's values and data regularly to evaluate performance and service quality, holding each other accountable for effective behaviors and making adjustments as needed?
19. Are frontline supervisors vigilant in identifying and modifying practices and behaviors to improve customer service and technical competence?
20. Are there examples of material changes to practices, policies, and procedures based on the organization's values? Data analysis? Input from staff?

Assessment Area #5: Performance Outputs

Outputs are the results of the organizational performance capturing what has been accomplished through organization activities. Outputs are the more tangible results of system performance, while outcomes capture how lives of clients have changed. Outcomes are described later in this guide, but it is important to understand that while outputs and outcomes occur simultaneously, outputs by themselves provide significant data regarding the results of system performance, but do not tell the full story about organizational outcomes.

Examples of organizational outputs are:

- Number of investigated reports;
- Number of children in foster care;
- Number of adoptions completed;
- Number of eligibility applications processed; and,
- Number of clients who received GED during the past year.

While most organizations define and track performance against a set of indicators for what the organization does with its clients, the data that agencies use to track outputs is often flawed, poorly collected, and/or interpreted inaccurately. Many data collection approaches do not truly capture client-specific experiences, and longitudinal trends are often not tracked due to the difficulty of maintaining contact with clients over time. For these reasons it is necessary to track both organizational outputs and outcomes to get the most complete data feed to interpret system performance and influence strategy appropriately.

In order to assess an organization's performance within the performance outputs domain, ask the following questions:

1. What outputs are currently measured, and why? Do current outputs and strategy align?
2. Through what means is output data collected (e.g. tools, use of technology, databases, etc)?
3. Are there ways to enhance current output measurement?
4. What trends are seen in outputs?
5. How are objectives, outputs and outcomes currently conveyed to staff? To funding sources? To community partners? To children, youth, families and adults receiving services?
6. What does the government (local, state, and federal), families, partners, clients, and the community hold you accountable for and how do you demonstrate this – examples: annual reports, community forums, families/youth involvement in organization decision making?
7. In what ways have funding constraints influenced outputs?
8. What data do you currently collect specifically regarding the effectiveness of your organization -
- how comprehensive is the data, what does it tell you, how does it inform strategy?

9. Who controls and guides data collection and tests data integrity?
10. Are organizational performance objectives clear with measurable benchmarks of success? How does the organization measure progress?
11. Where do organizational performance objectives come from?
12. Does the organization have non-negotiable performance objectives? What are they?
13. What is the frequency of data measurements?
14. Is the way the organization measures progress a problem in some ways?
15. What are the most important current outputs expected of staff – examples: number of home visit, reporting requirements, meeting attendance?
16. What are the most important current outputs for families/clients – examples: attendance at parenting classes/counseling, visit with child in care?
17. Are clients who come in contact with the organization for one reason connected with additional services based on a comprehensive, holistic assessment of their needs?
18. Do decision makers have daily access to the data and analysis they need?
19. Are vendors requiring payment and staff requiring reimbursement paid in a timely way?
20. Is the organization retaining key staff at all levels? Is staff truancy low? When vacancies in supervisory and other leadership positions occur, are there generally strong candidates from within the organization?

Assessment Area #6: Performance Outcomes

Outcomes are aspects of the client's condition or behavior that the organization seeks to impact. They are the consequences of both the organization's actions and many other potential factors. A desired outcome may be an individual or a family's behavioral change, brought about by the organization's work. The number of visits to a family's home, however, is an output, not an outcome.

Examples of outcomes that are results for participants during or after interaction with the organization include the following:

- Ability to parent without abuse, resulting in safety for a child;
- Reunification of children in foster care, resulting in permanency for a child;
- Securing of permanent employment with a strong prospect of a sustained, living wage; and,
- Increased numbers of youth in care who complete high school, resulting in increased well being for children in a community.

Working strategically towards desired outcomes is different than simply completing tasks or responding to crisis. Once an outcomes mentality is truly embraced by an organization, it necessitates that an organization work and partner with all of its relevant and expert community partners and clients in determining desired outcomes, and using resources and performance actions to reach those outcomes. This partnership better insures the proper definition and tracking of community based outcomes that reach far beyond a single organization's reach and scope. An organization working within an outcomes-driven model will often lead such an effort in their local and state level settings, gathering or developing the required skill sets and building the required culture and practices to do so. The organization's training and development plans ultimately need to be anchored in its outcome driven model as well.

In order to assess an organization's performance within the outcomes domain, ask the following questions:

1. What are the organization's desired outcomes and where did they come from? Who is aware of them and how are they communicated?
2. Are these outcomes prioritized by level of importance?
3. How are desired outcomes linked to the organization's mission, vision and values? To policies and procedures? To daily staff activities? To resource allocations? To organization strategy as a whole?
4. Does the organization have mandated or non-negotiable desired outcomes? What are they?
5. What trends does the organization see in client outcomes?
6. What outcomes does the organization measure and why? Are these measures comprehensive?
7. What is the frequency of these measurements?

8. Are there ways that the organization can enhance current outcome measurement?
9. In what ways have funding or other resource constraints influenced outcomes?
10. How effective are specific organizational performance actions in achieving outcomes? Based on what information does the organization make that assessment?
11. Who does the organization partner with to achieve performance objectives? How do the organization and its partners share information?
12. What quality assurance methods and processes are in place to influence outcomes?
13. What do the government (local, state, and federal), families, partners, clients and the community hold the organization accountable? How does the organization demonstrate its effectiveness in terms of both outputs and outcomes?
14. Ultimately, what impact is the organization having on clients and the larger community?

Assessment Area #7: Feedback from the Environment

Creating a continuous feedback loop with its environment helps an organization determine how it is doing. For example, the environment (including organizational clients, staff, partners, key stakeholders, and the community) lets the organization know if it is achieving its desired outcomes.

Feedback can also inform the organization about resources being put into the organization and effectiveness of work is being performed. Feedback provides data for the organization to identify continuous improvement priorities and should be a primary source of information when developing or reviewing strategy.

In order for feedback to be comprehensive, communication lines from system performance through the environment and back to strategy need to be clear and open to all those touched by the system.

In order to assess an organization's performance within the feedback from the environment domain, ask the following questions:

1. What type of feedback does the organization obtain from the external environment? How does it use the feedback? How and what does the organization communicate with external environment?
2. How is the organization regarded right now by clients and system partners?
3. How will the public image of the organization impact change and improvement initiatives as it builds upon what is being done now?
4. How are clients involved in defining services?
5. Who are the organization's stakeholders?
6. Does the organization's communication help staff and clients and other stakeholders to understand, influence and support change and improvements?
7. Does feedback from the environment currently impact strategy? If yes, how does that occur? If no, why not?
8. If outcomes are being fully achieved what will the environment notice? What will staff notice? What will clients notice?
9. Are there examples of when material changes to practices, policies, and procedures were made based on input from clients? Other external stakeholders? How were these changes reconciled with the perspectives of the organization's staff?
10. Have legislators generally approved budget requests for increases, reductions, or shifts in funding for direct work with clients? How about for infrastructure building?
11. Is there a path for feedback from internal staff or external stakeholders? Does the organization's communication help staff to understand, influence and support change and improvements?

12. Do clients generally report that they experience service delivery as efficient, timely, and responsive?
13. Do clients generally report that they experience service delivery as caring and respectful?

Strategic Playbook Template

[NOTE: This template was first developed by the American Public Human Services Association in December 2004, and revised most recently in 2009 in partnership with Casey Family Programs and a workgroup of child welfare professionals through the Positioning Public Child Welfare Guidance]

1. Introduction and Purpose

Why are we establishing this playbook?

2. Vision, Mission and Values

What does the future we aspire to look like?

In general, what will our organization do to achieve this future? What part will we play?

In order to accomplish our mission, how do we need to treat one another, our partners, and the children and families we serve?

3. Environmental Scan

What other parts must be played to achieve this future?

Who are our potential partners and vendors? How well do they play their parts, and how might we best work with them?

What do our funders, the media, and those we serve expect from us, and what do we expect from them? Are they mandating anything to us that is non-negotiable? What particular motivations and characteristics do we need to understand in order to achieve the relationships we want with them?

Do we have any competitors- those with a competing vision or mission? How are we positioned to either protect ourselves from them or otherwise minimize them?

What overall opportunities, challenges, and threats do we face within this environment?

4. Client Analysis and Desired Practice Model

Who wants and needs services from our organization, and what do they expect? In terms of achieving our vision, how do their “wants” differ from their “needs,” and why?

What models, tools, key processes and other techniques for developing and delivering those services do we aspire to have?

5. Desired Structure, Culture and Leadership Platform

What organizational structure and key roles will we need to develop and deliver these services well? What culture?

What vision and philosophy of our field, our community, our staff and our organization as a whole will our leaders need to embody for us to succeed?

6. Organizational Strengths, Gaps and Capacity to Change

Comparing our current and our desired practice model and organization, what are our strengths? What are our gaps?

Why do we have the gaps that we do- what do we think is causing them? What general solutions or remedies might be needed to close them?

Based on our past experiences, how quickly are we able to implement solutions and remedies like these?

7. Goals, Objectives and Initiatives

Given our environmental scan, desired practice model and organizational capacity, what are our goals, objectives, and initiatives? This year? Over the next 2-3 years?

8. Major Project and Work Plans and Commitments

What is each department and function in the organization signing up to do to advance our goals, objectives and initiatives? What are the primary task areas, the timeframes, and who is primarily responsible?

9. Performance Measures, Timeframes and Governance

What data and analysis we will use to monitor our organization-wide performance? How will we measure the impact and “return on investment” of our efforts? How and how often will we monitor our progress and make any adjustments needed?

Who will manage and communicate about this playbook on an ongoing basis?

Defining Roles Template

Defining roles of departments, units, and individual staff provides internal and external stakeholders a common understanding of the division of labor, delegation of authority, span of control and decision making authority, and responsibility relationships within an organization. Formats to use when defining roles vary from organization to organization, but there are some useful guidelines to make role clarification successful. Common elements of an effective role definition include the following:

- How the role supports the strategy (purpose or the role);
- Key responsibilities;
- Key tasks;
- Outputs and outcomes of the role (how success will be measured);
- Values/behaviors;
- Knowledge, skills, and abilities;

This template can be used in multiple ways:

First, the leadership team within the organization may choose to use the template when planning for the future of the organization.

Second, a department and/or unit within the organization may use the template to more fully understand how they contribute to the success of the overall organization.

And finally, the template can be used by a facilitator to walk a team through the process of role clarification as a way to allow full participation of all team members and to obtain insight from a third party.

Regardless of which of the above methods is utilized, the template can assist an organization in developing an understanding of how roles within the organization contribute to the overall strategy of the organization.

Template for Roles

Department/Unit/Individual:

Have Department/Unit/Individual fill in the following information:

Department/Unit/Individual overall purpose (connects strategy/mission/values):

Department/Unit/Individual key responsibilities:

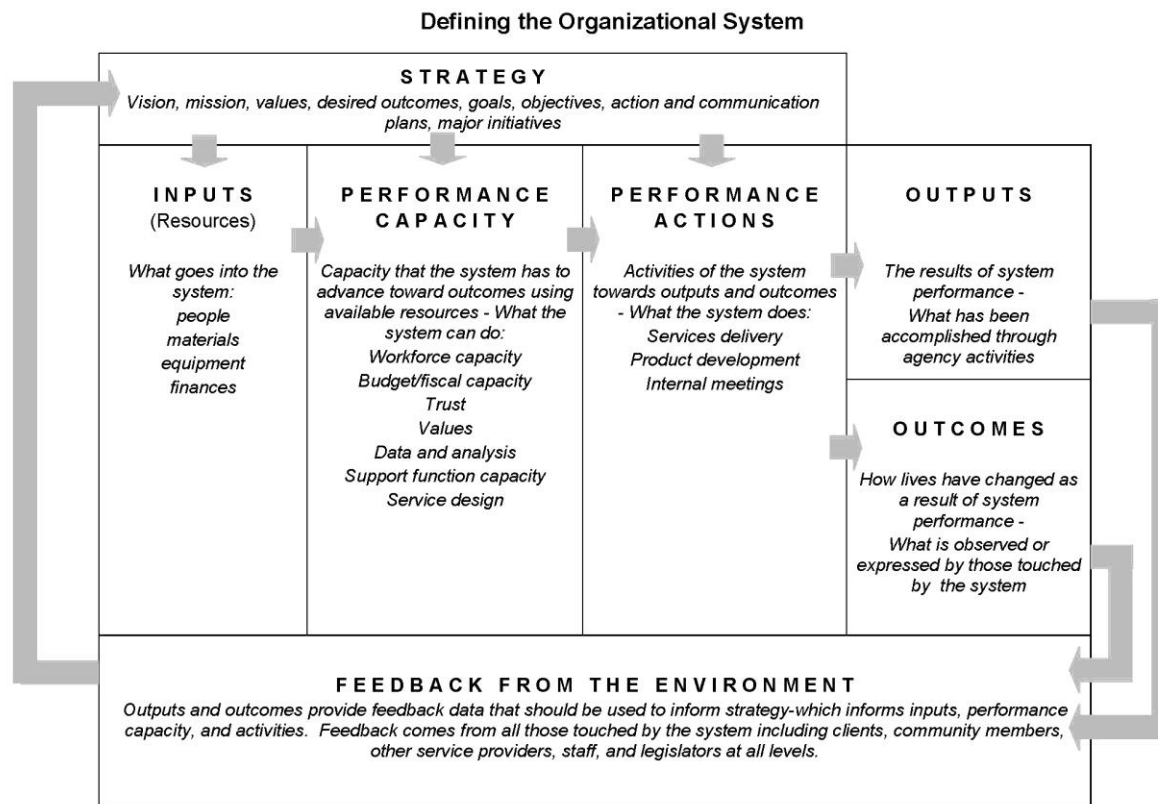
Department/Unit/Individual key tasks:

What are our outputs and outcomes - how we can measure our success:

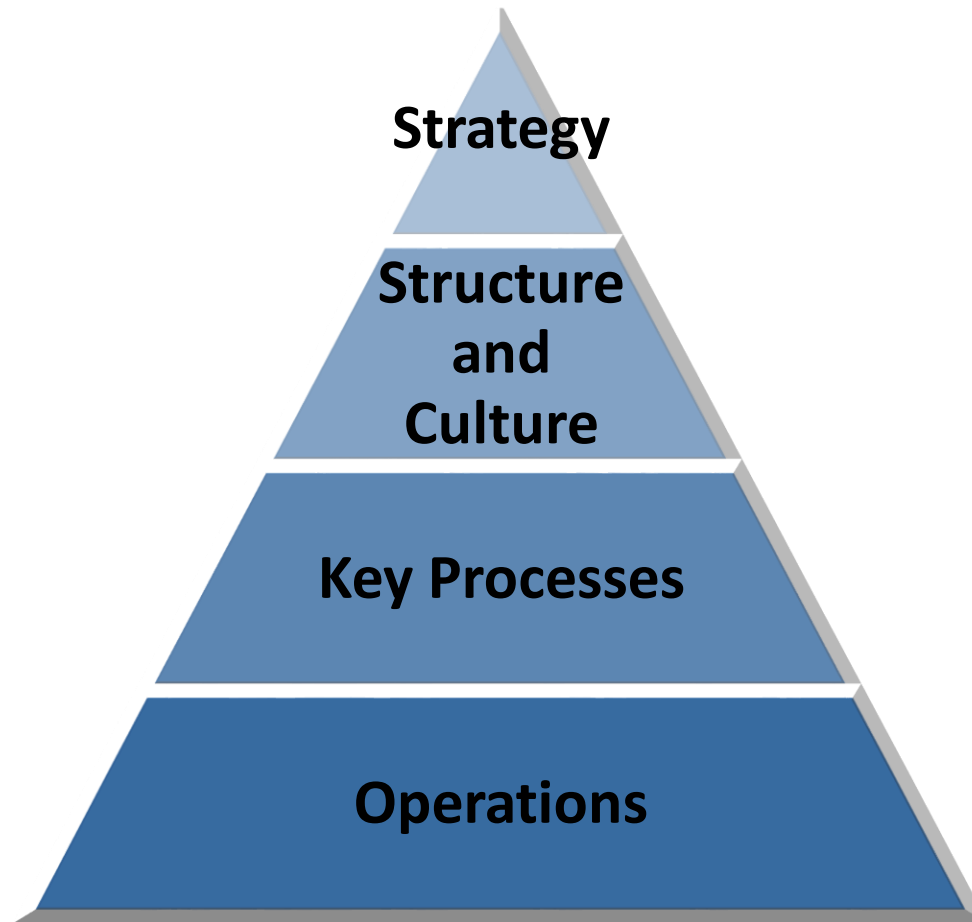
What Values/Behaviors are needed to perform effectively:

What Knowledge, Skills, Abilities are needed to perform effectively:

Organizational System Model



Organizational Roles Model



Road Map for Change Template

1. Strategic Direction of the Agency

Why are we establishing this road map, and to what agency strategy are we aligning it?

How are we aligning specifically to the following elements of effective strategy work:

- Vision, mission and values;
- Core principles including reducing disparity;
- Environmental challenges and opportunities;
- Our client's needs and the practices that will help them improve their lives?

Do we already have in place:

- Formal strategic goals, objectives and initiatives;
- Stakeholder mandates and non-negotiable expectations;
- Financial or other identified resource limits;
- Projects already launched and other work commitments already made;
- Established means to measure and monitor our progress;
- Established oversight and governance for our strategic plans and initiatives?

2. Organizational Strengths, Gaps, and Readiness for Change

In general, how engaged are we in increasing our capacity to continuously improve and innovate?
How self-aware are we about our current ability to do so? Why is this so?

Do we have the structure, culture and leadership platform in place to drive successful changes?
What level of trust do our staff and stakeholders have in our executives and senior management?
Why do we have the strengths and gaps that we do here?

Do our staff have the skills, the time, and the energy to implement strategic initiatives? Why or why not- what are the root causes of the current situation?

3. Resources and General Tactics for Change and Innovation

How will we make use of our strengths and address our gaps for making change happen? Have we considered each of the general readiness factors cited above?

Have we considered these additional factors and tactics for improving our readiness:

- Communication efforts that build the public will inside and outside the agency through forming a sense of shared meaning;
- Enlisting staff, stakeholders and clients directly into our change efforts;
- Building trust with our staff through top management demonstrating caring, integrity, openness, reliability and competence;
- Supervisor effectiveness in coaching, mentoring and communicating with staff;
- Employing methods for gauging staff capacity and skills for doing more and for doing new and different things
- Empowering staff to make decisions and take action within clear boundaries;
- Shifting ownership and responsibility for ongoing continuous improvement and innovation to local office management teams;
- Identifying and using “champions of change” to build staff buy-in and support;
- Employing tactics for using constructive resistance to improve the change plans as well as for minimizing non-constructive resisters;
- Maximizing staff development resources through both training and facilitation;
- Establishing effective support functions like HR, IT, Finance, QA and Policy;
- Scanning and taking ideas from best practice and case study resources?

4. Specific Plans, Commitments and Priorities

Given the plans already established for our strategy work, how should these be enhanced based on our assessment of these readiness factors, resources and tactics?

In light of these considerations, how should our change efforts be sequenced and phased over time? What are our quick wins, our mid-term changes, and our long-term ones? What if any adjustments to our current plans should we make?

5. Timeframes, Milestones and Governance

What are our related action plans and milestones? Who will play significant roles within them?

Have we established the needed sponsor groups and continuous improvement teams, and equipped them with effective continuous improvement tools and methods?

What public commitments are those involved making to reinforce their accountability? How do these commitments link to our performance management system?

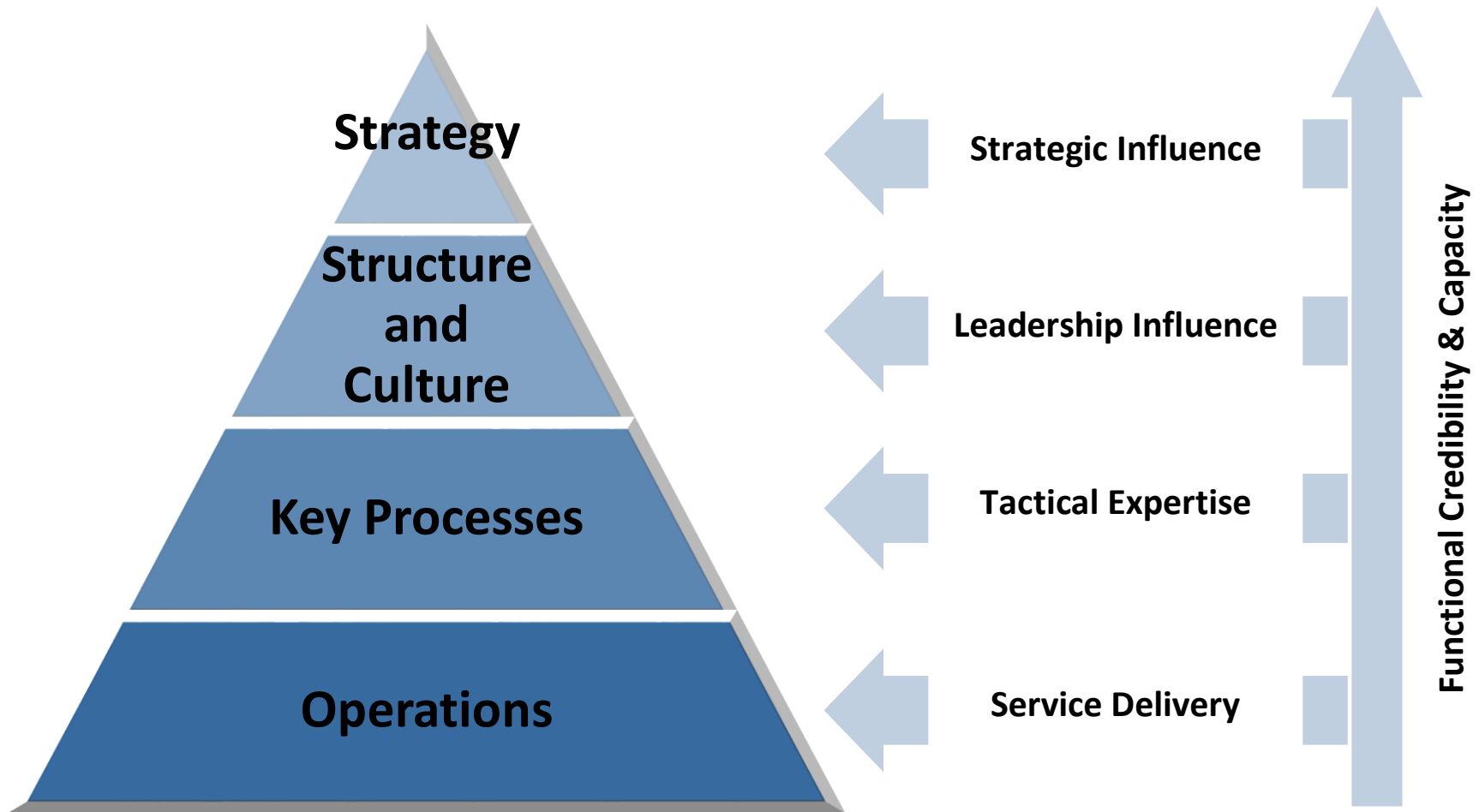
How will we communicate and celebrate notable accomplishments as we make good on these commitments?

Who is responsible for the road map as a whole and for making adjustments to it?

6. Data, Measures and Related Methods

How will we track plan progress, impact and lessons learned? How will we collect and analyze the data we need to do so?

Strategic Support Function Capacity and Credibility Model





OE

ORGANIZATIONAL | EFFECTIVENESS

Chapter Two: Systematic Continuous Improvement Work



ORGANIZATIONAL | EFFECTIVENESS

Overview

This chapter introduces facilitators and leadership teams to the DAPIM™ and learning by doing approaches to systematic continuous improvement. Teams engaged in a facilitated learning by doing project or institute can use this chapter to become familiar with models, tools, templates, and methods to continuously improve in priority areas. These areas may emerge from any number of sources, including the following:

- A systemic continuous improvement process such as the one described in chapter one;
- Priorities of a new leader or leadership team;
- Environmental changes like a shift in client population, changes in law or regulations, new funding opportunities, or major funding decreases;
- Data reports that raise concerns or identify opportunities for the organization to continuously improve its service to clients; and/or,
- Sanctions from courts or regulators that need to be remedied.

Resulting work products include the development and implementation of rapid and long-term continuous improvement plans as well as related communication and capacity plans. Participants in learning by doing projects or institutes also learn and practice monitoring techniques to assess their progress and adjust their continuous improvement work as needed. When these participants become comfortable with the tools and techniques in this chapter, help colleagues in their organizations begin to use them, and apply them to improvement work in new areas, they find the continuous improvement work doing the “double duty” of helping the organization continuously improve in the chosen areas of focus while strengthening the organization’s general capacity to learn, adapt, and continuously improve anything it chooses to focus on in the future.

As continuous improvement methods and techniques become internalized and intuitive for staff throughout the agency, they become the basis for ongoing, organic reflection, critical thinking, improvement making, innovation, and creativity. These methods also serve as the foundation for the agency’s quality assurance process and practices. Not all improvement and innovation efforts have to be centrally managed to be important. In fact, it is at this “micro” level of self-correction and change that many of the best ideas for improvement and innovation begin to influence strategic thinking and agency-wide improvement and innovation. As continuous improvement methods are become fully

embedded within the organization, they naturally reinforce the principles and practices advanced more formally by the organization's strategic plans and practice model.

Experiential Learning

Real world observations in human service organizations reveal that most supervisors and senior managers start as frontline workers before moving up into more senior positions. The typical approach to preparing frontline workers for supervision and management is classroom training.

Classroom training content is generally theoretical, technical, and focused on policies and procedures. Little attention is given to hands-on skill development and training content is rarely linked with the organization's overall strategy and key initiatives. Skill development exercises during training typically rely on case scenarios and/or role-play activities to simulate the real world. These simulations rarely allow participants to experience the true implications of their decisions and actions and see how they might play out in real life. Back on the job, participants often find direct application of material challenging and experience little to no change in behavior or improved results.

This dynamic occurs not only on the individual worker level, but on the organizational level as well. Leaders tend to be promoted up through an organization with little exposure to an effective strategic planning or experience with developing large, multi-year change plans. As a result, human service organizations rarely think or plan strategically or develop internal processes for change management or continuous improvement. Human service organizations tend to change based on reactions to trends or legislation, often disconnected from an overall strategy and seldom driven by explicit desired outcomes supported by data.

Research on adult learning suggests that the best way to strengthen professional skills and performance for frontline practitioners and organizational leaders is through immediate application of new concepts and techniques to real work challenges. Experiential learning researchers have found that adults learn best by taking concrete experiences and reflecting on the results. These reflections allow learners to identify where they did and did not achieve desired results and how to approach similar experiences more effectively in the future. Learners then test these enhanced approaches in real-life situations, generate new experiences for reflection, analysis, and innovation, and enter an upward spiral of continuous skill development and performance improvement.

Learning By Doing

Inspired by this research, APHSA has developed an innovative approach to ongoing staff development called Learning by Doing. Unlike traditional training approaches, APHSA's approach has the following core elements:

- Working directly with intact teams who perform together day-to-day;
- Building safe, high trust, team-oriented learning environments;
- Encouraging teams to tackle real life challenges through creativity and experimentation;
- Facilitating continuous improvement for aspects of performance of greatest significance to the teams themselves;
- Building the capacity of participating teams to handle new and emerging challenges as an ongoing way of doing business;
- Using participant expertise and insight about their own challenges to determine which developmental models and tools to introduce and when to introduce them;
- Using an organizational needs assessment to determine developmental priorities in alignment with organizational goals and objectives; and,
- Measuring success by identifying concrete improvements to learners' performance on the job and to the lives of the organization's clients.

Learning by doing moves from the traditional classroom training approach of involving participants from a variety of organizations and disciplines in trainer-led sessions to a facilitated approach that empowers real world work teams to tackle their thorniest issues. The result is a win-win of enhanced skills and knowledge for individual participants and real life improvements to their organization's effectiveness, directly connected to the organization's strategy, and resulting in improved outcomes for clients.

Organizing for Continuous Improvement

Sponsor Groups

Continuous improvement relies on strong internal sponsorship to become a way of doing business. When they decide to embark on OE work, executive teams become "Sponsor Groups" accountable for defining the high level vision, specific priorities, and conditions of success for continuous improvement efforts. They are also accountable for securing resources required for success. One crucial resource is people power, and one of a sponsor group's most important tasks early in a continuous improvement process is the creation and chartering of a "Continuous Improvement Team". A flow chart of a continuous improvement effort is in the appendix of this chapter.

Continuous Improvement Teams

The continuous improvement team is the coach and guide of continuous improvement. It is responsible for the mezzo-level change work described in chapter one as well as for creating the conditions for embedding micro-level change work throughout the organization. The team's members set the direction for and guide continuous improvement work day-to-day.

The continuous improvement team assumes hands-on responsibility for improvement efforts during a facilitated process and maintains responsibility following the conclusion of formal facilitation. A continuous improvement team should be large enough to represent key internal stakeholders (e.g., major departments and/or offices) but small enough to make recommendations and decisions. In large organizations, continuous improvement teams generally have 10-15 members, while in smaller organizations they generally have 3-5 members.

Continuous improvement team members should be viewed as local content experts, have a commitment to continuous improvement, and a willingness to become knowledgeable in OE and the tools and techniques of continuous improvement. The team should include representatives from all levels, major departments, and/or offices of the organization. Members should have the ability to build trusting relationships internal and external to the organization in order to obtain buy-in for continuous improvement efforts, secure resources from senior leaders, charter and oversee work teams, make recommendations to senior leaders, and model micro-level continuous improvement work for others in the organization.

The initial development of the continuous improvement team involves coaching and support from an experienced OE facilitator in defining, assessing, and initial planning of improvements. The team then assumes primary accountability for implementing, monitoring, and sustaining the improvement effort. The team's work is strengthened if the organization has developed a strategic playbook and high level change plan (see chapter one), as these macro-level change tools can help the team stay aligned to the organization's strategic priorities throughout the continuous improvement effort.

The continuous improvement team reports to the sponsor group. This reporting structure allows organization executives to review continuous improvement plans and all chartered work, providing feedback and support. Continuous improvement teams generally meet at least twice per month to monitor implementation of plans, review the products and progress of work teams, and plan and monitor communication of progress to staff and the sponsor group. The team generally provides the sponsor group monthly updates, either in person or in writing. Roles on the team should include a project management lead to organize the session logistics and communicate with the facilitator, fellow team members and the Sponsor Group on an ongoing basis.

Work Teams

Work teams engaged in the improvement effort by the continuous improvement team are time limited and focused on a particular area of improvement work. Work teams complete mezzo-level change management work for the specific area of the overall continuous plan assigned to them. Work Teams can become engaged at any time in the continuous improvement process. They are activated when the continuous improvement team identifies improvement remedies that require team activities -- remedies for which new product, policy or process design work is required. Work teams are typically chartered by the continuous improvement team so that they are aware of the expected outcome, timelines, limitations, and resources available to them.

Similar to the continuous improvement teams, work teams should be small enough to accomplish the tasks at hand yet large enough to have cross-department input. Members should also be viewed as primary people responsible for implementation and follow through on specific commitments made. Work teams should report directly to the continuous improvement team to allow monitoring and evaluation of the work team's efforts.

While work teams are generally chaired by members of the continuous improvement team, work teams engage in mini-DAPIM™s staff members not previously engaged in the effort. Using work teams therefore exposes additional staff to OE tools and methods and creates the conditions for micro-level change management work to spread throughout the organization.

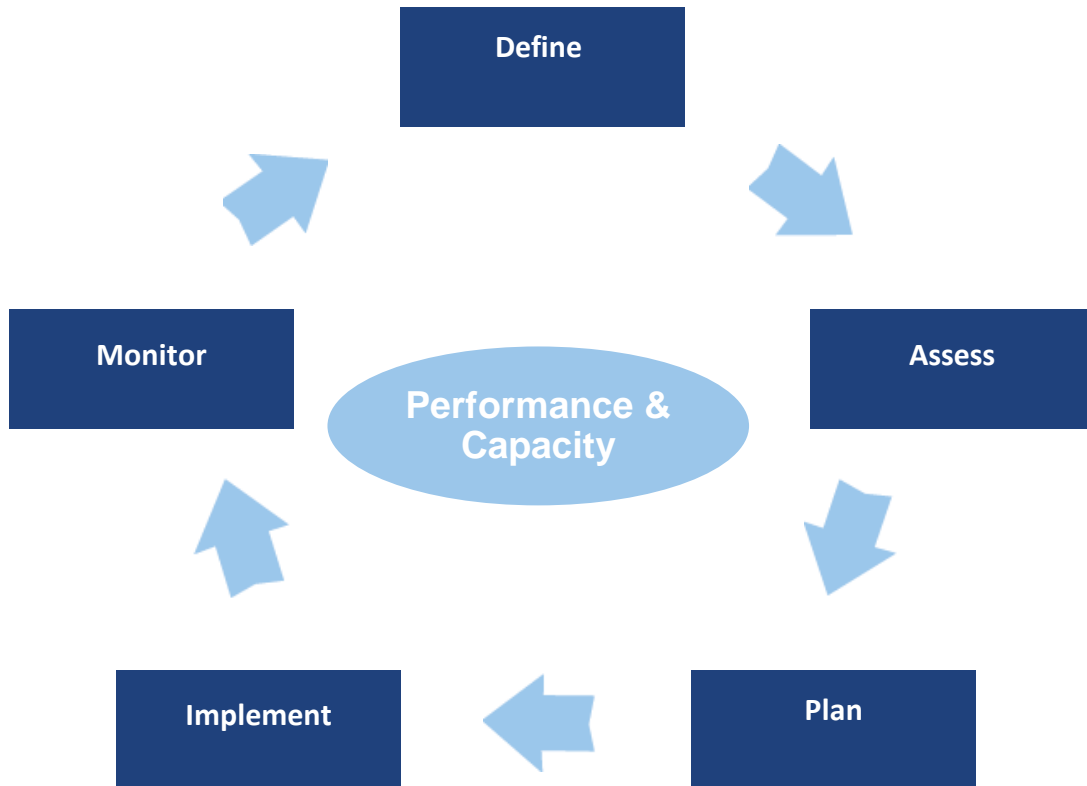
By organizing in such a structured way and with clearly defined communication paths, everyone in the organization becomes aware of and involved in the work of building a more effective organization.

DAPIM™: (Define, Assess, Plan, Implement, Monitor)

Organizational Effectiveness (OE) is a “systematic and systemic approach to continuously improving an organization’s performance, performance capacity and client outcomes”. DAPIM™ is APHSA’s approach to systematic continuous improvement. APHSA has found that to improve something, you have to:

D A P I M ^{T M} M O D E L	
DEFINE	Step One: Define priority improvements in operational terms.
ASSESS	Step Two: Assess observable, measurable strengths and gaps. Identify root causes and general remedies for priority gaps.
PLAN	Step Three: Plan quick wins, mid-term, and longer-term improvements.
IMPLEMENT	Step Four: Implement action plans while managing communication and capacity.
MONITOR	Step Five: Monitor progress, impact, and lessons learned for accountability and on-going adjustments.

Organizations experienced in the DAPIM™ approach use it to continuously improve everything they do, no matter how big or small. At any given time they may be engaged in a multi-year “big DAPIM™” improvement effort to make fundamental improvements to practice while running multiple “little DAPIM™s” to eliminate inefficient processes, respond to unexpected shifts in the environment, overcome obstacles, etc. In this way an organization can be doing work associated with any and all steps of the DAPIM™ approach at any given time.



A flywheel is a little wheel connected to a larger wheel. A bicycle is an example of a device that uses flywheels. When you ride a bicycle, you typically start out in first gear, peddling hard while making only modest progress. Sometimes you even need to stand up to get the strength to get the bicycle moving forward. Each time you peddle, it becomes easier. You move into higher gears and begin to move faster and faster.

Using the DAPIM™ approach is like riding a bicycle. The first time participants turn the DAPIM™ flywheel it is hard and takes significant time and energy. Learning and applying new concepts to real life work situations takes time and focused thought, as they are unfamiliar. As participants use the DAPIM™ approach in their day-to-day work more and more, it becomes easier and eventually becomes intuitive, just like riding a bicycle.

Define

Defining what you aim to improve is the first step in OE. Continuous improvement teams first define what they are going to focus on, in observable, measurable terms and in line with the organization's strategy. Typically, teams will only perform as well as their shared understanding of and commitment to the team's "aim", its outcome objectives and strategy to achieve those objectives. Defining a

continuous improvement team's aim provides a clear, defined, and agreed upon goal and path to achieve the goal.

Some teams define their aim and specific areas of focus by defining their desired future state, while others do so by identifying the various operational elements of the area of work they want to improve. These teams choose to identify their desired future state as part of assessing their current state. An example would be communication. Team A might describe the desired future state, including something like "we are all open and honest with each other as a standing ground rule in our team meetings." Team B might start by first identifying "how we interact in our team meetings" as one element of defining communication for them, and then developing a desired future state as a natural part of identifying related strengths and gaps. Team A takes a more deductive and strategic approach, while Team B takes a more inductive and inside-out approach. Both teams get their continuous improvement efforts started in productive ways.

Another strategy that an OE facilitator might employ to assist a CI team in beginning their define work is to spend time with them initially "defining the problem to be solved". In other words, before a CI team can begin to describe their desired future state, or assess their current behaviors, the members of the team should first agree to the scope and nature of the problem that has brought them together as a CI team. This will help prevent members of the CI team having different interpretations of what they are actually working on together. Following up with the communication example listed above, a statement such as "we have a history of communication errors or gaps that has caused use us to provide poor client service, function inefficiently, and make public statements that have caused the organization problems. We are here to develop a method and process for internal communication that will serve to improve our internal functioning as well as client service." can serve as a touchstone for the facilitator to come back to if it feels like the group is moving off target or down a tangent that the facilitator cannot connect back to the "problem to be solved".

This strategy of developing a clear "problem to be solved" statement for the CI team can also be completed by the Sponsor Group and provided to the CI team. This defining work should help assure that everyone on the CI team is working on the same problem together and leaves no doubt as to the purpose and function of the CI team as well as provides clarity for the CI team as they begin their defining work.

Chapter one laid out a systematic and systemic way to identify areas of focus that address key organizational gaps and their root causes. This "soup to nuts" approach is rigorous and recommended for organizations seeking to drive comprehensive improvements in their system in alignment with an overarching strategy. It is not, however, the only way to get started driving continuous improvement.

Many organizations identify their initial areas of focus through an "inside out" approach -- targeting areas, for example, that have been persistent areas needing improvement and/or have high buy-in

from staff and external stakeholders. APHSA has found that the key to sustained organizational effectiveness lies not in where improvement efforts begin, but in whether organizations sustain continuous improvement work over time and slowly but surely expand their scope of continuous improvement work.

Another critical principle of being an effective organization is that continuous improvements are made in both task and relational areas. Working on just one will not get the organization far enough, and working in balance on both will yield returns greater than the sum of the parts, because the improvement areas are interconnected (see the trust model for a prime example of this). The achievement of relationship-task balance can be reinforced at many stages of a continuous improvement effort. These stages include defining topics for improvement, assessing strengths and gaps, identifying root causes, and planning quick wins.

Regardless of whether an organization uses a formal organizational assessment or a less formal approach to define the focus of a continuous improvement effort, and regardless of whether or not it explicitly defines a desired future state, the important thing to accomplish at this phase is to engage internal staff and external stakeholders in selecting areas for continuous improvement. This work should be in line with the organization's strategy and should begin with defining in behavioral, observable, and measurable terms what the focus area(s) look like when they are effective. This way, later monitoring efforts can be connected back to the problem, scope, or desired future state that originally launched the improvement effort.

The following categories can help guide OE participants in generating comprehensive definitions and building the desired future states of the area(s) of focus:

- **Defining the client:** What is the population you should be serving, and how might this population change and/or remain the same in the future based on current political trends and social trends, both positive and negative? What outcomes do you want for the client?
- **Defining the desired practices, products and services:** Based on the population served and desired outcomes, what practices, products and services should you offer to your client? How should these practices, products and services be offered? Why would you offer them? What value are they to your client?
- **Defining the organizational structure:** What should the vision and mission of the organization be to lead you to your desired state? How should your organization be structured to support the work that needs to be completed to reach your desired state? What procedures should be in place to support the flow of work that needs to be completed? How many staff members do you need to employ, what roles and responsibilities should they have and what educational and work experiences you're looking for in staff? How should your staff be trained and what

technical support needs to be provided to the organization to reach your desired outcomes for clients?

- **Defining performance capacity to achieve the desired state:**
 - **Data & Analysis:** What type of data will you need to monitor desired outputs and outcomes and who will you need it from?
 - **Trust:** What behaviors do you expect of yourself and your staff to create a trusting environment?
 - **Values:** What should the values of the organization be to lead you to your desired state? How should these values be behaviorally displayed in the work environment – both internally and externally?
 - **Budgeting & Fiscal Capacity:** What type of monetary resources will you need to reach your desired state (e.g., to deliver products and services and employ qualified staff, manage improvement effort)? How will these resources need to be managed?
 - **Workforce Capacity:** What type of leadership will be needed to manage continuous improvement efforts? What qualifications will staff need so their performance will lead to desired outcomes? What type of development support will the organization need to achieve desired outcomes?
 - **Strategic Support Capacity:** What should the capability of the organization’s strategic support functions (e.g., human resources, information technology, policy and finance) look like to assist the organization in achieving its desired outcomes?

As stated earlier, taking the time needed to define aim helps teams gain clarity about what they are working to improve. Shared and clear aim can be the glue that keeps team members working in concert toward high level, common objectives. It is common for new teams to have uncertain or limited aim as they struggle toward group consensus on goals. It may even benefit teams at times to maintain uncertain aim, allowing them to test various methods of achieving their objectives or defining desired outcomes. The team can adjust its aim and defined areas of focus as it receives new information, learns lessons, and/or decides as a group to shift desired outcomes or strategy. This process can lead over time to steadily improving team performance and capacity.

Assess

Once OE participants have defined the focus for continuous improvement, they need to complete an assessment of the current state of the organization. This assessment can then be compared to a desired future state to help identify strengths, gaps in services, and areas needing improvement.

The assessment serves as a baseline to compare against a desired future state as well as a reality check prior to planning and implementing improvement efforts. The assessment generates and then tests

tentative hypotheses about strengths and gaps. In concrete terms, findings are statements of something observable or measurable about the current situation of the thing you would like to improve. Findings include current strengths that position the organization for success and gaps that stand in the way of success. An example of a finding might be “Staff members take 2-3 long breaks everyday that last as much as 30 minutes” or “Staff absenteeism averages 10% or more each day.” Continuous improvement teams can analyze, troubleshoot, and monitor behavioral and/or quantifiable findings such as these for improvement over time more effectively than findings that include value judgments such as “staff is lazy and its morale is bad” or “staff does not care about our customers.”

Findings should include both strengths and gaps within the organization. Strengths often have untapped potential to help close gaps and become valuable assets when participants start developing remedies. Examples of strengths include “client feedback and survey scores regarding customer service are rising” or “our team now meets with a structured agenda.” Once they have a full set of findings, continuous improvement team members are able to prioritize the identified gaps. These gaps are the primary focus of remaining continuous improvement work.

Complete the Assessment

Completion of the assessment phase of an improvement effort using the DAPIM™ approach may occur in conjunction with facilitation of a CI team or may be part of a more rigorous, in depth process that requires data gathering from various sources, including those outside of the CI team. The more rigorous the assessment the more confidence OE participants and the stakeholders can have in the findings that result.

Regardless of the level of rigor, the assessment needs to take into account data from all levels of the organization and key stakeholders.

For situations that require a more in depth assessment the following steps are recommended:

1. Formulate a desired future state with sponsors of the assessment
2. Secure sponsor group agreement that data will be held confidential (i.e., individual responses cannot be connected with individual participants)
3. Identify with the sponsor group who needs to be interviewed (i.e., who has the information on the current state). Consider all levels of the organization as well as external clients and other stakeholders.
4. Develop a question set to collect data on the current state.
5. Organize the questions into general categories of inquiry, in alignment with the sponsor group’s desired future state and using the sponsor group’s language for category labels.
6. Define the general categories of inquiry in operational and observable terms.

7. Use a mix of strategies for collecting data, for example
 - a. Records review
 - b. One-on-one interviews
 - c. Focus groups
8. As part of records review, review quantitative, multi-year trend data on client outcomes (e.g., time to permanency for foster children and youth, percent of TANF clients who secure and maintain employment paying a living wage) and organizational outcomes (e.g., staff retention, eligibility processing timeliness and accuracy rates).
9. Assure interview and focus group participants that confidentiality will be maintained by informing them up front that data will be reported in aggregate with no way to connect them with their individual responses.
10. Use data to develop operational and observable findings, for example by:
 - a. Collecting and analyzing a first set of data to develop initial hypotheses (typically records review and an initial set of interviews), then
 - b. Testing hypotheses and refining them into findings during subsequent data gathering and analysis (typically a second round of interviews and focus groups plus additional, targeted records review, if needed).
11. Findings are the key work product from an assessment. A findings report should include:
 - a. Strengths and gaps.
 - b. Possible root causes and general remedies (if in the data from interviews and focus groups).
 - c. Sources of findings (e.g., clients, private providers, staff from Division A), while maintaining individual confidentiality.
 - d. Direct quotes from participants in interviews and focus groups.
 - e. Quick wins from the data collected.
12. Use findings to complete root cause and general remedies analysis.

When conducting interviews or focus groups, the goal is to get participants talking in specific, behavioral terms about the aspects of the focus area they are most knowledgeable about. Interviewers select in advance a subset of assessment questions most relevant to the audience and use these questions to guide the discussion in a way that covers all major bases while still allowing for a natural flow. While it is important to gather a comprehensive set of data across all interviews and focus groups, each individual interview or focus group need not be fully comprehensive. Taking this flexible approach allows each group to provide in-depth data in areas of particular interest and expertise. In selecting question sets for subsequent interviews or focus groups, the interviewer can steer discussion toward areas of interest for which there is not yet enough data to generate findings with confidence.

When drafting written findings to prioritize and use for root cause and general remedy analysis, interviewers use the language of the individuals and groups interviewed versus reframing findings into the interviewer's language. The interviewer may group and flow findings for ease of understanding and use, but should not assign explicit or implicit priorities to the findings by emphasizing a subset of them or including them in an executive summary. Prioritization is work the continuous improvement team

does as the first step in building a bridge to planning, and it is important for that work to not be prejudiced by conscious or unconscious intervention by the interviewer.

Build the Bridge to Planning

Once OE participants have findings in which they have confidence, they need to build a bridge from assessment to planning. This work involves group input, brainstorming and dialogue to determine the priority order of identified gaps, root causes of gaps, and general remedies to address root causes.

Prioritize Gaps

Prioritizing gaps enables the organization to scope out resulting improvement efforts in a thoughtful manner likely to yield the best results for sustained continuous improvement. Prioritization can be completed successfully using any number of methods. The main thing to remember during the prioritization process is to obtain group input on the level of importance for each identified need area.

Facilitators can help groups prioritize gaps by posing reflective thinking questions about which gaps:

- Have the greatest negative impact on clients?
- Relate most directly to the organization's strategic priorities?
- Are most visible to staff and would have a powerful positive impact if closed?
- Are most visible to senior leaders and/or key external stakeholders (e.g., legislators, client advocates, the media) and would build buy-in for sustaining continuous improvement work over the long term?
- Are you – the continuous improvement team members – most passionate about? Closing which gaps would energize you the most?
- Have been "pain points" for a long time?
- Have related strengths that help close the gap?

Prioritizing gaps creates a natural path to root cause and general remedy analysis. Once gaps are prioritized, natural connections to each other and to root causes for the gaps become more apparent, and the group can start root cause and remedy analysis in areas where its interest and energy are high.

Root Causes and Remedies

Root cause and general remedy analysis ensures that time, energy, and other resources used to plan, implement, and monitor improvements are targeted to address fundamental causes of organizational challenges, not just symptoms of deeper issues. Models, tools, tip sheets, and resources found in

chapter four of this handbook can help OE facilitators and participants conduct root cause analysis by providing frames of reference for analyzing specific gaps, grounded in research and the combined experience of other organizations that have completed continuous improvement efforts. For example, if decision-making is found to be top down, then decision-making models can help the organization determine why that may be the case and help participants identify how decisions should be made and what type of decision-making works best in various situations.

Root causes and general remedies can be task or relationship oriented. More task oriented root causes and general remedies focus on how the work of the organization gets done. More relational root causes and general remedies focus on behind-the-scenes processes that lead to performance outcomes.

The following are examples of more task oriented root causes and remedies:

- Organizational Structure:
 - Tiers and Functions,
 - Roles and Numbers;
- Goals, Standards and Measures;
- Policies and Procedures;
- Processes and Methods;
- Internal Programs, Services, and Tools; and,
- Staff Capacity:
 - Time Management,
 - Skill Set (technical/general).

The following are examples of more relationship oriented root causes and remedies:

- Culture and Values;
- Resistance and Power;
- Communication;
- Decision-Making;
- Teamwork and Collaboration;
- Community Partnerships; and,
- Daily Behaviors and Motivations.

When identifying root causes, OE participants should ask themselves based on assessment findings: “What is not working well, and why specifically is that?” until they discover tangible and actionable root causes for the gaps. Participants can also test a priority gap against the structural and relational root causes until one or more fit. Root causes can apply to multiple gaps within the organization and individual gaps may have several actionable root causes.

It may take multiple times of asking the questions of “why is that?” before a root cause becomes apparent. Root cause analysis generally continues until an actionable general remedy to the gap and its root cause appears readily, at which point the team can move on to planning. An example that touches on a common issue in continuous improvement work is staff resistance. When not subject to thoughtful root cause analysis, staff resistance may be ignored, attacked, or misunderstood. But the deeper, actionable root cause of resistance is often constructive, such as when staff agrees with the improvement objectives but have different perspectives that, if brought into the planning, would strengthen the continuous improvement efforts.

Prior to beginning the work of taking identified root causes into planning, facilitators should revisit the work that the CI team did during the Define stage of the process and assure that the CI team clearly sees the linkage of how addressing their identified root cause will help them get to their desired future state, and ultimately improve client outcomes.

Sometimes, CI team members are very “concrete” in their thinking and not used to systemic work. If a CI team came together to develop a new method for doing client intake, they may not readily make the connections between their root cause analysis and related remedies to that concrete goal. It may need to be explained by the OE facilitator that if the root cause issues identified are not addressed (for example communication issues, policy barriers, or staff capacity), the new method for doing client intakes will soon fall into a similar problems that the current method has. This would likely be due to the CI team not addressing the actual root cause of why a new intake method was needed.

By connecting the work of the root cause analysis and remedies back to the desired future state of the organization and the desired outcomes of the organization’s work, the facilitator helps the CI team maintain that line of sight through the planning, implementation, and monitoring processes that follow.

General remedies can take many forms, but generally speaking there are three types of actionable remedies for identified root causes:

- **Recommendations:** remedies not in the continuous improvement team’s control that must be referred to others in the organization for consideration;
- **Decisions and Commitments:** remedies in the continuous improvement team’s control that do not require development of new tools and/or processes to implement; and,
- **Team Activities:** remedies in the continuous improvement team’s control that require development of new tools and/or processes to implement. Team activities may involve chartering a work team to perform the “mini-DAPIM™” work of designing and planning implementation of specific remedies.

Using these categories of general remedies as a guide, OE participants can complete the bridge to planning by identifying one or more general remedies for each root cause of a high priority gap,

keeping in mind that multiple root causes, and therefore multiple gaps, may also be addressed with a single general remedy.

At this point in the process, OE participants have a list of general remedies to be planned for but not yet the plans themselves. It is important to note that by keeping remedies general during root cause analysis, the full assessment can be completed. Continuous improvement teams often want to jump directly to solutions without doing all of the necessary assessment work around gaps that create the bridge to planning.

As continuous improvement teams and their facilitators move to planning and preparation for implementation, they should become familiar with APHSA planning tools, including the following: the continuous improvement plan template, communication planning template, capacity building guide and tools, data planning template, developing charters template, and tracking quick wins template. These tools are in this chapter's appendix and are used throughout the rest of improvement effort to guide planning, implementing, and monitoring work that is based on the defining and assessment work already completed. These tools can help an organization drive organizational improvement that maintains high-quality core service delivery, targets improvement in areas of greatest return on investment, and identifies and eliminates inefficiencies.

Plan

Planning, the third step in the DAPIM™ approach, can begin after the bridge has been built and a set of prioritized root causes for gaps has been established. There are essentially three types of continuous improvement planning – quick wins, which can start being identified and implemented as gaps are being identified, mid-term improvement planning, and longer-term improvement planning.

When planning quick wins and mid-term improvements, OE participants identify things that can be implemented immediately and completed within 30 days (quick wins) or within six months (mid-term improvements). Quick wins and mid-term improvements make immediate impact and buy the organization time, build credibility, and begin to build staff capacity for longer-term planning and continuous improvement. Organizations should pursue quick wins and mid-term improvements that:

- Enhance key initiatives already underway;
- Address needs that are obvious, big, and essential to client service delivery and relationship stability;
- Build the involvement and the confidence of clients and staff- “quick, visible wins”;
- Help the agency practice monitoring, learning, and making adjustments to improve impact;
- Stretch current resources to an untried level;
- Eliminate or curtail lower-priority “capacity eaters”;
- Enable deeper future assessments and planning; and,

- Are symbolically powerful.

By implementing quick wins, teams become energized by the improvements they see within the organization. The climate may begin to feel more positive, the culture may begin to be more participative and inclusive, and desired outcomes associated with continuous improvement may appear to be in place. Quick wins do come with a caution. Participants may develop a false sense of security and feel there is no need to engage in the tougher work of developing and implementing longer-range improvement plans.

Longer-term improvements identified by OE participants take place over time, generally six months to two years. Longer-term changes often need additional levels of support, buy-in and resources in order to be effective.

When beginning planning efforts, it is essential for OE participants to consider all three types of improvement: quick wins, mid-term improvements, and longer-term improvements.

Regardless of whether an improvement is a quick win, mid-term improvement, or longer-term improvement, the organization should commit publicly to an improvement plan. When committing to a quick win, the plan can be as simple as a verbal commitment by all team members with a tracking tool prepared to list the quick win, person(s) accountable for implementation, due date for implementation, and status. The purpose of the tracking tool is to remind the work team of commitments made, track accountability, and monitor progress.

Mid-term and longer-term improvements require more formalized, written plans. Whether verbal or written, a project manager should be assigned to oversee the creation and monitoring of the improvement plan.

The purpose of the written continuous improvement plans is to:

- Commit explicitly to improving client outcomes and services over time;
- Build organization credibility with stakeholders and staff;
- Get everyone on the same page about organizational improvement work to be done, how it will be rolled out over time, how different initiatives are connected, and why they matter; and,
- Reinforce a culture of accountability, data-driven assessment, follow-through, and ongoing adjustment.

An effective continuous improvement plan includes the following elements:

- **Brief Description:** What do you intend to do? (This is the desired future state of the defined problem)
- **Rationale:** Why do you intend to do it (your business case)? (What are the findings regarding the problem and the root causes for the findings)
- **Objective:** What will success look like for the organization and its clients? (Desired outcomes of the planning process)
- **Timeframes for Improvement Initiatives:** When will the improvement take place?
- **Responsible Group:** Who will be accountable for implementing the improvement?
- **Specific Activities and Tasks:** Who will do what by when?
- **Overcoming Obstacles:** What are your potential obstacles and how will you overcome them?
- **Communicating the Improvement Effort:** What will you say and to whom? Who will deliver the message (director, managers, or supervisors)? What form will the message be delivered in (written, verbal)? Where will the information be shared (all staff meeting, department/unit meetings)?
- **Monitoring Plan Progress and Impact:** How will you chart your progress and the impact it is having? What will you track? What methods/tools will be used?
- **Sustaining the Improvement Effort:** How will you ensure the improvement effort continues to be implemented? What methods/tools will you use for accountability?
- **Budget and Resource Implications:** Is this a “no-cost” or “low-cost” effort or will money be needed to support the improvement? If funds are needed how will they be secured? What resources, if any, will you need and who will you need them from?

Most longer-term plans (6 months-2 years) require phased efforts and multiple pieces of work that need to be completed. For each of the major initiatives in a continuous improvement plan, the organization should do the following:

- Develop work capacity plans including finance and resource plans; and,
- Develop communication plans that clearly explain the initiatives and how the initiatives will impact outcomes for clients.

Most longer-term plans require the assignment of individuals or charter teams to complete work and the development of ongoing evaluation and monitoring tools and techniques for accountability. These processes will be discussed in more detail in the implementation and monitoring sections of this chapter.

Capacity Building

Capacity building is an ongoing process of assessing and building the organization’s capacity to support and implement meaningful improvements. Initial planning efforts should reflect the capacity required to implement plans. Developing a plan that an organization does not have the current capacity to

support will doom that plan to failure. Building capacity to eventually reach long term goals is part of a phased, longer-term process.

To properly assess an organization's current capacity as part of the planning process, OE facilitators need to help participants ask the following questions:

- What do we need to execute our initiatives and achieve our output goals?
- What inputs do we have (resources, staff, materials, space, money)?
- What state or condition are our resources in now?
- How adaptable/flexible are our resources?
- What staff developmental needs do we have?
- What staff capacity building activities are we engaged in now (management, supervisors, workers, new staff)?
- Do we have short term and longer-term plans for building or changing our organization's performance capacity?
- Do we have tools in place to accurately track and monitor our staff capacity?
- How are we reacting and/or responding to changes in our capacity?
- How are we continuously improving and leveraging our capacity?
- Do we have barriers/issues with capacity building, e. g. unions, employee relations, labor market constraints, budgets, stakeholder support, etc?

Answers to these questions help OE participants develop, monitor, and adjust budgets that enable the organization to obtain resources needed to follow through and complete planning of initiatives.

A reflective thinking guide on capacity building with more in-depth organizational assessment questions is located in the appendix of this chapter.

Communication Planning

Developing a communication plan as part of planning is required to ensure that leaders deliver and are able to back up key messages that inform staff and stakeholders about the direction the organization is taking. Effective communication informs everyone about the actions planned by the organization and how the actions support the organization's strategy. Being transparent to both staff and stakeholders through effective communication builds trusting relationships and secures buy-in for continuous improvement efforts.

Furthermore, public commitments serve as the conscience for the group. The external communication of commitments:

- Demonstrates explicitly a commitment to improving client outcomes and services over time;
- Builds organization credibility with stakeholders and staff;
- Reminds the work team of commitments made;
- Gets everyone on the same page about organizational improvement work to be done, how it will be rolled out over time, how different initiatives are connected, and why they matter; and,
- Tracks accountability and monitors progress while reinforcing a culture of accountability, data-driven assessment, follow-through, and ongoing adjustment.

While planning, leaders should keep in mind that staff and stakeholders could react negatively to the improvement efforts. Leaders should, therefore, include the following in their communications:

- A clear vision for where the change will take the agency and how it is related to the desired outcomes;
- What resources will be available to staff to develop new skills that might be required to implement the change;
- The incentives to both internal and external stakeholders for supporting the change;
- What resources are needed to support the change and how leadership will obtain the resources; and,
- A clear plan of action on how the change will be implemented and monitored, along with an expected timeline.

Leaders should include at a minimum the following elements while developing communications regarding continuous improvement work:

- A brief overview of the background of the organization and current situation analysis;
- Key commitments and goals for each commitment;
- How the commitments will be monitored and evaluated for success;
- Desired outcomes of the initiative; and,
- Quick wins already achieved.

Once leaders have outlined the message, they should think through methods of communication to be used both internal and external to the organization -- who will deliver the message and how will the message be communicated in writing, verbally, or both.

A template for communication planning is provided in the appendix of this chapter.

As a team moves from planning to implementation, it is important to remember that well developed plans serve to drive immediate, mid-term, and longer-term actions. Detailed capacity and communication planning will build trust, support the proper use current workforce capacity, and build greater workforce capacity.

Well developed plans also identify what initiatives need specialized work teams, who is responsible for developing or chartering that work, and what data needs to be collected and how it needs to be reported. These key concepts and related tools and techniques are discussed below under “Implement” and “Monitor”, and OE facilitators should read these sections carefully prior to leading a planning session so that they can apply them during planning, should the need arise.

All of the actions that result from proper planning help position a continuous improvement team for success and sustainability during implementation.

Implement

After solid, written plans have been developed, the implementation phase begins. At this step, the continuous improvement team and their project manager should take increasing ownership of improvement efforts. With initial coaching and support from an OE facilitator, team members complete actions from plans within agreed timeframes, building internal capacity and keeping public commitments.

During the course of implementation, new and unexpected information worthy of attention as part of the overall continuous improvement effort often comes to the forefront. In the introduction to this chapter, it was noted that the DAPIM™ approach operates as a flywheel and that at any given time while engaged in a multi-year continuous improvement effort to improve fundamental aspects of practice, multiple “little DAPIM™s” arise to address inefficient processes, respond to unexpected shifts in the environment, overcome obstacles, or address newly discovered root causes for gaps.

These little DAPIM™s support larger change efforts and help organizations continuously improve over time. As with any flywheel, it is expected that every time the DAPIM™ flywheel is turned, it gets easier and more natural for the participant. These mini- DAPIM™s create the conditions for OE to truly become a way of life for the organization, with increasing numbers of staff troubleshooting day-to-day challenges with the help of OE tools and methods, spontaneously and without outside guidance. This micro-level change management gives the organization the resilience to sustain an upward spiral of continuous improvement over time.

This handbook provides an array of “team activities” in chapter 4 to help OE facilitators structure support mini-DAPIM™s as part of the implementation process. OE facilitators should be well versed in the team activity options available and be prepared to use them. Team activities such as Building Trust, Communicating Up in the Organization, Meeting Management, Building High Performing Teams, or Establishing a Culture of Empowerment can help continuous improvement teams implement planned remedies.

As mentioned during the planning discussion, continuous improvement teams may need to charter work teams to complete specific aspects of a larger plan. These chartered work teams can each be thought of as subcommittees to the larger continuous improvement team, with specific objectives to support the improvement effort. While identification of work teams occurs in the planning stage, the work of the chartered team actually is part of implementation.

Chartering Work Teams

Chartering is the process by which expectations of a work team are clarified and translated into a specific scope of work. Effectively chartered work teams provide venues for increasing numbers of staff to use OE tools and methods to plan, implement, and monitor organizational improvements, thereby completing mezzo-level change management and creating the conditions for embedding of micro-level change management.

Developing a charter for a work team typically involves achieving the vision of the sponsor group but the work of chartering and overseeing a work team is generally completed by a continuous improvement team. This chapter's appendix contains a graphic which provides a visual of how a sponsor group, continuous improvement team, and chartered work teams function together.

A good work team charter is not overly prescriptive. It does not contain every detail about the work to be done. It offers enough detail to guide the team to complete the work, while allowing the team some flexibility to decide exactly how the work will be completed.

Common elements of an effective work team charter include the following:

- Parameters of work;
- Organization of the project;
- Team members, including identification of a chair person(s);
- Conditions of success; and,
- Commitments to the committee by leadership team and sponsor group.

Once the scope of the work is defined, the work team itself creates an action plan detailing the specific tasks and timelines for completion of the stated goals and additional resources needed from the continuous improvement team and sponsor group. Considering the objectives in their work team charter, members should specify the following in their action plan:

- What work steps will be accomplished by when;
- Who will be primarily responsible for the steps;
- What resources will be required to accomplish the steps;

- Communication plan between the work team and the CI team; and,
- What specific progress measures will be tracked.

A template for chartering work teams is provided in the appendix of this chapter.

Chartering work teams beginning in planning and continuing through implementation is just one example of how good planning leads to well designed and executed implementation. It is important for OE facilitators and continuous improvement teams to understand that planning and implementation are intertwined.

Capacity Management

During implementation, capacity building discussed during planning continues and may begin to feel like capacity management. OE facilitators ask a series of capacity questions during planning (see Planning section) that continuous improvement team members begin asking themselves periodically during implementation as ownership of the effort transfers to them. Team members also ask some more in-depth questions to ensure capacity is managed effectively during implementation. The questions include the following:

- Have those involved in implementation been released from responsibilities and assignments that compete for their time?
- Do we have in place individual and team capacity plans that help us manage the days that participants spend on an effort?
- Are there capacity gaps that need to be filled immediately before further implementation efforts can continue or new phases of work begin?
- Were our original assessments regarding capacity correct or have we over or under estimated capacity based on new information?

Capacity management is a key skill for both OE facilitators and OE participants to master, as strengths and gaps regarding capacity invariably surface during implementation. These strengths and gaps are critical to the long term success and sustainability of the continuous improvement effort.

Communication Management

Much like capacity planning and management are related as an OE team moves from planning to implementation, maintaining and updating a communication plan throughout implementation is required to ensure that leaders deliver messages that inform staff and stakeholders about the direction and progress of the continuous improvement effort. As stated earlier, effective communication informs everyone about the actions being taken within the organization and how they support the

organization's strategy. Being transparent to both staff and stakeholders through effective communication planning helps build trusting relationships and secures buy-in for continuous improvement efforts. Being transparent with open communication during the implementation phase maintains and even strengthens the trust and buy-in created during planning.

As communications occur during implementation, continuous improvement teams should consistently ask themselves the following questions:

- What are our key messages and how will we know that we're getting our key messages across?
- Are we able to back up our key messages with more detailed explanations, information and examples if our audience wants them?
- Do we begin and end our continuous improvement team agendas with a discussion about how to communicate our decisions and actions?
- How will we engage any resisters to our strategic initiatives in a constructive way using good communication?
- Have we missed communicating appropriately with any of our key stakeholders?
- Has anything unexpected occurred during implementation that would require an immediate communication to key stakeholders?

As implementation progresses, the sponsor group must assure that continuous improvement plans, charters, and communication plans are included and updated within their strategic playbook. Maintaining these elements within the strategic playbook helps show internal staff and external stakeholders how the organization is implementing its strategy.

Monitor

When implementing continuous improvement plans, a focus on accountability is essential. The final step of the DAPIM™ flywheel, monitoring, is all about accountability and continuous adaptation based on emerging lessons learned. The project manager along with the continuous improvement teams should decide how they will monitor progress and communicate monitoring methods to staff. Although the monitoring activities themselves do not typically start until after implementation begins, the conversation about how a plan will be monitored should occur during planning. Doing so will allow for proper data gathering to begin at the outset of implementation and will assure that monitoring occurs consistently throughout implementation.

Monitoring techniques the organization can use include the following:

- Plan Progress: measure accomplishments versus plan milestones and commitments;
- Impact: measure actual versus expected impact on organizational capacity and client outcomes;
- and,

- Lessons Learned: compare actual with expected progress and impact, resulting in new and emerging questions and findings that drive further innovations
 - You can use an After Action Review format by asking stakeholders and participants the following: What went well? What didn't go well? What should we do differently next time?

Monitoring measures the organization can use include the following:

- Client outcomes;
- Efficiency and quality of client service (e.g., client experience of a service);
- Specific staff capacity to deliver a service (e.g., knowledge and skill, performance); and,
- Foundational staff capacity (e.g., retention, safety, leadership bench strength).

Typically, organizations either do not engage in systematic monitoring or only complete the process described here as an implementation review. These reviews typically consist of leaders asking themselves “did they do what they said they would do”, such as “did the training occur?” or “was that form changed?” This type of monitoring is valuable at a basic level and serves to keep plans moving forward, but unless the impact of a continuous improvement plan is measured as well, a sponsor group or continuous improvement team can never truly know if their efforts have been successful or if their objectives have been achieved.

Furthermore, by reviewing lessons learned throughout the process, new areas for continuous improvement work become uncovered and, in some cases, new root causes for priority gaps emerge. Organizations that monitor progress, impact, and lessons learned effectively use team activities such as those in Chapter Four routinely to continuously improve in these new areas, and adjust their continuous improvement plans as needed. Without using the full array of monitoring techniques, it becomes impossible to truly complete the DAPIM™ flywheel. When organizations do use the full array of monitoring techniques to reflect on real-world experiences and the lessons learned from them, the result is effective knowledge management and the kind of learning organization described later in this chapter.

Regardless of the methods selected and techniques used for monitoring, a continuous improvement team needs to consider the type of data it needs to perform the monitoring actions. Items to consider in data gathering and reporting include the following:

- What qualitative and quantitative data will help track progress, impact, and lessons learned?
 - Qualitative; such as, surveys of clients that will be impacted
 - Quantitative; such as, regularly tracked statistics that will inform if the effort is having an impact
- Where will the data come from?

- From Whom; such as, survey populations
- From Where; such as, existing data systems
- Who needs the data?
 - Agency Staff
 - Agency Clients
 - Other External Agency Stakeholders
- How will the data be reported?
 - Format
 - Frequency

A data planning template and sample tracking tools are provided in the appendix of this chapter.

Organizations ready and willing to assess the entire organization and develop a continuous improvement plan that includes technical assistance, training and performance capacity issues may consider using the Organizational Continuous Improvement Assessment Guide (OCIA) located in the appendix of this chapter. The OCIA guides OE participants through a comprehensive assessment versus an inside-out DAPIM™ approach that is topic area specific.

A Learning Organization

When staff and leaders in organizations use learning by doing techniques to reflect on real-world experiences, identify the lessons inherent in them, and apply these lessons to ongoing continuous efforts using the DAPIM™ approach, the result is a learning organization. In *The Fifth Discipline*, Peter Senge defines learning organizations as “organizations where people continually expand their capacity to create the results they truly desire, where new and expansive patterns of thinking are nurtured, where collective aspiration is set free, and where people are continually learning to learn together.” In effective learning environments, participants feel both safe enough to be open and collaborative as well as accountable for making improvements to their performance and capacity. Learning takes place in a well-managed way at many points within effective change efforts as:

- Change plans are developed to expand upon and deepen strategic plans;
- Assessment takes place within change planning and continuous improvement;
- Services, programs, processes and tools are designed or revamped to address gaps;
- Constructive feedback from resisters is considered and used;
- Data is manipulated, analyzed and converted into knowledge and insight;
- Decisions are made in a more participative, inclusive manner;
- Continuous improvement teams and working committees solve problems within specified boundaries;
- Quick wins, plans and new designs are implemented, experienced, and monitored;

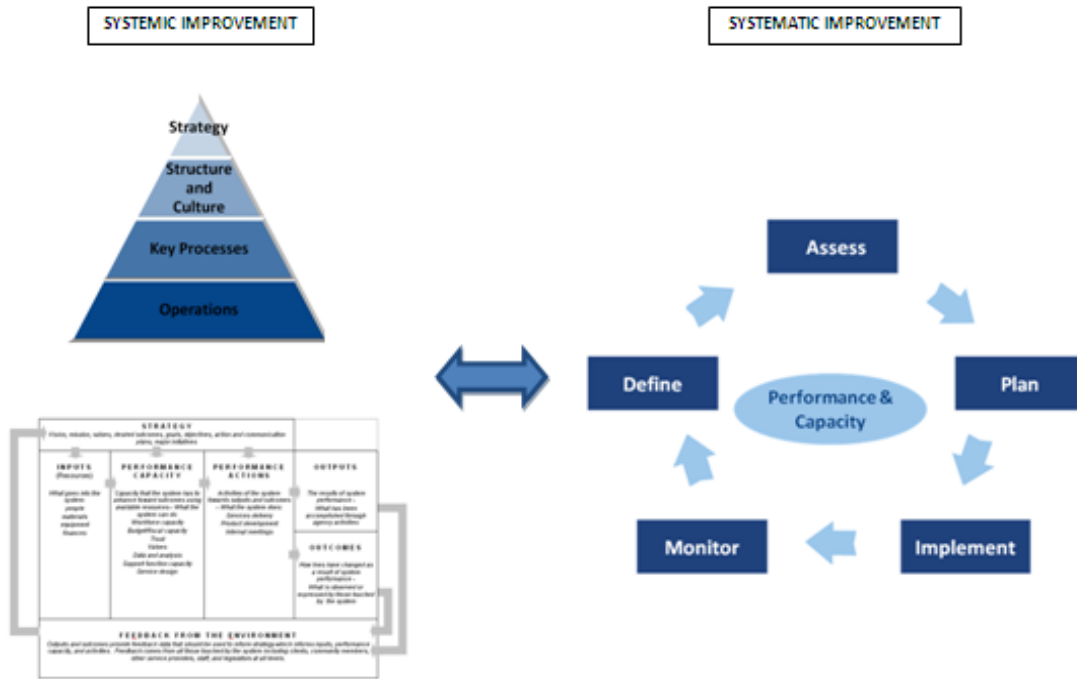
- Legacy ways of doing things that cannot be demonstrated to add significant value (“sacred cows”) are discarded as part of agency capacity building;
- Successes, challenges and lessons learned are shared across programs, functions, and regions;
- Innovative staff development efforts and rich communication initiatives are launched in alignment with change plan priorities;
- Case studies are written, presentations are made and cross-departmental mentoring occurs to capitalize on successful change management experiences, and,
- Continuous improvement methods and techniques are internalized by individuals and teams, and connections are made between those applied to organizational issues and those used with children, youth, and families.

In these ways, continuous improvement work does the “double duty” of helping the organization continuously improve in the chosen areas of focus for the change effort while strengthening the organization’s general capacity to learn, adapt, and continuously improve anything it chooses to focus on in the future.

The Power of Systemic + Systematic

In the introduction to this chapter, we noted that as continuous improvement methods and techniques become internalized and intuitive for staff throughout an agency, they become the basis for ongoing, organic reflection, critical thinking, improvement making, innovation, and creativity. These staff members use systemic models and tools from Chapter One and systematic models and tools from Chapter Two in dynamic interplay.

Roles and organizational system models from Chapter One, for example, can help Sponsors and Continuous Improvement teams define priorities for change in concrete, operational terms. They can help teams identify root causes and general remedies for key gaps in areas that were previously “blind spots” for them, for example helping task-oriented teams recognize that they may need to work on things like culture, values, and decision making versus only things like policies, procedures, and business process flows. They can help teams apply lessons learned from monitoring to strengthen the initiative itself or related initiatives, launch new initiatives to close previously overlooked gap areas, strengthen linkage between previously unconnected initiatives, and/or enhance the organization’s strategic playbook.



Using systemic and systematic models and tools in dynamic interplay also enables senior leaders to organize disparate improvement initiatives. Mapping individual initiatives to a systemic model enables leaders to identify essential and non-essential initiatives, wasteful duplication, and gaps in the overall improvement work. It helps leaders apply insights from one improvement initiative to strengthen others, launch new initiatives on the foundations laid by previous improvement work, and organize all of the organization’s or community of organizations’ initiatives into an integrated, laser-targeted array. In these ways, senior leaders, staff, and other stakeholders draw on the full richness of this handbook to put their organizations on a steady, sustained path of continuously strengthened performance, capacity, and client outcomes.

Organizational Effectiveness Handbook

Chapter Two Appendix (Templates and Guides)

1. DAPIM™: (Define, Assess, Plan, Implement, Monitor)
2. Continuous Improvement Plan Guide and Template
3. Chartering Teams Template
4. Capacity Building Guide and Templates
5. Communication Plan Template
6. Data Planning Template
7. Organizational Continuous Improvement Assessment (OCIA) Tool
8. Tracking Quick Wins “At a Glance” Tool
9. Continuous Improvement Flowchart
10. Power Point – Driving Continuous Improvement
11. Systematic & Systemic Change Picture

DAPIM™: (Define, Assess, Plan, Implement, Monitor)

Organizational Effectiveness (OE) is a “systematic and systemic approach to continuously improving an organization’s performance, performance capacity and client outcomes”. DAPIM™ is APHSA’s approach to systematic continuous improvement. APHSA has found that to improve something, you have to:

DAPIM™ MODEL	
DEFINE	Step One: Define priority improvements in operational terms.
ASSESS	Step Two: Assess observable, measurable strengths and gaps. Identify root causes and general remedies for priority gaps.
PLAN	Step Three: Plan quick wins, mid-term, and longer-term improvements.
IMPLEMENT	Step Four: Implement action plans while managing communication and capacity.
MONITOR	Step Five: Monitor progress, impact, and lessons learned for accountability and on-going adjustments.

Continuous Improvement Plan Guide and Template

This template is designed to assist the organization in thinking about how to plan and implement quick wins, mid-term improvements, and longer-term improvements. The template contains the key areas that the organization should think through prior to implementing an improvement.

This template can be used in multiple ways:

First, a leader of an organization may use the template to think independently about the organization when planning for an improvement. The leader can use the template to ensure they have thought through all aspects of the improvement prior to moving forward. In an improvement situation, where leaders want to think through the steps of the improvement plan independently, they must ensure a sound diagnosis by including senior staff and stakeholders in the “assessment phase” prior to writing the plan and after the plan is developed to obtain feedback prior to implementing it.

Second, the leader of an organization may use the template with their leadership team, allowing the leadership of the organization to think together when planning for the improvement.

Third, a department/unit within the organization may use the template to plan an improvement within the department/unit, allowing all staff within the unit to clearly understand the purpose for the improvement and the role each member of the department/unit will plan in carrying out the improvement.

Fourth, a facilitator can use the template to guide a team from the organization through thinking and problem solving to plan improvements within the organization prior to implementation. The use of a facilitator allows for full participation of all team members and to obtain insight from a third party.

Regardless of which of the above methods is utilized, the template can assist an organization in developing an understanding of all of the things that must be thought through prior to implementing an improvement.

Taking time to think about the organization, whether independently or as a team, is the work of leading any organization.

The objectives of the template are to help agency leaders drive quick wins, mid-term improvements, and longer-term improvements that maintain high-quality core service delivery, curtail or eliminate

activities outside the core services, target improvement in areas of greatest return on investment, and identify and eliminate inefficiencies.

Creating detailed plans for improvement that begin with a sound diagnosis of strengths and needs, drive immediate action, detail communication actions at every step, take advantage of quick wins, identify non-negotiable items, and leverage working teams and taskforces within the organization help position an improvement effort for success and sustainability.

The improvement planning template is a shell format that includes elements contained in most sound improvement plans. Users are, however, encouraged to modify this template to meet their unique needs. The following are the minimum elements of a sound improvement plan:

- Assessment of Current Situation: Findings, root causes and remedies
- Rationale: Why will you implement the improvement?
- Objective: What will success look like for the organization and the client?
- Timeframes for Improvement Initiatives: When will the improvement take place? Will the improvement be rapid or long term? Responsible Group: Who will be accountable for implementing the improvement?
- Activities/Task that will be engaged in to Support the Improvement: Who will do what by when?
- Overcoming Obstacles
- Communicating the Improvement Effort: What will you say and to whom?
- Monitoring Plan Progress: How will you chart your progress? What methods/tools will you use?
- Sustaining the Improvement Effort: How will you ensure the improvement effort continues to be implemented? What methods/tools will you use for accountability?
- Budget and Resource Implications

Continuous Improvement Plan Template

Complete this template only after completing a thorough assessment of the current situation. Include senior leaders and key stakeholders in the assessment and share findings (both current strengths and challenges) to ensure a high level of confidence in the findings, root causes, and remedies.

Brief Description: What do you intend to do?

Rationale: Why do you intend to do it (your business case)?

Objective: What will success look like for the organization and its clients?

Timeframes for Improvement Initiatives: When will the improvements take place? Quick win improvements typically can be implemented within 0-90 days. Mid-term improvements take 3-6 months. Longer-term improvements take 6 months to 2 years.

Responsible Group: Who will be accountable for implementing the improvements?

Specific Activities and Tasks: Who will do what by when?

Overcoming Obstacles:

Potential Obstacle	How We'll Overcome It

Communicating the Improvement Effort: What will you say and to whom? Who will deliver the message (director, managers, or supervisors)? What form will the message be delivered in (written, verbal)? Where will the information be shared (all staff meeting, department/unit meetings)? How will the actions of this plan lead to our desired outcome?

Monitoring Plan Progress: How will you chart your progress? What will you track? What methods/tools will be used?

Sustaining the Improvement Effort: How will you ensure the improvement effort continues to be implemented? What methods/tools will you use for accountability?

Budget and Resource Implications: Is this a “no-cost” or “low-cost” effort or will money be needed to support the improvement? If funds are needed how will they be secured? What resources, if any, will you need and who will you need them from?

Improvement Plan Goals and Action Steps At-A-Glance

The following chart can be developed for each identified goal in the improvement plan. The chart provides an at-a-glance view of the improvements committed to in the continuous improvement process. The chart can keep everyone on the page about the intended improvement and can assist with on-going monitoring and evaluation of the improvement.

Goal Statement:

Action Step	Benchmark* (Quality)	Person Responsible	Timeline	Resources Needed	Completed

Chartering Teams Template

Chartering is a process by which expectations of a taskforce or working work team are clarified and translated into a scope of work. Charter formats vary from organization to organization, but there are some useful guidelines to make chartering successful. Developing a charter typically involves both an organization's leadership team (the "sponsors" of the work) and work team members who will do the work being chartered. A good charter is not overly prescriptive. It does not contain every detail about the work to be done. It offers enough detail to guide the work team to complete the work, while allowing the work team some flexibility to decide exactly how the work will be completed.

Common elements of an effective charter include:

- **Parameters of Work:** This defines what constitutes the work team's scope.
- **Organization of the Project:** This specifies who will serve on a work team, for how long, and, if necessary, with what provisions for backfilling them in their regular work. This establishes the basis whereby supervisors of daily performance can make accommodations to other work priorities while individuals serve on these work teams.
- **Conditions of Satisfaction:** This specifies two things: (1) the general outcome expected and (2) the specific, measurable outputs or products of the work team. Specifying both balances a focus on tangible production and accountability with the overall purpose of the initiative.
- **Commitments to the Work Team:** Work teams often need various forms of support from the Leadership Team during their commitment. These forms are feedback, information, encouragement, resources, help removing or navigating various obstacles to success, and opportunities to discuss progress and reflect on how the initiative and charter is translating into value for clients and the organization.

A crucial element of chartering is assigning specific people to perform the work. If the sponsor group has not already developed standing work teams or specific taskforces, this is an important initial step to take.

Effective work teams typically:

- Have a point-person or team leader;
- Identify environmental obstacles early in their planning and data gathering;
- Gather input widely and include individual and group input where the expertise or relevance is high;
- Plan for communicating progress regarding their work;
- Request extra hands and other resources as needed;
- Provide alternative solutions to the sponsor group versus a single preferred one; and,

- Identify development gaps within the organization that will need to be addressed in implementing any new process, system, or technology needed as a result of their work.

Once the scope of the work is defined in a charter, the work team assigned to the work creates an action plan, detailing the specific tasks and timelines for completion of the charter goals and additional resources needed from the leadership team (if any). Considering the objectives in their charter, members should specify the following in their action plan:

- What work steps will be accomplished;
- Who will be primarily responsible for the steps;
- When we will accomplish them;
- What resources will be required; and,
- What specific progress measures or general milestones we will track.

Action plan formats vary. The most important attributes of effective action plans are that they stress substance over form, serve to track and communicate work progress, and keep a sense of accountability in place over time.

Charter Template

Charter for:

This section to be completed by the sponsors of the work:

Rationale: Why is the work team being charged to perform the work?

Work Team Members and Leadership: Names of group members and who will lead the work team (single chair or co-chair)

Boundaries: What the work team can do and what work team cannot do – what is the decision making scope of the work team?

Goals: What are the expected outputs and outcomes of the work team?

Completion Date: How long should the work continue? When should the work team be done with its work?

Impact: How does it benefit the agency and its client?

Communication: What will be communicated about the charge of the work team? Who will communicate the charge and activities of the work team? What will the communication structure back to the sponsor group be?

This section to be completed by work team:

Activities/Tasks /Timelines: This section should be completed by the work team and submitted to the sponsors to ensure support and “buy-in” on the way the work team has chosen to complete its work. Reviewing this section with sponsors also allows the work team to secure necessary resources they have identified for the completion of the work.

Accomplishments and Date Charter Closed: At the completion of a charter, the work team should complete this section to document the accomplishments of the work team. The agency leadership could spotlight accomplishment at staff meetings, in agency newsletters, or agency bulletin boards.

Capacity Building Guide

This guide is designed to help an organization gauge its capacity to carry out and sustain meaningful change through a set of structured, open-ended questions. This guide is designed to assist users through a reflective thinking process to stimulate thinking that serves as the basis for the attached planning activity, and not for every question be completed. Answers to these questions will help leaders develop, monitor, and adjust plans and budgets to support the organization in aligning, obtaining, and developing resources they need to execute their priority initiatives.

This guide can be used in multiple ways:

First, the leader of an organization may use the guide to think independently about the organization when planning and implementing an improvement effort. The leader could use the information to secure the resources necessary for meaningful improvements to occur within the organization.

Second, the leader of an organization may use the guide with their leadership team, allowing the leadership of the organization to think together when planning and implementing an improvement effort.

Third, the guide can be used by a facilitator to guide a team from the organization through the reflective thinking questions as a way to allow full participation of all team members and to obtain insight from a third party.

Regardless of which of the above methods is utilized, the guide can help the organization develop an understanding of the organizations capacity to carry out and sustain meaningful improvements.

Taking time to think critically about the organization, whether independently or as a team, is the very work and essence of leading any organization. Effective leadership requires spending time thinking about how the organization is going to get to its desired state and what resources the organization needs to execute its strategy. When engaging in ongoing assessment and planning of the organizations capacity to support and implement meaningful improvements, leaders should be ask themselves the following questions:

1. Strategic Alignment of Resources

- What are our strategic goals, objectives, and related priority initiatives?
- Have these initiatives been translated into specific projects and areas of work within each unit of our agency? Are these initiatives well-scoped and well-sponsored?
- Does each unit within our agency have a structure and employ roles that best ensure we can accomplish our priority initiatives?
- Are unit and team work plans and task plans in place?
- Are individual work plans and task plans in place?
- What are our strengths and gaps related to strategic alignment of our resources? What actions do we need to take to address them?

2. Inputs (Resources themselves)

- What inputs do we need to execute our initiatives and hit our output goals? (staff, materials, space, money, technology and equipment)
- What inputs do we currently have?
- What state or condition are our resources in now?
- How adaptable/flexible are our resources?
- What are our strengths and gaps with regard to our resources? And what actions do we need to take to address them?

3. Staff Development and Performance Capacity

- What staff capabilities do we need in order to achieve our strategic priorities? What related knowledge, skills and competencies do our staff need that can be addressed through professional development, technical assistance, and training?
- What are the strengths and gaps in our staff capabilities?
- What staff development activities are we engaged in now, and are these efforts aligned with our needs? (for management, supervisors, workers, new staff)
- Are gaps in our staff capabilities a result of a deficit in knowledge and skills, or do other organizational barriers exist to prevent staff performance? (culture, structure, processes, tools, programs, policies)
- Are these gaps a result of individual or team barriers/issues, e.g., time management gaps or lack of adherence to standard operating procedures?
- Are these gaps a result of organizational barriers/issues, e.g., non-constructively resistant unions, chronic employee relations problems, labor market constraints, budgets, and/or stakeholder support?
- What actions do we need to take to address the underlying causes for our gaps?

4. Continuous Improvement Planning

- Do we have quick wins, mid-term and longer-term improvement plans for building or changing our organization's performance capacity?
- How are we continuously improving and leveraging our capacity?
- What are our strengths and gaps with regard to continuous improvement planning? And what actions do we need to take to address them?

5. Project-Specific Capacity Planning

- Have specific task plans and action plans been developed for this project that help us understand what staff time is needed to accomplish it?
- Have those involved in project-related change efforts been released from other responsibilities and assignments that compete for their time? Do they have work plans in place that help us understand if they are being assigned work that is above or within their capacity?
- Do we have staff involved in project-related change efforts who have the facilitation and the project management skills required for these efforts to succeed?
- Are there capacity gaps that need to be filled immediately before project-driven efforts can continue or be sustained?
- Were our original assessments of capacity required correct, or have we over or under estimated? What steps will we take to address this?

For those teams who do not currently use a set of tools for tracking multiple strategic initiatives and aligning staff capacity to them, the following are two examples of these tools.

The first is an example of how numerous strategic initiatives can be organized together according to:

- The strategic goals and objectives they are designed to advance
- What staff are involved as leads or performers
- When milestones are expected to be reached
- What overall progress is being made
- What impact is expected and being made
- What lessons learned are being gleaned for the efforts to date

The second is an example of how individual staff responsibilities, task areas, available time to work on all tasks, expected time to complete specific tasks, and actual time to do so. This approach to "work planning" can be very useful as managers work to establish improvement plans that are realistic to implement.

**APHSA OE Handbook
Example: Tracking Strategic Initiatives**

Initiative and General Timeframes	Lead	Second	Status
<p>Strategic Goal #1: The Field’s Voice and Credible Broker</p>			
<p>Objective A: Support the Advancement of Pathways Related Initiatives:</p> <ul style="list-style-type: none"> • Collaborate with TW and AL as sponsors of our support for this effort. (PB) Ongoing • Aid development of a strategic communications plan. (RO) Q1 and Ongoing • Take on roles within this plan as needed, being fully conversant in the related key messages and supporting information. (All) Ongoing • Help maintain a strong linkage between Pathways and the Policy Forum (RO) Q2 • Help shape the content of Pathways and supporting materials as they link to practice themes. (JR/KJK) Q1 and Ongoing <p>Desired Impacts: Transformation of the US human services policy, practice and program agenda on the national, state and local levels. APHSA and its members viewed as change agents along these lines. Strengthened content and connections between policy, program, and practice effectiveness.</p>	<p>Phil</p>		<ul style="list-style-type: none"> • High level of collaboration established and ongoing. • Provided significant support to this plan’s development. • Performer roles identified and cross-walked with work plans. • Significant work on Policy Forum alignment taking place, including staffing multiple breakouts. • Developed success stories, a “common practice model,” and input into defining adaptive leadership. <p>Lessons Learned: Much of our experience and thinking around OE directly applies to the Pathways principles and foundational elements. And our own innovations going forward will link OE more concretely to practice innovation (e.g., a “common practice model”).</p>

Roles Defined

Lead:

- Ensure ongoing aim and alignment to the strategy.
- Ensure action plans are in place where needed.
- Recognize and manage resolution of related capacity gaps, such as recommending changing deadlines.
- Monitor progress and impact and facilitate the related dialogue within our team.
- Communicate as needed with the rest of the team.

Second:

- Fill in as needed for the lead; be fully up to speed on the lead's role.
- Accept delegated responsibilities from the lead, or serve in a "co-lead" capacity as requested.
- Serve as a sounding board and advisor to the lead as requested.
- This role should add value versus require extra work, otherwise the second role will be modified or dropped.

Supervisor:

- Monitor overall performance of both leads and seconds, coaching and evaluating as needed.
- Mediate calibration issues between the lead and others on the team as needed.
- Serve as an aggregate lead in terms of strategic alignment, capacity management, communication and monitoring.

Area of Work	# of Anticipated Days by Contract	# of Days used this Week	# of Days used to Date in the Quarter	Completed Tasks and Comments
Client Consulting and Relationship Management (Projected at 45%): 22.5 days	21.5			
Client A	10.5			
Client B	5.0			
Client C	1.0			
Institute A	2.5			
Origination and Marketing	2.5			
Development and Delivery (Projected at 10%): 5 days	5.0			
Existing product improvement	2.5			
New product development	0.0			
Presentations and conferences	2.5			
Core Services to APHSA Staff and Affiliates (Projected at 45%): 22.5 days	21.0			
Own unit's strategy and planning	4.0			
Supervision	6.0			
Support to team B	4.0			
Support to team C	2.0			
Ongoing, ad hoc customer service time	5.0			
Total Days Planned:	47.50	0.0	0.0	50 days max for this quarter (65-vacation and holidays)

Note: If time with clients exceeds plans, existing product improvement can be delayed

Communication Plan Template

This template is designed to help an organization think about how to plan and implement effective communication, both internal and external to the organization. The template contains key areas that the organization should think through when developing a communication plan.

This template can be used in multiple ways:

First, a leader of an organization may use the template to think independently about the organization when planning for a communication. The leader can use the template to ensure they have thought through all aspects of the message to be communicated prior to moving forward. In situations where leaders want to think through the communication effort independently, leaders must ensure a sound diagnosis by including senior staff and stakeholders prior to delivering the communication whether it is written and/or verbal.

Second, the leader of an organization may use the template with their leadership team, allowing the leadership of the organization to think together when planning for the communication.

Regardless of which of the above methods is utilized, the template can help an organization develop an understanding of all of the things that must be thought through prior to communicating to internal and external stakeholders.

Taking time to think about the organization, whether independently or as a team, is the work of leading any organization.

The objectives of the template are to help agency leaders prepare and deliver communication messages that inform stakeholders about the direction the organization will take to maintain high-quality core service delivery. Effective communication informs everyone about the actions being taken within the organization and how they support the organization's strategy. Being transparent as an agency to both internal and external stakeholders through effective communication planning will assist in building trusting relationships with all stakeholders.

When planning improvements, leaders should keep in mind that stakeholders, both internal and external, could have a negative reaction to the improvements. Therefore, leaders should be sure to include the following in their communication:

- A clear vision for where the improvements will take the agency and how it is related to the desired outcomes;

- What resources will be available to staff to develop new skills that might be required to implement the improvements;
- The incentives to both internal and external stakeholders for supporting the improvements;
- What resources are needed to support the improvements and how leadership will obtain the resources; and,
- A clear plan of action on how the improvements will be implemented and monitored along with an expected timeline.

The communication planning template is a shell format that includes elements contained in most sound communication plans. Users are, however, encouraged to modify this template to meet their unique needs. The following are the minimum elements of a sound communication plan:

- Background/Situation Analysis;
- Key Messages and Goals;
- Method of Communication; and,
- Evaluation and Monitoring.

Communication Plan Template

After completing a thorough assessment of the current situation, this template can be used to assist in communicating systematically and thoughtfully for greatest impact. During the communication planning process, it is important to include senior leaders and internal and external stakeholders whose active support you'll need to implement your plan.

Background/Situation Analysis: What is the background or current situation you would like to impact through communication? What would you like to see happen as a result of your communication efforts, both internally and/or externally?

Target Audience: Who (external and internal) do you need support from in order to advance your organizational objectives and strategies? Who will be impacted by the changes and/or decisions you are making?

Key Communication Goals, Messages and Back Up: What impact are you looking for from your communication efforts? What messages do you need to send to have this impact? What back up information and activities will you use to support your messages?

Goal Area A: What do you want your target audience to understand, perceive, buy into, feel or do?

Key Message: What is the concise message that will best help you advance this goal?

Back Up: How will you back up the message so it is credible? What examples, data or other information or demonstrations of your message will you need and use?

Goal Area B: What do you want your target audience to understand, perceive, buy into, feel or do?

Key Message: What is the concise message that will best help you advance this goal?

Back Up: How will you back up the message so it is credible? What examples, data or other information or demonstrations of your message will you need and use?

Goal Area C: What do you want your target audience to understand, perceive, buy into, feel or do?

Key Message: What is the concise message that will best help you advance this goal?

Back Up: How will you back up the message so it is credible? What examples, data or other information or demonstrations of your message will you need and use?

Method of Communication: How should the message be communicated – verbal and/or written? Through the chain of command or collectively? What are the various methods that will be used to communicate? How might electronic or social media fit into your methods?

Barriers to the Communication Plan: What barriers are anticipated in delivering the communication and how will we plan to overcome these barriers?]

Specific Communication Activities and Actions: What is the action plan to accomplish your goals? Who should be responsible for each plan area? When should tasks be completed?

Evaluation and Monitoring: How will the effectiveness of the communication effort be monitored? How will feedback be obtained internally and externally to ensure understanding of the message communicated? How will feedback be used to evaluate, monitor and adjust your goals and plans? How will adjustments and changes to the broader objectives and strategies being supported through communication be adjusted based on feedback from your target audiences?

Action to be Taken	Who is Responsible	Anticipated Completion Date	Status (completed, in-progress, not started, notes)

Data Planning Template

This template is designed to help an agency identify the data essential to tracking outcomes and where that data must come from. The template is designed to assist users through a reflective thinking process that stimulates thinking by the user, and not for every question be completed.

This template can be used in multiple ways:

First, the leader of an organization may use the template to think independently about the organization when planning for its future. The leader could use the information to secure necessary data resources for organization.

Second, the leader of an organization may use the template with their leadership team, allowing the leadership of the organization to think together when planning for the future of the organization.

Third, a unit within the organization may use the template to more fully understand how they contribute to the success of the overall organization.

Fourth, the template can be used by a facilitator to guide a team from the organization through the process of identifying data needs to track outcomes as a way to allow full participation of all team members and to obtain insight from a third party.

Regardless of which of the above methods is utilized, the template will assist the organization in developing an understanding of its data needs. Data planning can take many forms. At a minimum, the following items should be considered:

- Why data is important to the organization;
- Forming a data team;
- The type of data needed:
 - Qualitative,
 - Quantitative;
- Where and from whom the data will come;
- Who needs the data:
 - Agency Staff,
 - Agency Clients,
 - Other External Agency Stakeholders;
- Who will collate and analyze the data;
- How the data will be reported:

- Format,
- Frequency;
- Potential obstacles in data collection; and,
- Budget and resource implications.

Data Planning Template

Why We Need Data: What project are we gathering data for? What will gathering and using data allow us to do?

Our Data Team: Who are the “go-to people” for data on this project? Who is/are the leader(s) of the team?

The Data We Need: What qualitative and quantitative data will help us track progress, impact, and lessons learned?

- **Qualitative:** (e.g., surveys of people we’re aiming to impact)
- **Quantitative:** (e.g., regularly tracked statistics that will tell us whether we’re having an impact)

Where are We Going to get the Data: What people and places can help us get the data we need? What is already in place? What new forms/systems/etc. will we need to develop?

- **From Whom:** (e.g., survey populations)
- **From Where:** (e.g., existing data systems)

Things We Need to Develop & How We’re Going to Develop Them:

Who Needs the Data:

- Agency Staff:
- Agency Clients:
- Other External Agency Stakeholders:

How We’re Going to Report the Data:

Who will Collate and Analyze the Data:

What Format will it be Provided in:

What will be the Frequency of the Data Reporting:

Potential Obstacles and How We’re Going to Overcome Them:

Potential Obstacle	How We’ll Overcome It

Budget and Resource Implications: Is this a “no-cost” “low-cost” effort or will money be needed to support the data and analysis work? If funds are needed how will they be secured? What other resources (e.g., people, equipment), if any, will we need and who will we need them from?

Organizational CI Assessment Tool

This guide is designed to help the organization gain a clear view of itself - current state, desired state, critical gaps, and key priorities for addressing those gaps - through a systematic review of the organizational system. The assessment tool is designed to guide the user through a continuous improvement process using the DAPIM™ approach. Completion of the assessment tool results in the development of an overarching continuous improvement plan for the organization, linking improvement efforts, professional development, technical support, and training to the organization's strategy and desired outcomes.

This Organizational CI Assessment Tool (OCIA) can be used in multiple ways:

First, the leader of an organization may use the tool to think independently about the organization when planning for its future. The leader could use the information to develop budgets and secure resources for organization.

Second, the leader of an organization may use the tool with their leadership team (managers) and/or an assessment team (such as key managers, supervisors, front line staff and stakeholders), allowing the team to think together when planning for the future of the organization and how to secure the necessary funding and resources to achieve the organizations desired outcomes.

Third, the tool can be used by a facilitator in a "Learning by Doing" session to guide a team from the organization through the DAPIM™. Using a facilitator will allow full participation of all team members and to obtain insight from a third party.

Regardless of which of the above methods is utilized, the tool can help the organization develop an overarching continuous improvement plan.

Taking time to think about the organization, whether independently or as a team, is the very work and essence of leading any organization. Effective leadership requires spending time thoroughly understanding where the organization is at any given point in time in relation to the outcomes it hopes to achieve for its clients.

Organizational Effectiveness (OE) is a "systematic and systemic approach to continuously improving an organization's performance, performance capacity and client outcomes". DAPIM™ is APHSA's model for systematic continuous improvement. APHSA has found that to improve anything, you have to do the following:

Step One: Define priority improvements in operational terms.

Step Two: Assess observable, measurable strengths and gaps. Identify root causes and general remedies for priority gaps.

Step Three: Plan quick wins, mid-term, and longer-term improvements.

Step Four: Implement action plans while managing communication and capacity.

Step Five: Monitor progress, impact, and lessons learned impact for accountability and on-going adjustments.

The DAPIM™ approach is sequential and cyclical. It operates as an iterative flywheel in real time, with definitions crafted during step one and assessments completed during step two being continuously refined by insights generated while planning, implementing, or monitoring. Organizations experienced in the DAPIM™ approach use it to continuously improve everything they do, no matter how big or small. At any given time, they may be engaged in a multi-year “big DAPIM™” improvement effort to make fundamental improvements to practice while running multiple “little DAPIM’s” to eliminate inefficient processes, respond to unexpected shifts in the environment, etc. In this way, an organization can be doing work associated with any and all steps in the DAPIM™ approach at any given time.

The Organization Continuous Improvement Assessment tool is designed to assist the organization in looking at itself as a whole versus a specific operational or practice issue. The tool is easily adaptable to focus on a specific issue.

At each stage of the DAPIM™ process, team members first reflect independently on the reflective thinking questions provided and/or task to be completed for the stage of the assessment. A group discussion of their findings then takes place to lead to group consensus. Group decisions should be recorded on flip charts, typed and shared with the team.

Upon completion of the assessment, the organization has a continuous improvement plan outlining task and activities designed to support the organization in achieving its strategy, as well as the professional development, technical support, and training required to support staff in the completion of the identified task and activities.

As plan objectives are completed, the organization should complete an After Action Review (AAR) of the process asking participants: What went well? What didn’t go well? And what should we do differently next time?

Prior to completing the assessment tool as many of the following documents that are currently available should be obtained and reviewed by everyone participating in the Organizational Continuous Improvement Assessment process:

- **Vision, mission, values statement for the organization;**
- **Organizational chart;**
- **Organizations budget** for past fiscal year, current fiscal year planned fiscal year;
- **Annual reports** for past fiscal year, current fiscal year planned fiscal year;
- **Agency demographics:** What type of positions are in the organization, how many positions are filled, how many positions are vacant, what is your turnover rate, how are new workers oriented to the position, how is new worker training conducted, how is on-going training provided to experience staff, how are new leaders (supervisors, managers, directors) oriented, how are leaders trained, what type of technical support is provided to help with organizational effectiveness, and how are training and technical support needs currently assessed, developed and delivered;
- **Demographics of the community served:** Who is the population and what are the economic, social and political issues effecting the community;
- **List of services currently provided to the community served:** Brief paragraph of each services and its intended outcome, if available evaluation data on each service; and,
- **Strategic Playbook** (if one exists. If one does not exist, pulling the above documents together and completing the assessment tool will lead to the development of a Strategic Playbook).

First, define the desired state of the organization by asking the following questions:

- **Defining the Client:** Who is the population you should be serving, and how might this population change and/or remain the same in the future based on current political trends and social trends, both positive and negative? What outcomes do you want for the client?
- **Defining the Desired Practices, Products and Services:** Based on the population served and desired outcomes, what practices, products and services should you offer to your client? How should these practices, products and services be offered? Why would you offer them? What value are they to your client?
- **Defining the Organizational Structure:** What should the vision and mission of the organization be to lead you to your desired state? How should your organization be structured to support the work that needs to be completed to reach your desired state? What procedures should be in place to support the flow of work that needs to be completed? How many staff do you need to employ, what roles and responsibilities should they have and what educational and work experiences are you're looking for in staff? How should your staff be trained and what technical support needs to be provided to the organization to reach your desired outcomes for clients?
- **Defining Performance Capacity to Achieve Desired State:**
 - **Data & Analysis:** What type of data will you need to monitor desired outputs and outcomes and who will you need it from?
 - **Trust:** What behaviors do you expect of your staff to create a trusting environment?
 - **Values:** What should the values of the organization be to lead you to your desired state? How should these values be displayed in the work environment – both internally and externally?
 - **Budgeting & Fiscal Capacity:** What type of monetary resources will you need to reach your desired state – deliver products and services and employ qualified staff, manage improvement effort?
 - **Workforce Capacity:** What type of leadership will be needed to manage continuous improvement efforts? What qualifications will staff need so their performance will lead to desired outcomes? What type of technical assistance and training will the organization need to achieve desired outputs and outcomes?
 - **Strategic Support Capacity:** What should the capability of the organizations strategic support functions look like to assist the organization in achieving its desired outcomes - human resources, information technology, policy and finance?

First, review the questions independently and record your findings in the space below.

Then discuss the findings as a group to reach consensus. Group decisions should be recorded on flip charts, typed, and shared with the team.

Second, assess the current state of the organization. Start by reviewing the materials collected prior to the assessment while reflecting on the “desired state” the team just defined. Next, reflect on the same list of questions from the “define” section for each of the categories below. The assessment should lead to tentative hypotheses of “findings” that identify current strengths and gaps in the organization.

- Assessing who the client is
- Assessing current practices, products and services
- Assessing the current organizational structure
- Assessing current performance capacity
 - Values
 - Budgeting & Fiscal Capacity
 - Workforce Capacity
 - Strategic Support Capacity

Review the materials collected prior to the assessment and the analysis from the define stage independently and record your findings in the space below.

Then discuss the findings as a group to reach consensus. Group decisions should be recorded on flip charts, typed, and shared with the team.

Building the bridge from assessment to planning involves prioritizing findings and identifying root causes and general remedies.

Root causes and general remedies can be more task oriented or relationship oriented. The following are examples of more task oriented root causes and general remedies:

- Organizational Structure:
 - Tiers and Functions,
 - Roles and Numbers;
- Goals, Standards and Measures;
- Policies and Procedures;
- Processes and Methods;
- Internal Programs, Services, and Tools; and,
- Staff Capacity:
 - Time Management,
 - Skill Set (technical/general).

The following are examples of more relationship oriented root causes and general remedies:

- Culture and Values;
- Politics and Power;
- Communication;
- Decision-Making;
- Teamwork and Collaboration;
- Community Partnerships; and,
- Daily Behaviors and Motivations.

When identifying root causes and general remedies, the organization should ask itself “What isn’t working well, and why?” until something very tangible and actionable is discovered. It is important to remember that root causes can apply to multiple findings within the organization.

First, identify the root causes you believe are impacting the organization from reaching its desired state and record your findings in the space below.

Then discuss the findings as a group to reach consensus. Group decisions should be recorded on flip charts, typed, and shared with the team.

After root causes have been identified, remedies to address each root cause can be explored. Remedies can address multiple root causes. Remedies can take many forms, but generally speaking there are three types of actionable remedies for identified root causes. The following are the three types of general remedies:

- **Recommendations:** remedies not in the continuous improvement team’s control that must be referred to others in the organization for consideration;
- **Decisions and Commitments:** remedies in the continuous improvement team’s control that do not require development of new tools and/or processes to implement; and,
- **Team Activities:** remedies in the continuous improvement team’s control that require development of new tools and/or processes to implement. Team activities may involve chartering a work team to perform the “mini-DAPIM™” work of designing and planning implementation of specific remedies.

Identified remedies should always be easily connected back to how they will support achievement of the desired outcomes.

First, identify the remedies you believe will assist the organization in reaching its desired state and record your findings in the space below.

Then discuss the findings as a group to reach consensus. Group decisions should be recorded on flip charts, typed, and shared with the team.

Third, plan for change that will lead to continuous improvement. There are essentially three types of continuous improvement planning – quick wins, mid-term improvements and long-term improvements.

Quick wins can be implemented within 0-90 days. Select improvements from your remedies list that accomplish the following:

- Enhance key initiatives already underway.
- Address needs that are obvious, big, and essential to client service delivery and relationship stability.
- Build the involvement and the confidence of clients and staff- quick, visible wins.
- Stretch current resources to an untried level, yet...
- ...Eliminate or curtail lower-priority capacity eaters.
- Enable deeper future assessments and planning.
- Are symbolically powerful.

First, identify the “quick wins” from the remedies list, you believe can be implemented to have the most impact on the organization and record your findings in the space below.

Then discuss the findings as a group to reach consensus. Group decisions should be recorded on flip charts, typed, and shared with the team.

Use the tracking quick wins improvement tool located in the appendix of chapter two of the OE Handbook to record commitments made by the team to quick wins.

Longer range improvements identified take place over time, generally six months to two years. Longer range improvements often need additional levels of support, buy-in and resources in order to be effective.

First, identify the long ranges changes, from the remedies list, you believe should be implemented first to support the organization in reaching its desired state. Record your findings in the space below.

Then discuss the findings as a group to reach consensus. Group decisions should be recorded on flip charts, typed, and shared with the team.

Once longer range improvements have been agreed upon by the team, it needs to develop written continuous improvement plans for each action item. The purpose of the continuous improvement plan is to:

- Commit explicitly to improving client outcomes and services over time,
- Build agency credibility with stakeholders and staff,
- Get everyone on the same page about organizational improvement work to be done, how it will be rolled out over time, how different initiatives are connected, and why they matter, and
- Reinforce a culture of accountability, data-driven assessment, follow-through and ongoing adjustment.

The elements of an effective continuous improvement plan include the following:

- **Brief Description:** What do you intend to do?
- **Rationale:** Why do you intend to do it (your business case)?
- **Objective:** What will success look like for the organization and its clients?
- Timeframes for Rapid Improvement Initiatives: When will the change take place; both immediately and within 60-90 days?
- **Responsible Group:** Who will be accountable for implementing the change?
- Specific Activities and Tasks: Who will do what by when? (both immediate and within 60-90 days)
- **Overcoming Obstacles:** What are your potential obstacles and how will you overcome them?
- **Communicating the Effort:** What will you say and to whom? Who will deliver the message (director, managers, or supervisors)? What form will the message be delivered in (written, verbal)? Where will the information be shared (all staff meeting, department/unit meetings)?
- **Monitoring Plan Progress:** How will you chart your progress? What will you track? What methods/tools will be used?
- **Sustaining the Effort:** How will you ensure the improvement effort continues to be implemented? What methods/tools will you use for accountability?
- **Budget and Resource Implications:** Is this a “no-cost” “low-cost” effort or will money be needed to support the change? If funds are needed how will they be secured? What resources, if any, will you need and who will you need them from?

A Continuous Improvement Plan Template is located in the appendix of chapter two of the OE Handbook to assist in the development of effective continuous improvement plans. Development of continuous improvement plans is an ongoing process based on the priority order selected by the assessment team and completion of plans.

Fourth, implement the improvements. The Tracking Quick Wins tools and Continuous Improvement Plans for each major initiative when pulled together, into a single document, form the Organization

Continuous Improvement Plan. Preparing for implementation of the major initiatives in the organization continuous improvement plan involves doing the following:

- Assign individuals or charter teams to complete the work;
- Develop workforce capacity plans;
- Develop finance and resource plans;
- Develop communication plans that clearly explain the change improvement;
- Share detailed written improvement plans internally and externally as appropriate; and,
- Develop and implement on-going evaluation and monitoring tools and techniques for accountability.

Templates and reflective thinking guides to support the assessment team in developing charters, assessing workforce capacity (training and technical assistance planning), and communication planning are located in the appendix of chapter two in the OE Handbook.

Charters, capacity plans (training and technical assistance plans) and communication plans should be added to the organization continuous improvement plan. Development of charters, capacity plans and communication plans is an on-going process designed to support the organization continuous improvement plan.

The fifth and final stage of the assessment, monitoring, ensures accountability. Monitoring techniques the organization can use include the following:

- **Implementation Reviews:** measure accomplishments versus plan milestones and commitments;
- **Impact Reviews:** measure actual versus expected impact on organizational capacity and client outcomes; and,
- **Lessons Learned Reviews:** address new and emerging questions and findings and drive further innovations
 - You can use an After Action Review format by asking stakeholders and participants the following: What went well? What didn't go well? What should we do differently next time?

Monitoring measures the organization can use include the following:

- Client Outcomes;
- Efficiency and Quality of Client Service (e.g., client experience of a service);
- Specific Staff Capacity to Deliver a Service (e.g., knowledge and skill, performance); and,
- Foundational Staff Capacity (e.g., retention, safety, leadership bench strength).

Discuss which monitoring activities the team will engage in and what measures will be used to define success. Group decisions should be recorded on flip charts, typed, and shared with the team.

A *Data Planning* template and sample tracking tools are provided in the appendix of chapter two of the OE Handbook.

In conclusion, at the end of this process the assessment team will have the following materials that can be shared as part of the communication plan:

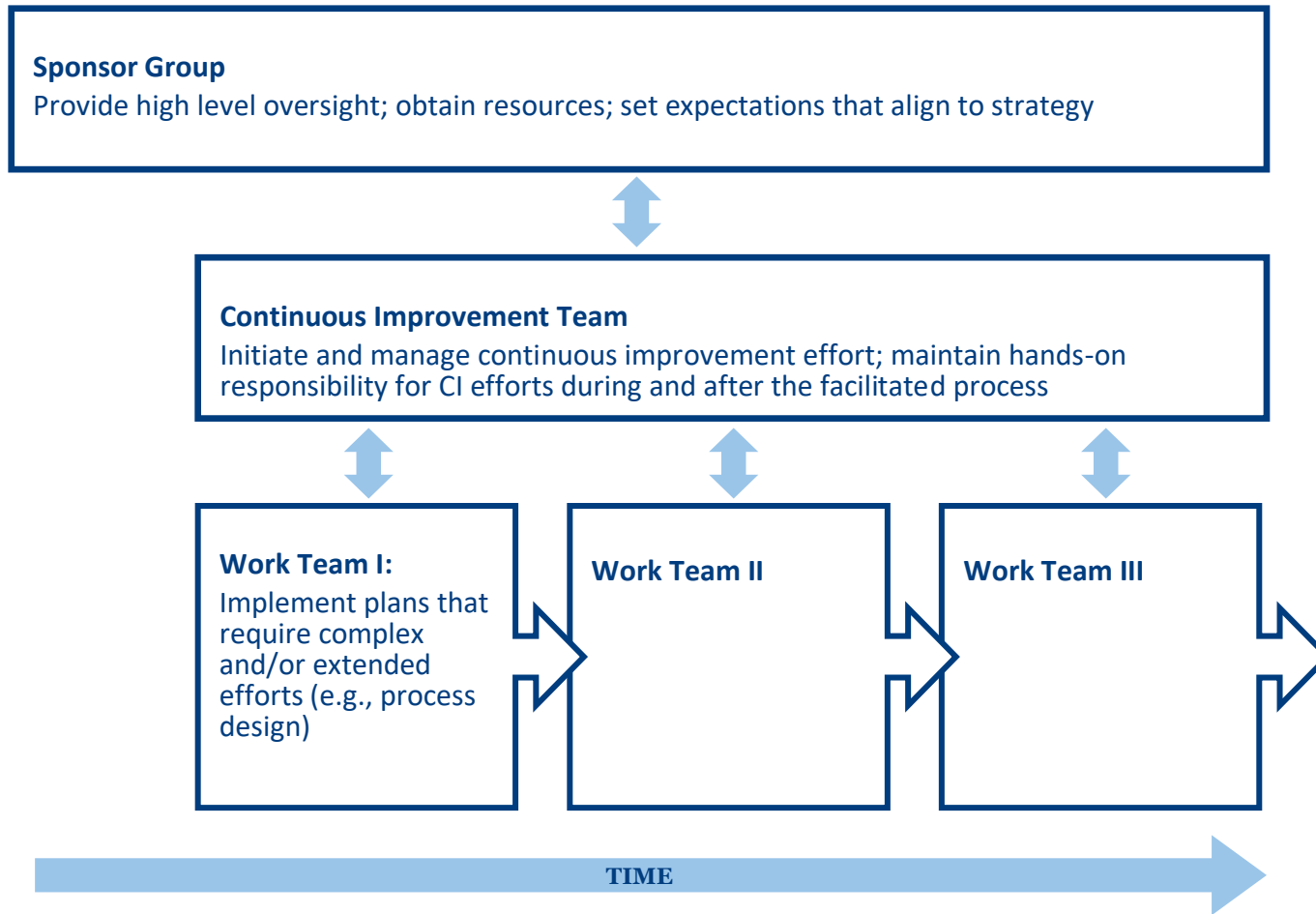
- Group process notes for each section of the DAPIM™ discussions – informing stakeholders how your conclusions about the agency were reached;
- Tracking Rapid Improvements tool completed with quick win commitments;
- Long range improvement plans for areas selected by the team to work on; and,
- Any charters that were developed for team activities.

Tracking Quick Wins At-A-Glance

A quick way to monitor your quick wins is to record the main objective on the form along with the person responsible and completion date. During routine department meetings those accountable for the action can give brief updates on the status, enabling everyone to track the status through to completion. This keeps the quick wins on the radar and allows for communication that keeps everyone on the same page.

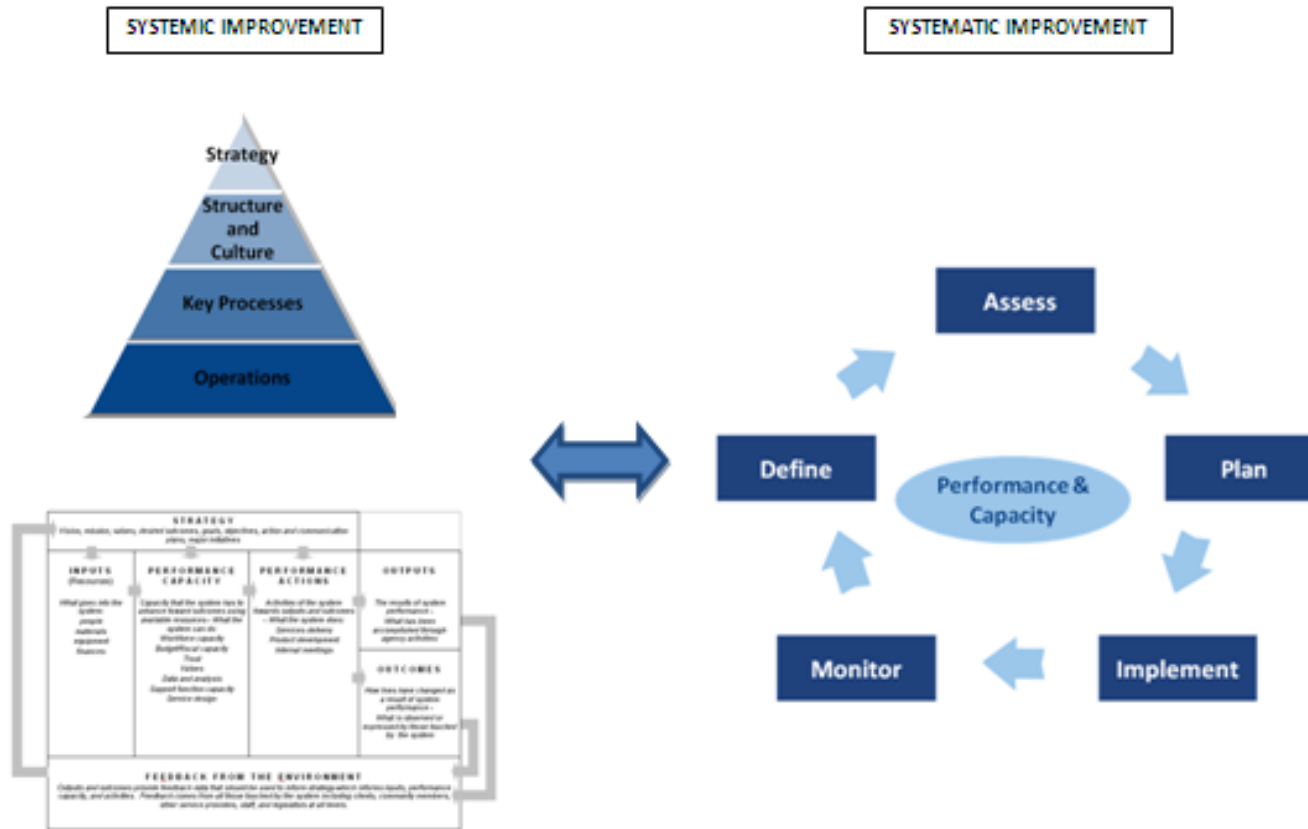
Action to be Taken	Who is Responsible	Anticipated Completion Date	Status (completed, in-progress, not started)

Structure for Change Management



PPT – Driving Continuous Improvement Work

Systematic + Systemic Change Picture





OE

ORGANIZATIONAL | EFFECTIVENESS

Chapter Three: Facilitating Continuous Improvement



ORGANIZATIONAL | EFFECTIVENESS

Overview

Driving continuous improvement projects and initiatives depends on well-organized efforts that are guided and supported by an effective facilitator. Facilitation is a process for group discussion and decision-making that ensures all participants are involved in a meaningful and constructive way. Facilitation involves the use of techniques to coordinate discussion and information flow from a group's own experiences and thinking, such that all group members feel energized to participate and accountable for the group's products and results. This is contrasted with training, where a session leader moves the group through pre-set content and curriculum. A facilitator is typically a person external to the group, whose sole agenda and purpose is to help them work together more effectively.

Effective facilitation of continuous improvement using the DAPIM™ approach generally includes the following:

- Determining the general readiness and willingness of teams to begin a continuous improvement effort;
- Establishing role clarity early in the facilitation process;
- Establishing safety amongst the participants and then building a shared sense of accountability;
- Working with participants to identify work products to complete, which may vary depending on whether they aim to drive systemic, soup to nuts reform or more targeted, inside out continuous improvement;
- Following a 4-6 month continuous improvement project that allows for a learning by doing approach to real life situations and generates work products of lasting value and significance;
- Ensuring solid linkage throughout a project using the DAPIM™ approach between the sponsors of continuous improvement and the continuous improvement team itself;
- Handling typical facilitation challenges such as the influence of observers, participant or subject-specific safety risks, balancing relationship and task orientations, teams jumping too quickly to solutions, teams going off into tangents, team members demonstrating resistance, and bringing new team members into the process;
- Displaying markers of an effective facilitator such as flip charting, group processing, and having difficult conversations; and,
- Being a “good doctor”, for example, balancing control and dependency, and helping the client to internalize the DAPIM™ approach and make it a normal way of doing business.
- Using a combination of reflective thinking and critical thinking questions at the right times to elicit thoughtful discussion and decisions and next steps for the CI team.

A DAPIM™ facilitator “tips” chart has been included in the Appendix of this chapter. Input for this chart was gathered from all APHSA OE consultants as well as the field OE consultants working within various state agencies.

Readiness

The DAPIM™ continuous improvement approach is designed to enable almost any team to advance its capacity and performance, requiring little in the way of advanced credentials and proven effectiveness. There are only three general reasons why a facilitator might not initiate a continuous improvement project with a team, might first work one-on-one with a team’s leader or senior manager, or might recommend to sponsors that the work be concluded prior to completion of the previously agreed scope of work:

1. The team has not committed enough time for the project, does not have a full enough complement of team members in place, or has not worked together enough to have sufficient baseline data about themselves or their staff. Participant transfers or attrition may prompt facilitators to delay the start of a continuous improvement project. And while most teams know what they can commit to before a project begins, sometimes this readiness barrier will not become apparent until the first session or two, at which point facilitators should delay or stop the project.
2. The team does not demonstrate motivation or desire to actually improve its current situation. The DAPIM™ approach is a voluntary and empowering approach that does not work as well when teams feel like it has been mandated. Teams must sincerely want to improve to have the energy to make these improvements over time. Newer teams may be more motivated around general team building than other improvement topics. Facilitators should discuss motivations with a team before a continuous improvement project begins.
3. The team or its leader has a world view that may not allow for objective assessment, root cause analysis, and sound general remedies. While all individuals and teams possess biases and personal convictions, some identify beliefs that a facilitator will not be licensed to address as problems or barriers. For example, a belief that some races of people cannot improve as much as others, or that a deity will solve problems that the team cannot, will likely not be manageable by most facilitators.

Despite a team’s limitations in these three areas, facilitators may still elect to begin a project if they feel these readiness barriers can be overcome.

As an empowering, inductive, and flexible process, the DAPIM™ approach allows for different rates of progress through the following general stages of development:

1. Understanding and buying into the concept of continuous improvement;
2. Using the DAPIM™ flywheel approach to address concrete improvement areas with direct assistance from a facilitator and experiencing tangible successes; and,
3. Using the DAPIM™ approach as a way of doing business, intuitively, and without needing facilitation, or turning the flywheel on their own.

All involved in a continuous improvement project -- sponsor groups, evaluators, facilitators, and the team itself -- will be interested in determining how the team is progressing through these stages and what changes are occurring to the team's capacity, performance and impact on others.

The chapter three appendix contains a detailed readiness model and readiness quick tool with descriptions of organizational behaviors and characteristics in nineteen categories. In each category, the model and quick tool help a user identify whether the category is an area of priority for continuous improvement, movement from a gap to a strength, or strength in which continuous improvement is a way of doing business.

The model and quick tool are versatile resources that can be helpful before, during, and following continuous improvement projects. For example, they can help facilitators, sponsors, and continuous improvement teams do the following:

- Structure a general discussion about readiness and willingness;
- Assess readiness and willingness for change before launching a continuous improvement project;
- Identify how to get ready for a continuous improvement project, prioritize possible areas of focus, and decide where to start;
- Diagnose what is happening once a continuous improvement project is underway;
- Determine the appropriate complexity of and timeframes included in continuous improvement and implementation plans;
- Select pilot sites when preparing to implement remedies; and,
- Evaluate a team's progress over time.

The model and quick tool are particularly helpful for determining how fast to drive a continuous improvement project, how much improvement work to take on at once, and how much support sponsors and continuous improvement teams will need, and at what points in the continuous improvement project. Teams should consider using the model and quick tool explicitly during the Define, Plan, and Monitor steps of the DAPIM™ approach when considering the focus, pace, and complexity of the project.

This model and quick tool are not intended to be prescriptive, and a facilitator's assessment of readiness will rarely fit into it neatly. Some individuals on a continuous improvement team might be at a higher readiness stage than others. A team might demonstrate high readiness but operate in a

broader environment of low readiness. Or there may be a mix of indicators for a particular readiness factor, with some high and some low. While it is possible to use this model directly with a continuous improvement team to help it self-assess and monitor progress, this tactic should be used with caution, as some teams may lose a sense of safety and empowerment if the tool is introduced to them in a prescriptive way.

This model and quick tool are also not intended to serve as the basis for excuses or rationale for why a team fails to improve over time. The facilitator's role is not to judge a team and the individual participants within it, but rather to use a gauge of general readiness to adjust the project's design and pace, to suggest specific types of support a team needs from their sponsor group, and to link other agency improvement efforts to the team's own efforts (e.g., climate studies, performance management and mentoring programs, training). Finally, the model and quick tool should not be used directly with involuntary clients (e.g., counties ordered by the state to work with internal OE facilitators), as these clients may not use them as intended. In these cases, facilitators can use the model and tool themselves to diagnose the client's readiness and willingness for a continuous improvement project, determine the appropriate pace and scope of the project, and make sense of how it progresses once it is underway.

Role Clarity

Once readiness has been established, it is important to establish role clarity in the continuous improvement effort. Participants involved in continuous improvement work have various roles and responsibilities before, during, and after a facilitated process. Unlike traditional classroom training, where participants attend a one-time training session with predetermined content, and with an optional level of involvement during the session and application of content back on the job, participants engaged in continuous improvement work are active participants who determine the content of the session through the application to real life situations of DAPIM™ as well as various models and theories based on their unfolding needs.

In the beginning of a continuous improvement effort, participants will be unfamiliar, and sometimes uncomfortable, with their roles. The facilitator should establish role clarity early in the process and then look for opportunities to reinforce roles and responsibilities throughout the effort. Participants will need to understand how the learning by doing approach differs from experiences they have had in the past. Role acceptance by each individual participant is essential for creating buy-in and sustainability of the continuous improvement effort.

A "Continuous Improvement Flowchart" diagramming the various roles involved with a typical DAPIM™ continuous improvement effort is located in the appendix of chapter 2. We recommend reading the following description of roles while also studying the chart.

The roles involved in a continuous improvement effort are the following:

- The Sponsor Group;
- The Continuous Improvement Team; and,
- Work Team(s).

As DAPIM™ facilitators spend most of their time working directly with continuous improvement teams, their role will be described more fully below:

The **sponsor group** is the champion of continuous improvement and the customer of the work to be done and the progress to be made. The sponsor group is generally the senior leadership team of the organization. This group is accountable for doing the macro change management work of scoping the continuous improvement work at a high level prior to the initiation of the facilitated process -- selecting the membership of the continuous improvement team, selecting a chair person(s) for the continuous improvement team, and developing a charter to define the goals, objectives and parameters of the work.

The sponsor group is also responsible for communicating the effort to internal and external stakeholders, obtaining buy-in for the effort, and securing the resources that will be needed to engage in continuous improvement work. Ideally, the sponsor group would have initially created a strategic playbook outlining the strategy of the organization and the continuous improvement initiatives that will support the strategy (see handbook chapter one). If these initiatives include areas of major reform, the sponsor group would also ideally have created a road map for change outlining how the organization will build readiness for change and sequence or phase change for maximum sustainability. It should also be noted that in a small organization, the sponsor group and the continuous improvement team could be the same individuals (see below).

The **continuous improvement team** assumes hands-on responsibility for improvement efforts during a facilitated process and maintains responsibility for continuous improvement projects following the conclusion of formal facilitation. This team is responsible for mezzo-level change management. A continuous improvement team should be large enough to represent key internal stakeholders but small enough to engage in rich discussions towards making thoughtful recommendations and decisions. The team should include representatives from most levels, major departments, and/or offices of the organization- wherever expertise and buy-in is needed for the continuous improvement effort to succeed. In large organizations, continuous improvement teams generally have 10-15 members, while in smaller organizations they generally have 3-5 members.

The continuous improvement team and its project manager receive coaching and support from an OE facilitator in defining, assessing, and initial planning of improvements. The team then assumes primary accountability for implementing, monitoring and sustaining the overall improvement effort. The team's work is strengthened if the organization has developed a strategic playbook (see chapter one), as the

playbook can help the team keep the continuous improvement effort aligned with the organization's strategic priorities.

Initially, the continuous improvement team is facilitated through the DAPIM™ process, identifying real life situations that are holding the organization back from reaching its desired state and then developing, implementing and monitoring improvement plans that get the organization closer to its desired state. As the continuous improvement team provides oversight for the implementation, monitoring and evaluation of the on-going improvement effort, it follows the systematic steps in the DAPIM™ approach in a flywheel fashion. Eventually, the DAPIM™ process of defining, assessing, planning, implementing, and monitoring becomes an intuitive process and a way of doing business in the organization. One can observe that this is happening when DAPIM™ begins to show up unprompted in specific problem-solving or in 1-to-1 situations such as performance management.

The continuous improvement team reports to the sponsor group. This reporting structure allows organization executives to review continuous improvement plans and all chartered work, providing feedback and support. Continuous improvement teams generally meet at least twice per month to monitor implementation of plans, review the products and progress of work teams, and plan and monitor communication of progress to staff and the sponsor group. The team generally provides the sponsor group monthly updates, either in person or in writing. The continuous improvement team may also double as work team members, especially in smaller organizations (see below).

Work teams engaged in the improvement effort by the continuous improvement team are time limited and focused on a particular area of improvement work. Work teams complete mezzo-level change management work for the specific area of the overall continuous plan assigned to them. Work Teams can become engaged at any time in the continuous improvement process. They are activated when the continuous improvement team identifies improvement remedies that require team activities -- remedies for which new product, policy or process design work is required. Work teams are typically chartered by the continuous improvement team so that they are aware of the expected outcome, timelines, limitations, and resources available to them.

Similar to the continuous improvement teams, work teams should be small enough to accomplish the tasks at hand yet large enough to have cross-department input. Members should also be viewed as primary people responsible for implementation and follow through on specific commitments made. Work teams should have a direct reporting relationship to the continuous improvement team to allow for monitoring and evaluation of the work team's efforts.

While work teams are generally chaired by members of the continuous improvement team, work teams engage in mini-DAPIM™ efforts with staff members not previously engaged in the effort. Using work teams therefore exposes additional staff to OE tools and methods and creates the conditions for micro-level change management work to spread throughout the organization.

A facilitator should become familiar with the following templates and resources in the other chapters of this handbook, specifically:

- Strategic Playbook;
- Continuous Improvement Planning Template;
- Chartering and Action Planning;
- Communication Planning;
- Meeting Management;
- Data Planning; and,
- Organizational Continuous Improvement Assessment Tool.

Familiarity with these templates will help the facilitator explain the products and behaviors expected for the sponsor group, continuous improvement team, and work teams.

Contracting the Work - Planning Session with Sponsor Team

One way to discuss readiness and role clarity is by holding a planning session with the Sponsor Team. This session can be completed in-person or by phone. The goals of the session include:

- Introducing the APHSA OE models, tools, and approach for continuous improvement work to Sponsor Team members
- Preparing for the OE sessions
 - Provide background and history of agency to facilitator
 - Identify the issue to be resolved and its background and history
 - Identify sponsors' goals for and desired outcomes from the OE sessions
 - Identify pre-reading materials for facilitators
 - Develop work plan and high level session one agenda
 - Identify appropriate participants for continuous improvement team
 - Identify a project lead and who can schedule and coordinate OE sessions and keep the continuous improvement team on track between OE sessions
 - Identify timeframe and dates for the OE sessions with the agency
- Developing a communication plan to engage the CI team and other key stakeholders, as needed

Following the session, the facilitator should develop a work plan using the template provided in the appendix of this chapter to outline the measures of success, planned areas of work, and time commitment that will be required by the facilitator, Sponsor Team, and CI Team. The work plan serves as a “contract” for the work to be completed and continues the process of role clarification for OE

work and building safety and trust between the facilitator and Sponsor Team. A sample facilitator agenda is provided in the appendix of the chapter. The sample facilitator agenda list several suggested handouts to use in the planning session. These handouts can be found in the appendix of chapter one and two of the OE Handbook.

Establishing and Maintaining Effective Boundaries

Establishing principles for maintaining effective boundaries allows a facilitator and participants to understand each other's roles and responsibilities. Maintaining healthy boundaries can be challenging. If facilitators are internal to the organization, sponsors are often senior managers who are organizational superiors. If facilitators are external consultants, sponsors are paying clients.

Facilitators can establish clear boundaries at the outset of a continuous improvement effort by agreeing in writing with sponsors on general principles and the ways these principles might translate into more specific expectations, for example, in the following areas:

- Goals;
- Roles;
- Timeframes;
- Work products;
- Communication plans; and,
- Available resources and capacity.

Principles to uphold might include the following:

- The continuous improvement team will follow through on commitments and complete all agreed upon work products;
- DAPIM™ work products need to reflect accurately the findings from the assessment and the analysis of the continuous improvement team;
- The continuous improvement team needs to operate in an environment of safety, with confidentiality safeguarded and dialogue open, honest, and constructive;
- Continuous improvement team members need to have the capacity and resources to fulfill their roles in the project;
- Continuous improvement work should maintain momentum, with facilitated sessions generally taking place within a month or two of each other; and,
- The facilitator needs to have an open and honest dialogue with continuous improvement team members and sponsors about strengths, gaps, root causes, and remedies.

For continuous improvement teams, boundaries and expectations can be included in a written charter from their sponsor group as well as within the team's ground rules for working together. These written

expectations provide a platform for facilitators, sponsors, and participants to discuss throughout the effort how the work is evolving and how specific expectations (e.g., roles, timeframes) might change in response to unfolding circumstances and lessons learned while staying true to the underlying principles. In this way, boundaries are maintained and roles remain clear throughout a continuous improvement effort that evolves in a healthy way.

Interpersonal relationships also play a role in maintaining boundaries. Throughout a continuous improvement effort, facilitators spend considerable time in the room, on the phone, and communicating in writing with continuous improvement team members and sponsors. This time together can lead to the trust and rapport required to have difficult conversations when principles and expectations are not being followed.

Regardless of the specific nature of their relationships, facilitators, sponsors, and participants with written expectations regarding project boundaries can maintain an open, honest dialogue to ensure the work stays in alignment with agreed upon principles and continues to be work that all key parties want to complete. Their success in maintaining boundaries is likely to produce a continuous improvement effort with steady momentum, strong focus, and high-quality work products and related communications that improves the organization in tangible, visible ways.

The DAPIM™ Process: Balancing Safety and Accountability

Establishing a safe and trusting environment up front is critical to the success of a continuous improvement effort. When teams feel unsafe, they tend to experience a great deal of anxiety (“should I really stick my neck out here?”) or apathy (“how do I manage these people so they’ll leave me alone?”). Creating and maintaining trusting relationships establishes the safety needed for open and honest communication throughout a continuous improvement effort.

The facilitator must be familiar with the following elements of the trust model from Megan Tschannen-Moran and engage in activities that reinforce these elements:

- Benevolence - kindness, caring;
- Integrity - no hidden agendas; honesty;
- Openness - vulnerability with information and authority;
- Reliability - what is committed to is done; and,
- Competence - capabilities expected for one’s role.

Trust and safety-building can be initiated prior to a continuous improvement effort using a variety of methods, such as the following:

- One-on-one interviews, focus groups and surveys;
- Sharing the agenda with participants prior to the session; and,
- Sharing information about the facilitator prior to the session.

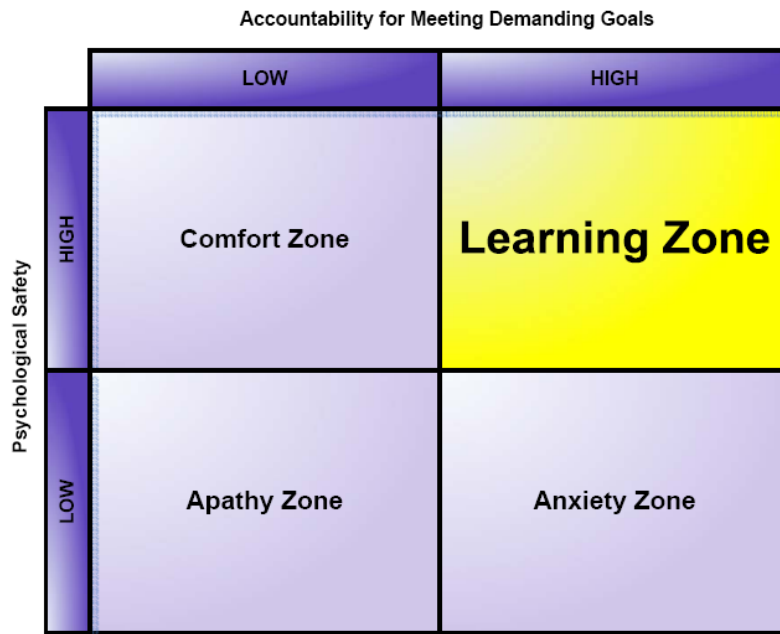
Trust and safety can continue to be developed during a continuous improvement effort using methods such as the following:

- Sharing information early in the process about the facilitator’s background and familiarity with DAPIM™ tools and techniques – if the facilitator is new to the DAPIM™ process, this fact should be shared openly as a way to be transparent with the participants;
- Establishing ground rules for how participants and the facilitator will interact during the sessions, and holding participants accountable to these ground rules, especially ones concerning respectful treatment;
- Pointing out to the group when it appears there is an “elephant in the room,” encouraging them to be open and honest with one another and with the facilitator
- Being open to the ideas of the group and making related changes;
- Using the language of participants when recording their discussion, checking-in to ensure thoughts have been captured as the participants intended, and always working from their points of view;
- Following through with commitments made to the participants during the session in the timeframes agreed upon; and,
- Thanking participants for their time at the start and end of each session.

Once teams feel safe with the facilitator and each other, the emphasis of facilitation should evolve to building a shared sense of accountability for meeting demanding goals and following through on commitments made. Teams that feel safe but not accountable tend to go into a comfort zone where relationships are strong but challenges and hard work are avoided. The DAPIM™ process itself, mini-DAPIM™s related to follow through and motivation (see chapter four) and reinforcing the task-based elements of trust-building -- reliability and competence -- all help facilitators build a shared sense of accountability on a foundation of team safety. Once teams are in this learning zone, they can improve their performance and capacity steadily over time.

Harvard’s Amy Edmondson has done some excellent work on learning organizations, and the Safety and Accountability Performance Matrix below is derived from her work. The matrix is also in the appendix of this chapter.

Psychological & Accountability Performance Matrix



Adapted from Harvard Business Review, Amy C. Edmondson

Edmondson’s research focuses on the role leaders must play to create learning organizations. She suggests that in order to create a learning organization, team leaders must continually clarify the meaning and importance of the team’s goals, make sure the goal is supporting the organization’s aim, and remain open to input from team members about ways to modify the team’s goal to implement new changes and overcome challenges the team faces in the organization. Leaders must set challenging goals and specific direction but still allow team members to be innovative within the provided structure for learning. This requires leaders to provide enough structure to ensure teamwork and engagement of team members without restricting their creativity, keeping the team in the learning zone. In effective learning environments, participants feel both safe enough to be open and collaborative as well as accountable for making improvements to their performance and capacity.

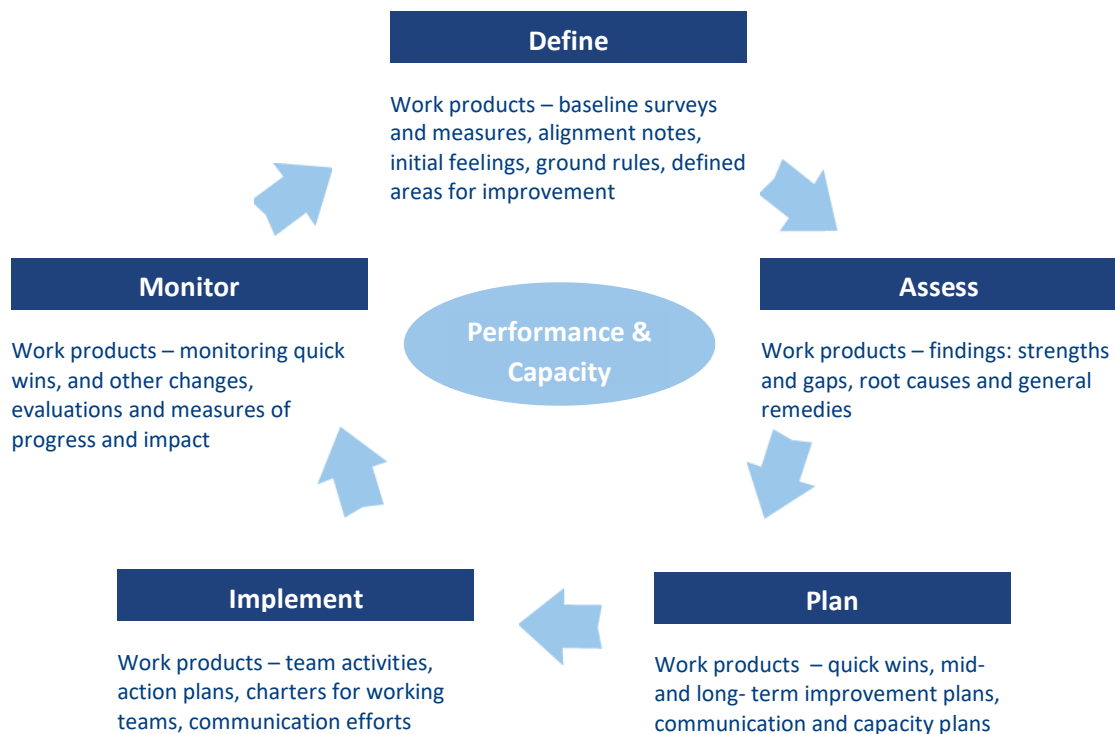
As continuous improvement teams begin to take accountability for their work, the OE facilitator must work closely with sponsor team members to ensure they are setting direction, linking goals to the organization’s aim and providing a structure that is safe and allows for risk taking.

The DAPIM™ Process: Standard Pace and Design

From start to finish, a facilitated continuous improvement project requires about seven or eight full-day working sessions over a four to six month period. This is just a standard estimate -- how many sessions are conducted and over what time period is based on the needs of participants. Typically, sessions are held using a two day format with at least four weeks between sessions. The four weeks allow enough time for participants to complete intersession work but is short enough to maintain project momentum. The facilitator should contract with participants when scheduling the follow up sessions to ensure participants feel enough time has been allowed for intersession commitments based on their work load and schedules.

The DAPIM™ Process Work Products

Here is a version of the DAPIM™ flywheel with the “work products” from each session. Work products -- the documents generated in the continuous improvement sessions themselves -- serve as the ongoing record of discussions, observations, conclusions, decisions and commitments that are generated by the group. Also known as “management control documents” because they serve as the project record of accountabilities and commitments for the group as well as for others assigned to subsequent tasks and work teams, well-developed work products are vital to the success and sustainability of any continuous improvement initiative.



This model is also in the appendix of this chapter. We recommend reading the following description of a typical continuous improvement project while also studying the flywheel.

The eight sessions are typically used in the following sequence:

- **Session 1:** Kickoff and Participant 1-on-1s
 - **Work Products:** Alignment Notes

The first session objectives are to familiarize participants with the DAPIM™ model and methods and to begin the work of defining by exploring what sponsor expectations and strategic priorities are in place to which the team might align its local improvement priorities. One-on-one time with the facilitator begins the process of trust-building and creating a sense of safety for the participants, as well as providing the facilitator with insights about what each participant might require from them.

- **Session 2:** Exploring Initial Feelings, Establishing Ground Rules, Completing the Defining Step of the DAPIM™ process and Exploring Staff Communication and Involvement
 - **Work Products:** Initial Feelings, Ground Rules, and Defined Areas for Improvement

The second session objectives are to ensure that the project feels safe for the participants, establish effective patterns of relating amongst the participants, begin to establish similar patterns between the team and their staff, and complete the defining step of DAPIM™. In defining, some teams prefer more guidance from the facilitator than others. For the former group, the facilitator might present a model for improvement and/or a range of effectiveness markers, which serve as a menu from which the team can select their priority improvement areas. Other teams are comfortable establishing improvement priorities from their own materials or ideas.

- **Session 3:** Assessing Strengths and Gaps, and Establishing Quick Wins
 - **Work Products:** Findings- Strengths and Gaps, Quick Wins

The third session objectives are first to recognize and celebrate what the team already does effectively, and then to determine what needs to improve. Strengths may cover a broad range of areas, but gaps should be focused on the areas the team has defined as top priorities. In developing a written findings work product, facilitator should be careful to use the language of the group versus reframing findings into the facilitator's language. The facilitator may group and flow findings for ease of understanding and use, but should not assign explicit or implicit priorities to the findings by emphasizing a subset of them or including them in an executive summary. Prioritization is work the group will do during session four. It is at this point that the team benefits from determining what improvements it can make immediately, with existing resources and expecting an immediate impact on its gaps. These activities or commitments are called quick wins, and they also serve to help the team understand the principles

of continuous improvement more intuitively while working concurrently through the DAPIM™ flywheel.

- **Session 4:** Monitoring Feelings, Ground Rules, Staff Communication/Involvement and Quick Wins, and Determining Root Causes and General Remedies
 - **Work Products:** Refinements to previous work products

The fourth session objectives are to monitor the efforts to date and to begin building a bridge between identified gaps and either mid-term or longer-term continuous improvement plans that are most likely to close them. In prioritizing gaps and conducting root cause analysis, some teams prefer more guidance than others, and for these teams a model or tool for doing this work may be helpful. Other teams identify root causes inductively, by asking themselves “why?” until a fundamental root cause and remedy emerges. It is important to model continuous improvement throughout the project sessions by monitoring whether or not commitments are being honored, activities are being accomplished as planned, intended impacts are resulting, and lessons learned along the way are being translated into ongoing adjustments.

- **Session 5:** Completing Root Causes and General Remedies, and Beginning Mid-term Improvement Planning
 - **Work Products:** Root Causes and General Remedies

The fifth session objectives are to ensure that the team has slowed down and disciplined its thinking and planning sufficiently to cross the bridge and shift its gears from quick wins to remedies that may require significant analysis and/or implementation work. This is also the point in the project where safety becomes balanced with emerging accountabilities for each member of the team. Mid-term improvements typically take 30-90 days to implement and often require staff not on the continuous improvement team to contribute to implementation.

If general remedies are not in the team’s control they may opt to analyze a gap area and make recommendations to others for closing it. Remedies within the team’s control may or may not require design and development work before implementation. Those that do will most often lead to team activities the OE facilitator may assist with in future sessions, and those that do not will likely lead directly to longer-term plans and commitments.

- **Session 6:** Completing Mid-Term Improvement Planning, Beginning Implementation and Monitoring and Beginning Team Activities
 - **Work Products:** Mid-term Improvement Plans

The sixth session objectives are to apply effective implementation tools and methods to general remedies and to begin doing the same for monitoring efforts. Implementation methods include working team charters, capacity and action plans, and communication and meeting management tools. Team activities guided by the OE facilitator follow tip sheets and fact sheets (many of which are located in chapter four) that reinforce further the same continuous improvement principles.

- **Session 7-8: Completing Team Activities and Establishing Continuous Improvement Plans**
 - **Work Products:** Team Activities, Charters, Longer-Term Improvement Plans and Communication Plans

Depending on how many team activities and chartered work teams a continuous improvement project yields, and depending on the readiness of the continuous improvement team to fully determine its longer-term continuous improvement plans, this stage of the project requires one or two sessions to complete. Facilitated team activities are considered remedies the continuous improvement team identified. Facilitated team activities result in work products the continuous improvement team develops and can use going forward. Examples include new guidelines, policies and procedures, templates and/or models. Chartering work teams for rapid and longer-term improvement planning includes establishing formal and ongoing communication and monitoring methods, anticipating obstacles and how to overcome them, and establishing activities and plans that ensure sustainability of continuous improvement efforts as a way of doing business.

While the specific content and flow of continuous improvement work varies based on each team's rate of progress and the dynamic nature of the process, the basic seven-day design and the sample agendas located in the appendix of this chapter generally apply and can help an OE facilitator's overall planning and organizing efforts. Examples of most of the work products referenced in the description of these sessions, as well as templates for chartering work teams and improvement planning, are also in the chapter three appendix.

The DAPIM™ Process: Preparation and Planning for Sessions

When preparing for continuous improvement sessions, there are many tasks for the OE facilitator to consider before, during and after the session. Proper preparation will ensure positive performance. A Preparation Checklist for Facilitators is located in the appendix of this chapter. The checklist outlines the task a facilitator must complete in the weeks prior to the continuous improvement session and the day of the session.

In addition, when preparing agendas for continuous improvement sessions, an OE facilitator should consider the learning styles of participants. Learning styles are various approaches or ways of learning. They refer to an individual's preferred manner of processing material, or characteristic style of acquiring and using information when learning. These styles, preferences, and tendencies should be considered by OE facilitators when planning continuous improvement sessions.

Considering learning styles means adding variety to the various facilitation techniques an OE facilitator may decide to use during the session, such as:

- Balancing the amount of factual information, models, and theory presented with hands-on application of the material;
- Allowing time for both individual reflective thinking and large group brainstorm activities when generating ideas and thoughts;
- Answering the “what”, “why”, and “how” for the situation or problem to be resolved; and,
- Planning for change using quick wins, mid-term, and longer-term term change outlined in small steps.

The important thing is to not label team members based on preferred methods of learning but to recognize how learning preferences and tendencies can impact the way a team works together. A facilitator should consider all learning styles when preparing for continuous improvement sessions to create a supportive learning environment for all team members.

One way this can be accomplished is by developing a facilitator agenda that outlines the time, content/method for delivery, and materials to be used in the session. The outline helps facilitators test and refine the details of an agenda with the sponsors of the effort, and to prepare in detail for the session itself. Facilitators can also use materials from the OE Handbook to create reflective thinking questions relevant to the topic being addressed in the OE effort. A sample of a facilitator agenda and a blank template are provided in the appendix of this chapter.

The DAPIM™ Process: Documenting the Continuous Improvement Process

OE facilitators should consider “telling the story” of continuous improvement efforts using a case study format. A case study collects and presents detailed information about the continuous improvement effort. It records the accounts and perspectives of the participants themselves and the facilitator throughout the effort. This case study format looks at individual and/or team perspectives, drawing conclusions only about the specific team engaged in continuous improvement work and only in the specific context of the identified continuous improvement efforts.

The objectives of a case study are to help those engaged in continuous improvement efforts document the DAPIM™ approach, specifically the decision-making processes engaged in when developing plans for improvement that begin with a sound diagnosis of strengths and needs, drive immediate action, detail communication actions at every step, take advantage of quick wins, identify non-negotiable items, and leverage working teams and taskforces within the organization to assist in the success and sustainability of the improvement effort.

Most case studies include similar elements and allow for reflections of participants and facilitators to be considered in each element. The following are the most common elements of a case study:

- Introduction and Purpose of the Continuous Improvement Effort;
- Structure of the Continuous Improvement Effort;
- Value of the DAPIM™ approach and Learning by Doing;
- Uncovering of Strengths;
- Gaps to Improvements;
- The Managing of Improvements in the Present and in the Future;
- The DAPIM™ approach as a Way of Doing Business: A Vocabulary of Continuous Improvement
- Plan of Action; and,
- Conclusions:
 - Lessons learned,
 - Observations around APHSA hypotheses.

Prior to starting the continuous improvement effort, agreement to complete the case study must be obtained from the sponsors of the continuous improvement effort in the organization. Once agreement is obtained, the OE facilitator and the sponsors determine the following:

- Who in the organization is in the best position to answer each of the questions on the template? Is it an individual or a group of persons?
- Should the questions be answered using a one-on-one interview process, focus groups, in writing, or a combination of methods?

- What do the people providing information for the case study need to know about the continuous improvement effort in advance? Who will provide that information?
- Which question sets make most sense to collect information on prior to starting the continuous improvement effort?
- Which question sets make most sense to collect information on during the learning by doing phase of the continuous improvement effort?
- Which question sets make most sense to collect information on while implementing the continuous improvement plan? At 30 days? 60 days? Six months? One year?

Following the data collection, the OE facilitator writes the case study to tell the story of the organization's continuous improvement experience. The writing process includes a review of the draft case study by the sponsors to ensure accuracy.

Once finalized, the case study can be used to inform future OE work. In addition, the sponsor team may choose to share the case study with internal and external stakeholders.

A copy of the Organizational Effectiveness Case Study Template is in the appendix of this Chapter of the OE handbook.

Sponsor Group and Continuous Improvement Team Linkage

Throughout the course of a project using the DAPIM™ approach it is important for facilitators to monitor the linkage between sponsors and the continuous improvement and work teams and use various tactics to help ensure that linkage remains strong and ideally grow stronger over time.

These tactics should include at least the following:

- Hold initial meetings with sponsors to compare initial readiness reads about the continuous improvement team, fully understand their expectations and charter elements, establish agreements for ongoing communications and debriefing of the team's progress, and establish good boundaries if initial sponsor expectations are unrealistic or inappropriate;
- Advocate strongly that the sponsor group charter require continuous improvement teams to share at least the following work products by the end of the project: Quick Wins, Remedies, Monitoring Notes, and Staff Communications. Also advocate the charter spell out when and how the continuous improvement team will communicate with the sponsor group; and,
- Ensure that DAPIM™ session ground rules include a disclaimer of confidentiality if law or agency policy is being violated.

Common Facilitator Challenges

Influence of Observers

Observers of DAPIM™ sessions pose both an opportunity and a risk to the overall process. The role of the facilitator is to maximize opportunities and limit risk. Observers are often part of the sponsor group and can therefore provide useful perspectives and ideas, help generate buy-in for the working team's quick wins and plans, and strengthen accountability for follow-through as the continuous improvement effort unfolds. Yet observers can inhibit a team if they are too outspoken, and if they are in the team's chain of command, observers can sometimes reduce the team's sense of safety.

Facilitators should emphasize early and often that the continuous improvement effort will be directed by the continuous improvement team itself, including determining the ground rules for observers, establishing the areas for continuous improvement, identifying root causes and remedies, etc. If the team initially sets tight ground rules for observers, it is likely that baseline trust and sense of safety is relatively low, and the challenge for facilitators is to help the team relate constructively with observers, opening up to communication with them over the course of the sessions. If the team initially sets loose ground rules for observers, the team's sense of its own authority over its work and plans may be weak. The challenge for facilitators is to push back on overly involved, dominant, or highly animated observers while the team is finding its solid footing in the process.

As the DAPIM™ process progresses into quick wins, commitments and plans, observers who are in the team's chain of command face the challenge of assuming oversight for the team's follow through without seeming to use their privileged access to the DAPIM™ process against them. Facilitators should emphasize from the outset that the process will lead to this heightened performance accountability, and openly discuss and plan the observer's role in performance monitoring with the team present and involved in the discussion.

Individual Participant Safety

Even when overall safety and trust is developing well between a facilitator and a continuous improvement team, there may be times within a continuous improvement project when a particular individual within the team is called out for something they may need to improve, reducing the sense of safety that person may feel at that time. Facilitators should monitor these situations and choose from a number of facilitation tactics according to the following criteria:

- Is a particular participant showing signs of feeling too unsafe to respond constructively (such as crying, shaking, or getting deeply red-faced)?
- Are the crucial conversation tactics being used with a participant relatively constructive and well-meaning (e.g., empathetic versus rude)?

- If these tactics seem to be escalating, is it because milder forms of communication have not worked with this participant?
- Is the safety and accountability for this participant balancing itself over time? Have they been too safe, over-demonstrating empathy or comfort?
- Are there signs that the team is moving constructively forward from these situations, versus bogging down or regressing (signs of low safety)?

Specific facilitation tactics for redirecting a discussion that may be making one participant feel too unsafe include the following:

- Revisiting the ground rules to ensure they are being followed or reflecting on initial feelings to note if and how they are changing;
- Stating your observations and concerns directly and in behavioral terms, asking participants to discuss the exchanges they are having and reflecting on their related perceptions and feelings;
- Reminding participants of their shared sense of purpose and shared responsibility for the improvements being discussed;
- Mediate or moderate a discussion between two or more participants, checking in with each person being spoken to immediately afterward;
- Engaging a threatening participant, modeling crucial conversation skills;
- Turning the topic at hand into a mini-DAPIM™ exercise for the entire team;
- Focusing the group on a topic related closely to the one being addressed;
- Taking a break and shifting into 1-on-1 coaching mode, either for a brief period of time during a given session or postponing DAPIM™ sessions all together; and,
- Spelling out transparently that you are making these tactical choices and why you are doing so.

Relationship and Task Balance

Continuous improvement teams often demonstrate an initial imbalance between building effective relationships and accomplishing tasks. While DAPIM™ methods and project design provide many opportunities for creating a balance here, some teams still struggle in this area. Facilitators can use any number of tactics to help their teams achieve a general balance between or even an integration of these two general performance factors, including the following:

- Employing staff surveys that address both factors and connect survey improvements for both relationships and tasks to performance results;
- Guiding topic selection towards a combination of the factors;
- Using the trust topic to initiate discussions about both factors;
- Helping teams make connections between the factors through wall visuals, videos, readings and models;
- Having teams speak with alumni of the DAPIM™ process who have achieved this balance;

- Using mini-DAPIM™ discussions to address how members of the team want to relate or follow through, establishing a collective vision;
- Reframing a high task-orientation as unconscious demotion;
- Turning “I want” viewpoints into discussions about how others feel and what they want, towards a “we want” viewpoint;
- Asking a team that claims to have no relationship gaps: “Are you sure?”
- Pointing it out to task-oriented teams when performance breakthroughs are attributable to sharing feelings and seeing each other as whole people;
- Breaking large or impersonal groups into smaller and more personal ones;
- Using crucial conversations to challenge gaps in following through on tasks;
- Having participants be more active in the room by putting them to work, thereby improving their task orientation (e.g., adding their input to a diagram on the wall);
- Encouraging participants to establish a collective vision for why things need to get done;
- Increasing meeting frequency or intensity of monitoring on task items; and,
- Letting teams discuss feelings of failure, helping them reframe as temporary passages they go through towards making improvements.

Jumping to Solutions

Some continuous improvement teams are anxious to solve their problems as soon as possible because they feel pressed for time, anxious about the problems themselves, or culturally conditioned to be highly action-oriented. The DAPIM™ approach is designed to help teams become more systematic and reflective about what problems they truly have and why they have the problems they do before determining any fixes. Teams who jump to solutions, much like jumping to conclusions, are often disappointed when they monitor the impact of their chosen fixes later on. This facilitator challenge is most likely to arise when teams have established their gaps and want to rush through root causes and general remedies, or when they have determined their quick wins and lose energy and interest for further planning. Allowing teams some latitude might be necessary in an adult learning process, but facilitators should use the following reflective questions to determine how hard to lean against the team’s natural tendencies:

- Does the team have a proven track record of solving complex problems?
- Does the team have a general history of acting before reflecting? (lean harder)
- Does the team monitor its plans and commitments effectively and with good energy?
- Is the team overly task-oriented, or do they demonstrate tendencies towards either a micromanagement or laissez-faire culture? (lean harder)
- Is the team opening up with each other about the full range of its improvement priorities and gaps?
- Did the team want to rush through initial feelings and ground rules? (lean harder)

Moving In and Out of Tangents

The DAPIM™ approach is designed to be highly dynamic and adaptive to the needs of the continuous improvement team. Tangents that a team might choose to pursue demonstrate where the team's energies and priorities are, which are very useful for a facilitator's assessment of team readiness. Allowing teams significant latitude in this way may also help to build trust and model empowerment. Furthermore, seemingly tangential discussions often lead to insights and considerations that are not tangential to the continuous improvement effort at all. In general, tangents are desirable within the continuous improvement effort as long as the facilitator uses the following reflective questions to make that determination:

- Is the team working through an issue or subject progressively or is it spinning its wheels, reiterating the same ideas in a loop or into a dead end?
- Is there a connection that the facilitator can make between the subject at hand and the DAPIM™ flywheel or continuous improvement topics?
- Is the team demonstrating a passion or energy for a subject that is worth honoring in and of itself? Are typically reserved participants being energized by the subject?
- Is the team diverting its focus and energies consciously or unconsciously away from the agenda topic or objective at hand, using the tangent as a defensiveness or resistance tactic?
- By the same token, does the facilitator consciously or unconsciously prefer to stay with the tangent him or herself?
- Is the subject at hand generally conceptual, abstract, or theoretical and does the team demonstrate difficulty moving from that approach to getting things done?
- Is the team habitually long-winded and do its members often struggle to articulate their points clearly and concretely?

Participant Resistance

Continuous improvement teams may view resistance as something to be either ignored or attacked when it reveals itself. To complicate matters further, resistance may be playing out within the continuous improvement team itself, or between itself and its sponsor group, through behaviors like passive resistance, questioning or objecting to process and methods, pulling rank, or dominating conversations.

When these themes arise, facilitators should call out their observations about resistance, probe for the team's own perspectives and experiences, and then help the team understand the root causes of resistance and the ways it can be managed. Facilitators may even elect to make the topic of resistance explicit in setting ground rules, conducting after action reviews, or at other points in their agendas.

Facilitators should help the teams with whom they are working understand that resistance comes in two general forms. Constructive resistance serves to support a continuous improvement effort by identifying its blind spots and limitations. Such resistance is very valuable to a continuous improvement team, and the facilitator should guide it to adopt the input from constructive resistance and thereby strengthen their work and plans.

Non-constructive resistance is based on agendas that are inconsistent with the agency mission and values, such as turfism and highly personal wants and needs. Facilitators should guide continuous improvement teams to have difficult conversations with the source of such resistance and confirm that it is indeed non-constructive. If a continuous improvement team assesses non-constructive resistance to be significant, facilitators should then guide the team through a mini-DAPIM™ to determine how to use their authority and alliances to neutralize or overcome this resistance.

Bringing In New Participants

For projects that require 4-6 months to accomplish, it is typical that members of a particular team change, both along the way and afterward. Sponsor group and continuous improvement team leads should introduce new participants to the continuous improvement effort in a formal and thoughtful manner. When these changes occur during a continuous improvement project, facilitators should choose from a number of related tactics with the following considerations in mind:

- What relationship, trust, and sense of safety (if any) already exist between the continuous improvement team and the new member?
- What level of readiness is the continuous improvement team demonstrating at this point? Are they likely to bring a new participant on board naturally and on their own, or will they need my help?
- How early in the overall project are we? Can the team easily back track and modify its work to date to include the input of its new member?

Specific facilitator tactics for helping teams bring in new participants include the following:

- Making the topic of bringing aboard a new participant a mini-DAPIM™;
- Revisiting each of the work products to date with the new participant, inviting them to ask questions, respond and provide input;
- Using a team-building and/or trust-related exercise to welcome and integrate a new participant;
- Adjusting the timing or content of sessions proactively based on expected changes shared by the continuous improvement team;
- Holding a 1-on-1 session with the new participant to bring them aboard; and,

- Including “Bringing Aboard New Members” as part of a continuous improvement team’s longer-term planning activities.

Tactics for bringing aboard new members of teams using the DAPIM™ approach on an ongoing basis include building continuous improvement and learning by doing principles and updates on current efforts into new hire orientation, new supervisor training, and staff mentoring programs.

Markers of Effective Facilitation

To use a metaphor, traditional classroom training is a lot like a classical music performance by a concert soloist (the trainer), attended by a courteous audience (the participants). The music (training curriculum) is written down and practiced thoroughly in advance of the performance. There are opportunities for the audience to get involved, but these are either limited to applause or booing (feedback and questions) or master classes (highly structured exercises).

Unlike traditional training, OE facilitation is more like forming a jazz ensemble. The ensemble leader (facilitator) assembles a group of musicians who know their instruments but do not memorize any music (real-world teams working on the real problems they face). The ensemble agrees on a few things before playing, the rhythm and key, for example (the DAPIM™ model and basic agenda objectives). Playing itself is generally fluid and dynamic and only as good as the ensemble’s growing sense of one another and their instruments (improving readiness, safety and accountability, and facility with new models and tools). Over time, the ensemble works to get better and better through jam sessions (learning by doing).

Markers of effective facilitation are, therefore, quite different from those of effective training, much like classically trained musicians often cannot play jazz and vice versa. Here are eight of these markers (a more complete set is included in the appendix of this chapter):

Avoid being prescriptive or overly directive. While classroom trainers are typically viewed as the resident expert for the material being taught, an OE facilitator should not be viewed that way. The facilitator is instead delivering a program that empowers and provides a structure for a team to draw upon and supplement its own expertise in the most seamless way possible, in turn establishing the team’s buy-in and commitment to its own improvement. This principle informs a number of facilitation techniques, including, for example, how the facilitator flip charts a team’s input. Facilitators should adhere to the team’s own words and thoughts versus trying to help or rush them to higher-level work, unless offered, accepted, and expressed by the team itself. Facilitators should then process the team’s own words back to them, checking for accuracy, completeness and buy-in.

Listen actively and constructively. Given that OE facilitations are not prescriptive or highly directive, the challenge for a facilitator is to guide a team through a generally open process of individual and

collective discovery. This process requires the facilitator to concentrate on everything someone is saying, both in content and emotion, note how others in the group are responding, both verbally and non-verbally, make immediate linkages to the individual's and the team's objectives, and then formulate empathic, clear responses and follow-ups that lead to positive, focused energy and evolving data and perspectives within the team.

Introduce new ways of thinking and acting through an inductive process. Most trainers use a deductive process for working with session participants, putting theories and ideas at the center of the agenda, with participant experiences being applied to them only as a secondary activity (or not at all). OE facilitators put participant experiences central to all session agendas and activities, only introducing models, tools, and templates that will help the team solve the problems that they are facing right now. This requires OE facilitators to hold a wide range of models and tools in reserve, constantly scanning for which ones would be useful to a given continuous improvement team. In this way, teams immediately apply new ways of thinking and acting because they themselves have identified their relevance and purpose first.

Adjust session agendas in real time based on a team's readiness, energy and sense of priorities. Disruptions to preplanned agendas are often seen by classroom trainers as a problem. In OE facilitation, the team's energy, sense of safety, degree of useful interaction and insights about what will advance them or hold them up are all good reasons for the facilitator to change an agenda. When participants push collectively for a change in course, they are making continuous improvement something they themselves own. As long as the facilitator connects the change in course back to the objectives and work products, this change should be seen as a positive sign of participants' readiness and ownership.

Identify and test constructively apparent issues with the team's level of trust. A primary function of OE facilitation is to leave a team's internal dynamics and patterns of relating to one another in better shape than prior to the facilitation. Trust is about treating each other respectfully, with no hidden agendas, making oneself vulnerable through appropriate self-disclosure, sharing of authority, and following-through reliably on stated commitments. The facilitator should both model each of these characteristics of trust and call them out when they are being either demonstrated or violated by others.

Be sure you and participants alike are feeling OK about everyone else in the room. Open hostility or silent fuming are major detractors from the continuous improvement effort, whether on the part of participants or the facilitator, who may at times be openly challenged and debated by participants. If the team feels it needs to tend to the feelings of their facilitator, it will not be as candid and the process will suffer. Feeling OK does not mean being entirely comfortable as the program may at times make participants feel uncomfortable. It means having the ability to be honest and constructive despite feeling this way.

Gauge the team's general temperament and biases and lean the other way. Unlike being prescriptive, effective OE facilitators take note of their clients' blind spots and normal perceptions and then model or raise questions and ideas, even at times asking tough questions that may help the team find a more balanced perspective. For example, highly task-oriented teams may be blind to the importance of relationship-building in organizational improvement work. This leaning will be appreciated by a team that is uncovering its own gaps and viewing the facilitator as a resource to help them test their preconceived notions.

Be prepared to handle emotional moments with clinical comments, empathic mirroring, and breaks when needed. While OE facilitators do not need to be clinical therapists, some of the patterns seen in therapy show up in an improvement process. Instead of shying away from such moments, facilitators need to recognize the potential breakthroughs that may occur as a result of related catharsis. Depending on the intensity of emotions, facilitators may a) refer to a general model for understanding the substance of an emotional exchange, b) deeply and empathically engage without adding much of your own perspective while a participant sorts through an emotional subject, or c) call a break in the action and possibly sidebar with one or more participants. The third option (c) is generally only for the most extreme cases of release of emotion.

Being a Good Doctor

Facilitators of the learning by doing approach must maintain a balance between guiding the process and controlling the process. In traditional classroom settings, a trainer follows a pre-scripted curriculum with specific objectives to be covered during the course of the session. The trainer may allow time for questions, but for the most part this time is limited to questions very specific to the content being delivered. In addition, the trainer may incorporate case study activities, referring to this as skills training. Case studies are, however, predetermined and often not as specific and nuanced as participants' real life situations. In essence, a trainer controls both the content to be delivered and the application of the content to examples and/or role plays/skills practice.

In a learning by doing approach, the facilitator uses the DAPIM™ approach to guide participants through a process that identifies current gaps in their organization and then plans, implements and monitors improvement efforts that will support continuous improvement. This approach allows participants to define the content of a session by working on issues and concern that are real for them. The facilitator needs to be prepared to present models and tools that assist participants in developing improvement plans to address the root causes. This is where traditional content-focused training materials tend to connect into the DAPIM™ approach, but only when the team itself demonstrates the need.

Each OE session is unique to the participant group. With this in mind, a facilitator needs to become familiar with the team activities, fact sheets, and resources in chapter four of this handbook and

continue to add to this tool kit. Just like a good doctor treats each patient individually, prescribing treatment after a complete assessment of the individual customized to make the individual healthy, the OE facilitator offers models and tools to support improvement and build effective organizations. An OE facilitator should be aware that early on in the learning by doing approach, participants are dependent on the facilitator as their guide. Participants need the facilitator to create a safe and trusting environment that allows for candor and other forms of risk taking. Participants need specific direction by the facilitator as they learn to apply the step-by-step approach to systematically changing their organization.

The facilitator needs to use effective assessment, listening, and observation skills to recognize when the DAPIM™ approach is becoming more intuitive for participants and begin to move from a more directive role to a more supportive and coaching role. The facilitator also needs to adapt agendas and tone of sessions in accord with the issues being surfaced in real time by the participants, sometimes taking a detour in order to move the group in its own way towards the objectives. This approach is very different from a training curriculum approach, where such detours are regarded as failures by the trainer to keep participants properly engaged in course content. The coaching and supporting role should lead to participants taking ownership of the work, truly making it theirs as they adopt continuous improvement using the DAPIM™ approach as a way of doing business.

If we go back to the DAPIM™ flywheel and the analogy of riding a bicycle, when we first learn to ride a bicycle a trusted person teaches us the step-by-step process of how to get on the bicycle, balance it, and ride it (quick wins). Then the trusted person holds onto the bicycle as the rider tries for the first time to peddle. Holding the bicycle allows for risk taking by removing the danger of falling and getting hurt or feeling embarrassed. With each attempt at riding the bicycle (monitoring quick wins and working through the entire DAPIM™ process) the trusted person holds onto the bicycle a little less and provides verbal coaching until the rider eventually looks back and realizes no one is holding them up anymore and they are moving forward on their own. At this point, the rider can actually begin to observe and enjoy the scenery and think about the destination to which they would like to ride their bike (longer-term planning). Once the organization is moving forward on its own, the facilitator can let go, knowing the organization has the processes, models, and tools needed to continuously improve itself.

Organizations that get to this place of turning the flywheel without outside facilitation support experience a pattern of change that over time resembles an upward spiral, moving from more reform-oriented change and improvement to more innovative and progressive change, at times interrupted or delayed by temporary setbacks, disruptions and plateaus:

1. Incremental progress forward, meeting basic expectations such as mandates, non-negotiable expectations and limited budgetary requirements;
2. Initial feedback from the environment, connected to direct experiences with agency services;

3. Rallying of support, commitment and participation from staff and stakeholders through related communication and relationship-building efforts;
4. Renewed or improved resources and decisions to provide a greater level of empowerment to the agency based on its growing credibility;
5. Further incremental progress, often through redesigning or revamping programs and processes to either streamline them or eliminate low value-added activities;
6. Further confidence within the environment that the agency uses resources wisely and in innovative ways, and a growing desire to listen to the agency's ideas and recommendations;
7. Further incremental steps forward, often through integrating programs and processes to be more client-centric, meeting more strategic environmental needs that move closer and closer to realizing desired outcomes for clients served;
8. Broader environmental influence, e.g., being regarded as a vital political "player" even in regard to somewhat non-related environmental priorities; and,
9. Further incremental steps forward, at times even serving field-wide needs and objectives by creatively resolving general tensions within the field that typically result in false choices.

A critical breakthrough that organizations experience is evolution from either a program- or staff-focused culture to a client-focused one. In a program-focused culture, the primary interests of the agency strategy and leadership are program compliance and the level of output by the agency in comparison to program-specific output goals (e.g., accuracy and timeliness of program delivery). In a staff-focused culture, the primary interests are staff satisfaction with leadership and with the benefits of working for the agency (e.g., a lucrative pension program, or strong union and HR protection of marginal performers). In a client-focused culture, programs and staff interests are shaped in the service of the most effective practice model for improving the lives of children, youth and families (e.g., changing program policies and job requirements to support the innovation of a client practice).

Use of Reflective and Critical Thinking Questions

The "Markers of Effective Facilitation" found in this chapter of the OE Handbook discuss how facilitators must "avoid being overly prescriptive or overly directive" and be able to "introduce new ways of thinking and acting through an inductive process". To achieve these goals good OE facilitators are very thoughtful in the questions they ask CI teams as part of the OE process, seeking to use and activate the knowledge and expertise of the group to advance them through continuous improvement activities.

In chapter 1, reflective thinking questions are discussed in detail and are presented as a "basic set of probing questions to conduct a high level assessment..." The questions are typically directed at participants for the purpose of having them think in their own terms about the topic in a reflective manner that leads to discovery and greater understanding of the larger picture.

Reflective Thinking as used in the OE handbook can help CI team members begin to develop a view of what they know and what they still need to learn while defining, assessing, planning, implementing and monitoring as well as understanding strengths and priority areas for improvement. Reflective thinking questions from an OE facilitator tend to be “neutral” and non-leading, allow for participants to feel safe as they process in their own mind answers to questions.

For these reasons, reflective thinking questions are very useful, specifically at the outset of working with a CI team and for helping teams that are not used to communicating or working together to begin to share their thoughts and feelings with other team members. Facilitators use reflective thinking questions as a means of opening up discussion, raising issues, and building awareness among individuals or CI team members.

In contrast, critical thinking questions are more purposeful for facilitating an individual or a CI team towards planning and decision making. In this context, critical thinking questions are meant to help apply and evaluate information gathered to allow for planning and decision making to be based off of that knowledge and subsequent understanding versus haphazard or in reaction to crisis. Critical thinking questions should help members of a CI team:

- Activate their knowledge on a topic area
- Consider how others are feeling about the topic area, not just allow for decisions based on one perspective
- Include the participants observations and analysis of situations
- Solicit evaluation of a situation based on the combination of the above (the participants perspective along with their understanding of other’s perspectives)
- Lead to decisions and next steps.

It is hoped that over time, CI team participants will develop the habits of good critical thinking and consideration of critical thinking questions that both generate and evaluate information prior to decision making and complex problem solving.

As a quick example, below are two series of questions that can be used in combination:

Reflective questions:

- Do you have a practice model that guides your direct service workers in the field?
- Is it effective?
- Are you satisfied with that result?

Critical thinking questions:

- Describe how the practice model impacts workers in the field?
- How do the workers feel about the practice model?
- What have you observed that tells you how impactful it is?
- What needs to happen to make the model more impactful for achieving desired outcomes?
What are your next steps to make that happen?

Using a combination of reflective and critical thinking questions, OE facilitators can help CI teams:

- Identify problem areas and begin to consider the larger picture of the strengths and gaps within their organization, where they would like to see the organization move towards, and what their current situation looks like
- Gather and assess relevant information, interpreting it effectively and coming to clear findings, identification of root causes for those findings, and related remedies
- Test remedies and develop measures of success
- Monitor progress toward goals, continually responding to the impact of work occurring.
- Communicate effectively with each other, working through complex issues

Organizational Effectiveness Handbook

Chapter Three Appendix (Templates and Guides)

1. Readiness Reflection Quick Tool
2. Full Readiness Model
3. Work Plan Template
4. Facilitator Agenda Sample
5. HO1 – Agenda
6. Safety and Accountability Performance Matrix
7. Preparation Checklist for Facilitators
8. Facilitator Agenda Sample
9. Facilitator Agenda Template
10. Case Study Template and Question Sets
11. Markers of Effectiveness: Success Factors for Internal Facilitators
12. Fact Sheet: Sustainability Factors for CI Work
13. Agenda Samples
14. Work Products Samples
15. DAPIM™ Process Work Products Flywheel
16. DAPIM™ Process Work Products: Example: Charting a CI Team's Work Visually
17. DAPIM™ Process Work Products Guide
18. DAPIM™ Chart for the OE Seminar: Revised from Participant Input

Readiness Reflection Quick Tool

Leader,

This tool was designed to offer you the opportunity to reflect on your organization prior to beginning continuous improvement work. Although no one will ask to see your score sheet or know the intimate details of your discussions, it is our hope and expectation that you will be able to share key points, decisions, and knowledge gained during discussions with your fellow continuous improvement effort participants. Work teams that get the most out of this exercise will be those that engage in honest self evaluation and work to identify both organizational strengths and current barriers to success.

Directions: Review as a team the specified descriptions of the readiness components listed within each of the four major areas of readiness: organizational readiness, leadership readiness, staff readiness, and general capacity readiness. As you review each component, note your team's rating and key discussion points. After your review of the individual components of readiness is complete, determine for each of the four areas the statement that best describes your agency as either:

- stuck or moving backwards;
- slow progress or intermittent movement; or,
- positive momentum moving consistently.

After the exercise is complete, ask your team the following questions:

1. Are you willing and able to commit the staff time and other resources needed to complete your continuous improvement work? Are you willing to make the kinds of changes in roles, policies, procedures, management tools and techniques, and resource allocation that continuous improvement work generally involves?
2. As you enter into your continuous improvement work, what readiness areas do you see as most supportive of a successful experience? Why is that? What examples from your organization's experience support this view?
3. Which of the four major areas of readiness (organizational, leadership, staff, or general capacity) do you see as most in need of addressing before starting a continuous improvement effort? Why does this readiness gap exist? What examples from your organization's experience support this view?
4. Based on why (your "root causes") you believe you have your current readiness levels, what are some ways to address the readiness issues that you have?
5. Are there any of the specific areas listed on the tool that you will want to address as a team at the institute prior to beginning continuous improvement work?

This readiness “quick tool” is accompanied by another, more detailed version that further defines the listed readiness areas. Please refer to this more detailed version if team discussion indicates a need for further explanation.

	A Relative Gap	Moving from Gap to Strength	A Relative Strength
Organizational Readiness			
Performance history	Implementation of new programs historically has not been well planned, and has not had intended impact.	Some new programs are well planned; some are not. Results are mixed in terms of achieving intended outcomes.	Implementation of new programs is consistently well planned and usually achieves intended outcomes.
Momentum for system improvement	More pressure to keep the “status quo” than to improve.	Forward momentum followed by stops and starts.	Strong, sustained forward momentum, based on strategic principles and priorities.
Organizational climate	Chaos, moving from crisis to crisis and functioning solely to achieve compliance with regulatory requirements.	Both chaos and calm feeling in respective pockets and silos. Staff feels unsure of organizational climate day to day.	Calm, dynamic, consistent message of continuous improvement has permeated the organization over time.
Organizational posture related to CI	Denial of need for continuous improvement (“if it ain’t broke don’t fix it” mentality).	Continuous improvement efforts occur only after a legislative mandate, system audit, or in response to a public crisis.	Continuous improvement is viewed as healthy and invigorating.
Clarity of roles and responsibilities	Roles and responsibilities are unclear throughout the organization.	Roles and responsibilities are clear in pockets/silos within the organization.	Staff members at all levels of the organization perform within role boundaries.
Leadership Readiness			
Expectations of the organization from leadership	Failure to achieve desired outcomes is expected.	Some success is expected, mostly from particular pockets or silos of the organization.	Sustained success is expected; occasional failure/set-backs are viewed as learning experiences.

	A Relative Gap	Moving from Gap to Strength	A Relative Strength
Posture towards obstacles	Organizational leaders seem to ignore obstacles with an assumption that most issues will work themselves out.	General recognition that obstacles can and need to be overcome through planning.	Recognition across the organization that challenges can be good things that lead to better agency performance.
Posture towards feedback	Feedback from clients, staff, or stakeholders is not sought out.	Some consideration is given to feedback received.	Feedback is embraced as healthy and analyzed systematically for CI
Decision making	Decisions are not strategic and are not communicated effectively across programs or down through the organization.	Decisions in pockets or silos are strategic and are communicated fairly and effectively across programs or down throughout the organization.	Decisions are generally made strategically and are communicated fairly and effectively across programs and down throughout the organization.
Time for CI efforts	Organizational leaders do not have time available to participate in planning sessions.	Organizational leaders have limited time to commit to continuous improvement.	Leadership sees continuous improvement work as a key element of their work time.
Leadership stability	Organizational leadership is constantly changing.	Organizational leadership is tenured, but organizational knowledge is held by few leaving vulnerability to change.	Organizational leadership is stable. Knowledge is shared among many capable of leading.
Staff Readiness			
Expectations of the organization from staff	Staff is not concerned with overall agency outcomes, only individual accountabilities.	Staff expects some successful continuous improvement and positive outcomes from the organization.	Communication has increased buy-in and expectations for system improvements in a positive way.
Employee attitudes toward their work and clients	Operations level staff members consistently feel powerless to effectively perform their jobs.	Attitudes are mixed; some employees feel a sense of purpose while others feel skeptical.	Excitement, a sense of purpose, determination, and urgency to perform permeate the organization.

	A Relative Gap	Moving from Gap to Strength	A Relative Strength
Teamwork	There is no sense of “team” or team members are more concerned with personal responsibilities and tasks than team goals.	Teamwork occurs within programmatic silos or organizational pockets.	Teamwork occurs naturally in a high-functioning manner throughout the organization.
General Capacity to Improve and Innovate Readiness			
Strategy	There is no written strategy or there’s a written strategy with little to no impact on the organization.	There is a written strategy that is evident in silos/pockets and overall connection to organizational strategy is often not considered when planning new initiatives.	There is a clear written strategy that is embedded within the agency. The strategy supports decision making regarding how the organization is structured, how key processes are designed, and how frontline practice is conducted.
Data	Little to no data and/or the wrong data are used for strategic decision making	Data are used for strategic decision making in silos/pockets.	Data are used routinely for strategic decision making.
Communication	There is consistent avoidance of open and honest dialogue within the organization.	A growing number of leaders recognize the need for and have begun practicing open and honest dialogue.	Communication is open and honest both inside the organization and with external stakeholders
Strategic support functions (training, HR, policy, QA...)	Struggle to add value in basic service delivery	Provide basic services with occasional mistakes and are starting to design some processes that staff recognize as adding value.	Consistently provide basic services, design processes that are seen to add value, and act as strategic consultants to leadership.

	A Relative Gap	Moving from Gap to Strength	A Relative Strength
Resources	Organization will not commit any significant resources to continuous improvement effort	Organization seeks third party funding to support continuous improvement efforts but is unlikely to spend its own funds.	Organization is committed to continuous improvement effort and is willing and able to shift or develop resources for these efforts.
Notes/Priority Areas for Improvement:			

Full Readiness Model

	A Relative Gap	Moving from Gap to Strength	A Relative Strength
Organizational Readiness			
Performance history	<ul style="list-style-type: none"> • Implementation of new programs historically has not been well planned, and has not had intended impact. • Disciplined root cause analysis and after action reviews are rare or non-existent causing action plans to be ineffective. • Supervision issues are not considered when implementing new initiatives. • Staff development and capacity issues are not addressed when planning change. • Poor performers in regard to new initiatives are tolerated. • Improvement programs that have been launched but did not lead to lasting organizational improvements “died on the vine” and were therefore discontinued vs. monitored, revised and improved. 	<ul style="list-style-type: none"> • Some new programs are well planned; some are not. • Disciplined root cause analysis and after action reviews may be starting in pockets but are likely “blind spots” that keep initiatives from reaching potential impact. • Supervision recognized as key to success and a priority for continuous improvement but not always addressed in planning. • Staff development and capacity issues are considered but often not funded as part of new initiatives. • Poor performers are beginning to be managed out but system limitations make this difficult. • Staff can point to a few successful improvement programs as models for future, as well as failures that should be learning points. • A growing number of managers and leaders recognize the importance of planned out implementation efforts and want to be part of that work. 	<ul style="list-style-type: none"> • Implementation of new programs is consistently well planned. • Disciplined root cause analysis and after action reviews are routine and support continuous improvement of initiatives after initial implementation. • Supervision is coaching-oriented and an organizational strength that is leveraged during implementation. • Staff development and capacity issues are always considered when new initiatives are planned. • Initiative “champions” are identified and developed in an ongoing, systematic way supporting implementation. • Poor performers are routinely managed out. • Improvement programs generally lead to lasting organizational improvements that achieve desired impact.

<p>Momentum for system improvement</p>	<ul style="list-style-type: none"> • Generally non-constructive resistance to change across the organization. More pressure to keep the “status quo” than to improve. 	<ul style="list-style-type: none"> • Forward momentum followed by stops and starts. Change is motivated as a reaction to crisis not proactive efforts based on strategy, so momentum is lost as time passes. 	<ul style="list-style-type: none"> • Strong, sustained forward momentum, based on strategic principles and priorities, buy-in from staff, and solid planning/ implementation efforts.
<p>Organizational posture related to continuous improvement</p>	<ul style="list-style-type: none"> • Denial of need for Continuous improvement (“if it ain’t broke don’t fix it” mentality). • No confidence that meaningful change is possible. • New initiatives are met with skepticism across levels of the organization. • Staff members suffer from “change fatigue” and wait out new proposals or initiatives expecting them to fail or leadership to change. • Little or no confidence that staff is capable of leading continuous improvement efforts. 	<ul style="list-style-type: none"> • Continuous improvement efforts occur only after a legislative mandate, system audit, or in response to a public crisis requiring response. • Continuous improvement is driven in “fits and starts” by time-limited programs. • Some organizational leaders and mid-level employees are motivated to participate in the agency’s improvement plans while some are frustrated expecting a lack of progress or outcome to the effort. 	<ul style="list-style-type: none"> • Continuous improvement is viewed as healthy, continuous, and invigorating. • Continuous improvement efforts are done proactively, by leadership monitoring data from outputs and outcomes and listening to stakeholders. • Continuous improvement efforts are strategic, connected to an overall agency strategy and using resources in alignment with the strategy.

<p>Organizational climate</p>	<ul style="list-style-type: none"> • Chaos, moving from crisis to crisis and functioning solely to achieve compliance with regulatory requirements. Resistant to change. Behavioral norms are not plan-full or systematic and do not make sense to those outside the organization. 	<ul style="list-style-type: none"> • Feels like chaos in pockets or silos and calm in other areas of the organization. Staff members are unsure what the climate will feel like day to day. • Interested in being more strategic and proactive with little expertise, readiness, or sponsorship to advance strategic or continuous improvement efforts. 	<ul style="list-style-type: none"> • Calm, dynamic, consistent message of continuous improvement has permeated the organization over time. • Organization is seen by outsiders as always wanting to improve and serve the community.
<p>Clarity of roles and responsibilities</p>	<ul style="list-style-type: none"> • Roles and responsibilities are unclear throughout the organization causing confusion, duplication of efforts, and gaps in productivity. • Senior level staff members frequently perform operations level tasks as a form of “unconscious demotion”. 	<ul style="list-style-type: none"> • Roles and responsibilities are clear in pockets/silos within the organization and unclear in other areas. • Roles and responsibilities are clear for front line practice/operations level staff, but higher up within the organization there is a lot of ambiguity and role confusion. 	<ul style="list-style-type: none"> • Staff members at all levels of the organization are aware of their specified roles and responsibilities and perform within those boundaries.
<p>Leadership Readiness</p>			
<p>Expectations of the organization from leadership</p>	<ul style="list-style-type: none"> • Low: Failure is expected; failures/setbacks are viewed as confirmation that the situation is hopeless. <p style="text-align: center;">OR</p> <ul style="list-style-type: none"> • Unrealistically High: Constant success is expected; failures/setbacks are viewed as evidence of incompetence. 	<ul style="list-style-type: none"> • Moderate: some success is expected; failures/set-backs are expected but trigger fears of backsliding or losing momentum. Organization has a history of incomplete or poorly implemented initiatives that keep expectations moderate at best. 	<ul style="list-style-type: none"> • High: Sustained success is expected; occasional failure/set-backs are expected and viewed as learning experiences. • Communication has increased buy-in and expectations for system improvements in a positive way.

<p>Posture towards obstacles</p>	<ul style="list-style-type: none"> • Due to denial that they exist or a resignation and feeling that they cannot be overcome, organizational leaders seem to ignore obstacles with a laissez faire attitude and an assumption that most issues will work themselves out. 	<ul style="list-style-type: none"> • General recognition that obstacles can and need to be overcome but little strategic planning or action steps in place to address obstacles. • Attempts are made to address obstacles through staff training or policy changes that may not fully address the issue or that are not related to the root causes of the obstacle. • Tendency to put in place one-time programs to overcome them “once and for all” without sufficient funding or sustainability for change management. 	<ul style="list-style-type: none"> • General recognition that obstacles are challenges that can and need to be overcome. • Recognition across the organization that these challenges can be good things that stimulate creative thinking and highlight areas that require improvement leading to better agency performance. • Recognition that challenges are a fact of life and overcoming them demonstrates commitment and resilience.
<p>Time for continuous improvement efforts</p>	<ul style="list-style-type: none"> • Organizational leaders do not have time available to participate in planning session or do not see their participation as needed for the work to advance. 	<ul style="list-style-type: none"> • Organizational leaders have limited time to commit to continuous improvement efforts but attend when possible and are able to designate appropriate staff to stand in, speak for them, and manage communication with them. 	<ul style="list-style-type: none"> • Leadership sees continuous improvement work as a key element of their work time and plan to fully participate as needed and appropriate in meetings and discussions.

<p>Posture towards feedback</p>	<ul style="list-style-type: none"> • Feedback is not sought out and not acted upon as there are no formal mechanisms in place to share opinions constructively. • Organizational leadership views negative feedback as disloyal or destructive and seeks to sanctions those who criticize the organization. 	<ul style="list-style-type: none"> • Feedback is considered an annoyance that has to be tolerated but minimized. • Formal mechanisms to share both positive and dissenting views constructively are beginning to be put in place in pockets/silos. • Some consideration is given to feedback received. 	<ul style="list-style-type: none"> • Feedback is embraced as healthy and analyzed systematically for continuous improvement. • Constructive feedback is routinely sought out and acted upon. • Formal mechanisms to share both positive and dissenting views constructively are in place and used routinely.
<p>Decision making</p>	<ul style="list-style-type: none"> • Leaders do not routinely differentiate between different kinds of decisions and frequently fall into a comfort zone of autocratic decision making. • Decisions are not generally made strategically or communicated effectively across programs or down throughout the organization. • Decisions are not based on organizational values or connected to strategy and often appear to be in conflict with previous decisions. 	<ul style="list-style-type: none"> • Leaders in silos/pockets are beginning to use various kinds of decision making models including seeking group input and good consensus. • Decisions in silos or pockets are made and communicated strategically and effectively across programs or down throughout the organization. • Decision makers occasionally but not consistently consider organizational values or strategy when making or communicating decisions. 	<ul style="list-style-type: none"> • Leaders routinely differentiate between different kinds of decisions and understand when to seek expert consultation, group input or group consensus of staff and external stakeholders. • Decisions are generally made and communicated strategically and effectively across programs and down throughout the organization. • Decisions reflect organizational values and support strategic initiatives.

<p>Leadership stability</p>	<ul style="list-style-type: none"> • Organizational leadership is constantly changing with leaders frequently leaving before initiatives are fully implemented, resulting in strategic plans that are ineffective or simply not-completed. 	<ul style="list-style-type: none"> • Organizational leadership is stable, but organizational knowledge is held by few with no succession plan in place, leaving the organization vulnerable to change. 	<ul style="list-style-type: none"> • Organizational leadership is stable. Knowledge is shared among upper management assuring that current initiatives can be maintained even through leadership changes.
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Staff Readiness			
Expectations of the organization from staff	<ul style="list-style-type: none"> • Staff is not concerned with overall agency outcomes, only individual accountabilities. • Failure of new initiatives is expected by staff so they do not easily accept change; failures/setbacks are viewed as confirmation that the situation is hopeless. 	<ul style="list-style-type: none"> • Some success from continuous improvement initiatives is expected but staff members hesitate to commit to changes as failures/set-backs are also expected. • New initiatives trigger fears of backsliding or causing workers to look bad in the eyes of clients or the community. • Organization has a history of incomplete or poorly implemented initiatives that keep expectations moderate at best. 	<ul style="list-style-type: none"> • Sustained success is expected; occasional failure/set-backs occur occasionally but are viewed as learning experiences. • New initiatives are met with enthusiasm for potential positive outcomes and new resources for staff members. • Communication has increased buy-in and expectations for system improvements in a positive way.
Employee attitudes toward their work and clients	<ul style="list-style-type: none"> • Operations level staff members consistently feel powerless to effectively perform their jobs leaving them angry or bitter towards the organization or resigned and complacent about their work. • Supervisors and mid-level managers are not able to address staff morale issues or have low morale/little motivation to perform beyond compliance within their department. • Performance evaluations are seen as punitive. 	<ul style="list-style-type: none"> • Attitudes are mixed: some employees feel excitement, sense of purpose, determination, and urgency while others feel suspicion, burned out, or skeptical that they are really having impact in their community. • Some resistance to work processes is constructive while some resistance reflects unwillingness to try new things, complete work tasks, or attempt system improvements. 	<ul style="list-style-type: none"> • Excitement, a sense of purpose, determination, and urgency to perform permeate the organization. • Energy is high for new initiatives and the staff appreciates opportunities to develop their skills and achieve positive client outcomes. • Performance evaluation of staff is seen as a development opportunity.

<p>Teamwork</p>	<ul style="list-style-type: none"> • There is no sense of team or team members are more concerned with personal responsibilities and tasks than team goals. • There is no teamwork across organizational silos causing lapses in service to clients. • When teamwork is planned it seems dysfunctional and team goals are rarely accomplished. 	<ul style="list-style-type: none"> • Teamwork occurs within programmatic silos or organizational pockets. • Some levels within the organization perform well as a team while others do not. • Teamwork can be high-functioning when structured, planned, and well led, but does not occur naturally throughout the organization. 	<ul style="list-style-type: none"> • Teamwork occurs naturally in a high-functioning manner throughout the organization, across programs, and at all levels. • The organization has many staff members capable of leading team efforts.
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General Capacity to Improve and Innovate Readiness			
Communication	<ul style="list-style-type: none"> • There is consistent avoidance of open and honest dialogue within the organization. Most agency wide communications are considered “spin”, “non-specific”, or “non-transparent.” • Organizational communication tends to be bureaucratic/jargon-heavy language unable to be understood by the community or stakeholders. • Communication method is always “top down” with little communication up within the organization. • Communication tends to be compliance-focused and defensive • Communication with stakeholders, partners, staff, and the community is infrequent and/or poorly planned. 	<ul style="list-style-type: none"> • Movement toward openness and honesty (“transparency”) both inside the organization and with external stakeholders. • Mix of general and specific communication points are shared in plain language • Various communication methods and language are beginning to be adapted and used for different audiences. • Communications include innovation ideas seeking feedback and have a focus of performance improvement. • Communication is frequent, routine, and well planned in silos/pockets. • A growing number of managers/leaders recognize the need for and have begun practicing open and honest dialogue. 	<ul style="list-style-type: none"> • Communication is open and honest (“transparent”) both inside the organization and with external stakeholders. • Communication is specific and presented in plain, straight-forward language. • Communication methods and language are routinely adapted for different audiences. • Communications with stakeholders are comfortably about finding innovations and improving organizational performance. • Communications can be described as: frequent, routine, and well planned (e.g., using written communication plans).

<p>Strategy</p>	<ul style="list-style-type: none"> • There is no written strategy, e.g., Mission/Vision/Values, Desired Outcomes, Priority Initiatives <p style="text-align: center;">OR</p> <ul style="list-style-type: none"> • There is a written strategy with little to no impact on how the organization is structured, key processes are designed and frontline practice is conducted. Organizational culture is “reactive to crisis” vs. proactive towards goals and objectives. 	<ul style="list-style-type: none"> • There is a written strategy that is evident in silos/pockets and/or with some impact on how the organization is structured, key processes are designed and frontline practice is conducted. • Managers/leaders recognize the need for and have begun work on improving the implementation of an organization-wide strategy. • Overall connection to organizational strategy is often forgotten or not considered when planning new initiatives. 	<ul style="list-style-type: none"> • There is a clear written strategy that is embedded within the agency. The strategy supports organizational planning and implementation of how the organization is structured, how key processes are designed, and how frontline practice is conducted. • The mission of the organization is clear at every level of the organization. • Strategy is monitored and re-defined based on data (outputs and outcomes) and feedback from the community.
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<p>Data</p>	<ul style="list-style-type: none"> • Little to no data and/or the wrong data are used for strategic decision-making. • Data generally focus on outputs and quantity. • Management reports are long and not generally accompanied by executive summaries or easily understood. • Information systems “not talking to each other” is a routine complaint with no apparent solution. • There is a general feeling is that “we have what we need” and aren’t willing to continuously improve data work and therefore there is little to no effort to improve data collection or interpretation. 	<ul style="list-style-type: none"> • Data are used for strategic decision making in silos/pockets. • Some outcomes and quality data are beginning to be used. • Management reports are starting to be processed into executive summaries. • Information systems “not talking to each other” is recognized as a challenge to be overcome, not an excuse for ineffective data work. • Efforts to improve data work may be beginning as part of a one-time, silo-ed program. • Efforts to understand what the “right” data is are underway. 	<ul style="list-style-type: none"> • Data are used routinely for strategic decision making. • Data generally focus on outputs, outcomes, and quality. • Management reports are short, easily understood, and generally accompanied by executive summaries. • Information systems either “talk to each other” or are connected by workaround solutions • The organization constantly seeks to improve its data work.
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<p>Resources</p>	<ul style="list-style-type: none"> • Organization will not commit any significant resources to continuous improvement effort. 	<ul style="list-style-type: none"> • Organization is able to shift resources to support continuous improvement efforts including staff time, and minimal costs that can be moved from other line items in the budget. • Organization seeks third party funding to support continuous improvement efforts but is unlikely to spend its own funds. 	<ul style="list-style-type: none"> • Organization is committed to continuous improvement effort and is willing and able to shift or develop resources with an understanding that ultimately there will be either cost savings or better client outcomes as a result of the investment.
<p>Strategic Support Functions</p>	<ul style="list-style-type: none"> • Struggle to add value in basic service delivery (“Cannot make the trains run on time”). • Default answer to questions tends to be “no” versus “let’s discuss what you need and find a way to make it work.” • Persistent “sore spot” that people complain about. • Not connected to strategic discussions and considered an afterthought when planning even large system initiatives. 	<ul style="list-style-type: none"> • Provide basic services with occasional mistakes and are starting to design some processes that staff recognize as adding value. • Are starting to answer “let’s discuss what you need and find a way to make it work.” • Are starting to be recognized as contributors to the organization’s success and may be included in strategy discussions but don’t always have a “seat at the table”. 	<ul style="list-style-type: none"> • Consistently provide basic services, design processes that are seen to add value, and act as strategic consultants to leadership. • Default answer to questions tends to be “let’s discuss what you need and find a way to make it work.” • Seen as key contributors to the organization’s success.

Notes/Priority areas for Improvement:	
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Work Plan Template

Insert Agency Name

Proposed Areas of Work: Insert DATE

Background and Client Challenges

- Provide a brief overview of the agency (state, county, size, main service/area of responsibility)
- Describe the current situation (Why is CI work being requested?)
- List the desired outcome (What does the agency hope to achieve by engaging in the CI effort?)
- Answer the following questions:
 - Why are we making this proposal?
 - What is the main hook for the agency's improvement effort (e.g., services integration, retention)
 - Who within the agency is the primary focus of our work?
 - How well are we demonstrating we listened to the client's needs?

APHSA's Services

- Provide a title for the work and a high-level paragraph on the outcome for the work.

Principle Features and Task Areas of Work

- Divide services into task areas, defining the work to be completed in each task area. The following is a list of task areas to include:
 - Off-site preparation prior to starting work (optional no more than two days)
 - On-site DAPIM facilitations
 - Oversight (optional)
 - Final report
 - Other based on contract (such as focus groups)

Task Area: Preparation Prior To On-Site Facilitation

- Things to consider for review include:
 - Organizational chart
 - Existing strategic plans
 - Data relevant to the DAPIM topic
 - Other based on organization and reason for OE involvement

Task Area(s): On-Site DAPIM

- Define major work activity of task area in a brief paragraph (such as supervisory development, retention, front-line practice, strategy playbook...)
- List the products to be completed as a result of the work in the task area (see DAPIM product flywheel)
- If multiple on-site sessions occur within a task area, provide high-level overview of products by session

Task Area: Development of Final Report

- Provide documentation and preparation of all related work products from each task area
- Provide recommendations for future areas of work

Task Area(s): Other

- Provide title for area of work
- Define major work activity of task area in a brief paragraph
- List the products to be completed as a result of the work in the task area

Timeframe for Completion of Work

- Provide overall project timeframe (beginning and ending date)

Minimum Requirements for Success

- If applicable list markers to ensure success of the CI Effort

Methodology and Approach

APHSA's approach to client consulting is to balance general principles of effectiveness with the client's particular context and stage of development. Instead of employing a traditional classroom method, APHSA engages its clients in learning by doing on the client's terms. Facilitation and coaching will be strengths-based, relationship-oriented, and will lead to tangible, actionable results.

APHSA's approach to sustainability is to help clients gain the capacity to drive their own continuous improvement versus being overly dependent on external partners and/or consultants.

APHSA's approach to diversity is to develop products and services that are respectful of human diversity and deliver them equitably and without bias toward any person or group. Staff is expected to demonstrate respect for human diversity and model awareness of the need for continuous personal self assessment and improvement as knowledge is gained and understanding enriched.

APHSA will use an array of models, tools, templates and techniques it has developed for continuous improvement, longer-term planning and organizational effectiveness. In each of our projects we are likely to generate new or revised materials to support our clients' continuous improvement efforts, and these often become very useful in helping other state and local agencies later. For this reason, we always retain ownership of any models, tools, templates and techniques we develop or refine within our projects. While our clients have the right to share and use the specific work products, documents and reports that are generated within this project, it is important for them to ensure that intellectual property-related contract language is in place that enables us to otherwise build upon and freely use our OE practice elsewhere.

Estimated Investment

APHSA does not explicitly charge for our time, but for our work products and output. However, we do determine our consulting fees based on the time we expect to invest in our work, as we believe this is a fair, consistent and transparent method.

In addition to a daily consulting rate, APHSA charges a 10% materials fee that allows APHSA staff to continue to develop updated materials, tools, and templates and deliver products through a continuous improvement model.

The chart and summary below describes how we are determining our fees for this project.

- List estimated consulting days by task area, including offsite preparation and development time, onsite time, travel (for long-distance travel, max one day per onsite visit), oversight (if applicable), and report writing. Use the following template to identify days.

Time	Offsite Preparation & Development	Onsite	Travel	Oversight & Coordination	Report
Task Area One					
Task Area Two					
Task Area Three					

In Summary

We therefore estimate a total of (INSERT NUMBER) consulting days, including all onsite consulting, offsite development time, and travel time.

Facilitator Agenda Sample

Sponsor Team Planning Sessions

Participants:

Goals:

- Introduce the APHSA OE models, tools, and approach for continuous improvement work to Sponsor Team members
- Prepare for the OE sessions
 - Discuss the background and history of agency
 - Identify the issue to be resolved
 - Identify pre-reading materials for facilitators
 - Develop work plan and session one agenda
 - Identify appropriate participants for continuous improvement team
 - Identify timeframe and dates for the OE sessions
- Identify next steps and complete communication planning

Agenda:

Time	Content	Materials
15 minutes	<p>I. Introduction</p> <ul style="list-style-type: none"> a. Who is the room – roles and responsibilities b. Agenda and goals <p>Check-in: How does this agenda meet your needs? What changes or additions would you like to see happen?</p>	HO 1– Agenda
15 minutes	<p>II. APHSA OE Models, Tools and Approach for Continuous Improvement Work</p> <ul style="list-style-type: none"> a. Definition of OE b. Organizational System Model c. DAPIM™ Flywheel d. Learning by doing e. Structure for OE efforts <ul style="list-style-type: none"> i. Sponsor Team ii. Continuous Improvement Team iii. Work Teams <p>Check-in: Do these models ring true for you? Do you have examples from your own agency that fit these models (strengths and gaps)?</p>	HO 2 - Definition HO 3 - Org. Sys. Model HO 4 - DAPIM (with work products) HO 5 - Structure

<p>70 minutes</p>	<p>III. Planning for the OE Sessions</p> <ul style="list-style-type: none"> a. Background of Agency <ul style="list-style-type: none"> i. Ask Sponsor to share demographics of county, population served, types of services provided, types of services needed (not available), number of staff, (10 minutes) b. Group Agreement on the Issue to be Resolved – What is the area of concern the county would like to improve and why? Draft a problem to be resolved statement for group agreement (15 minutes) c. Developing the Work Plan (using the template as a guide) (25 minutes) <ul style="list-style-type: none"> i. Background and current challenges ii. Measures of success iii. Principle features of the work to be completed iv. Timeframe for completion v. Investment of time by county d. Identifying participants (10 minutes) e. Planning Sessions Dates and locations (10 minutes) 	<p>Resource for facilitator – Work Plan Template</p>
<p>10 minutes</p>	<p>IV. Overview of Session One</p> <ul style="list-style-type: none"> a. Goals and objectives b. Introduction to OE models and tools c. Team Activity: DAPIM™, Learning by Doing <ul style="list-style-type: none"> i. Defining our desired state ii. Assessing strengths and gaps against the current state iii. Root Causes and General Remedies (Quick wins) iv. Prioritize Gaps for Session Two v. Intersession commitments d. Roles of Sponsor Team (prior to session, and on-site) 	
<p>10 minutes</p>	<p>V. Commitments and Next Steps</p> <ul style="list-style-type: none"> a. What the county can expect based on the discussion. (Draft work plan and agenda for session one) b. Review of items the facilitator will need from the agency based on the discussion. c. Communication Planning with CI Team members 	

Meeting Notes, Commitments, and Next Steps:

HO 1 – Agenda

Sponsor Team Planning Sessions

Goals:

- Introduce the APHSA OE models, tools, and approach for continuous improvement work to Sponsor Team members
- Prepare for the OE pilot sessions
 - Provide background and history of agency to facilitator
 - Identify the issue to be resolved
 - Identify pre-reading materials for facilitators
 - Develop work plan and session one agenda
 - Identify appropriate participants for continuous improvement team
 - Identify timeframe and dates for the OE pilot sessions
- Identify next steps and complete communication planning

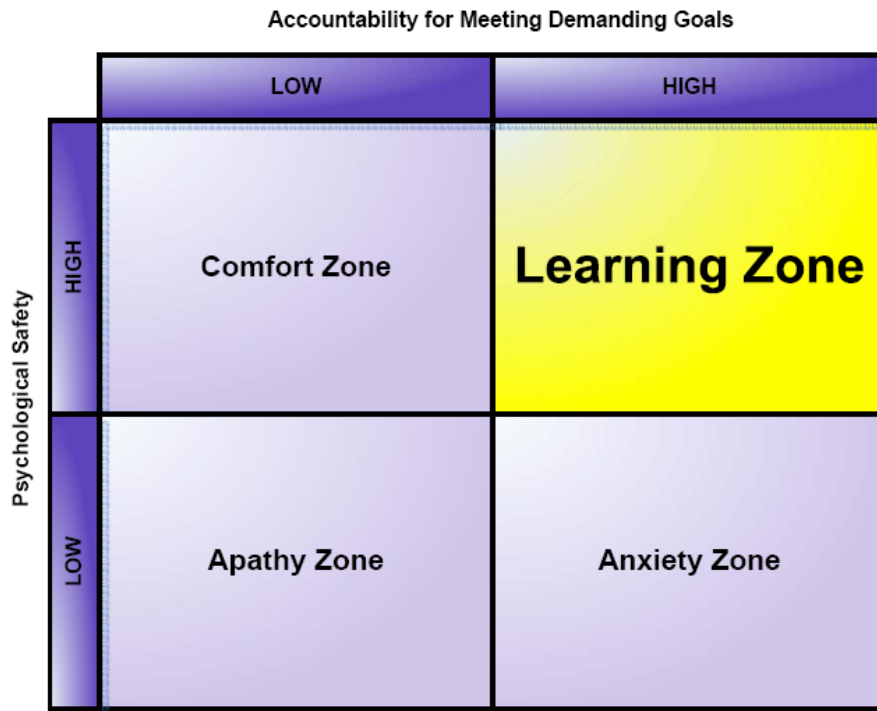
Agenda:

- I. Introduction
 - a. Who is the room – roles and responsibilities
 - b. Agenda and goals
- II. APHSA OE Models, Tools and Approach for Continuous Improvement Work
 - a. Definition of OE
 - b. Organizational System Model
 - c. DAPIM Flywheel
 - d. Learning by doing
 - e. Structure for OE efforts
 - i. Sponsor Team
 - ii. Continuous Improvement Team
 - iii. Work Teams
- III. Planning for the OE Sessions
 - a. Background of agency
 - b. Group Agreement on the Issue to be Resolved – What is the area of concern the agency would like to improve and why?

- c. Developing the Work Plan
 - i. Background and current challenges
 - ii. Measures of success
 - iii. Principle features of the work to be completed
 - iv. Timeframe for completion
 - v. Investment of time by county
 - d. Identifying participants
 - e. Planning Sessions Dates and locations
- IV. Overview of Session One
- a. Goals and objectives
 - b. Introduction to OE models and tools
 - c. Team Activity: DAPIM, Learning by Doing
 - i. Defining our desired state
 - ii. Assessing strengths and gaps against the current state
 - iii. Root Causes and General Remedies (Quick wins)
 - iv. Prioritize Gaps for Session Two
 - v. Intersession commitments
- V. Roles of Sponsor Team (prior to session, and on-site)
- VI. Commitments and Next Steps
- a. What the county can expect from the Professional Development System based on the discussion. (Draft work plan and agenda for session one)
 - b. Review of items the professional Development System will need from Waukesha County from the discussion.
 - c. Communication Planning with CI Team members

Meeting Notes, Commitments, and Next Steps:

Safety and Accountability Performance Matrix



Adapted from Harvard Business Review, Amy C. Edmondson

Preparation Checklist for Facilitators

This Preparation Checklist for Facilitators was developed to be used as a tool for OE facilitators to keep track of the many tasks that must be performed prior to beginning an “on-site” OE facilitation. As the facilitator completes a task leading up to the session, they should check off the task as completed. If a task seems “not applicable”, that should be noted as well.

Project Title:

Lead Facilitator:

During the weeks prior to the session

Complete or N/A	Task	Notes
	Pre-meeting with organizational leadership or individual participants to assure congruence of expectations for the session/overall work plan.	
	Prior to making agenda, facilitators should be clear on objectives for the session. As agenda is prepared, facilitators should ask themselves: will this agenda lead to the achievement of all of the stated objectives?	
	Facilitators should develop their own agenda/plan with expected time frames for pieces of work and needed resources (different than agenda handout that would be passed out to the group).	
	Consider who will be responsible for taking notes. If not the facilitators, have pre-meeting with note taker to assure role understanding. Ask: will the flip charts be used as the session record or as simply discussion reinforcement? How will notes get transcribed and processed for the group to review? Prepare appropriately for note transcription.	
	Prepare to deliver safety and accountability and what that will look like for this group - are there any special considerations for facilitator to be aware of (expect confrontations between participants, controversial topics)?	

	Consider whether you need participants to bring anything to the session. Communicate those needs to participants or team leadership.	
	Seek feedback for planning from teammates or supervisor prior to delivering the advance information to the team. Agenda and/or handouts should be shared with sponsors of the work prior to the session once those documents are final.	
	If you are doing something new or have a “lecture” concept to present (org systems model? New team activity?), practice and develop the timing.	
	Determine room logistics including location, seat set up, availability of flip charts and markers, projectors, space to hang up flip charts. Space for small group work? Audio visual equipment expected to be present etc...for session planning.	
	Handouts...confirm who is bringing them and in what fashion (in folder, pass one at a time out?). If facilitator is bringing handouts make sure that travel is not a problem (may need to ship them in advance.) If the handouts are being put together by the session coordinator on-site, make sure that they have the handouts well in advance (more than a week) of the session. When making handouts consider how the session participants will keep track of multiple handouts (different colors? mark as exhibits? Kept in a binder with tabs) over multiple sessions.	
	Make travel plans, dates for sessions, locations, etc...	
	Review and keep commitments from previous sessions.	

During the week prior to the session

Complete or N/A	Task	Notes
	<p>Confirm meeting location and time to assure no mix-ups. Assure transportation from hotel to meeting location. If this is the first time to a new location, be familiar with security requirements and who to ask for upon arrival.</p>	
	<p>Confirm room logistics including location, seat set up, availability of flip charts and markers, projectors, space to hang up flip charts. Space for small group work? Audio visual equipment present and working? Review the agenda and be sure that all logistical issues are clearly accounted for. Find out if the group will be having lunch in the room or having to travel out of the building for lunch (may affect timing). Prepare to make any necessary adjustments. (It is best to find out this information when planning weeks in advance; this is final confirmation to assure no “surprises”).</p>	
	<p>Consider if you need and prepare: sign in forms, name tents, or tags.</p>	
	<p>Prepare monitoring from last session-make sure facilitator has kept public commitments from any previous sessions.</p>	
	<p>Consider whether there will be any observers present, how they will be introduced, and whether a side discussion with them will be necessary on the day of the session.</p>	
	<p>Re-practice any areas of presentation that are new or that you are unsure about.</p>	
	<p>Make sure you have clear directions to the meeting location, especially if this is the first time to the location.</p>	

Day of the session

Complete or N/A	Task	Notes
	Arrive early the day of the session.	
	Prepare blank flip chart papers with “parking lot”, “next steps” or “commitments” for future monitoring to record those issues as they come up during the course of the session.	
	Plan to eat a good breakfast. Maintaining energy throughout the day will be important and requires good nutrition.	
	Appropriate appearance for the session (dress, hygiene)	
	Tuning into self (neutral feelings) about how you are feeling that day. If any personal issues (tired, sick, outside distractions) are present consider how you will put them aside for the session. Expect of yourself to be fully present. Remind yourself of the mission of your work if that helps you remain focused and motivated for the session.	
	Bring a clock (watch, cell phone) to make sure you are able to keep track of timing. If this is a problem, be prepared to assign a timekeeper in the room.	

General preparation

Complete or N/A	Task	Notes
	Prepare introduction of yourself to make sure not too long but tells participants what they need to know to begin building trust.	
	Prepare to define roles and objectives for the participants from the very beginning of any session.	
	Know the audience as much as possible - are the right people in the room for what you are trying to accomplish?	

Sample Facilitator Agenda

Goals

- Become familiar with the APHSA Organizational Effectiveness models and tools and how to use them in continuous improvement efforts.
- Define a desired future state for the organizational structure, functioning, and capacity to align with the principles and values of the Practice Model.
- Assess strengths and gaps of the current system toward achieving desired stated goals.
- Prioritize gaps and explore root causes and remedies.
- Identify potential quick wins for implementation.
- Plan next steps and commitments for session two.

DAY ONE:

Time	Content	Materials Needed
9:00 – 9:15	I. Opening a. Who is in the room and why (sponsor team) b. Agenda and objectives c. Results by end the first session and for the overarching CI sessions (measures of success)	HO 1– Agenda
9:15 – 9:45	II. Checking in with participants prior to getting started, building trust and safety for the CI sessions a. Participants will share how they feel about engaging in the OE work and what outcomes they are hoping for.	
9:45 – 10:30	III. OE models and framing to guide discussion on defining the professional development system a. Overview of the OE models tools and approach – what the team can expect as part of the process. b. Organizational system model c. DAPIM™ – “Learning by doing” Approach	HO 2 –CI Slides HO 3 – Org. System HO 4 – DAPIM HO 5– CI flow chart

10:30 – 10:45	BREAK	
10:45– 12:00	<p>IV. Defining your desired future state. What will services look like to reduce placements and support families cross systems? How will your structure and culture, key processes and operations align to your strategy?</p> <p>Practice Model – Introduction and Sharing Initial Thoughts</p> <ol style="list-style-type: none"> a. How will help you achieve our mission? b. How will it support you in aligning your culture, structure, key processes and operations? c. What concerns do you have about the practice model? <p>Reflective thinking questions:</p> <ul style="list-style-type: none"> • What outcomes do you want for those it serves (children, youth, families, and communities)? <ul style="list-style-type: none"> ○ Specifically, how will you assure clients (children and youth) are safe and have stable and permanent families that have the skills and resources to provide for the needs of their children? ○ How will you assure your interventions support care givers to provide for those in need? ○ How will you assure families are engaged during the completion of assessments to keep clients (children and youth) in their own homes and communities? ○ How will you foster connections for children and youth when placement is necessary? ○ How will the individual needs of families be respected and supported in times of need with respect to race, ethnicity, socioeconomic status,? ○ How will you assure staff has the competence to conduct assessments and plan for the needs of the client in a crisis situation? What skills will they need? What strategies will they employ (engagement, teaming, assessment, planning, intervention, follow up)? What resources and 	<p>HO 6 - Practice Model</p> <p>HO 7 - Pyramid Model</p>

	<p>tools will they need? What key processes will support them in work with families? What structure will best support service provision?</p> <ul style="list-style-type: none"> ○ How will staff be held accountable for the delivery of services - what will the expected standards of practice be with regard to family engagement and maintaining children in their own homes when possible? ○ How will leadership support staff in service delivery? How will the organization and its leadership be held accountable for the delivery of effective services? (organizational support, cultural responsiveness, provision of training and workload management, provision of tools to do the work – such as desk aids and assessment tools, supervision, communication about expectations, provision of resources, partnerships in place to support services to the families – internal partnerships and external partnerships) 	
12:00 – 1:00	LUNCH	
1:00 – 2:30	V. Defining work continued (if needed) - otherwise move into assessing (Also review alignment with the Practice Model)	
2:30 – 2:45	BREAK	
2:45 – 3:45	VI. Assessing Strengths and Gaps towards Your Desired State <ul style="list-style-type: none"> a. What is in place to support you in moving forward (strengths)? b. What will need to be planned for to move forward (gaps)? 	
3:45 – 4:00	VII. Preparing for day two <ul style="list-style-type: none"> a. Things to think about overnight b. Agenda for day two 	

DAY TWO:

9:00 – 9:30	I. Opening a. Checking in on day one – questions from overnight b. Review of day one notes	
9:30 – 10:30	II. Complete Strengths and Gaps work – Prioritize Gaps	
10:30 – 10:45	BREAK	
10:45 – 12:00	III. Root Causes and Remedies a. What are root causes? b. Types of remedies c. Conducting root cause analysis for priority gap areas - to get to “Quick Wins”	Root Causes – from CI slides Types of remedies – from CI slides
12:00 – 1:00	LUNCH	
1:00 – 3:00	IV. Continuing root causes and remedies a. Identify “Quick Wins” and assign accountabilities (15 minutes break around 2:30)	HO 8– Quick Win
3:00 - 3:30	V. Communication Planning a. Key messages from session that will be communication	
3:30 – 4:00	VI. Closing a. Review of commitments and next steps b. Next meeting date – May 18 th and May 19 th c. After Action Review	

Commitments, next steps and notes:

Facilitator Agenda: Sample Template

Agency Name
Date, Time, and Location of Meeting

Goals:

Agenda:

Time	Facilitator	Content and Method of Delivery	Materials

Commitments, next steps and notes:

Case Study Template and Question Sets

The following provides a high level table of contents and questions for a case study. Please refer to the final report template for a detailed template on the flow of the case study. The questions are meant to provide direction to APSHA Organizational Effectiveness (OE) consultants in completing a case study to tell the story of an APSHA OE facilitated Continuous Improvement (CI) effort within an organization.

Table of Contents

Items to include in the case study immediately following on-site CI session:

- History/background
- Desired future state for the organization
- Findings
- All work products from the CI session – walk through the DAPIM™
- OE models, tools and templates used
- Reflect on the objective – did we meet the objectives of the work proposal
- Recommendations from APSHA and participants engaged in the OE effort
- Lessons learned
- Reflect on the hypothesis we have recorded on in our journal during our OE effort with the client
- Reflection from the participants and sponsors of the CI sessions
- Plan next phase of work

Items to include in the case study one year post on-site CI session:

- Outcomes: what impact did the OE work have? If available collect six month and one year post impact.

Question Sets

The questions should be answered and elaborated on as much as possible. It is the hope that by obtaining answers to these questions, a case study will be written that informs a reader of the organizations' background, reason for engaging in a CI effort, and the overall impact of the CI effort.

Prior to starting the CI effort, agreement to complete the case study must be obtained from the sponsors of the CI effort in the organization. Once agreement is obtained, the OE consultant and the sponsors of the CI effort determine the following:

- Who in the organization is in the best position to answer each of the questions? Is it an individual or a group of persons?
- Should the questions be answered using a one-on-one interview process, focus groups, in writing, or a combination of methods?
- What do the persons providing information for the case study need to know about the CI effort in advance? Who will provide that information?
- Which question sets make most sense to collect information on prior to starting the CI effort?
- Which question sets make most sense to collect information on during the learning by doing phase of the CI effort?
- Which question sets make most sense to collect information while implementing the CI plan? At 30 days? 60 days? Six months? One year?

Following the data collection, the OE consultant writes the case study to tell the story of the organization. The writing process includes a review of the draft case study by the sponsor team to ensure accuracy.

Once finalized, the case study will be used at APHSA to inform our OE work. In addition, the sponsor team may choose to share the case study with internal and external stakeholders.

Introduction and Purpose

Reflection by the organization:

- What is the current state of the organization? (organizational structure, staffing, client population served, desired outcomes for clients, resource available to support client outcomes, current vision and mission, current values)
- What is the identified need for the organization?
- Why did you decide to engage in a CI effort?
- What outcomes are you seeking?
- What gap in your organization's performance are you seeking to fill with the CI effort? Please describe your organization's performance outcomes prior to the CI effort.
- What systems change are you seeking to achieve?
- How did you become aware of the APHSA OE department and *its* CI strategies?

OE Consultant self reflection:

- How did you view the current state of the organization and its ability to assess its current situation appropriately? Why do you think this to be true?

Structure of the CI Effort

Reflection by the organization:

- What structure and process did you put into place for the CI effort and why? How did you arrive at that structure and process?
- Was this a controversial or universally accepted idea for your agency?
- If it was controversial, what were the key selling points for moving forward with the CI effort?
- Why did you make the decision to use outside facilitation support for this CI effort?
- Who did you choose to invite to participate in the CI effort and why?

OE Consultant self reflection:

- What were your thoughts on the structure the organization used for its CI effort?
 - What did you see as the strengths in the structure and why?
 - What concerns did you have about the structure and why?
- What were your thoughts about the individuals chosen to participate in the CI effort and why?
 - What did you see as the strengths and why?
 - What concerns did you have and why?

Value of Learning by Doing

Reflection by the organization:

- Please describe the structure and process you actually used during the CI effort.
 - Was there a specific action plan with concrete measurable benchmarks and timeline goals? Did the APHSA OE consultant assist with the creation of the action plan? If an action plan was in place prior, did the action plan change during this phase of work? If so, how and why?
 - Did the structure and process you identified prior to using the guidance change during this phase of work? If so, how and why?
 - What impact do you feel the facilitator had on this phase of the process?
 - What strengths did the facilitator bring to the process?
 - What barriers did the facilitator bring to the process?
 - Would you choose to use a facilitator again when planning a CI effort? And why is that?
- Please describe how the DAPIM™ model impacted your efforts toward continuous improvement in effecting systems change. Specifically, in what ways was the DAPIM™ model supportive of the process and how did it hinder the process?
- Did you use any OE tools such as the team activities to assist you in CI effort? How so?

- During this phase of work, did you identify additional stakeholders to include in the process? If so, who and why?
- As part of this phase of work, did you develop a CI plan? If so, why did you choose to do this and were tools provided helpful to this process?
- As part of this phase of work, did you develop a communication plan? If so, why did you choose to do this and were the tools provided helpful to this process?
- As a part of the Communication Plan, how have you connected the CI efforts to the everyday work of staff and the connection of CI to the leadership vision?
- As staff applied the DAPIM™ model, how has it changed the way work is done and discussed to a more outcome-focused discussion and focus?

OE Consultant self reflection:

- What were your thoughts about the participants' engagement in the CI effort?
 - What did you see as the strengths and why?
 - What concerns did you have and why?
- What were your thoughts on how the participants and the organization as a whole adopted the DAPIM™ approach as a way of doing business?
 - What did you see as the strengths and why?
 - What concerns did you have and why?
- What breakthroughs do you think participants made as a result of engaging in a learning by doing process and why?
- What team activities do you feel had impact on the participants and the organization as a whole and why?
- What work products came out of this phase of work that you feel had impact on the participants and the organization and why?
 - What went well during this phase of work and why?
 - What concerns did you have and why?

Uncovering of Strengths

Reflection by the organization:

- What, if any, organizational and individual strengths did you uncover during the CI effort?
 - Was the DAPIM™ process helpful in uncovering these strengths? If so, how?
 - Where tools, templates, and team activities helpful in uncovering these strengths? If so, how?

OE Consultant self reflection:

- How well do you feel the participants accurately identified strengths that support their performance?
 - What went well during this phase of work and why?
 - What concerns did you have and why?

Gaps to Improvements**Reflection by the organization:**

- What, if any, gaps did you encounter during the CI effort?
 - Was the DAPIM™ process helpful in overcoming these gaps? If so, how?
 - Were tools, templates, and team activities helpful in overcoming these gaps? If so, how?

OE Consultant self reflection:

- How well do you feel the participants accurately identified gaps to their performance?

The Managing of Improvements in the Present and in the Future**Reflection by the organization:**

- Following the learning by doing phase of the CI effort, what is the *desired state* of the organization? What will look different as result of your work?
- How do you plan to get there? In the short term? In the long term?
- What quick-wins did you implement?
- What, if any, impacts are you seeing in 30 days, 60 days, 90 days, six months, one year? How do you know that to be so?
- What impact has the effort had on frontline practice? How do you know that to be so?

OE Consultant self reflection:

- How well do you feel the participants accurately identified root causes and remedies that would support performance improvement?
 - What went well during this phase of work and why?
 - What concerns did you have and why?

- How well do you feel participants handled the planning phase of the CI effort?
 - What went well during this phase of work and why?
 - What concerns did you have and why?

DAPIM™ as a Way of Doing Business: A Vocabulary of Continuous Improvement

Reflection by the organization:

- What new techniques, tools, models do you use routinely as a result of the CI effort and why?
- What impact have they made internal to the organization and how do you know that to be true?
- What impact have they made external to the organization and how do you know that to be true?
- How will you ensure that staff at all levels know that this is the expected way of working / what accountability is in place for those applying the model to provide feedback on its success, any implementation issues, etc?

OE Consultant self reflection:

- If contact was maintained during this phase of work, what did you observe as the lasting impact of the CI effort and why?
 - What did you see as the strengths and why?
 - What concerns did you have and why?

Plan of Action

Reflection by the organization:

- Did you develop a CI plan and Communication Plan as part of the *Learning by Doing* phase of your work? If yes, answer the following;
 - How did the CI plan and/or communication plan support the implementation of your continuous improvement effort? What impact did these plans have? Did you alter the plans during the implementation phase? If so, how and why?
- Did you have outside support in facilitating the implementation the CI plan? If so, why did you choose this support? What impact did the facilitator have on the implementation phase? Specifically, what strengths did the facilitator bring to the process and what barriers did the facilitator present? Would you choose to use an outside facilitator again when implementing a CI effort? Why/Why not?
- How are you evaluating and monitoring the outcomes of the CI plan implementation?

- What have been the outcomes of implementation?

The following groups should be adjusted based on the organizations' stakeholders and clients:

- What have you noticed?
- What has your staff noticed?
- What have your stakeholders noticed?
- What have families noticed?
- What have youth in care noticed?
- What have alumni youth noticed?
- What has the community noticed?
- How have your outputs (data results) changed since implementing the CI plan?
- What areas do you find that you need more guidance in regarding implementation of a CI plan?

OE Consultant self reflection:

- If contact was maintained during this phase of work, what did you observe as the lasting impact of the CI effort and why?
 - What did you see as the strengths and why?
 - What concerns did you have and why?

Sustainability Planning

- How did you determine the plan for sustainability of the CI process?
- What impact has this decision had on staff, staff roles, etc?
- What will be the way in which the success of the sustainability plan will be determined?
- What supports have been put in place to ensure the success of your sustainability strategy?

Conclusion

Reflection by the organization:

- What lessons have you learned along the way, and should any of these lessons be used to add to or modify the CI process itself?
- How have you considered documenting your shift to the CI / DAPIM™ approach?

OE Consultant self reflection:

- What lessons have you learned along the way, and should any of these lessons be used to add to or modify the CI process itself?

For any of the areas of the case study, is there additional information you would like to provide relevant to telling the story of the CI effort and/or further defining or explaining related outcomes.

Markers of Effectiveness: Success Factors for Internal Facilitators

Success Factor	Comments
<p>1. Facilitate versus lead the sessions. Avoid being prescriptive and overly directive. Instead, guide clients based on a balance between their energies and need to complete work products.</p> <ul style="list-style-type: none"> • Develop trust and respect of participants • Maintain focus in group • Ability to talk in front of people (confidence) • Identify key themes from a group discussion • Ability to remain objective • Leading a brainstorm • Channeling discussions 	
<p>2. Acknowledge others’ comments explicitly by:</p> <ul style="list-style-type: none"> • Using interpersonal communication skills • Paraphrasing conversations positively • Good rapport building skills including: <ul style="list-style-type: none"> ○ Smiling and nodding ○ Paraphrasing and reflecting back ○ Making connections between individual comments and the work as a whole 	
<p>3. Adjust the session agenda in real time, balancing the speed the team can reasonably achieve with the ultimate objectives of the project.</p> <ul style="list-style-type: none"> • Keep meeting moving towards objectives/accountabilities • Ability to set the content and parameters of the meeting • Time management skills 	

<p>4. Actively and empathetically listen to and engage with others. Read body language and facial expressions to gauge participants’ state of mind, while respecting cross cultural communication of participants through their use of language and non-verbal gestures. Use your assessment of participants’ state of mind to ask probing questions or call out and test apparent issues with the team’s dynamics (e.g., feelings, trust, ground rules) within the cultural context of each participant. Having an understanding of ourselves and our own cultural frames of reference and being open to learn about peoples cultures can help us appreciate one another and respectfully work together.</p> <ul style="list-style-type: none"> • Use good communication skills such as active listening and reflective questioning and other listening skills • Engagement skills, ability to engage a variety of audiences 	
<p>5. When flip charting, record <i>their</i> thoughts and specific words versus your own. Avoid impressing your own ideas on top of theirs. This is a nuanced factor as clients will often benefit from your advice, but only when requested, considered and accepted.</p> <ul style="list-style-type: none"> • Ability to summarize discussions 	
<p>6. Always allow participants to critique and adjust your notes after you process them. Adjusting notes based on participant feedback builds understanding, buy-in, and a willingness to adapt one’s self to agreed-upon findings and commitments.</p>	
<p>7. Avoid influencing teams to make decisions they are not ready or willing to make. Be patient and take small steps in these situations.</p> <ul style="list-style-type: none"> • Decision making skills 	
<p>8. Make sure that <i>each</i> individual participant is feeling and doing OK at the end of each day. As difficult conversations are had in the room, seemingly stable temperaments may waver, and you need to know it.</p> <ul style="list-style-type: none"> • Ability to enforce ground rules and explain boundaries • Facilitation of participants from various levels within the organization 	

<p>9. Make sure that <i>you</i> are OK with everyone in the room. If you have misgivings or negative feelings about someone, always avoid making that the basis for your decisions and actions in facilitation.</p> <ul style="list-style-type: none"> • No perceived biases • Don't alienate people • Facilitation of participants of diverse backgrounds 	
<p>10. Allow the teams to go off on tangents, confident that the DAPIM™ method allows you to bring them back to the work objectives. These tangents often yield new insights and important ideas for later use within the work.</p>	
<p>11. When teams are going off on tangents, provide them a line of sight to how their discussion fits into the DAPIM™ model (e.g., "right now you are adding a finding to one of your priority topics").</p> <ul style="list-style-type: none"> • Recognize if there is a lack of progress in the meeting and help get participants back on track • Ability to maintain focus and purpose of group-keep them on target 	
<p>12. Balance the group's overall dynamics. Gauge their collective temperament and lean the other way as needed for them to practice balance themselves (e.g., encouraging an overly task-oriented team to focus on relationships).</p> <ul style="list-style-type: none"> • Manage sidebar conversations • Keeping conversations balanced among participants 	
<p>13. Always allow for hot topics to be raised, but diffuse the emotional pitch that often accompanies them, through either:</p> <ul style="list-style-type: none"> • Non-personal techniques (e.g., introducing a related model) • Empathic mirroring (in 1-on-1s or in the room) • Ability to mediate when necessary • Conflict resolution skills 	
<p>14. Guide the appropriate level of involvement of observers. If ground rules for observers are not being met, challenge this overtly. If observers are controlling a discussion, back them off openly so the team sees that this is their process.</p>	

<p>15. Technical skills</p> <ul style="list-style-type: none"> • Using outlines and agendas • Using equipment and tools such as power point and projectors • Transcribing notes after sessions • Flip charting in operational terms that allow for work products to be reviewed and understood at future meetings 	
<p>16. Using resources and support</p> <ul style="list-style-type: none"> • Using peers as mentors and liaisons • Co-facilitation • Using Sponsors and leaders (RD or others) to clarify requests of service and review agendas • Be accountable to sponsors • Understand boundaries on projects • Use clerical support/supplies appropriately • Connect with Logistics Lead for information sharing • Complete duties within specified times 	

Fact Sheet: Sustainability Factors for CI Work

1. Ongoing monitoring by “DAPIM™ Alumni” teams. Support in post-project monitoring from leadership and sponsor groups and from facilitators of continuous improvement work using the DAPIM™ approach.
2. Continuous improvement work, modeling and related communication from sponsors and stakeholders, resulting in a two-way ripple effect.
3. Internal DAPIM™ facilitators (vs. external consultants) selected, trained, performing well and with sufficient work plan capacity to offer ongoing support.
4. Program success measures are defined and evaluated, validating or pointing out improvements required of the DAPIM™ approach itself.
5. Ongoing support from Organizational Development or a comparable internal function. Policy and budget alignment, on-line resources to support internal facilitators and ongoing continuous improvement efforts, knowledge management programs and processes, oversight of internal facilitators, and general contracting for external resources (e.g., APHSA products and consulting) are all examples.
6. Agency executive team support, resulting in the alignment of agency strategy and efforts using the DAPIM™ approach and the participation of a broad set of constituents and partners.
7. Ongoing DAPIM™ Alumni networking and materials repository, so that best practices and success stories can be generated, shared and leveraged over time.
8. A continuous improvement point-person in place to champion sustainability and manage an overall sustainability plan.
9. A multi-year continuous improvement plan for embedding continuous improvement and the DAPIM™ approach as a way of doing business for all agency levels, functions, and local settings.

Agenda Samples

Sample Agenda

Supervisory Development: Initial Planning Session

1. Introduction and Objectives

- Review APHSA's "Learning by Doing" Approach
- Consider Project Design Features
- Determine Next Steps

2. The "Learning by Doing" Approach

- The "DAPIM™" Model for Continuous Improvement
- Putting DAPIM™ to Work: Continuous Improvement Teams

3. Project Design Features

- Kickoff and Full-Group Alignment Work
 - Sponsor Group Priorities
- One-on-Ones with Each Participant
- Somewhat Fluid Sequence of Work Products:
 - Initial Feelings
 - Ground Rules
 - Communicating with Staff
 - Topics
 - Findings
 - Root Causes and General Remedies
 - Quick Wins
 - Mid-Term Plans
 - Longer-Term Plans
 - Implementation Tools
 - Team Activities
 - Monitoring Progress
- Frequency of Facilitated Sessions
- Intersession Activities
- Observer Roles
- Facilitators and Co-Facilitators
- Travel and Related Logistics

4. Wrap-Up and Next Steps

- Scheduling and Communication

Sample Agenda

Supervisory Development: CI Team Kickoff Session

1. Introduction and Objectives

- Understand APHSA's "Learning by Doing" Approach
- Align Local Office and Agency Priorities
- Establish Project Expectations, Roles, and Logistics
- Determine Next Steps

2. The "Learning by Doing" Approach

- Compare and Contrast with Traditional Approaches
- The "DAPIM™" Model for Continuous Improvement
- Stories and Examples from Your Experience
- Empowerment and Alignment Principles
- Safety and Accountability Principles
- Understanding and Buy-In

3. Aligning Priorities

- Agency Strategy and Performance Goals
- Mid-Management's Continuous Improvement Priorities
- Staff Retention (Priority): Related Variables

4. Expectations, Roles and Logistics

- What Success Looks and Feels Like
- Required Time and Effort vs. Other Priorities
- Participating Local Offices
- Observer Roles and Co-Facilitation
- Communication Plans
- Sponsor Group Linkage
 - Monitoring Progress and Impact

5. Wrap-Up and Next Steps

- Progress Versus Expectations
- Responsibilities for Follow-Through

Sample Agenda

Supervisory Development: CI Sessions 1 and 2

Session/Day One

1. Introductions and Objectives

- Confirm Understanding of “Learning by Doing”
- Reflect on Your Feelings As We Begin
- Establish Ground Rules for Working Together
- Balancing Safety and Accountability
- Select Topics for Continuous Improvement
- Begin to Brainstorm Related “Findings”
- Determine Next Steps

2. The “Learning by Doing” Approach

- Further Questions and Comments
- Your Feelings as the Project Begins
 - Apprehension and Anxiety
 - Excitement and Hope

3. Establish Ground Rules

- Participants, Observers and Facilitators
- In the Room, Outside, and at Sponsor Group Debriefs

4. Select Topics for Review

- Input from the Kickoff:
 - Agency’s Strategic Direction
 - Mid-Management’s Improvement Priorities
 - Retention Tip Sheet: Related Factors
- Local Office Priorities

5. Brainstorm Findings (as time permits)

- Team and Office Strengths
- Challenges and Needs (Gaps)

6. Wrap-Up and Next Steps

- Progress Versus Expectations
- Communicating with and Involving Your Staff
- Next Steps and Commitments to Follow-Through

Session/Day Two

1. Introductions and Objectives

- Review Goings-On Since Our Last Session
- Review “Processing” of Notes into Work Products
- Brainstorm Findings: Strengths and Gaps
- Determine Next Steps

2. Since Our Last Session

- Communication with and Involving Staff
- Other Goings-On?

3. The Latest Processing

- Feelings About the Project
- Ground Rules
 - Are they being honored?
- Selected and Defined Topics

4. Brainstorm Findings

- Local Office and Team Strengths
- Gaps by Topic
 - Additional Data or Input Needed?

5. Brainstorm Root Causes and General Remedies (as time permits)

- Priority Gaps
- Root Causes
 - Structural and Relational
- General Remedies
 - In or Out of Our Control?
 - Additional Tools Needed?

6. Wrap-Up and Next Steps

- Progress Versus Expectations
- Communicating with and Involving Staff
- Any Quick Wins?!
- Next Steps and Follow-Through

Sample Agenda

Supervisory Development: CI Sessions 3 and 4

Session Three/Day One

1. Introductions and Objectives

- Review Goings-On Since Our Last Session
- Review the Latest Processing
- Complete Findings (as needed)
- Brainstorm Root Causes and General Remedies
- Determine Next Steps

2. Since Our Last Session

- Ground Rules
 - Are they being honored?
- Debrief with Sponsor Group
 - Keeping that Linkage Strong
- Monitoring Quick Wins
- Communication with and Involving Staff
- Other Goings-On?

3. The Latest Processing

- Completing Topics and Findings

4. Complete Findings (as needed)

- Gaps by Topic

5. Brainstorm Root Causes and General Remedies

- Priority Needs
- Root Causes
- General Remedies

6. Wrap-Up and Next Steps

- Progress Versus Expectations
- Communicating with and Involving Staff
- Additional Quick Wins?!
- Next Steps and Follow-Through

Session Four/Day Two

1. Introductions and Objectives

- Review Goings-On Since Our Last Session
- Review the Latest Processing
- Complete Root Causes and General Remedies (as needed)
- Begin Work On Recommendations and Team Activities
- Determine Next Steps

2. Since Our Last Session

- Monitoring Ground Rules and Feelings
 - Have Your Feelings Changed Over Time?
- Monitoring Quick Wins
 - Progress, Impact and Lessons Learned
- Communication with and Involving Staff
- Other Goings-On?

3. The Latest Processing

- Full Set of Findings
- Completing Root Causes and Remedies

4. Complete Root Causes and Remedies (as needed)

5. Analyses and Recommendations

- Data and Perspectives Needed
- Audiences and Key Messages
- Alternatives, Pros and Cons

6. Team Activities

- Related Models and Tools
- Brainstorming and Design
- Plans and Commitments to Use

7. Next Steps and Wrap-Up

- Further Communication and Quick Wins
- Additional Plans and Commitments Made
- Next Steps and Follow Through

Sample Agenda

Supervisory Development: Sessions 5 and 6

Session Five/Day One

1. Introductions and Objectives

- Review Goings-On Since Our Last Session
- Review the Latest “Processing”
- Continue Team Activities
- Begin Mid- and Long-Term Planning
- Determine Next Steps

2. Since Our Last Session

- Check On Feelings and Ground Rules
- Communication with and Involving Staff
- Debrief with Sponsor Group and the Related Linkage
- Advancing Analyses and Recommendations
- Monitoring Quick Wins and Other Remedies

3. The Latest Processing (and “Catch Up” Work)

- Specific to Each CI Team

4. Continue Team Activities

- Related Models and Tools
- Brainstorming and Design Work
- Decisions, Plans and Commitments to Use

5. Mid- and Longer-Term Planning

- Establish Plan Phases and Timeframes (as needed)
- Overcoming Obstacles and Sustaining the Effort
- Ongoing Monitoring and Related Measures

6. Wrap-Up and Next Steps

- Communicating with and Involving Staff
- Next Steps and Follow-Through
- After Action Review

Session Six/Day Two

1. Introductions and Objectives

- Review Goings-On Since Our Last Session
- Review the Latest “Processing”
- Complete Team Activities
- Complete Mid- and Long-Term Planning
- Determine Next Steps

2. Since Our Last Session

- Communication with and Involving Staff
- Monitoring Quick Wins and Other Remedies

3. The Latest Processing

- Specific to Each CI Team

4. Team Activities (if needed)

- Related Models and Tools
- Brainstorming and Design Work
- Decisions, Plans and Commitments to Use

5. Mid- and Longer-Term Planning (as needed)

- Phases and Timeframes
- Overcoming Obstacles and Sustaining the Effort
- Ongoing Monitoring and Related Measures

6. Next Steps and Wrap-Up

- Further Communication and Involvement of Staff
- Preparing for A Final Sponsor Group Debrief
- Wrapping Up Our Time Together
 - Turning the Flywheel On Your Own
 - The Good Doctor Principle

Sample Agenda

Supervisory Development: Initial Sponsor Group Debrief

1. Introduction and Objectives

- Review Overall Progress of CI Teams
- Review Progress of Internal Facilitators
- Consider General or Patterned Observations
- Determine Next Steps as Needed

2. Overall Progress

- Understanding the DAPIM™ Model and Approach
- Sharing Initial Feelings
- Effective Ground Rules
- Topics for Continuous Improvement
 - Alignment with Agency Priorities
- Assessing Strengths and Needs
- Establishing Quick Wins
- Communicating with and Involving Staff

3. Internal Facilitators

- Shifting from Classical to Jazz Techniques
- Handling Common Challenges
- Facilitator and Observer Perspectives

4. General or Patterned Observations

- Role and Impact of Observers
- Participant Readiness and Buy-In
- Immediate Impact of the Project on Performance
- Long-Term Sustainability Factors

5. Wrap-Up and Next Steps

- Progress Versus Expectations

- Scheduling To-Dos
- Next Steps and Follow-Through
 - Broader Communication and Staff Involvement
 - Our Next Debrief

Sample Agenda

Supervisory Development: Second Sponsor Group Debrief

1. Introduction and Objectives

- Review Overall CI Team Progress
- Review Progress of Internal Facilitators
- Consider Sustainability Factors
- Determine Next Steps

2. Overall Progress (Use a Summary Matrix)

- Honoring Ground Rules
- Defining Topics
- Assessing Strengths and Gaps
- Establishing and Monitoring Quick Wins
- Identifying Root Causes and General Remedies
- Analyses and Recommendations
- Team Activities
- Two-Way Communication with Staff
- Impact on Office Results
- Lessons Learned

3. Internal Facilitators

- Facilitator Effectiveness Markers
- Facilitator Perspectives
- Observer Perspectives

4. Sustainability

- Sustainability Factors
- Strengths and Gaps
- Root Causes and Remedies
- Activities Needed to Improve Sustainability

5. Wrap-Up and Next Steps

- Progress Versus Expectations
- Handbook for Facilitators
- Next Steps and Follow-Through

Work Product Samples

Supervisory Development: Work Product Examples

Alignment Notes- Agency Direction and Envisioning Success

Agency “Direction”

- Focus on outcomes for those we serve.
- Greater client self-sufficiency and responsibility.
- Increased food stamp participation, decreased TANF participation.
- Listening more to the clients and communicating with them better.
- Customer service *through* timely and accurate services. Friendly, personalized service as well.
- Identifying food stamp expedites accurately and timely. Implement new food stamp expedite process, addressing staff and client frustrations stemming from shortened timeframe.
- Service integration and systems of care. Improving inter-agency communication on behalf of clients (e.g., CPS, Child Care, etc.)
- On the same page and doing the best we can in the local offices. Improving upon a general lack of understanding about what goes on in the local offices.
- Up-to-date, user friendly technology. Equipment and facilities standardization and modernization.
- Expanding our level of “experimentation” and fearing it less.
- Realistic goal-setting in line with current capacity to perform.
- Renewed focus on professionalism.
- Hiring better, more prepared new staff.
- Smarter, better and faster methods for employee training and development.
- Retention *through* staff satisfaction, leading to quality staff.
- Shift out of a “crisis management” mode. E.g., from crisis and firefighting on email to a mode of working together to thoughtfully solve problems.
- Shift from a cookie-cutter and low accountability approach to a greater independence and accountability one.
- Shifting away from a “we-they” to a “we” mentality. Addressing the chasms between front-line staff, supervisors and mid-management.
- Letting those who perform the jobs figure out how to do things better. Addressing the “squeaky wheel” approach to prioritization and putting in fixes.
- Empowerment through better communication; making it safe to express different opinions.
- Increased staff recognition through “Pride on the Spots” and stronger reward systems. Investing in staff “up front versus later.”
- Improved local office backing from Central Office on discipline cases. Improving how we address “falling stars and rising stars.”
- Central office being more open and willing to listen to staff.

Envisioning Success

- Offices and districts collaborating across these lines.
- Better communication with outside agencies; better tools for doing this.
- A stronger bond, both ways, between tiers of the agency.
- A high level of trust both up and down the organization, and with our clients.
- Eliminating the we-they us-them gaps and working as a team.
- Proactive help being offered by everyone.
- Case worker and case reader teamwork, with everyone coming together as one.
- People enjoying their work.
- To leave at 5 and feel like I accomplished something and tied up my loose ends. To also feel like someone “from above” me recognizes this.
- Less stress; staff not complaining that they’re having nightmares about their job.
- Management team having a higher confidence level about what they do.
- Being able to get through the day without arguing.
- Trust and safety- staff not feeling like they’ll be retaliated against if they have ideas and suggestions.
- Clients are responsible and accountable also.
- Increasing customer service and decreasing customer service issues.
- Better educated staff and clients who better understand the process of what we do.
- A better process and understanding regarding food stamp expedites.
- Getting from Point A to Point B effectively.
- With our success comes greater compensation increases.
- Additional positions, resulting in a 150 caseload per worker.
- Increased employee satisfaction and staff retention (a two-way reinforcement).
- Performance discussions are not scary anymore.
- Working smarter, not harder.
- Staff are self-sufficient and knowledgeable about what they are doing.
- Dependable staff, showing initiative.
- Staff working independently and confidently; self-sufficient.
- Staff can lead a meeting and take more of a leadership role.
- Staff at all levels are aware that they can make decisions.
- Shattering clichés about the staff (e.g., “typical government employees”).
- The office can run without me.
- Other states coming here to see and look at what we do.

Supervisory Development: Work Product Examples

Initial Feelings about the Project

Positive Feelings - Excited and Hopeful

- This could really help us improve things.
- The “double benefit” of this project is we’ll develop our supervision skills, both as individuals and collectively.
- This is basic training for supervision beyond the casework-related technical training we already have and know well.
- This is an opportunity to honestly examine our strengths and needs, individually and collectively.
- If we are successful in making improvements, we will spend more of our time actually supervising vs. troubleshooting cases.
- If we are successful in making improvements, we will better understand the proper sizing and matching of resources to the demands and needs, especially new hires and low performers.
- This is an opportunity to build upon our mutual respect for each other by improving some ways we work on tasks.

Worries and Apprehensions

- Projects in our agency often begin with energy but follow-through does not occur. We’ll put a plan in place but then we will not implement it (often due to staff capacity limits). Then it “all halts.”
- Do we need more focus and discipline in the way we work together?
- Maybe there is just no way forward...maybe we just don’t have the capacity and time to supervise...maybe we’re making “necessary choices.”
- If we need help and support from upper management, will they really help and support us?
- When we are doing our best, will it be recognized?
- Will reactions from higher up be more punitive than positive, either intended or unintended? This may be a norm in our agency that will not change.

Positive feelings and reservations seem balanced, which is prudent.

Let’s check in about our feelings during the project and compare them to these initial ones.

Supervisory Development: Work Plan Examples

Ground Rules for Our Meetings

- Raise hands before we speak. Avoid talking over one another.
- Everyone participates and makes at least one contribution to each exercise.
- Observers may contribute at their discretion, using their best judgment.
- What goes on here stays here...the "Vegas Rule."
- The team will decide together what to communicate and share outside the room.
- Confidentiality is not protected when a law or regulation is being violated. This is the responsibility of the most senior person in the room to determine.
- When making decisions, the team will decide whether to use a consensus or a democratic process. Once a decision is made, the team will present a united front to the staff.
- We commit to "staying on track"- remaining focused on the topics we elect and then completing them.
- The facilitator will check in with the group if an exercise is taking a relatively long time to accomplish, or if the discussion seems to be going "off track."
- The facilitator and observers may use good judgment in communicating general information and observations outside the room, with the aim of helping the local office out.
- The team may ask the facilitator and observers what they are sharing outside the room.
- Everyone will be on time for starting, ending, and breaks.
- Turn cell phones off or put on vibrate.

Let's honor these ground rules, monitor how we're doing from time to time, and speak frankly about it if they are ever violated.

Supervisory Development: Work Product Examples

Topics for Continuous Improvement

Timeliness and Accuracy

- Local office performance and measures
- Related staff and supervisory development
- Crisis management and its impact

Managing Workload and Capacity

- The level of stress and tension
- Empowering the staff vs. “doing for” or micromanaging them
- Process efficiencies
- Having and being “on plan”
- Knowing how to appropriately “size” the work vs. the available capacity

Assigning Work and Following Through

- Related boundaries, expectations and disciplined behavior
- Ownership and sense of personal accountability
- Monitoring activities and norms
- Instilling a sense of accountability with confidence vs. motivating through fear

Office Morale

- Putting staff where they do “the least harm”; focusing on strengths
- Absenteeism and its impact
- Staff retention, what it tells us (e.g., office reputation), and its impact
- Handling matters negatively or positively with staff
- Team’s sense of confidence and support from above

**PPT: DAPIM™ Work Product Examples
Topics and Findings**

Supervisory Development: Work Product Examples

Root Causes and General Remedies

Timeliness and Accuracy

1. There are no mechanisms in place to know staff whereabouts
2. Supervisors do not set and reinforce consistent expectations here

Remedies:

- a. A team activity to create a written set of guidelines for breaks and reporting one's whereabouts, which allows for appropriate supervisory discretion and encourages positive conduct
 - b. A related plan to involve EIs and OSTs in the guideline development process and to initially roll out the guidelines for staff feedback
3. Supervisors are not fully in the habit of providing positive feedback

Remedies:

- a. A plan to increase and track positive staff recognition and "Pride On the Spot" awards, encouraging staff to participate, and to convey progress in positive recognition to all staff
4. There are no routine, structured communication mechanisms from middle management

Remedies:

- a. A commitment by our facilitator to alert the sponsor group to this as a general pattern
5. The management team has difficulty with "crucial conversations"- when the stakes are high, emotions are intense, and disagreements are significant

Remedies:

- a. A team activity to build awareness and skill here, including the *Crucial Conversations* self-test and the *DISC* leadership styles test (an example of training activities fitting into a broader range of remedies)

The team activity “mini DAPIM™” included a root cause analysis and set of remedies for rolling out major changes to policies, etc. (e.g., electronic benefits transfer card changes)

Office Morale

6. There is a limited staff awareness, locally and perhaps state-wide, of the challenges involved with the Scanner position

Remedies:

- a. A plan to assemble and review with staff a “marketing packet” about the Scanner role

7. Taking time off is seen by many staff as an entitlement. This view may be reinforced by agency policy

Remedies:

- a. A commitment by all supervisors that they convey to staff who are demonstrating this that the supervisor “sees” their behavior. This may be accomplished through charting unit results, generating peer influence, and direct conversations with these staff
- b. A plan to chart overall office absenteeism and present this data to staff, with an analysis of absenteeism’s negative impact, and with a request for staff’s input to solve the problem. A related plan to create a board for tracking absenteeism and its impact (absorbs, standbys, etc.) by unit
- c. A plan to establish a staff team to review and recommend ways to reduce unscheduled absence. Included in the scope of review, amongst other ideas, will be:
 - Alternative work schedules
 - Cases interviewed if someone’s unscheduled absence are returned
- d. A plan to get a policy clarification on managing time off

Managing Workload and Capacity

8. Supervisors struggle to “find the time” for building staff capacity

Remedies:

- a. Allow this to improve naturally based on improvements being made in other areas
9. Staff often choose to work deadline versus in advance, leading to a higher volume of calls and complaints. Supervisors may be “punishing working ahead and rewarding working deadline.”

Remedies:

- a. A commitment by supervisors to use monthly individual staff performance reviews, statistical performance and trend reports, and other supervision methods to help staff shift from “Stage I” to “Stage IV” performance over time (see APHSA time management model)

Assigning Work and Following Through

10. Electronic client interview documentation is often performed sporadically and incorrectly, and not at the time of the interview itself

Remedies:

- a. A plan to offer “key as you go” training for all units
- b. A plan to hold follow-up unit meetings
- c. A commitment by supervisors to follow up in their daily floor time agenda

Supervisory Development: Work Product Examples

Quick Wins (monitoring-in-progress; names have been changed)

For Ongoing Monitoring

1. Individual Quick Win focus areas:
 - a. Linda - improving workload management by reviewing applications and reports, then decreasing untimely scheduling. Also applying DAPIM™ to personal and unit improvement planning. Also being more proactive in personal communication.
 - b. Hector - created a timeliness results board. Office met timeliness goals for the 1st time in 8 months. Strengthening *cases due* accountability.
 - c. Susan - taking on and improving CSUs; the opposite of unconscious demotion (which was her primary gap).
 - d. Tanya - managed 1st monthly Community Day, attended by 227 clients, connecting them to other community services (an agency-wide strategy).
 - e. Bill - improving his communication and relationship behaviors. Also focusing on monitoring activities.
 - f. Chris - working on being less shy and quiet.
 - g. Louisa (senior manager) - her last visit was welcoming, supportive and constructive.

2. September 11th Community Day, followed up by another!
 - a. Improved office morale and office reputation
 - b. Improved partnerships with other organizations

3. Supervisors commit to inform each other when noticing positive or ineffective performance or behavior by one another's staff (Ongoing)

4. Supervisors commit to analyzing call backlogs and related information for each of their staff, and then engage staff with problems here to improve, including "planting" to-do messages (needs more effective monitoring)

5. Supervisors commit to conducting targeted exit interviews for staff having greater difficulty with case efficiency and quality (Ongoing)

6. Local office manager and supervisors commit to making delegation a more often used method for handling competing priorities (Ongoing)
7. Management team meeting standing agenda items for monitoring (Ongoing):
 - a. Staff recognition
 - b. Unconscious demotion

Monitoring No Longer Needed

1. Standby Scheduling- eliminating interviews after 5pm (Complete)
2. Entire team “filing two boxes” along with staff, week of 9/16 (Complete)
3. Supervisors commit to “going private” when frustrated and prone to acting out from it, and commit to reminding each other of this as needed (Complete)
4. Bill will pass out an article on managing office gossip (Complete)

Supervisory Development: Work Product Examples

Team Activity, Guideline for Taking Breaks

Purposes: Customer Service, Stress Management, Productivity, Professionalism, Accountability

To Be Followed: Whenever staff is breaking from work activities, whether at one's work station or away from it

Steps: Staff will use an honor system to decide upon and monitor their own breaks unless their supervisor decides to proscribe limits and/or monitor them on an individual basis

Factors for Supervisors to Consider:

- Not keeping a client waiting
- Being on time each day
- Unusual stress levels
- Work productivity, using the 4-stage model
- Personal use of PC; "breaks on the job"
- Abuse of break time boundaries

Boundaries:

- The upper limit of total break time 15 minutes in the morning and 15 minutes in the afternoon
- Lunch breaks are up to one hour or 30 minutes, depending on the policy that applies.
- Minimum time for a lunch break is 30 minutes under any circumstances.
- No breaks will be taken at the end of the work day

Supervisory Development: Work Product Examples

A Mini-DAPIM™ from Crucial Conversations

Finding

Staff are not typically “buying in” when we roll out big changes (e.g., EBT Cards)

Root Causes

1. The agency does not view these situations as “crucial conversations”
2. We don’t do a good enough job having that conversation with staff:
 - Not naming the purpose of a change for which staff can sign up
 - “Jamming it” versus “selling it,” thereby making staff feel unsafe
 - No talking points or key messages being established beforehand
 - We are often told not to share what is really behind a change

Remedies:

- a. Use a structured method and talking points for announcing big changes, including:
 - The Mutual Purpose
 - The Honest Back Story
 - The Future Story (aspirational)
 - A Two-Way Discussion:
 - Why you are safe
 - Let’s share our stories
 - Options for continuing this discussion
- b. Recommend to senior management that we share as much as we possibly can about what is really behind a given change

Let’s also “buddy up” in crucial conversation areas where one or more of us find them to be either a strength or a need:

- Office Meetings
- “Problem workers”

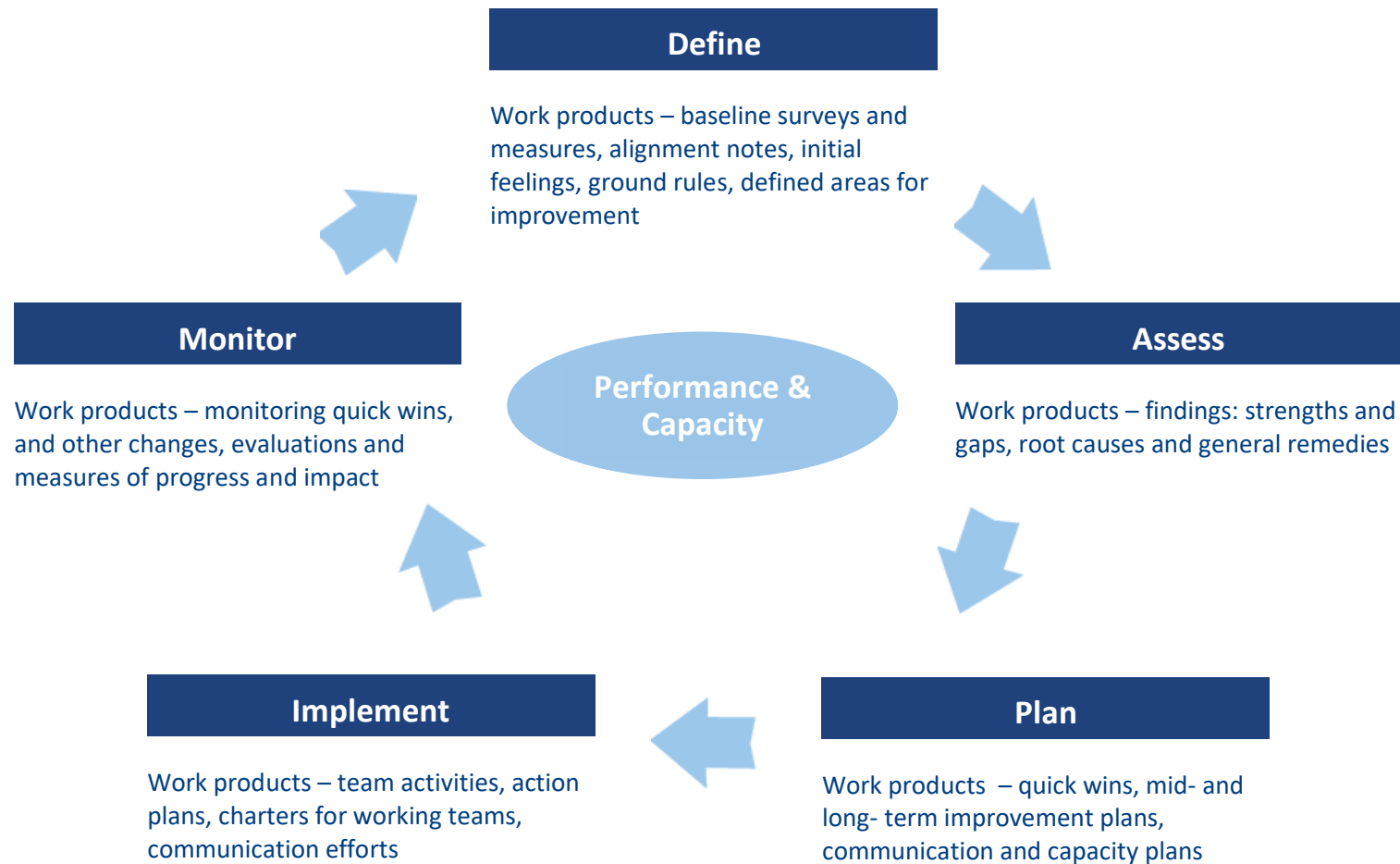
Supervisory Development: Work Product Examples

Longer-term Planning, Potential Obstacles

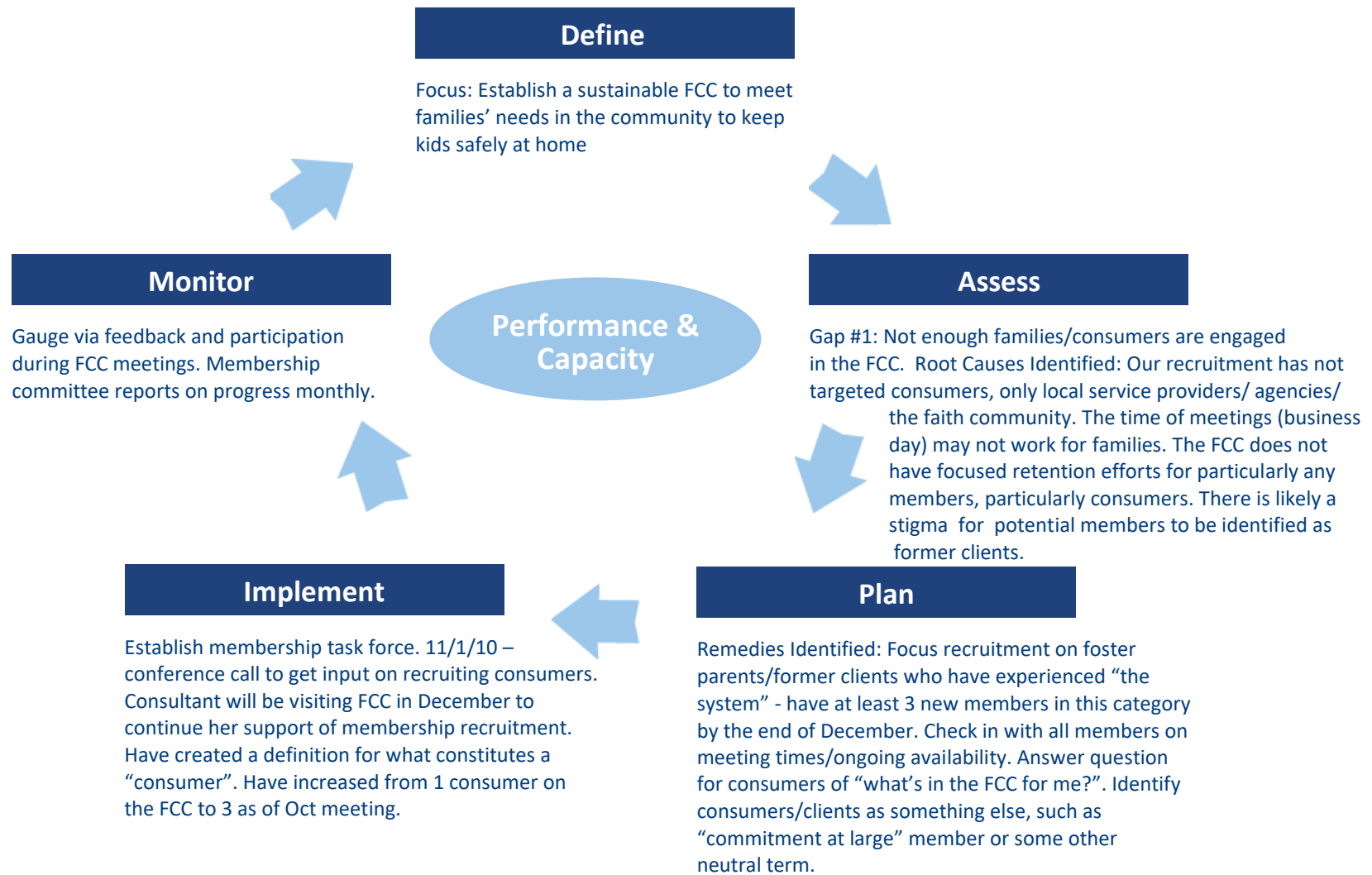
Potential Obstacles to our Progress

Potential Obstacle	How We'll Handle It
“December Phenomenon”- workload, time off and unscheduled leave spikes (Likely)	<ul style="list-style-type: none"> • Our plans emphasize “business as usual” activities vs. big projects • Our plans focus on improved staff efficiency vs. extra work
High turnover and absenteeism (Current)	<ul style="list-style-type: none"> • Our plans focus on improving this very characteristic of our office
“Hit a Wall”- lack of energy and motivation	<ul style="list-style-type: none"> • Our plans include a number of positive recognition efforts • Community Day results in a greater sense of serving a cause
Higher general workload per FTE; higher related monitoring work for the management team (Will Happen)	<ul style="list-style-type: none"> • Our time management plans will directly address this obstacle • Our plans are already realistic as far as requiring extra time and effort
Staff morale low/staff resistance high	<ul style="list-style-type: none"> • Our positive recognition initiatives • Our two-way communication efforts • Community Day
Lack of follow through from mid-management on their continuous improvement efforts	<ul style="list-style-type: none"> • Our own follow through inspires mid-management- the “ripple effect” • Request two-way communication through progress updates
Changes to our own management team’s make-up (Will Happen- adding two new members)	<ul style="list-style-type: none"> • Use our continuous improvement plans to bring new members of our team on board and into alignment
Failure to support each other and back each other up	<ul style="list-style-type: none"> • Use and monitor our ground rules to give one another feedback and stay on the same page

DAPIM™ Process Work Products Flywheel



DAPIM™ Process Work Products: Example: Charting a CI Team’s Work Visually



DAPIM™ Process Work Products Guide

This guide is designed to assist a facilitator in developing an understanding of the types of work products that should result from each phase of the DAPIM™ process as well as the types of things the facilitator should be thinking about to ensure a quality product. The facilitator can use this guide for an at-a-glance review to ensure that appropriate task and team activities have been facilitated and the necessary products developed prior to moving to the next phase of a continuous improvement effort using the DAPIM™ approach.

The DAPIM™ model, when applied in a learning by doing format, provides a framework for systematically improving or innovating something within the organization. DAPIM™ is the following step-by-step approach:

Step One: Define priority improvements in operational terms.

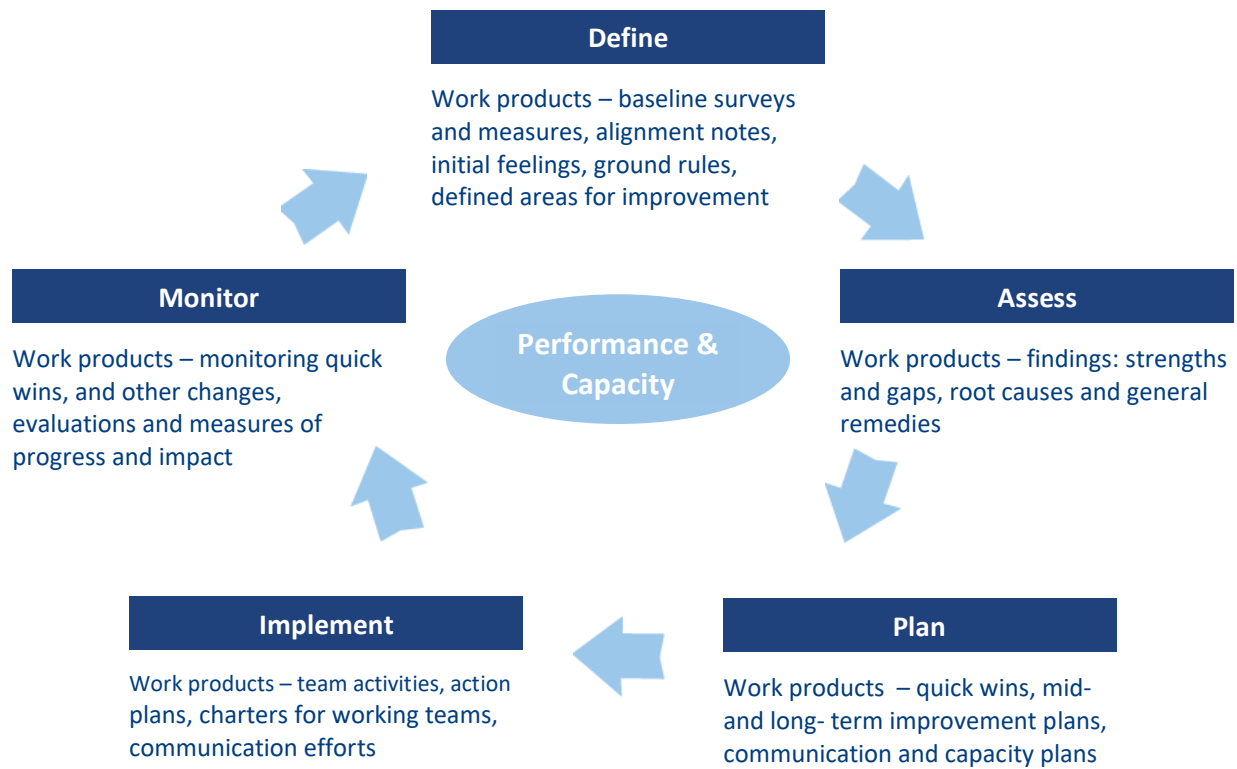
Step Two: Assess observable, measurable strengths and gaps. Identify root causes and general remedies for priority gaps.

Step Three: Plan quick wins, mid-term, and longer-term improvements.

Step Four: Implement action plans while managing communication and capacity.

Step Five: Monitor progress, impact, and lessons learned impact for accountability and on-going adjustments.

At each phase of a DAPIM™ process, the facilitator should ensure that work products and related team-building experiences that prepare participants to move on to the next phase are completed. The following illustrates the work products to be completed; beginning on the next page are reflective thinking questions the facilitator should consider when developing the products.



Step One: Defining what you seek to improve in operational terms means facilitating discussion that identifies in specific, behavioral terms a meaningful real life issue that the participants are interesting in improving.

Specific work products that the team should complete include:

- Baseline surveys and measures
- Alignment notes
- Initial thoughts and feelings
- Ground rules
- Defined areas for improvement

To assist the team, the facilitator should consider the following:

- Have participants been introduced to learning by doing principles, the DAPIM™ flywheel and the purpose of continuous improvement?
- Have participants reviewed and discussed data about the organization currently available to them as it applies to the selected area for improvement? (e.g., turnover rates for retention issues or annual reports for casework specific concerns)

- Have initial thoughts and feelings of participants been explored with regard to the continuous improvement effort in general and the selected area for improvement?
- Has the readiness of participants been assessed to determine the kind of pace and scope of the overall continuous improvement process the group is ready for?
- Have ground rules been established for how participants will participate in the DAPIM™ continuous improvement process?
- Have participants clearly articulated in behavioral terms what it is they want to improve?
- Have all the step one work products (operations definition of the area to be improved, thoughts and feelings, ground rules) been recorded and reviewed by participants for accuracy and agreement?

Step Two: Assessing the current and desired state or situation requires the facilitator to engage participants in a reflective thinking process and facilitated dialogue around the current strengths and gaps the participants have as a team and as an organization in reaching their desired state. It then requires the facilitator to help participants build a bridge to planning by prioritizing identified gaps and identifying root causes and remedies for the highest priority gaps.

Specific work products that the facilitator should walk away with include:

- Findings: identified and prioritized strengths and gaps
- Initial quick wins
- Root causes and general remedies

To help the team identify findings and quick wins, the facilitator should consider the following:

- Have participants developed and/or been introduced to markers of effectiveness that will allow them to reflect on the issue at hand? (e.g., markers of effective meeting management, leadership or follow through)
- Have participants been introduced to models or tools that allow them to reflect on the issue at hand? (e.g., trust model, decision making model, or time management matrix)
- Have participants utilized reflective thinking guides that will allow them to reflect on the issue at hand? (such as the PPCWG Reflective Thinking Guides)
- Have all participants openly shared what they see as the strengths and gaps in themselves, team members, and the organization?
- Have the participants reflected in immediate improvements they can make with minimal investments of time and energy (quick wins)?
- Have the quick wins, strengths and gaps been recorded and reviewed by participants for accuracy and agreement?

To help the team build a bridge to planning by prioritizing gaps and identifying root causes and remedies for the highest priority gaps, the facilitator should consider the following:

- Have participants identified the highest priority gaps to target for root cause and remedy analysis?
- Have participants been introduced to root cause and remedy analysis utilizing the Root Causes and Remedies slides?
- Have participants identified a range of root causes? Did they drill down deep enough? Are they balanced between structural and relational root causes?
- Have participants been introduced to the three types of general remedies?
- Have participants identified concrete remedies for their identified root causes? Are the remedies recommendations, decisions and commitments, and/or team activities?
- Have the priority gaps, root causes, and general remedies been recorded and reviewed by participants for accuracy and agreement?

Step Three: Planning for both rapid and longer-term improvements requires the facilitator to engage participants in the development of commitments and plans that result in the desired improvements.

Specific work products that the facilitator should walk away with include:

- Additional quick wins
- Mid-term improvement plans
- Longer-term improvement plans
- Communication plans
- Capacity plans

To assist participants, the facilitator should consider the following when helping them make commitments and develop plans:

- Have participants been introduced to the types of improvement: quick wins, mid-term, and long-term?
- Have participants been introduced to the elements to consider with planning for improvement using the continuous improvement planning template?
- Have participants agreed on changes to implement (quick wins, mid-term, and longer-term)?
- Have participants thought through how improvement efforts will be communicated?
- Have participants been introduced to the elements to consider when planning communication using the communication template?
- Have communication plans been developed and implemented for all staff, clients, and other stakeholders impacted by the improvement work?
- Have participants thought through how improvement efforts will impact staff capacity?

- Have participants been introduced to the elements to consider when managing capacity using the capacity management guide?
- Have work capacity plans been developed and implemented for all staff impacted by the improvement work?
- Has the continuous improvement, communication, and capacity plans been recorded and reviewed by participants for accuracy and agreement?

Step Four: Implementing improvement plans in detail require the facilitator to guide participants in the development of action plans and charters as well as engage them in team activities to support effective implementation of quick wins and plans.

Specific work products that the facilitator should walk away with include:

- Action plans and charters
- Communication efforts
- Team activities (if applicable)

To assist participants, the facilitator should consider the following:

- Have participants been introduced to the action planning/tracking quick wins tool and chartering template to assist them in implementing the improvement effort?
- Have participants developed action plans for work that needs to be completed and charters for work teams (if applicable)?
- Have action plans and team charters (if applicable) been put into writing and reviewed by participants for accuracy and agreement?
- Have communication and capacity plans from the planning phase been implemented?
- Have participants been introduced to the data collecting template to define measures of success and how they will be assessed?
- Have action plans, charters, and measures of success been recorded and reviewed by participants for accuracy and agreement?

Step Five: Monitoring plan progress and impact for accountability and on-going adjustments helps participants determine the impact of the improvement effort and apply lessons from the effort for ongoing adjustment and further continuous improvement. During this phase, the facilitator should be guiding the team through monitoring activities that allow for evaluation and measurement of progress, impact, and lessons learned. Re-adjustments of actions and plans can be developed as needed.

Specific work products that the facilitator should walk away with include:

- Monitoring of initial thoughts and feelings, ground rules, quick wins, and other changes
- Evaluation and measures of progress and impact

- Adjusted plans and lessons learned for further continuous improvement

To assist participants, the facilitator should consider the following:

- Have techniques for monitoring and evaluating team dynamics and their improvement efforts been introduced to the participants?
- Is the team monitoring plan progress, impact, and lessons learned, both with the facilitator and on their own?
- Has data been collected based on the measures of success?
- What does the data indicate, and have adjustments been made to actions and plans if needed?
- Have the adjustments to actions and plans been recorded and reviewed by participants for accuracy and agreement?
- Have successes been celebrated and shared internally and externally?
- Have successes been recorded and reviewed by participants for accuracy and agreement?

DAPIM™ Chart for the OE Seminar: Revised from Participant Input

DAPIM™ Stage or Aspect	Do’s and Don’ts or Non-Negotiable Things	Work Product Items and Examples	Facilitation Skills, Tips and Insights (add your own)
Sponsorship and Structure	<p>Always have a sponsor group or equivalent charging and providing oversight to the CI team.</p> <p>Roster formation should be broad and inclusive, based on needed expertise and buy-in.</p> <p>Scoping or defining work should always include a line of sight to ultimately improving outcomes.</p> <p>Always have a project manager or equivalent on the CI team roster.</p> <p>Sponsor groups can exist at multiple levels of the agency (e.g., a CI team can also be a sponsor group for work teams).</p>	<p>Charters or Scoping Documents (was “alignment notes”)</p> <p>CI team work products should be reviewed with sponsors on an ongoing basis.</p>	<p>“Sell” up front that communication, capacity management, and monitoring need to be made operational within the scope of CI planning, including forming work teams.</p> <p>Clarify with sponsors that empowerment requires setting clear expectations and boundaries, within which staff exercises discretion, versus providing too little direction.</p> <p>Get to know the language of sponsors and CI team members early in the process/through initial contracting, including calling DAPIM something else if necessary.</p> <p>Make connections to what the sponsors care most about- facilitating a discussion versus making a presentation.</p> <p>Negotiate clearly and with conviction what can be accomplished, how quickly, and with what time commitments. Emphasize the need to “slow down to speed up” in order to be reflective and solve problems.</p>

<p>Define</p>	<p>Defining work products must be comprised of observable or measurable elements.</p> <p>Still using the “inside-out” technique but reflecting on boundaries here.</p>	<p>Desired Future State Markers</p> <p>Problem Statement</p> <p>Topics Operationally Defined</p>	<p>Clients often confuse outputs with outcomes.</p> <p>Use Initial Feelings and Ground Rules selectively to improve relationships and build initial trust and safety.</p> <p>Use TAs or OE models as needed (e.g., Pyramid).</p>
<p>DAPIM™ Stage or Aspect</p>	<p>Do’s and Don’ts or Non-Negotiable Things</p>	<p>Work Product Items and Examples</p>	<p>Facilitation Skills, Tips and Insights (add your own)</p>
<p>Strengths and Gaps</p>	<p>Findings must be observable or measurable, with limited adjectives used, non-prescriptive, and with separate findings for each main point.</p>	<p>Findings</p> <p>“Current Inventory” Mapping Chart</p>	<p>Proactively probe for “culture”-related findings here, in root cause work, and in barriers to plan implementation.</p> <p>Emphasize that being strengths-based requires neither admiring nor ignoring gaps.</p>
<p>Root Causes and General Remedies</p>	<p>Do not let CI teams jump to remedies without going through root cause analysis, unless you guide them back to root causes after they initially consider some promising remedies.</p> <p>Each general remedy should “tie back” to the desired state points.</p>	<p>Root Causes and General Remedies</p>	<p>Identify root causes and general remedies together, and stop at an actionable remedy. A given remedy often addresses multiple root causes for multiple gaps.</p> <p>Explore root causes for strengths as well as gaps.</p> <p>Sharing remedies from other agencies can be helpful, but be careful that this does not become “giving the answer.”</p>
<p>Plan</p>	<p>Emphasize substance over form in use of templates.</p>	<p>CI Plans or a version, including capacity and monitoring and data</p>	<p>Communication, capacity and monitoring planning at this point will reinforce plans being realistic and sustained. Related, agencies often do not need to</p>

	<p>Emphasize driving principles over exact duplication in applying evidence-based practices.</p> <p>The most important thing is that teams feel that plans are “theirs”, not the OE facilitator’s.</p>	<p>plans or both as CI plan elements.</p> <p>Communication Plans, including how the agency will back up key messages and make a business case.</p>	<p>add communication and capacity, but rather redirect and leverage it.</p> <p>It can be ok to have an initial plan made up of quick wins to build buy-in, just be careful that this does not become the entire plan.</p>
Implement	<p>Always guide the CI team and others to make public commitments.</p>	<p>Action Plans: who, what, by when, status.</p> <p>Quick win and Remedies charts (use the same template).</p>	<p>Mini-DAPIMs and additional Team Activities should be anticipated.</p> <p>Having participants complete and revise templates strengthens ownership and accountability for implementation. Having participants “talk to each other” instead of directly to you does this as well.</p>
DAPIM™ Stage or Aspect	Do’s and Don’ts or Non-Negotiable Things	Work Product Items and Examples	Facilitation Skills, Tips and Insights (add your own)
Monitor	<p>Clients may have a bias towards priority output and outcome measures only. Help them avoid this, as they can improve the thing they measure at the expense of other critical things.</p> <p>Reinforce that the learning by doing principle isn’t sustained without effective monitoring.</p>	<p>A monitoring plan with all three monitoring types included.</p> <p>A logic model or dashboard that connects outcomes, client experience, agency performance, and agency capacity indicators.</p>	<p>Use Quick Wins to initially embed a monitoring discipline and to build buy-in for monitoring. If follow through is not occurring here, stop the DAPIM process and address readiness or conduct a “mini DAPIM” on following through.</p> <p>Effective data sources and uses can be a topic on the first or subsequent flywheel turns.</p> <p>Monitoring is what continues the flywheel turning, and to more and more systemic and outcomes-oriented priorities. Do whatever you can to emphasize the need for improvement priorities to be focused on strategy and client outcomes over time.</p>

Team Activities			Self-reflect on what the benefit of a TA or related model might be after each facilitation day (as well as in real time).
General/Overall	<p>Don't proscribe your "work product content" on your clients' input. This can be tempting as you may feel strongly that you "know the answers."</p> <p>All OE facilitators must be comfortable with flip charting and processing group input into work products (acknowledging that some OE teams work from a co-facilitator model).</p>		<p>Each step's work products should position you solidly for the next step. "Call time out" when you need to reflect on what is happening and change direction.</p> <p>Adjusting the agenda and introducing team activities are high points of DAPIM that can lead to breakthroughs.</p> <p>Thinking of facilitation as "about them, not me" helps reduce anxiety, increase listening, build trust and relationships, and improve ability to engage on "hot topics."</p> <p>Be transparent about the decisions you're making and why, at the same time facilitating OE and DAPIM, and reinforcing how others can do it for themselves. Pointing out how OE and casework are parallel processes also helps here.</p>



ORGANIZATIONAL | EFFECTIVENESS

Chapter Four: Continuously Improving from the Inside Out



ORGANIZATIONAL | EFFECTIVENESS

Building Your Facilitation Tool Kit

Organizational Effectiveness (OE) is a systemic and systematic approach to continuously improving an organization's performance, performance capacity and client outcomes. DAPIM™ is APHSA's approach to systematic continuous improvement. Through its practice, APHSA has developed the philosophy that meaningful improvements come from facilitating real work teams in troubleshooting their real world challenges. This philosophy is core to the success of the DAPIM™ approach, and as a result no two OE facilitations are ever the same.

To be successful, an OE facilitator needs a tool kit of topic-specific materials that help OE participants troubleshoot a range of real world challenges they identify as they move through the continuous improvement process together. These materials may include team activities, templates, tools, and resources that can be used as needed. Developing such a tool kit is an ongoing process.

This chapter of the handbook is designed to get an OE facilitator started in building his or her toolkit. It can help a facilitator guide an organization through continuous improvement activities that are focused on specific topics of high priority. The areas covered by the materials included are those encountered most frequently by APHSA's OE team when working with state and local human services agencies at various stages of the DAPIM™ process such as when they reflect on their own team dynamics, define topics for improvement, and identify root causes and remedies for priority gaps, barriers to implementation, and reasons why implemented improvements are not having the impact that was expected.

As presented in chapter two of this handbook, areas for improvement as well as root causes and general remedies can be task or relationship oriented. High performing organizations strike a balance between task and relationship orientation. Organizations that focus too much on tasks can be viewed as autocratic and unfeeling about things like staff motivation and work-life balance. Organizations that focus too much on relationships can be viewed as overly permissive, unreliable in follow-through, and generally laissez faire. Organizations that find a balance between task and relationship are often consultative and/or participative in the way they get things done, with an emphasis on getting things done in sustainable ways.

The following are examples of more task oriented root causes and general remedies:

- Organizational Structure:
 - Tiers and Functions,
 - Roles and Numbers;
- Goals, Standards and Measures;
- Policies and Procedures;
- Processes and Methods;
- Internal Programs, Services, and Tools; and,
- Staff Capacity:
 - Time Management,
 - Skill Set (technical/general).

The following are examples of more relationship oriented root causes and general remedies:

- Culture and Values;
- Politics and Power;
- Communication;
- Decision-Making;
- Teamwork and Collaboration;
- Community Partnerships; and,
- Daily Behaviors and Motivations.

Facilitators learn with experience that root cause analysis generally continues until an actionable remedy to a gap appears.

Remedies can take many forms, but generally speaking there are three types of actionable remedies for identified root causes. Participants can explore remedies to address each root cause. The following are the three types of general remedies:

- **Recommendations:** remedies not in the continuous improvement team's control that must be referred to others in the organization for consideration;
- **Decisions and Commitments:** remedies in the continuous improvement team's control that do not require development of new tools and/or processes to implement; and,
- **Team Activities:** remedies in the continuous improvement team's control that require development of new tools and/or processes to implement. Team activities may involve chartering a work team to perform the "mini-DAPIM™" work of designing and planning implementation of specific remedies.

Facilitators can identify and facilitate appropriate team activities after improvement priorities have been well-defined or after thorough root cause analysis and remedy work has been completed. To help new facilitators link team activities with topics that are either task or relationship oriented, the team activities in this chapter have been organized in this manner.

Facilitators and the teams they support conduct team activities most frequently during the Plan and Monitor steps of the DAPIM™ process. While preparing to begin planning, facilitators and teams should consider completing team activities to address root causes that have direct impact on the continuous improvement team's ability to operate with maximum effectiveness (e.g., time management, trust). During monitoring, discussions regarding progress, impact, and lessons learned often identify additional areas for continuous improvement. Some areas can directly be addressed immediately through team activities and others require adjustment of the continuous improvement plan.

The team activities in the tool kit were developed by various OE consultants on the APHSA team and therefore reflect a diversity in style. The approach, however, to identifying topics for facilitation should always be diagnostic and consultative. The key to a diagnostic approach is to ask open-ended questions with few leading questions or indications of right and wrong answers. The key to a consultative approach is to build trust and relationships during the process by shaping questions and follow-up probes to the language and viewpoint of the organization, not to those of the facilitator. Facilitators in a consultative mode also move dynamically and iteratively around the team activities and resources, as opposed to sticking rigidly to a predetermined sequence or set of questions.

Conducting an After Action Review

As a facilitator, it is a good practice to collect feedback from participants at the end of each learning by doing session by conducting an After Action Review (AAR). An AAR provides participants an opportunity to share their thinking on the overall effectiveness of the meeting and how future meetings can be improved based on lessons learned. To conduct an AAR, ask the following three questions:

- What has gone well with regard to the meeting?
- What has not gone well with regard to the meeting?
- And what could be done differently to improve meetings in the future?

Prior to asking the questions, explain that the AAR is a way to collect data from participants to plan for future meetings. Share with participants the importance of their feedback for both the facilitator's own continuous improvement and the cultivation of an environment for honest sharing of information. In some instances, the facilitator may want to offer to leave the room during the AAR requesting one of the participants record the feedback on flip charts. This option should be made available to groups

when the facilitator senses high trust levels have not yet been established between the facilitator and participants and feedback directly related to the facilitator may not be shared if the facilitator remains in the room.

The AAR is meant to be a free-flowing data collection activity and should not be rushed. Allow silent time for participants to think. Be sure to probe for thoughts on preparations for the meeting, the meeting itself, and what is to follow the meeting – this probing ensures lessons learned for planning and conducting future meetings take into account the full range of work involved. Facilitators should flipchart the AAR and create participant notes as with all other work products from a DAPIM™ process. Facilitator Instructions for conducting an AAR are located in the appendix of this chapter.

Organizational Effectiveness Handbook

Chapter Four Appendix (Templates and Guides)

The following is a list of topics for which team activities are included in the attached facilitator tool kit.

Team activities that assist with root causes and general remedies that are more **task-** oriented include the following:

- A. Building Capacity
- B. Clarifying Roles by Level
- C. Conducting an After Action Review
- D. Decision-Making
- E. Developing Vision, Mission, and Values for Your Organization
- F. Establishing Strategic Goals and Objectives
- G. Following Through
- H. Frontline Practice
- I. Managing Change
- J. Meeting Management
- K. Monitoring
- L. Setting Consistent Supervisory Standards
- M. Succession Planning
- N. Time Management
- O. Time Management: Using E-mail and Phone
- P. Project Management
- Q. Capacity Planning Process and Work Plan Tool

Team activities that assist with root causes and general remedies that are more **relationship**-oriented include the following:

- R. Addressing Disproportionality and Disparity in Human Services Outcomes
- S. Building High Performing Teams
- T. Building Trust
- U. Communicating Your Message “Up” in the Organization
- V. Developing Team Capacity and Performance
- W. Difficult, Courageous Conversations
- X. Establishing a Culture of Empowerment
- Y. Defining Quality Leadership
- Z. Managing Stress
- AA. Maximizing Effectiveness of a Multi-Generational Workforce
- BB. Performance Management
- CC. Positive Reinforcement
- DD. Resistance and Power
- EE. Retention
- FF. Selling Change
- GG. Strategic Partnerships
- HH. What Supervisors Can Impact
- II. Capacity and Task Planning
- JJ. Role Clarification
- KK. Strategic Staff Development
- LL. Anchoring Values in Practice Supervision and Leadership