







bid initiative briefs: recommendations and lessons learned **Change management**

The BID Initiative is grounded in the belief that better data, plus better decisions will lead to better health outcomes. It was designed in partnership with countries to enhance immunization and overall health service delivery by improving data collection, quality, and use. The BID Initiative takes a holistic approach to address immunization data challenges and strengthen evidenced-based decisions through a package of interventions including people, products, policies, and practices. These briefs summarize the approaches and interventions that the BID Initiative rolled out in partnership with the governments of Tanzania and Zambia and shares recommendations and lessons learned for others interested in improving immunization data quality and use.

BACKGROUND

Although electronic registries improve data availability, quality, and use and enable better decision-making for health, uptake of electronic heath information systems has faced several challenges.¹ One of the main criticisms of many efforts to implement these systems is that they do not adequately address socio-technical factors—that is, they do a poor job of addressing human aspects of intervention adoption.

Change management is key to addressing this gap. The change management process ensures that digital health technologies are adopted and integrated within existing systems and cultures of health facilities. In the BID Initiative, change management has complemented implementation of the electronic registry in several ways. One aspect of change management has been analyzing and advising on priority areas that will facilitate implementation of the registry. Most of these activities are managerial in nature and aim to improve registry uptake and data use at all levels. The initiative's change management component has also promoted a coordinated approach to strategies and activities across both demonstration countries. This will ultimately enable effective communication and knowledge transfer of successful strategies between policymakers and implementers and across the two demonstration countries.

^{1.} Cline GB, Luiz JM. Information technology systems in public sector health facilities in developing countries: the case of South Africa. BMC Medical Informatics and Decision Making. 2013;13(13):2–12. Available at https://bmcmedinformdecismak.biomedcentral.com/articles/10.1186/1472-6947-13-13.



Using change management for data use interventions

Changing the status quo within organizations is especially difficult when the change involves the interaction of people and technology. **Kotter's 8-Step Change Model** (Figure 1) is commonly used to guide change management for the adoption of new tools, systems, or processes. The steps in the model are outlined below:

- 1. Create urgency Help others see the need for change and the importance of acting quickly.
- 2. **Build a guiding team** Ensure there is a powerful group, with the appropriate leadership skills, credibility, and authority, to guide the change process.
- 3. Create a vision for change Create a picture of the future and how it will be different from the past.
- 4. Communicate the change vision Ensure everyone understands and accepts the vision.
- 5. Remove obstacles Enable action by removing barriers.
- 6. Create short-term wins Create clear, visible success stories early in the process.
- 7. **Consolidate gains and produce more change don't let up** Recognize more change opportunities following the "quick wins" to take full advantage of the momentum for change.
- 8. Anchor the new approaches in the culture to make the change stick Ensure the new ways of behaving are recognized and rewarded to embed the change into the organizational culture.

FIGURE 1: Kotter's 8-Step Change Model.



Dr. John Kotter, a thought leader in the field of business, leadership, and change, stresses that talking about change is not enough. Implementers must also be strategic in terms of stating the change, identifying and managing the supporters and opponents of change, and sustaining momentum. Kotter's model operates under the premise that every change meets resistance, and organizations, or in this case, health facilities and health systems, must confront this for change to occur.² An organized and methodical behavior change process is necessary to increase engagement for an effective transformation.

THE BID INITIATIVE'S APPROACH TO USING KOTTER'S MODEL

The BID Initiative has used "touches" to roll out interventions across the health system. A touch entails a regional, district, or facility-level visit to perform a specified set of activities tailored to assess, advocate for, or improve immunization data quality and use. Kotter's steps were embedded throughout the initiative's touch strategy to ensure change management along every phase of implementation (Table 1). Each of the



2. Kotter JP. Leading change. Boston, MA: Harvard Business School Press; 1996

ROUTINE BID ACTIVITIES	KOTTER'S STEPS	OBJECTIVES	CHANGE MANAGEMENT ACTIVITIES
Touch 1	1 and 2	Introduce the intervention and prepare for Touch 2. Urgency is defined and advocated for.	Select a guiding team involving health facility in-charges with the district officials and regional/ provincial teams for support.
Touch 2	3 and 4	Introduce the electronic immunization registry to health providers and train them on how to use it to collect immunization data and use the data for decision-making.	Communicate the vision for data use and data quality interventions and how that vision contributes to addressing challenges faced by the facility, through posters, messaging, etc.
Touch 3	5 and 6	Provide immediate follow-up with the health providers. During this touch, health workers are also encouraged to use the system and to build their confidence.	Create short-term wins by sharing success stories early in the process, such as the ability to use the systems to easily collate information or prepare reports.
Touch 4	7 and 8	Emphasize the decision-making and data use culture. Ensure new ways of behavior are recognized and rewarded to embed the change in the organizational culture. Institutionalize data use and data quality interventions and embed them into existing public processes using, for instance, supportive supervision.	Health providers are supervised and continue to use the new system. Health workers are also trained in several different data use scenarios using the built-in decision-making process. Future supervision is handed over to the district.

TABLE 1: Linking Kotter's 8-Step Change Model to BID's Touch Strategy



steps in Kotter's 8-Step Change Model is iterative and certain steps may be returned to throughout the change management process. The BID Initiative's touch strategy is similarly iterative.

RECOMMENDATIONS BASED ON LESSONS LEARNED

Key recommendations based on lessons learned from the BID Initiative's change management activities in Tanzania and Zambia are outlined below:

- Express the urgent need for change in a way that beneficiaries can appreciate and embrace. The context in which change is implemented is important for informing implementation and change management. Consultations, including a preliminary assessment, can help to understand the context and problem with data and data use. The insights gleaned during these consultations can then be used to communicate the need for change.
- 2. Use alternative methods of communication to promote peer learning. Creative communications such as WhatsApp messaging and training videos can be effective tools for introducing new technologies and interventions. These alternative communication platforms help health workers address common challenges and share their experiences. Selection of champions in each facility can also help to steward the change management agenda.

- 3. Constantly review and address obstacles encountered during implementation. It's not uncommon to encounter obstacles, such as staff rotations within facilities, that can affect the momentum of an initiative. Although some of these factors might be beyond the project's jurisdiction, they still require recognition and strategic approaches to limit their impact.
- 4. Identify and agree on short-term wins early in the process so implementers can appreciate their inputs and progress. Short-term wins are crucial because they motivate implementers and help to maintain momentum. Initiative leaders need to recognize and acknowledge these gains.
- 5. Ensure that new systems and processes are institutionalized within the health system for sustainability. It is important for the implementation team to intentionally use existing systems and processes to implement the electronic registry and related change management components. Also, it is critical for regional- and district-level staff to require use of systemgenerated data, by requesting stock data with monthly reports or by asking for lessons learned or examples of data use from health facilities.

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