**2018 Online KT Conference:**

**Engaging Ways to Engage Stakeholders**

Supporting Sustainable Change in Large, Complex Organizations

Mark Harniss

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 >> STEVEN BOYDSTON: So next up is our presentation from Dr. Mark Harniss, the director of the University of Washington Center for Technology and Disability Studies. He is also the principal investigator of the NIDILRR funded knowledge translation center and NIDILRR translating evidence about traumatic brain injury within the Washington State Department of Corrections.

This presentation, supporting sustainable change in large complex organizations, will discuss an organizational change process that focuses on incarcerated individuals with traumatic brain injury. Just as a reminder, if you have any questions during the presentation, please ask them in the chat box. And then after the presentation Kathleen Murphy will be leading us in an interactive discussion with the reactors and our conference participants. So, Mark, are you ready to begin?

 >> MARK HARNISS: I am. Thank you.

 >> STEVEN BOYDSTON: Thank you.

 >> MARK HARNISS: Good morning, everyone. It is still morning here in Seattle. And thank you to all of you who have lasted through to this last day of the conference. I'm going to be talking about supporting sustainable change in large complex organizations. And much of what I have to say is in reference to applied knowledge translation project that was funded through the University of Washington. And although I'm the presenter today, this really represents the work of a number of other people at UW including my colleagues Sherry Brown, Curt Johnson and Becky Matters who could not be here today. I also want to note that this is a project that was funded through ACL and NIDILRR. And I want to acknowledge the unique funding mechanism. It is a small five-year grant and particularly on topics that were originally funded by NIDILRR. So, it allowed for the development of a project that's not just research or technical assistance, but it is something that's more fluidly focused on integration of evidence in to practice with an emphasis on organizational change. And so, having access to that funding or to funding that really directly supported knowledge translation has been an important part of our work. And I just wanted to note that. And I will tell you more about how that has helped us later in the presentation.
 So, for the first part of this presentation I want to provide an overview of concepts related to sustainable organizational change. And then I'll address those concepts in relationship to our project. And to start it is useful to define sustainable change. I think all of us who work in the field of knowledge translation are interested in sustainable change. Our goal is that something backs different from the current state. And implicit in this is the change is evidence based. And it improves outcomes in whatever area we are working. Change by itself can be difficult to encourage, but I think that changing, getting something to change is relatively easy compared to sustaining that change over time. So, it can be relatively easy to bring about shortterm change or implementation. It seems significantly more difficult to keep that change going. And there are a lot of reasons for that. Organizations are dynamic places, the leadership changes; people leave, new ones come. The systems themselves create unintended pressure to do something different than what might be best practice. So, creating change that is encouraging change and change and supporting people to make change is the only first step towards successful implementation, long term implementation of an evidence-based practice.

So, the sustainable part of change is hard. But I also want to talk about the organization‑ the‑ organizational side of change, which has its own complexities. So, there are several factors that increase the difficulty of organizational change. And I'm going to talk about each of these. But one of those factors is the unit of change, that is who or what is the target of the change message. At what level do we expect to see change implemented. And you could argue that change always happens at the level of the individual I guess and to some extent that's true. But sustainable change often requires something to happen at higher levels, at group levels or system levels. And change at the individual level can differ, but it is often clearer what needs to happen to encourage an individual to change whereas change at group or systems level adds complexities. Motivations that drive certain kinds of policies and organizational behaviors can be hard to determine. So, I think that broad systemic change can be difficult to achieve and often takes longer and requires more sustained effort. Oops.
 There are many types of organizational change and I think it is useful to think through some of these different types of organizational change. And it can be useful in particular to understand how you and your team, if you are part of a team, are thinking about the change process and about your desired outcome. So, for example, sometimes what we are after is evolutionary change. We are after slow incremental change that seeks to improve the existing system. And another way to say that might be that we seek continuity. So, for some reason I have two boxes, one on the left and one on the right that kind of say the same thing. Maintaining continuity are I think similar ways of saying the same things. Other times though we want to tear an organization apart and start over. So, we sometimes seek revolutionary change or what we might call creative destruction. So, doing this means that we pull together apart to recreate it in to something better and these approaches necessarily have really different strategies. And I have found in my own teams that it is pretty important to have a clear talk about the kind of change that we are seeking because part of your team wants to tear an organization apart and start over and the other part wants to fix what we already have. It results in conflict within the team and thinking about the time of change can be quite useful.

As we just discussed change can happen at different levels, local versus systemic but can also be focused on different parts of the organization. It can be focused on changing an organization strategy, kind of the high-level vision mission or direction of an organization. Or it can be focused on operations, really changing the day today nuts and bolts of how work gets done. Obviously those two are not exclusive. There might often be a mix of the two and just again from my experience strategic change may need to follow operational change. It is worth thinking about how you believe change happens. Some people think about change as a linear process.

Moves in a stepwise process. Unexpected barriers that threaten to derail the entire process. We can have loss of key personnel. And my experience has been that most change process if you view it at a very high level can look somewhat linear but almost always feels very chaotic. Not as controlled as would hope it would. And the more chaos in a system the more challenging the change process. But also, chaos should be expected, and it should be planned for because it is going to happen. Something is going to happen that will derail a project. And you have to be prepared and have the resilience to manage it and to move forward. I want to address three components of the change process that we consider when implementing a project. And I'll talk about how these were applied in the project that we have. One component is leadership. Just understanding who has influence and power and vision to bring changes about.

The second is content. What needs to change and then KT models, this is often about the evidence-based practices. But it also needs to be within the context of understanding the system itself, what is the purpose, the mission, the strategy, the values in the system. And then what is it that needs to be targeted and changed. And finally process. The how. How are we going to plan, initiate, implement and sustain the change? In my work we have had an easier time thinking about the what, the content, and the how, the process. And we are dealing with the who. The who is often fairly clear at the level of the target audience. But we have had to really learn to understand how leadership and larger organizational politics play out in both the implementation and the sustainability of change.
 I'll end this sort of intro section by talking about types of organization because organizational change can be made more or less challenging based on the type of organization in which you are trying to work. And so clearly size matters. Trying to move a large ship is harder. Trying to turn a large ship is harder than trying to turn a smaller boat. So, you just have more points of contact, more moving parts within the system. But management also matters. In our project that I am going to describe this was an important thing for us to understand. Hierarchical management structures can be in some ways easier and other ways harder. They are more structured and more limited pathways through which decisions can be made, but they are also clearer in terms of where you have to start in terms of beginning a process. Flat structures, flat management structures can have a lot more opportunity, can be a lot more flexible and open, but it could be fuzzier to understand who actually makes decisions and to understand who is going to keep a process moving as once it is implemented. Complexity matters, multi-facetted missions versus focused missions of an organization can certainly support or impede change processes. Ownership matters. Public organizations, governmental organizations may have lots of owners, if you will, whereas private companies may have a more focused connection to leadership and a more limited ownership. And then that relates to stakeholders. Having a unified set of stakeholders who are pulling in the same direction is different than having a very diverse group of stakeholders who might be pulling in different directions. All of that played out in the project that I am going to talk about.

I want to acknowledge something that might seem obvious to you but wasn't always to me and that's the overlap between knowledge translation and organizational change. And I have put two definitions in this slide. The definition of organizational change is that it is a process in which a large company or organization changes its working methods or aims, for example, in order to develop and deal with new situations or markets. And knowledge translation is defined by the Canadian Institutes for Health Research is an iterative process that includes synthesis, dissemination, exchange, and ethically sound application and knowledge to improve something. And so KT's focused on an application of knowledge to improve something to change something. Organizational change is a modification of methods or aims to address the challenge. So, there is obviously some‑‑ obviously some overlap there.
 I think it can be helpful to revisit probably for many of us this knowledge to action cycle from Graham and his colleagues to see how knowledge translation fits within the organizational change process. In the center of this graphic you can see the knowledge creation pyramid. It is developed and synthesized and operationalized in tools and products. And these products then go in to the action cycle which wraps around the outside where the products are adapted to local context in relationship to barriers to use. They are tailored to fit the environment. They are monitored to see if they produce the outcome effect. So clearly a change process in play there.

So, when you have, ‑I think about the relationship now between the two, I tend to think of knowledge translation as kind of a subset of organizational change. Knowledge translation emphasizes rigor, knowledge and tools and those are implemented through a change process. But as we all know I would assume not all organizational change is based on evidence‑-based‑ knowledge. So, lots of change happens because of other things. Changes to markets and funding structures to public opinion. Organizational change doesn't always happen within the context of evidence-based‑ tools and products. And so, I just mention that because I happened to kind of think about the nature of our work within this broader world of organizational change.

And then the final thing I'll just discuss before I present our project, excuse me, are the mechanisms of change. We have already talked about these high-level components of change, leadership, content and process. So, on this slide I have listed a number of change mechanisms. This is not comprehensive in terms of all the different kinds of mechanisms you could consider to support change, but these are the ones that we have found useful in our project. Under leadership finding champions has been critical. Developing or accessing levers as in something that can leverage change. Encouraging and motivating change, finding ways to do that. And then understanding politics and maneuvering around political and organizational roadblocks. It has been critical to understand the problem and context in which we want to work. And then to engage in providing information, providing content about the innovation and change to stakeholders. And in terms of process, we have focused on structuring for sustainability, mentoring and supporting leadership within the project.

So now let me tell you a little bit about our project. We as I noted have a NIDILRR grant. Excuse me while I cough here. I am going to lose my voice. A NIDILRR grant that supports work in the Department of Corrections here in Washington state. And the focus of our work is to help the Department of Translations understand best practice, best evidence-based practice on traumatic brain injury. And before I go much further with that‑ I want to talk about the type of organization that the Department of Corrections is. And I went through this list of variables in terms of organizations. So, I want to do that for the DoC. The DOC first of all is a large organization. They have about 8500 employees. They have around 19,000 incarcerated individuals with another 36,000 individuals who are under community supervision. They have an annual budget of about 1.8 billion dollars. And so, this is a substantial organization. They are spread throughout the state. They have ‑I can't ‑remember‑ over‑ 20 facilities. And so, it is a large organization. Management in the Department of Corrections is top down. Nothing happens in the DOC without high level leadership approval and buy in. And so, as I noted before that makes it simpler in one sense because we know where we have to go to get approval and harder in another sense if we don't get that approval nothing‑ we‑ won't be able to move forward. The DOC has a multi-facetted‑ mission. They have a broad focus on community safety. I would say that's the core of their mission but there is an underlying mission to provide rehabilitation and to reduce recidivism. Those kind of fit under the community safety mission but there are complex kind of multi-facetted‑ aspects of the mission. They are publicly owned and must be responsive to public need. They are connected to representative leadership and the house and Senate. They have a complex ownership. And they also have diverse stakeholders. So, they respond to legislators. They respond to the general public, to family members of incarcerated individuals, to mental health experts and correctional officers and so on. And so, when you look at the DOC I think it hits a lot of targets for being a challenging site for sustainable organizational change.

So now I am going to walk through those three components and methods of change. It was initially focused on how can we help front line staff in the Department of Corrections to understand how traumatic brain injury affects individuals who are incarcerated and perhaps change practice to improve outcomes for incarcerated individuals with TBI.
 So, I noted that one of the mechanisms related to leadership that was important for us was finding champions. And we had champions both internally and externally. Internally probably our key champion was the DOC, Department of Corrections, Americans with Disabilities Act coordinator, compliance coordinator. But also, a lot of support from the training and development director. These internal champions were critical for helping us to find our way through the system. They were able to be the voice of the project internally when we couldn't be there. They were able to tell us when we were about to make a mistake. Like, for example, if we were not talking to the right person who had the kind of power to make that ‑‑the kind of decision we were seeking. They guided us through a series of barriers and challenges. And they helped us understand organizational climate and expected practices. So, without those internal champions a system, like an organization like the DOC can seem very opaque on the outside. We would have had a very hard time understanding how to proceed. I would say our external champions have been as important. Because the DOC is a public organization is responsive to external pressure. Very sensitive to kind of political will and how they are viewed publicly. And so, we worked with a number of groups. We have a TBI Council here in Washington that is connected to government but also provides kind of a stakeholder voice. Disability Rights Washington is our Washington state protection and advocacy organization. And they have been very engaged around the rights of people with disabilities who are incarcerated. So, they have been a part of our advisory team. And then we have been able to pull in community members with traumatic brain injury. Some of whom have had experience in correctional facilities, mostly as correctional officers. It has been harder for us to connect to people who were previously incarcerated. But we continue to work to bring those voices in and to have the stakeholder voices that Thomas talked about.
 I mention that it has also been important for us to develop or access levers for change. This idea of leverage I think is ‑has been pretty critical thinking about where do we actually‑ as an external project have any kind of power or way of motivating change because we don't have a lot. And we found that a couple of things really helped us to drive change. One is that we wrote this grand proposal with the Department of Corrections. And then we did that, we received a letter of support from the DOC superintendent. And so, what has happened multiple times, we are in our third year of the project, and what's happened multiple times we have had to use those tools, the fact that we have money in a grant and that we have approval, written approval from a leadership to leverage change within the organization.

So, DOC is a highly fluid kind of work environment. People are constantly coming and going, especially in leadership roles. People sometimes get fired. Sometimes choose to leave. We, for example, have been ‑I‑ think we are now in our third superintendent within the last three to four years. Our training and development director we are on our second one. ADA coordinator we are on our second one. There were a couple of points where we might have been kind of kicked out basically.
 So, thinking about just how do you leverage change from your position I think is an important thing to consider.
 In addition to having these levers it is important to think about how you encourage and motivate. One is more about building somebody's internal sense to change and the other is having kind of external motivation. And that internal motivation in the long run is what's really important. So, we worked on creating a sense of urgency around the problem. And then also on providing a vision for the future. And because we are a knowledge translation project a big part of our approach has been to use evidence to create a sense of urgency. So, I will just give you a few examples of some of the evidence that we have used. This is an example of a slide that was in one of our courses and the evidence about traumatic brain injury in a correctional setting is definitely in development. Prevalence estimates are quite broad, but the general consensus is that outside of prisons and correctional settings about 8 and a half percent of Americans reported TBI. And inside of prisons it is about 46% of people who have experienced a TBI. That's the average of multiple studies that were reported in a paper by Durand and his colleagues in 2017.
 And we connect that to the specific context of the Department of Corrections. By noting that if you apply that 8 and a half percent to the DOC staff, assuming that they represent the general population, you have about 730 individuals who have experienced a TBI out of approximately 8500 staff members. If you look at the incarcerated individuals and you see the word offenders which was the word in place when we started the project, as many as 46% of those individuals or 16,859 have experienced a TBI. And that's based on about 19,000 individuals in combined‑ in‑ confinement and another 18,000 plus inactive supervision. And so, trying to find ways to help people understand the nature of the problem and to feel immediacy and the need for change is an important part of the leadership that goes in to a change process. I mention that we also focused on trying to help our partners develop a vision for the future. And we did that by thinking about what the mission of the DOC was, and to help them understand how would it help them to achieve their mission if they could address the challenges faced by incarcerated people with TBI. And how would things be different if TBI were addressed in a correctional setting both for staff and leadership and for the community.

And one thing to note about DOC their mission and vision is incredibly consistent. Their mission is to improve public safety. So, safety is really what DOC is about. We were trying to understand what would it mean to them, what would it mean to the organization if they ‑and what would it mean to their mission about improving public safety if they addressed issues related to people with traumatic brain injury. And what we found is that in order for‑ us to enter DOC and to encourage this kind of organizational change we really needed to understand the motivations of correctional staff members. So, we needed to understand what they would gain from learning about people with TBI. Did they ‑did‑ they think it would improve staff safety. Would the workplace be less stressful? And then how should we best communicate that. What terms and approaches would be palatable and believable to that group. Our personal and professional goals are bigger than just trying to increase safety or staff safety or reduced safe frustration. We want people with TBI to receive treatment. And to do that we need to communicate to the people in the DOC who will implement the change. We have to help them develop a motivation for themselves that make sense to them within their context.

So, we have tried to shift perspective and take the perspective of the individuals who we are working with. So that's about encouraging and motivating change. And another part of leadership that we have experienced and worked on is really about politics and maneuvering. It sounds very...‑I don't know. It ‑sounds‑ politics‑ are not very popular I think in general. It sounds like manipulation. And understanding in an organization how decisions flow through the organization. In DOC they flow from top down more or less, but once they reach ground level, then they kind of flow out through networks of people who have similar or shared experiences. And so, understanding kind of how those decisions flow and how they gain uptake can be very critical. In terms of thinking about leadership, part of what we needed to do is to try to understand what it would take for leaders to feel safe. This is quite intimidating to DOC leadership because we are talking about a large group of individuals who purportedly have had a traumatic brain injury. And the question always is what does that mean for the DOC? What does the DOC need to do in response to that? And if the DOC needs to do something, is there money to do that or are there resources to do that? What will be the implications for the system if we really highlight and bring forward this issue and begin to address it? And so, kind of understanding motivations of leaders to engage or disengage is a part of this maneuvering through the system. And finally understanding the political failures that derail the innovation or change if we fail to talk to the right people. If we move forward to face and create a backlash, one of the things that we learned and a challenge we avoided is that we needed to once we had high level leadership, we needed to move down to the leadership facility that happens at the facility level. Because facilities have ‑they‑ are not independent, but they have a lot of independence.

So, we had a meeting with all of the superintendents to make sure they were on board. It would have been a political failure if we had bypassed them because we would not have been able to move forward. And then just another part, I think I have sort of mentioned this, it is about finding your way through roadblocks. What activities have to come first in order to have an open door later and then pretty critically. And we are in this point right now what kinds of signals or messages have to be conveyed from leadership before people feel empowered to act. And what we have been told a lot is that people at ground level, correctional officers and so on are not going to feel empowered to act unless they have a clear message from leadership. And so, we are currently working on helping leadership to feel safe and helping them to kind of craft the message that they are comfortable with providing to their staff members.
 So that's leadership and I will move on now to talk about content. Content is as I noted something that we probably as knowledge translation specialists feel more comfortable with. I think there are two parts to content. One is understanding context in which we are working and the other is understanding the problem. I won't spend a lot of time on these because I think these are kind of standard practices. For our project we spent a lot of time trying to understand the context because we were not correctional experts. And this was a‑ the‑ ‑kind‑ of a new task for us. So, we spent a lot of time meeting with DOC leadership. We had meetings with the training and development unit. We took a number of visits to DOC facilities. We gathered materials and reviewed those. And we participated in Department of Corrections trainings. All of this was a needs analysis for us to really understand the system in which we wanted to work. And what we found is that I'm not ‑surprisingly‑ the DOC is huge and complex and its approaches to knowledge translation were not going to be unidimensional, and that perspectives varied widely across staff in terms of what jobs were depending on whether they were in health services or corrections, et cetera.

But they all did really support that mission and vision of safety. And we found that there was limited knowledge about TBI among the staff. And so, we realized that these KT interventions will need to fit within this context. And we also found that there is a significant amount of training already going on. So, any training that we wanted to do would need to fit within the kind of high training demands that people were experiencing. And then in terms of understanding the problem, we engaged in a scoping review, primarily looking at NIDILRR products on TBI. And we did a number of interviews with TBI experts. And our findings were that incarcerated people with TBI are likely experiencing longer sentences because of their disabilities. Issues related to memory and emotional control and those kinds of things result in the potential for increased infractions, meaning that you potentially end up in more restrictive settings and that you don't earn time off of your sentence. And so, this is not a research-based finding, but this is the sense of what we understood as we talked to people within the system. And we learned the correctional organizations are not particularly prepared to address challenges faced by people with TBI.

And so, this lack of preparation causes a burden for DOC staff and the larger justice system. But we also learned about interventions that could improve outcomes for incarcerated people with TBI and DOC staff. We are able to begin looking at the evidence and providing opportunities for change within the system.
 We also‑ the ‑other ‑ the‑ other piece of content is really about educating the people who are going to be involved in the change.

So, I'll just let you know that we did spend quite a bit of time on education. We were able to develop an introductory level training online course that was administered to all of the staff as part of a required in service. And out of 8500 staff about 7800 completed it. It was a web-based course that included text and quizzes, infographics and videos and took about 45 minutes to complete. So that's been a great kind of first step in trying to increase awareness about TBI across the entire DOC. And so now as we move forward to begin trying to implement changes to practice, we know that the majority of people at least have a general understanding of traumatic brain injury and how it affects people who are incarcerated. There is an image of the course objectives. We looked at prevalence. Understanding TBI. How TBI affects incarcerated individuals and some universal strategies that might improve interactions. I'll just mention that we also have done an intermediate level training where we trained all the facility level ADA coordinators to help them understand what is TBI and what kinds of accommodations might be appropriate for people with TBI. And I want to end by talking about process. Process is about, you know, the way in which you‑...‑I‑ have gone too far. Sorry. The way in which your kind of ‑you‑ how integrate and how you do your work within the system. And what we have focused on is really thinking about creating some structure. I am a strong believer that sustainability is built through changes, through organizational structure. Things need to change in a way that allows something to sustain after a project ends and that often means changes to organizational structure. So that means tapping in to existing systems and structure and putting in place structures that will last. And we have done that primarily by working through systems that are already in place within the DOC.

So, the DOC has a performance management process. They actually have a team of people who support performance management who took a group of us through a process that involved initial brainstorming, development of a charter for a TBI task force. That task force then engaged in strategic planning and in the process of prioritizing the kinds of changes that would be supported over time. So, this is the slide that I was referencing. Out of that process we have developed this TBI task force. And the task force is a structure that's understanding to the DOC. It is a structure that will last after our project ends. It has membership from across DOC, all services, ADA compliance mission, housing, correctional officers and the list goes on. And it is intended to develop a shared understanding of TBI within the DOC and to develop a plan and to implement a pilot study to test some of our recommendations.
 The last part of process that I will talk about is mentoring and supporting. And what we have found is this is critical for us to work with stakeholders in an organization in a way that doesn't result in reliance on us but builds them in to leadership roles. So that as we move through the project, we are scaffolding our support. So maybe starting with more support in the beginning and slowly releasing our leadership, releasing our control and encouraging the development of leadership in stakeholders within the organization. That's happened in a number of ways through the task force. The task force has a number of committees. We have committee chairs. Those chairs are being supported to become really vision leaders within the organization around the issues facing people with‑ who‑ are incarcerated and who have traumatic brain injury. Until they develop the necessary skills and confidence for success.

So, I'll wrap up now and just say a few conclusory comments. One is that knowledge translation approaches I think are a very important part of organizational change interventions. And thinking about the relationship between organizational change models and knowledge translation is pretty important. It has been helpful for us as we have tried to maneuver the system. But that organizational change is much more complicated than just sort of evidence to practice. I think we all know over many years that just having good evidence just knowing about better practice doesn't result in change. That change really requires careful attention to structures, to power, to access, to supporting and building leadership and the list goes on. It also requires organizational change. Also requires ‑I‑ didn't move you through to my conclusions. There you go. Organizational change also requires attention to external changes that can influence internal organizational change. These organizations don't exist in a vacuum. We have found that external pressure can be important of driving internal change.

And the last thing maybe not super helpful but we have found in this project that sometimes it is really just a lot of luck and good timing. I'm often surprised about how smoothly some things go and how difficult other things go. And a lot of it really is just right place, right time, right people. But I have also found that being prepared to take advantage of those opportunities goes a long way. Being ready to jump and having the resilience to wait and to keep pushing and so forth can be important in terms of how you can help to encourage change within an organization.
 And so, I'll end with that. We do have some contact information if‑ in‑ the PowerPoint. A few references. And I will turn it back over I think to is it Kathleen?

 >> STEVEN BOYDSTON: This is Steven. I am happy to take over for a second. And thank you very much, Mark, for your presentation. And now we will turn it over to Kathleen for the interactive discussion. Thanks.

 >> KATHLEEN MURPHY: Hi everyone. This is Kathleen. Thanks, Mark. This is a really helpful presentation both, you know, very rich and that you described a lot of KT theory but also obviously really great examples of an actual KT project and all of its complexities. If everyone remembers we do have a question from Russ about slide 6, which I'll just describe. So, you don't have to scroll back. It is the one on types of organizational change. And then you had five boxes, evolutionary versus revolutionary change, local versus systemic change and continuity versus creative structure and linear and strategic versus operational. Where do you think evaluation would fit in on slide 6? Would it be on one of those boxes? Is it a type of organizational change, a phase?

 >> MARK HARNISS: I think ‑I‑ don't know if I would define it as a type of organizational change. I think it probably fits better within when we are looking at slide 10 and that knowledge to action cycle.

>> KATHLEEN MURPHY: Hi, everyone, this is Kathleen. Thanks, Mark, this is a really helpful presentation both very rich in that you described a lot of theory but also, it's really great examples of an actual project and all of its complexities. If everyone remembers, we have a question about slide 6, which I'll just describe so you don't have to scroll back, it's the one on types of organizational change, and then you have you five boxes, evolutionary versus revolutionary change, local versus systemic change, continuity versus creative destruction, organic process, and strategic versus operational.

Where do you think evaluation would be on slide 6? Would it be on one of those boxes? Is it a type of organizational change, a phase?

>> I don't know if I would define it as a type it organizational change, I think it probably fits better within when we're looking at slide 10 and that knowledge to action cycle, it's a part of understanding what happened as a result of the efforts that have been implemented, and those efforts could have been change processes that were evolutionary or revolutionary, you know, strategic or operational, but that evaluation would really be about understanding the outcomes of implementing that change process.

>> KATHLEEN MURPHY: Thanks, Mark. This is another question that came up also relatively early in the presentation when you were defining terms back on slide 9, you were comparing organizational change with knowledge translation and Joanne Mosul is curious as to the reason for using the Canadian Institutes for Health Research definition of knowledge translation, she mentions she's on a CHORSP network, given all the definitions of KT that are out there, why that one?

>> I don't know. It's one that I'm familiar with, it's one that makes sense to me. No particular reason. It also I think so up I think pretty well with the KTA cycle, but do you have recommendations for better definitions, or do you have a concern about the use of this definition?

>> KATHLEEN MURPHY: So, Joanne, we welcome you to respond there in the chat. I will chime in as PI of the center of KTRR who tracks knowledge translation for a long time and works closely with our project officer who is here with us, NIDILRR has explicitly looked to CIHR for exploration about KT and modified it for its own purposes, but Joanne, that's not an accident, NIDILRR is very aware of CIHR and all the contributions it has made to KT. So, turning now, says I love the idea of navigating assistance, would you consider a technical advisory group or project advisory boards or committees, sometimes called PAC's, playing a similar role?

>> MARK HARNISS: Yeah, that's a great question, and that's in fact how we use what we call our advisory team. Our advisory team is made up of both internal champions and external champions, so people who are inside the DOC and people who are in disability rights Washington and the statewide TBI council. What I've found is it's been quite useful to have that advisory team be mixed between internal and external, you know, mostly champions, people who are on our side, but they've also been people who are just sort of new to the project who have sat in on those advisory teams, and it's been very helpful for them to hear how, for example, the disability rights Washington lawyers frame the problem and the significant concerns they have. I think it's been a way of kind of‑ and then on the flip side, it's been very useful for our external community members to hear the real-‑world‑ constraints of those individuals who work inside of DOC.

So, there's been a nice back and forth, we've been lucky, I know, we haven't had kind of it blow into conflict, but a shared understanding about the problem space. So, I think an advisory team can serve that function. Really, I don't know that I have rules in my head about what the right makeup is, but I think there is a way to craft it so that you need to have people who are both really motivated but also really able to understand the bigger picture beyond their own perspective, their own individual perspective, so yes, I think that would be a good way to approach it, a good mechanism or structure to support that kind of development of champions.

Also, though, I would say you can have sort of solo champions who don't participate in those kinds of advisory meetings, and they can be pretty important as well. Often what I've seen is that those are people in leadership positions who are not going to participate in the day to day of the project but who are really critical to work with and make sure that they understand and that they're comfortable and to get their buy‑in as they move through their work in the organization. They are able to show their support, and that can be pretty critical.

>> KATHLEEN MURPHY: Thanks, Mark. The next question came later in your presentation, it was I think prompted by slide 31 when you noticed that your online course that launched on July 1, 2017, to all 8500 Department of Corrections staff, you had 7,842 of them complete the course. How did you get the high turnout for the web-based education in Corrections?

>> MARK HARNISS: Well, see, this is the beauty of a hierarchical organization. It's required. This is their in-service. So the way that the completion is so high is because this is a required part of in-service. I think the thing that was successful from our perspective is that we were so lucky to be asked to create a course that would be part of the in-service, if that makes sense.

The completion rates are high because people had to do it, but our project was supported to be part of the required educational opportunities that year, so I think the fact that we were able to do that really comes back to our connection to leadership, so we connected into the training and development units director. They were eager to work with us around the development of something, and they understood the mechanisms that would have the greatest impact.

So, you know, we could have done a training that was not part of the in-service, we could have done trainings that were only administered to new staff as they're hired. There were a bunch of different ways that we talked about it, and the fact that we were able to do it as part of the required in-service is I think what gave us the large participation.

>> KATHLEEN MURPHY: It definitely illustrates the value of integrated KT rather than coming at the DOC with a prepackaged course. So even though it was a mandate, like not everyone is a perfect employee. Did you use other methods, were people really into the course, was there a lot of buy-in, were there incentives, or it was really just their compliance?

>> MARK HARNISS: You know, participation was primarily about compliance, but we received very strong positive feedback about the course, and I think that is in relationship to the quality of the course. So, people in DOC, staff in DOC have extensive and burdensome training requirements. You know, everybody, I'm sure, in your own organizations have to take those silly trainings that you don't want to take, in the University of Washington I have to do asbestos training every three years ‑‑ asbestos training every three years, even though I will probably never touch asbestos, so there is that kind of compliance training, and we were able to do a training where it had a lot of video, where people ‑‑ we interviewed people who were in corrections, both health services and correctional officers about the issue of traumatic brain injury, we brought in community members, we have a couple individuals with TBI, so I would say that the first click was about compliance, I have to take this course, but that we were able to motivate people to find the issue important and engaging because we were able to bring our expertise in instructional design to the development of a course, and also to bring resources that came from the grant to actually do the video. The video is quite a bit more expensive than just slide-based training. So‑ I think all those things kind of came into play.

The challenge now, I'll just tell you, is that that happened in 2017, the challenge has been to keep the momentum going. So, everybody took that, they're all kind of aware of TBI. Some of them took it a little bit further and learned more. A lot of them didn't. So now we're in the TBI task force trying to understand how do we keep this interest going. So, we're working on a communications plan where we're going to start putting out, there's a DOC newsletter, for example, so we'll put out an article there. There's a task force ‑not a task force, there's ‑a ‑ funny‑, a phone call just came for me and interrupted my line of thought too.

Sometimes the superintendent does a video little note, so we're going to work to see if the superintendent will do something on TBI. But really broadly kind of keeping the issue you to the forefront for this large group of people, and then thinking about really more focused training, like we want to do some additional training for the ADA coordinators and so forth.

>> KATHLEEN MURPHY: As you think about trying to convince people of the value of the program and the importance of sustainability, do you have any evaluation data? Namrata was wondering, she says excellent presentation, Mark, how is the impact of your program being evaluated within the DOC, whether it be the training itself or the overall?

>> MARK HARNISS: We're engaging right now anyway in what is basically a process evaluation, it's fairly qualitative, we're collecting notes, we are interviewing people who have participated in the implementation of the work so far to understand, really more to understand the effectiveness of our knowledge translation approach, our organizational change approach, and so all of that with all of the kind of needs data that we collected that I told you about earlier, all that gets wrapped into trying to understand what's worked and what hasn't worked and how we have might change things moving forward. So, it's more of an engaged evaluation that's being used to help us think about the next step.

One of the unique things about this project is we proposed kind of high level that we would do a needs assessment, we would do some education, and then we would run a pilot, but the beautiful, I think, part of this is that we've been able to craft the specific procedural work within the context of what we learned from previous parts of the project, so the education really came out of our needs analysis, and now moving into, we're really right now in the process of planning this pilot study where we're going to go into one, maybe two facilities and implement practices that will come out of the TBI task force, so the TBI task force right now is engaged in strategic planning and prioritization, and that prioritization is around an understanding of kind of what seems to be likely to be effective and also seems likely to be doable. You know, within the constraints of the organization.

So, let me back up to the evaluation question. There has been process evaluation, then there will be evaluation of a pilot study. What has surprised me is that we started out the project really focused on changes ‑‑ helping correctional staff, frontline correctional staff to understand traumatic brain injury, and our task force has broadened that significantly so that they are interested in, they're also interested in how can they provide support to people with TBI, perhaps through support groups and some other kinds of interventions, and they're also interested in how can they provide information outer to family members as well.

So, the task force itself has enlarged the purpose of the project.

>> KATHLEEN MURPHY: Great. Maggie, I did see your question that you're asking, if the web-based training will be available to it other departments within other states and I think we can infer from what Mark has explained so far that it's not in other states but I'm sure he would be happy to bail it up.

>> MARK HARNISS: It's not out yet, we're trying to redesign it and release it through the National Institute on Corrections, so the goal is to have it out there, yeah.

>> KATHLEEN MURPHY: Yeah. So, I want to remind people that we are here with some other people on the line. Jennifer Weaver is from the George Washington University, Eileen Brennan from the Research and Training center for pathways to positive future at Portland State University and Lorraine Johnson who has a number of affiliations, she's the CEO of blind leads.org. We want to think about, is there a time when you may have had concerns about an organizational change that was being implemented, and we asked Lorraine to think about that.

>> LORRAINE JOHNSON: Thank you. I would say that I have watched organizational change trying to be implemented in large organizations, such as the Cochran colloquium in terms of implementing patient engagement and I've watched it in newer organizations such as Pacori, and I think that when you're dealing with organizational change within a large system that's been around for a while, it's very hard to let change because you have legacy systems, people have an institutional memory of how things are done. But if you have a new organization that's starting with a blank sheet of paper, the sky is the limit and you're creating all the rules and you have the funding to go along with it, so change is much more easily implemented and motivated.

I think a lot of times when you're dealing with a larger organization, one effective strategy may be to have a funding source that is from an organization that is smaller and nimble and that sets the rules for engagement in a way that can be meaningful. So change is just very difficult generally, but incentives particularly if you can align funding incentives towards the change, then you've got a little bit of a heads-up you, and I just wanted to mention one other factor that I think is important in terms of sustainability of change, and, you know, Cochran had tried to institute and get patients engaged for over 20 years and really just made very little progress there, and the problem, part of the problem I think was that the sense of urgency went away after the first study was published, so the concept of implementing, you know, check-ins, annual check-ins, how are we doing, let's reassess, let's have measurements that we determine what our success is. What does the success look like in terms of the Department of Corrections? How is this helpful to them? I think that might be a helpful approach.

>> KATHLEEN MURPHY: That's a really good point. Thanks. Mark did bring up the issue of timing in the sense of sometimes you have lucky timing. So, Jennifer, we ask you to think about organizations that deal with the unique ‑organizations‑ all deal with a unique set of challenges and expectations. Within your perspective and within your organization, how important is timing? Would it be better to implement change as soon as possible or is it always better to take time to research, plan, plan and implement?

>> JENNIFER WEAVER: This is Jen Weaver. I smile, Mark, when you said the comment about being in the right place at the right time, and I do think timing is critical, and I think there are so many factors that can affect our timing, whether it's external and something that is more politically related or if it's contextual and based on organization or even individual, all of these factors can influence our timing and the potential for success that we're going to have.

One way that I like to think about it is I like to think about it as a climate for implementation and I think sometimes in regards to the question of could it be more effective to implement change as soon as possible, it really depends on the implementation climate and if you have the skills in place and the absence of obstacles, whereas there might be other times when you're going to take the time to plan, research and implement things more carefully.

I think even what was mentioned earlier about having a source of funding and yet even that can come to timing, right? What you want to study and what your project is, is there a mechanism of funding available in that moment, or do you have to wait and kind of get a little bit more creative? But I definitely think timing can be critical to change.

>> KATHLEEN MURPHY: Thanks, Jen. And of course, the theme of today, we've had a week where we started at the beginning on Monday and looking at implementation on Wednesday and today we're trying to focus as much as we can on measurements. So, Eileen, we ask you to think about from a researcher perspective, how would you go about measuring the amount or effectiveness of the changes you were hoping to make?

>> EILEEN BRENNAN: Well, I think one thing that's really important is getting stakeholders to buy into and maybe suggest some of the measurements, and that's something that we've done in trying to get youth voice represented at agency levels and making change happen at organizations that serve young people with mental health problems, and actually putting together scales where everybody knows what's going to be measured. We had a recent project that looked at youth involvement and youth voice and we had key teams such as taking a collaborative approach or having empowered youth representatives and measure those and watch to see what happens over time as systems evolve and develop.

>> KATHLEEN MURPHY: That's again the importance of stakeholders and a good way to go out. I think Steven is going to take us to the break and let us know if there's any housekeeping.