Chapter 10
The LEADS in a Caring Environment Framework as an Operating System for Change

A vision without a plan is just a dream. A plan without a vision is just drudgery. But a vision with a plan can change the world. ~ Old proverb

Change is the territory of leadership. Leaders have no purpose unless they are trying to create a better future. Regardless of where you are on the ladder of leadership, you find ways to take an idea and turn it into a movement. As the proverb above suggests, neither a plan nor a vision alone is enough; leaders must also know how to implement both. As we saw in Chaps. 7 and 9, all three—vision, plan, and implementation—are needed to create meaningful change.

In Chap. 3 we said the domains and capabilities of LEADS are the source codes of effective leadership. We pointed out that an individual's DNA and its nucleotides determine similarities and differences among people. For leadership differences in genetic source codes (which determine personality, morality and talents) when combined, give each of us our individuality as leaders, and determine how we express the capabilities of the framework in our behaviour.

The similarities in those source codes, when combined, create systems for leading change. LEADS provides codes to generate leadership of change. One way is through creating a common language to express the ideas in the domains and capabilities; the other is by creating common patterns of thinking and acting on change. We know the language quite well by this point. But let's review the fundamental dynamics, or patterns,[1] of bringing about change.

The first dynamic is that change is movement from the current state of patient care to the desired future state. The gap between the two gives leaders focus for improvement. The size and significance of the gap creates the need to change. It evokes comparison to the first step of John Kotter's [1] change model, creating a

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[1] Dynamics is defined by the Merriam-Webster online dictionary as *a pattern or process of change, growth, or activity*.

sense of urgency, often referred to as a "burning platform" [2].[2] Although the Lead Self and Achieve Results domain articulate this fundamental principle of change most clearly, the other domains embrace it implicitly.

The second common dynamic is that a leader takes initiative, to havnessing his or her individual influence to system change. And that, we stress again, is irrespective of one's position in the hierarchy.

The third dynamic is that leaders work with and through others, (as in the Engage Others and Develop Coalitions capabilities). Building relationships is the third common pattern of effective leadership.

The fourth dynamic is that change and transformation are engendered through action learning. Leaders grow and develop in relationship to self and others, responding to new challenges by taking initiative to create the future [Lead self and Systems Transformation domains].

The final dynamic of change is that while people may be forced to change due to environmental forces beyond their control, leaders ensure they and others have some freedom to choose *how* to change and how much effort and commitment they want to put into it. All the LEADS domains and embrace the notion of making a choice of how to think about change, how to respond to forces they can't change, and whether or not they wish to be preemptive in shaping the society that will result from those forces.

In Chap. 4 we used the metaphor of the hero's journey to discuss personal growth and development as a leader—going from the leader you are to the leader you want to be. These dynamics, combined with the LEADS domain and capability language, allow us to see LEADS as an approach that will work for us as individuals or as groups. Let's explore each of these dynamics a little further.

One change many of us have gone through is renovations to our home. "Personally, I hate change, but I love renovating my house," says Rosabeth Moss Kanter, author of the book *Evolve!* [3]. Her point: nobody likes change when it's done to them. But change we choose is different; that's the kind of change we're willing to embrace.

If you've done a renovation, you know that voluntary or not, change is difficult. It is fraught with problems that require us to learn by doing. Renovations are usually more complex than we thought, often take longer and are full of surprises. If you do the reno yourself, there is a tremendous learning curve for whatever skills you need for the job. There are always quirks you didn't plan for. If you don't do it

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[2] Both Kotter and Conner's models had their genesis in the private sector. In a competitive marketplace, where the demand there is a constant demand to change to outstrip or outpace competitors, there is a compelling need to change. Some individuals have interpreted both writers as suggesting that leaders need to instill, or artificially create urgency—almost panic—to change. The reality is, however, as Conner was quoted in the above interview, "It is not about creating or exploiting a negative situation. Rather, it is about the level of commitment that is needed to get through a change. The burning platform does not refer to the energy that is needed to initiate change but to the commitment that is needed to sustain the change". Knowing the breadth and scope of the gap between current and future state tells us the work that has to be done, and therefore, the level of work and commitment required to do it. That is why in the Change Map in Chap. 9, we titled the same change phenomenon in health care, *Significance*. Communicating the significance of the change and the extent of the gap that defines it (i.e., scope and breadth) is how energy and commitment to change will be generated.

yourself, you have to manage relationships with contractors and suppliers—who don't always work the way you want or when you want. Renovation puts strain on daily work habits and in more often than not, on familial relationships. Choosing to renovate highlights the gap between your current house and the one you want. If you're lucky, you learn to see it as journey with others where you learn together along the way.

So how does this relate to LEADS?

LEADS as a Model to Guide Change

Everybody likes progress. It's the changes they don't like!
Will Rogers

LEADS can act as a model first by combining the domains into a simplified description of how to lead change, and second by establishing behaviour for leadership of change.

To generate the model, we combine the five capabilities into an interactive whole, showing how the domains work together to generate change (Fig. 10.1).
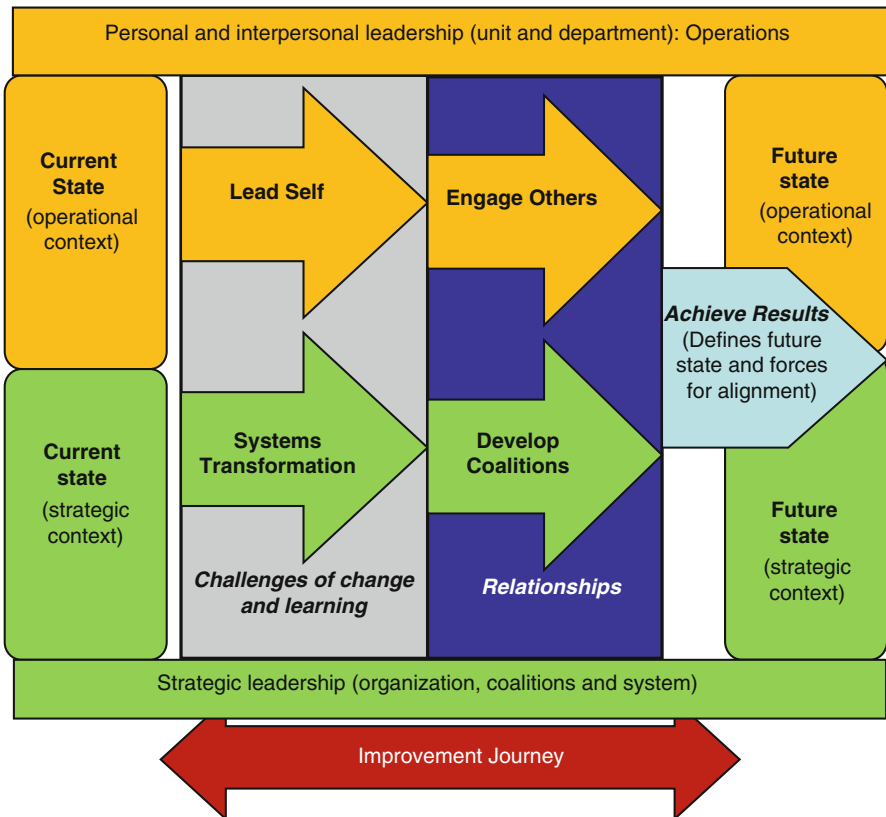

Fig. 10.1 LEADS as a model for change

The model shows the LEADS domains and capabilities are not just a list; they're an integrated whole interacting with one another to accomplish change. The model suggests leadership happens on the operational front and the strategic front, and activities associated with both are interrelated.[3] The gap between the current and future states defines that need operationally and strategically.

Carrying out the assessment of the scope and breadth needed for change is the focus of the "set direction" and "assess and evaluate" capabilities of the Achieve Results domain (the light blue shape anchored in the future state component of the model). Vision, values and desired final results make up the desired future. The model suggests you determine where the individual, organization or system is with respect to that future state. When expressed in measurable terms, the difference between current performance and desired performance shows the breadth and extent of the change you're undertaking, and suggests short-term measurements that can guide course corrections along the way. The other two capabilities of Achieve Results (align decisions with vision, values and evidence and take action to implement decisions) suggest ways leaders can align activities to ensure the journey stays on track. As change progresses, the Achieve Results domain interacts with the capabilities of the other domains to keep change happening.

The second component of the model highlights the need for leaders to have a sophisticated understanding of the landscape of change (see change map in Chap. 9) and action learning. This component is represented by the vertical grey bar linking Lead Self and Systems Transformation. To achieve better results you need to understand what goes on when people experience change. To achieve a desired future, you and others will have to change thinking, behaviour, distribution of responsibility and resources, and the structure and culture of your organization. LEADS' tools, instruments and models can help you do that. Everyone involved in change—whether they're employees, citizens, patients, or families—need to learn how to change. Leaders are encouraged to understand the challenges of change, so as to empathize with others and do their best to ameliorate the negative aspects of the change process.

The capabilities of the Systems Transformation domain help you understand the dynamics of both large- and small-scale change. They include critical and systems thinking and strategically orienting yourself to the desired future, capabilities which let you outline actions—including supporting innovation and championing and orchestrating change—that you'll need to stimulate learning and progress. Almost all of the tools, models, and approaches in Systems Transformation chapter stimulate systems and critical thinking so individuals and groups can make choices about where and how change should take place.

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[3] In the five LEADS chapters we created LEADS self-assessments for both operational and strategic leaders: two at the operational level (front-line supervisor or mid-manager) and two at the strategic level (senior or executive leader).

Lead Self is the personal analog to Systems Transformation. Its four capabilities—self-awareness, self-management, develops self and demonstrates character—recognize leaders themselves have to change. Some of the changes are psychological, making demands on your emotional intelligence, or testing your resolve; others require you to acquire or unlearn knowledge and skills; others put demands on your integrity and character. Leaders who can't meet those demands have diminished ability to champion change. You have to be authentic when you model those capabilities or your credibility as a leader suffers.

A third component of the model emphasizes the power of relationships to lead change (the dark blue bar on the diagram). Relationship-building comes ahead of tasks in the process of change and both Engage Others and Develop Coalitions focus on it—Engage Others in the operational context and Develop Coalitions in a strategic context.

LEADS is also a set of standards to measure quality in leading change. LEADS can be used to set curriculum for aspiring health leaders, or to generate performance measures to shape succession planning and professional development or to guide selection of leaders. As a set of standards, LEADS inspires the possibility of making health leadership a profession with formal certification on set standards. The winning conditions for change would be inculcated in health-system LEADS leaders, and momentum for change would build.

Learning Moment

Picture your own workplace. Conceptualize one practice you would like to change, on behalf of patients, or clients of your work.

Using the model, outline steps you would take to plan the change.

1. Is your project primarily operational in focus, or strategic?
2. In that context, clarify the change gap: the difference between the future state and current state of your project. How big a change is it?
3. What 'systems change' implications does the project have? Consequently, what change challenges (unit, department, organization, coalition, system) will you face moving from where you are now to where you want to be?
4. Based on your understanding of the scope and breadth of those external changes, what internal personal challenges will you have to face?
5. Based on how big the change is, who will you need to build relationships with, and why? How will you do it? Are there approaches discussed in the chapters of this book that would help you build those relationships?

Goethe said "Thinking is easy, acting is difficult, and to put one's thoughts into action is the most difficult thing in the world." Ultimately, the LEADS framework is a model for thinking through and implementing system-wide change: one we're encouraging you to use to make change work in a systems context.

LEADS as Simple Rules

Another way to think about LEADS as an operating system for leading change is to use a variation of the "simple rules for change" concept described in Chap. 9. The three simple rules are shown here (Fig. 10.2):

In keeping with the systems construct of interdependency, the three rules interact with each other on an ongoing, fluctuating basis to create conditions for leading change. These rules work whether you're attempting to change yourself, your unit, your organization, or a coalition or system change. Let's review "Joan's story" to point out how these simple rules can help.

Joan is director of care at an extended care home in a small rural community. She has just completed her masters degree, including a major project on feeding proto-cols which would improve care and reduce costs. She is proud of her degree, and keen to use it to make a difference. She wants the home to introduce the protocols.

Joan's best friend—both at work and outside of it—is Natalie, the nurses' union steward. Natalie has shown some interest in Joan's studies, but has always been a
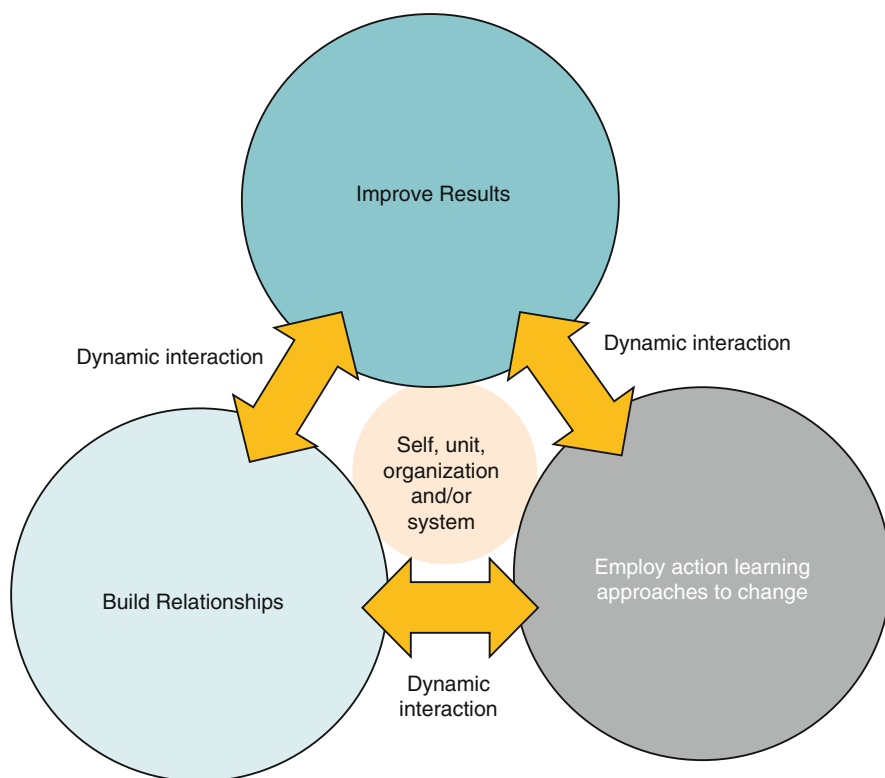
Fig. 10.2 Simple rules for leading change

little suspicious of her need to get a degree ("You don't need a degree to be a good manager.")

Joan is contemplating how to introduce the feeding protocols where she works. She has convinced herself—due to her deep commitment to patient-centred care, and her research—that the changes she proposed are clearly in the best interests of the residents. But she was a little worried about her personal and professional relationship with Natalie, whose nurses' union members have tended to resist change. Many of them don't see Joan daily, and think that her studies are out of touch with the realities of the home. They would likely push Natalie to marshal formal union resistance to this change.

Joan rummaged through her bookshelf. First, she pulled out a think piece the instructor in her final course had done on change. In it, he said there were three simple rules a leader needs to answer to begin the change process (and then continue to guide people through it). He had expressed them as three questions for the leader to answer. She reviewed the questions:

1. ***What results do we need to achieve and how will we keep on track?*** *She knew the answers to that question, but realized that no one else did.*
2. ***What change challenges will we face in moving to the future and what will we do to address them?*** *"Obviously", she thought, "I'm going to have to deal with the potential resistance of the staff. And that will be complicated as a consequence of my relationship with Natalie".*
3. ***What relationships will we have to build, and how?*** *"Well, certainly an understanding with Natalie as it relates to this project. And maybe a new relationship with my staff; I have been somewhat distanced from them because of my school work. But how?" she mused.*

Joan spent a couple of hours reviewing Goleman's leadership styles and pondered what guidance she could get from the LEADS framework brochure sitting on her desk. She picked it up and noted the four Engage Others capabilities: foster development of others, contribute to the creation of healthy organizations, communicate effectively, and build teams. Putting Goleman and LEADS together, she came up with a plan.

Joan remembered she and Natalie were going to be at the curling club the next night. She resolved to begin her plan then.

At the end of the game, Joan asked Natalie if she would like a drink before going home, on her. Natalie accepted.

Joan laid out her plan. She suggested holding meetings with the nursing teams during the last hour of the day shift and the first hour of the night shift by using casuals to cover the time. She proposed three meetings so patient service would not suffer and so all staff would have a convenient time to attend. She offered to explain how her protocol would truly improve the welfare of residents, and how it would make nurses' lives easier. She also promised to listen to all the nurses' concerns. She agreed to delay implementation until all the issues were worked out.

Natalie thought it over and agreed, setting the stage for change.

Table 10.1 Simple rules as guiding questions: an example

Simple rule: determine the desired results of the change and how to align actions with them*		
Level 1 question	Level 2: (Initiation)	Level 3 (Ongoing)
What results do we need to achieve and how will we keep on track?	What benefits to patients or citizens are anticipated?	How are we doing in terms of moving towards the desired state?
	What is our vision for change?	Are we progressing toward our vision?
	What results speak to accomplishing our vision?	How are we progressing relative to each of those results?
How do we align our actions with desired results?	What needs to be done in our planning to ensure our actions are aligned with anticipated benefits to patients or citizens ?	What course corrections need to happen to ensure our actions are aligned with anticipated benefits to patients or citizens?
	What strategies or tactics will help us reach our vision?	How do our strategies or tactics need to be adjusted to keep us on track with our vision?
	What strategies or tactics will help us reach our individual results?	How do our strategies or tactics need to be adjusted to reach our individual results?
	What evidence will support us to achieve our vision and desired results?	How does emergent evidence suggest we should adjust our strategies and tactics?

*See Learning Moment below

As the story shows, the simple rules can be parsed as a series of questions to guide you when you initiate change and while you carry it out, as they did for Joan. Some sample questions related to the simple rule of determining results are profiled in Table 10.1.

Note that these sample questions need to be applied to the appropriate context, you, or your unit, department, organization, coalition or system.

As Table 10.1 indicates, you don't just ask the questions derived from the simple rules at the beginning of the change journey. You must ask and answer them continually as the change progresses to operationalize cycles of experiential learning. That's because dynamic interplay in a change can morph into new and unexpected challenges, either changing the desired result or how to get to it.

Learning Moment

Using Table 10.1 as a template, choose one or both of the remaining simple rules to create a table of key questions.

1. Outline the key questions you need to ask yourself to prepare for leading change, and to carry it out.
2. Share your thoughts with a colleague. Refine the table and make it work for you.

Conclusions

This chapter has shown how the *LEADS in a Caring Environment* framework is more than a list: It is also an operating system for guiding change. To be a good leader is to be good at creating change. The exercises and stories highlight how to use the framework for that purpose and how important it is for you to see the interdependency of the leadership capabilities. Change is a constant in the Canadian health system and LEADS can support you as you work with it, by outlining how you need to think and act to be a successful health leader.

References

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