

---

### 1.1.2 Legacy project

A number of applications, associated with Incident Management, have already been rolled out on the IQ platform and the current reputation of IQ has had a substantial impact on stakeholder views about the software – in particular how aligned it is to the business and ease of use.

In addition, the deviation and CAPA processes (formerly CICA) have historically been seen as punitive tools to finding problems and assigning ownership when things have 'gone wrong'. Anecdotally, Deviations and other records are seen as data capture with no purpose in some areas of the business.

This history will make it more important to effectively manage the change. Without effective change management, the project carries substantial risk to business adoption. This is not just a reputational issue but one of ownership of quality management as a whole.

### 1.1.3 Cultural change

As a minimum, the rollout of IQ cannot adversely impact productivity, but ideally the rollout will be integrated into existing ways of working with clear roles and accountabilities.

Whilst the immediate process and technology change associated with the introduction of IQ is assumed to be relatively minor, the success and sustainability of the platform will be measured on how well users adopt it and how well aligned business processes are to it. The working assumption is that the same people will be doing the same steps in quality management processes as they are now. It may be that the business wants to use this opportunity to change the roles responsible for some steps and this needs to be understood, for example Manufacturing may want to use admin teams or other processes that align with their new ways of working.

In the long term, the success of achieving a sustainable system rollout can be measured in three core areas:

- **Adoption:** how quickly do people get on board with IQ.
- **Utilisation:** how many people use IQ
- **Proficiency:** how effective the IQ users are after training and is it enabling process/quality improvements long term.

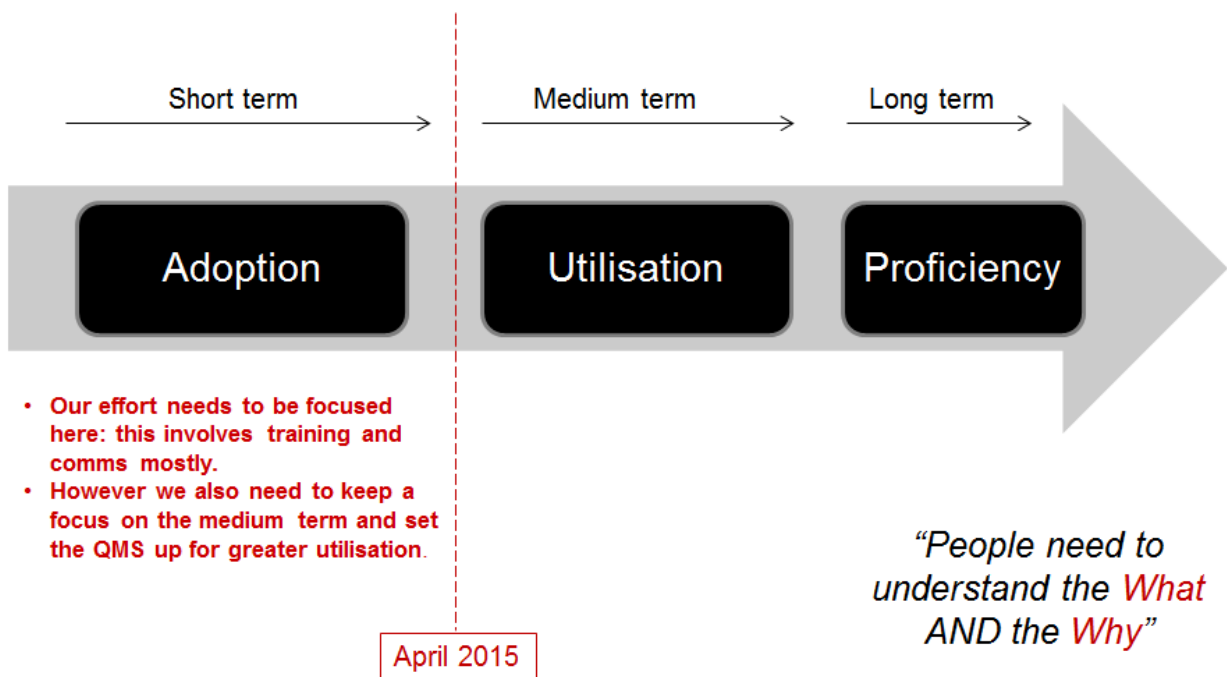
There are a number of barriers to achieving these three measures:

- Although the high-level 'as-is' process is documented, there is no guarantee that this is consistent across regions and there has been no role-mapping to establish which roles are responsible for various quality activities. These are likely to be different state-by-state.
- There is a view within the business that there has been little frontline engagement with business areas resulting in a lack of confidence in IQ and that the project is working on some high-level assumptions about how the business currently operates.
- We are unclear about who all the system users are, apart from knowing who the 'Deviation Leads' are (a mix of job roles). This must be understood in order to build training and targeted communications.
- This platform is seen as Quality-owned, therefore full utilisation and proficiency by other departments must be a longer term focus.
- The IQ 'brand' is tarnished by DAE and Incidents roll outs. This means the business may be reluctant to adopt the system.

Finally, the Quality function of the Blood Service is still bedding down a new structure and positioning itself as a business partner model. IQ is a real opportunity for regional quality teams to work with their business areas, and change perceptions about quality, from being something that is 'done to me' to 'we are all responsible for'. This requires significant senior sponsorship and communication.

## 1.2 Scope of this plan

The purpose of this plan is to provide an overview of tools and techniques to deliver the culture change associated with the successful deployment of the IQ.



The short term focus (next 6 months to April 2015) on:

- Gaining engagement with, and adoption of IQ, and its associated Quality processes.
- “Why am I being told to do this”, “What will it help us to do” “How will it help me?”
- Delivering the appropriate level of training and support needed to take the project into utilisation and laying the groundwork for ‘business as usual’.

The methods proposed include:

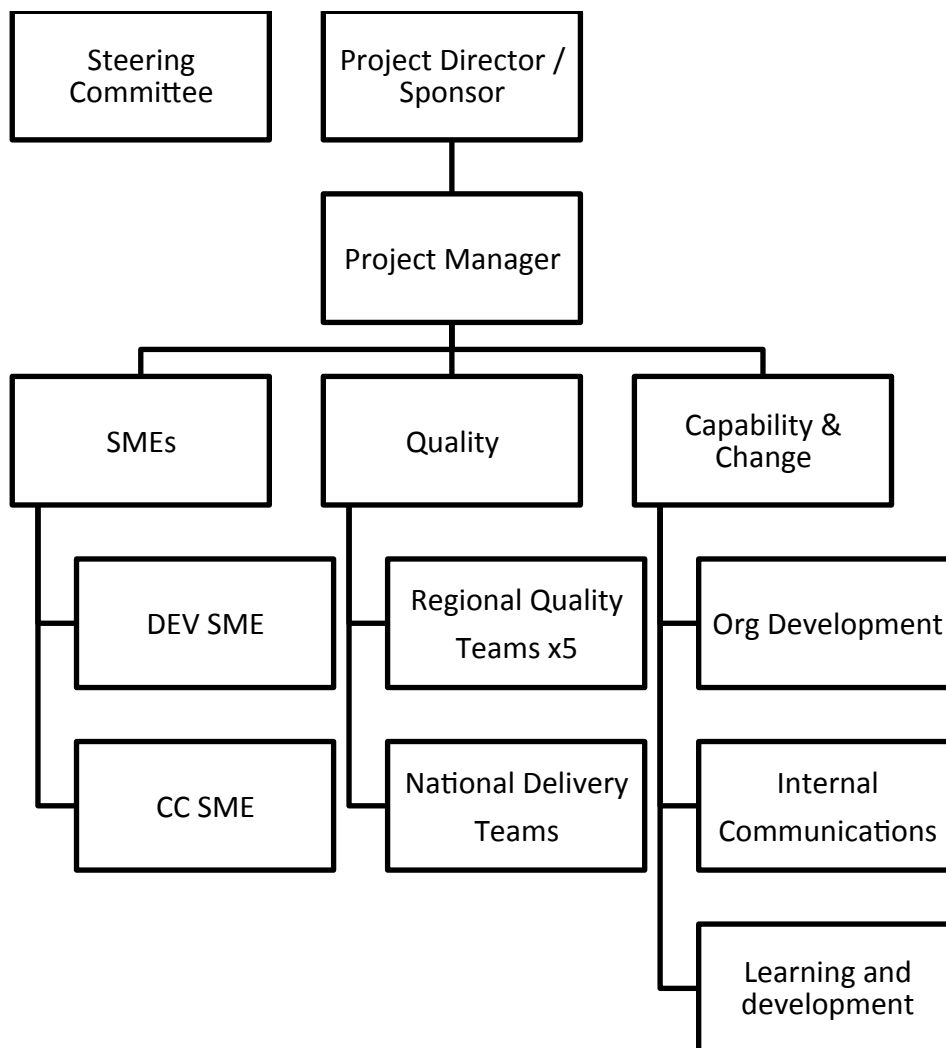
- Business involvement to build engagement and speed of adoption
- Communications and branding of IQ to build acceptance of the change.
- Role impact assessment and role mapping – to understand who will do what.
- Training and capability plans to take us to the utilization and proficiency stages.

## 2 Responsibilities

### 2.1 Project roles in this change management plan

- **The Steering Committee:** Responsible for providing final approval to proceed with implementation of this plan.
- **Project sponsor:** Visible, influential leadership of the project to build momentum and support.
- **Project Manager:** Identify all resources involved in executing this plan and ensure that they are aware of their duties and required availability.
- **SMEs:** Provide training to regional quality coordinators and sign-off of training products.
- **Regional Quality Teams:** Everyone in Quality will have a part to play in executing this plan. Their main role will be on-training and face to face support.
- **Internal Comms:** Deliver the enterprise-wide branding and targeted comms plan.
- **OD and Capability:** To advise on change management activity within this plan and to deliver the learning components.

### 2.2 Project Structure



### 3 Change management actions overview

Current issues	Solution	Outcomes/products
<p><b>Lack of engagement with the business about QMS and IQ and what it means for them</b></p>	<p>Define and implement a <b>business engagement model</b> that is appropriate to each area of the business.</p>	<p>Key people are identified to engage with the project on an ongoing basis. Activity will include:</p> <ul style="list-style-type: none"> <li>• Engagement at senior leader level across Manufacturing, Donor Services and other impacted divisions to build ownership.</li> <li>• Engagement with 'front line' business reps who will be system users in regions within each division.</li> <li>• Defined roles for Quality staff members nationally and regionally - who will manage each relationship within the model and what we need them to do.</li> </ul>
<p><b>Anecdotal view of the 'as-is' and 'to-be' which makes it difficult to assess change impacts at a role level.</b></p>	<p><b>Validate high-level 'To-be' maps from a role map perspective</b> through engaging the right people from the business engagement model.</p>	<p>Workshops with the business to gain mutual understanding and commitment. The outputs of this workshop will be:</p> <ul style="list-style-type: none"> <li>• Project overview / update</li> <li>• Who does what in IQ</li> <li>• Regional considerations taken into account</li> <li>• Validating existing roles that are likely to need training / support.</li> </ul>
<p><b>Unclear about how the activities in IQ will impact operations roles in the business.</b></p>	<p><b>Define all IQ roles and consult the business</b> to understand which activities need to be done <u>online (IQ) and offline</u>.</p>	<ul style="list-style-type: none"> <li>• Role mapping – who will do what.</li> <li>• This will be needed for each module as users will differ, although it's more of an issue for DEV.</li> <li>• Whilst the activity will be the same, the roles who will deliver them will differ in each division and potentially even state by state depending on As-Is.</li> </ul>
<p><b>Reputation of IQ will have an impact on the project moving forward</b></p>	<p><b>Brand identity and comms messaging</b> that supports wider quality cultural change as well as successfully supporting system elements.</p>	<ul style="list-style-type: none"> <li>• New look/feel for the project communications.</li> <li>• Comms messaging that is broader than 'system change' but defines our vision for a quality culture.</li> <li>• Multiple channels and methods to reach broad audience.</li> <li>• Very targeted face-to-face and written communications via the business engagement model.</li> <li>• Leadership messaging giving 'permission' for people to deliver expectations.</li> </ul>
<p><b>Capability gap is unclear but anecdotally this is about 'why' we care about QMS rather than system usage.</b></p>	<p><b>Capability (training) plan</b> that incorporates the 'why' as well as the 'how'.</p>	<ul style="list-style-type: none"> <li>• Business engagement model will support some of this, particularly leadership messaging.</li> <li>• elearning and face-to-face elements</li> <li>• User guides and high level processes to support comms.</li> <li>• Internal communications plan and brand.</li> </ul>

## 4 Implementation

Given the broad impact of the IQ in terms of numbers of employees, and the wider cultural change we are trying to achieve across multiple business areas, the implementation needs to have some structure around how we take this to the business for consultation, involvement and engagement. There are five elements:

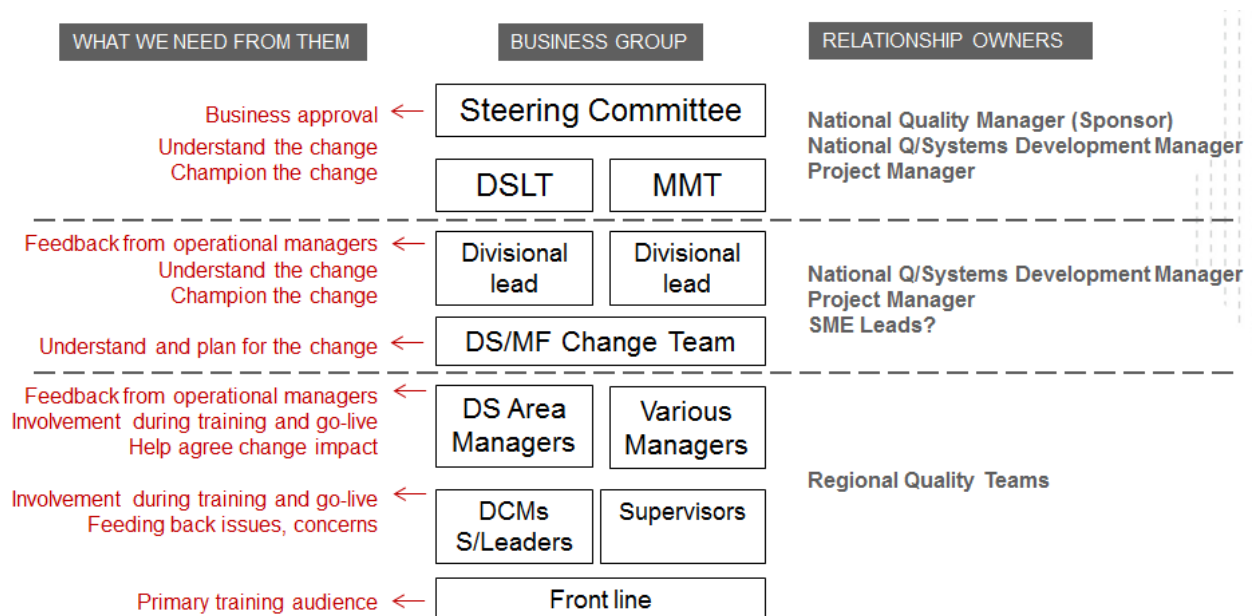
- **A clearly defined change** – the gap between ‘as-is’ and ‘to-be’ and its impact is tested with the business and documented at a high level.
- **The business engagement model** – the different levels and roles that we will rely upon to successfully ‘champion’ and deliver this change.
- **Workshops** – the method we use to engage frontline users of IQ to validate what they do now and engage them in what they need to do in future.
- **Training and capability** – various methods for up-skilling target groups of employees and managers to use IQ and operate in the way we need them to.
- **Communications and branding** – the look and feel of the project which will encourage interest, participation and recognition.

### 4.1 Clearly defined change

Mapping current and new processes is not usually an activity within the change plan but rather an input to the change plan. In order to fully assess operational impact of the change, the gap between ‘as-is’ and ‘to-be’ must be understood and validated with the business.

### 4.2 Business engagement model

This is critical to ensuring that key people at a senior level, as well as key people ‘on the ground’ are equipped and involved in the change. The model also shows who ‘owns’ the relationship with business representatives to help us deliver the change management effectively.



#### 4.2.1 Medical Services and Transplantation Services

The project will be consulting with Medical Services and Transplantation Services via a series of meetings and specialised workshops. Due to the differences in function and role between MTQS Services and DS/ Manufacturing, these sessions will be tailored to cover specific portions of the Quality process relevant to MTQS, assessment of change impact, identification of training and communications requirements.

<b>Business Reps</b>	<b>Who are they</b>	<b>What we need from them</b>	<b>Who manages the relationship</b>
<b>Steering Committee</b>	Executive or Direct report to Executive	Business approval	National Quality Manager (Sponsor)
<b>Donor Services Leadership Team</b> (10 people) <b>Manufacturing Leadership Team</b> (8 people)	National group who lead all of the Donor Centre operations and Manufacturing functions	Understand the change at a high level Cascade the messages and champion the change 2-way feedback from their operational managers	National Quality Manager (Sponsor) National Quality Systems Development Manager Project Manager
<b>Divisional leads</b>	X2 nominated leads from Manufacturing Management team and Donor Services Management Team.  Special meeting with MTQS	Ongoing involvement during training and go-live.  Feeding back issues, concerns.	National Quality Systems Development Manager  Project Manager
<b>The change management team</b>	The team that oversees change in Donor Services and Manufacturing.	Help test 'to-be' and agree change impact.  Ongoing involvement during training and go-live to feeding back issues, concerns.	National Quality Systems Development Manager  Project Manager
<b>Operational Managers</b> (13 AMs, 70 DCMs) (12 – 20 managers from Manufacturing)	<u>Donor Services:</u> Area Managers, DCMs <u>Manufacturing:</u> Customer Service Managers, Testing and Processing Managers, MF Services managers	A cross section to help us test 'to-be' and role map new activities.  Ongoing involvement during training and go-live.  Feeding back issues, concerns.	Regional Quality Teams
<b>System users</b> (some of these may be the same as the operational manager group below ) At least 400?	<u>Donor Services:</u> , DCMs, Session Leaders, Deviation Leads (could be EN, RN too) <u>Manufacturing:</u> Team leaders, supervisors and some front line.	Primary training audience.  Could have some involvement in helping us assess 'to-be' and role map new activities.	Regional Quality Teams

### 4.3 Workshops

Outline for the workshops depends very much on the role and seniority of the stakeholders we get, however it will need to cover these topics as a minimum:

- Project overview – ‘why, when, how’
- Module overviews – ‘what’ run through the process (no system demo) and decide whether to cover off all or some modules.
- To-be Process overviews – run through it to check for gaps, lack of understanding or differences – this will help us validate but also check knowledge
- Consult on any paper forms – changes and content
- Roles – ‘what’ needs to happen and how different is it from what they do now?
- Training and support – ask for their input on what they think the training should cover.
- Their role – we need them to ‘volunteer’ to help us with this and feedback to us.

This plan suggests running separate workshops for Manufacturing and Donor Services and allowing at least one day for these in each of the regions. This will be the first step in engaging the end-users and managers and the start of a relationship to help deliver the change.

It is also recommended to trial one of these workshops before rolling out to the wider business, to ensure that our working assumptions are correct and to seek feedback on content that can then be amended for later workshops.

### 4.4 Capability plan

- **Leadership briefings:** Pre-go live change briefing to local senior managers, outlining the training, support and known issues.
- **Learning:** elearning modules will be pushed to the relevant audience (pending completion of role maps)
- **Quick Reference Guides:** A quick reference guide will be made available to support post-training activity.
- **Face to face:** A rolling program of Regional Quality site visits to support users will be scheduled.
- **Other support:** Helpline / helpdesk support via national or regional quality. IS Helpdesk.

#### 4.4.1 Training for regional quality teams

The training needs for the regional quality teams will also need to be scoped and delivered prior to any business rollout so that they are equipped to support their clients through the change. This will need to include IQ training, process/responsibility training and Skills Coach/Assessor training (as required).

### 4.5 Communications

Overall project messaging, specific target audiences/stakeholder messaging and the timetable and channels for executing the messages should be wrapped into a separate communications plan. In addition, the ‘branding’ for IQ is needed to create interest, engagement and recognition for the project. The proposed ‘strapline’ for this project is ‘WHAT’S YOUR Q’ which aims to engage people in their personal role in delivering our quality culture.

EXAMPLE ONLY:



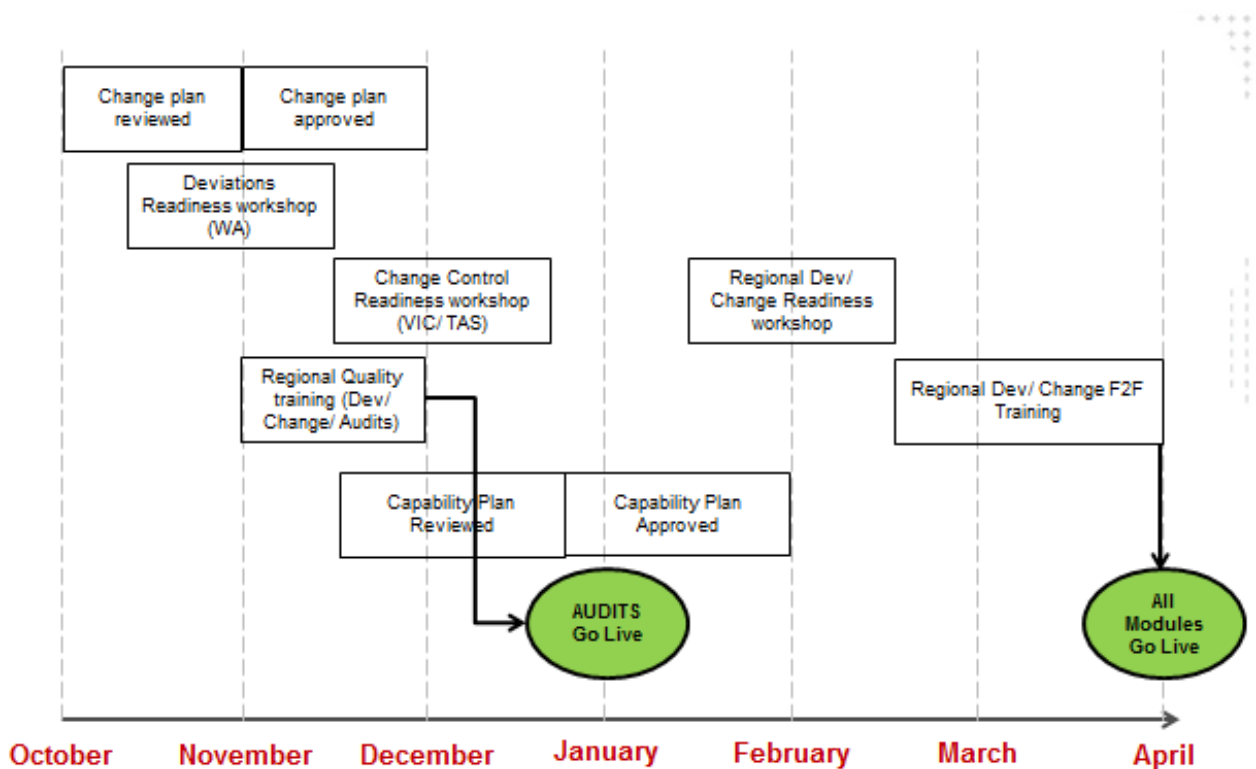
## 5 Resourcing

Activity	Who is involved	Estimated time
<b>Define business engagement model</b>	<ul style="list-style-type: none"> <li>• Project Director</li> <li>• Project manager</li> <li>• OD&amp;C Consultant</li> <li>• Regional Quality Coordinators</li> <li>• National Quality Team</li> <li>• Manufacturing Rep?</li> <li>• Donor Service Rep?</li> </ul>	<ul style="list-style-type: none"> <li>• 1 hour meeting with SRO and Project Director to clarify their ownership and levels</li> <li>• 1 hour to consult SMEs on model</li> <li>• Tabled at Steering Committee for sign off.</li> <li>• x2 1 hour meetings to consult manufacturing and donor services reps on the model and names.</li> </ul>
<b>Communicate business engagement model</b>	<ul style="list-style-type: none"> <li>• Project Director</li> <li>• Project manager</li> <li>• OD&amp;C Consultant</li> <li>• Regional Quality</li> <li>• National Quality Team</li> <li>• Internal communications</li> </ul>	<ul style="list-style-type: none"> <li>• 2 hours to engage regional and national quality in executing their responsibilities.</li> <li>• Internal comms to support with targeted messaging for each stakeholder.</li> <li>• Communication effort hard to estimate – this will be ongoing.</li> </ul>
<b>Complete high level 'as-is' and 'to-be' maps ready to demonstrate to the business.</b>	<ul style="list-style-type: none"> <li>• Project manager</li> <li>• OD&amp;C Consultant</li> <li>• Consult SMEs</li> </ul>	<ul style="list-style-type: none"> <li>• 1 day of work to finish off all module mapping</li> <li>• Depends on how deep we need to go in validation and consultation.</li> </ul>
<b>Define roles and correct language that can be communicated to the business</b>	<ul style="list-style-type: none"> <li>• Project manager</li> <li>• SMEs</li> <li>• OD&amp;C Consultant</li> </ul>	<ul style="list-style-type: none"> <li>• 2 hour meeting with SMEs to agree titles and actions we require of them (within the system and offline activity).</li> </ul>
<b>Consult on high-level 'to-be' maps and role activity through regional workshops</b>	<ul style="list-style-type: none"> <li>• Cross section of managers, supervisors and employees from processing, testing and customer service.</li> <li>• Cross section of DS Managers, Area Managers, DCMs and frontline staff from donor centres.</li> <li>• Who will facilitate? – regional quality (but also someone centrally)</li> </ul>	<ul style="list-style-type: none"> <li>• X4 manufacturing workshops (BNE, SYD, PER, MEL)</li> <li>• X1 DS? Or x5 DS workshops (do we need to do one in each region? I'd suggest we do if we doing MF regionally – back to-back?)</li> <li>• Travel costs for one person doing 5 return trips</li> <li>• 2 days for each regional Quality Coordinator to co-facilitate consultative workshops</li> </ul>
<b>Follow up to the workshops with notes - follow up meetings if needed?</b>	<ul style="list-style-type: none"> <li>• Regional Quality</li> <li>• Project Manager</li> <li>• OD&amp;C Consultant</li> </ul>	<ul style="list-style-type: none"> <li>• X 5 days for regional write ups</li> <li>• X 1 day for follow up meetings</li> </ul>



Activity	Who is involved	Time / cost commitment
<b>Brand identity and comms messaging</b>	<ul style="list-style-type: none"> <li>Brand team – look / feel</li> <li>Internal Communications support for messaging</li> <li>OD&amp;C input</li> <li>Quality Team input and sign off</li> </ul>	<ul style="list-style-type: none"> <li>Design – 2 days</li> <li>Approval – 1 meeting</li> <li>Print / production – 2 weeks</li> <li>Delivery / execution – 1 week.</li> <li>Costs for printed collateral</li> </ul>
<b>Training plan</b>	<ul style="list-style-type: none"> <li>Project Manager</li> <li>SMEs Consulted</li> <li>OD&amp;C Consultant – design</li> <li>OD&amp;C Consultant – change management</li> <li>Quality sign off</li> </ul>	<ul style="list-style-type: none"> <li>Elearning design – 3 weeks for Deviations (could be longer for new content) 12 weeks in total?</li> <li>Face to face with Regional Quality - 3 days design, 2 day delivery.</li> <li>Face-to-face with key users – 3 days design, 5 days delivery</li> <li>Quality DC site visits – difficult to estimate.</li> </ul>
<b>TIME COMMITMENT</b>		<b>Around 30 days of 'engagement'</b>
Does not include production time by brand, training or comms		(activity can happen concurrently)

## 6 Timetable / key events plan



---

## 7 Assumptions

- **Business rep availability:** That Donor Services and Manufacturing can release employees for workshops and consultation.
- **Facilitation:** That one person will have national overview of the regional facilitation workshops and that this is supported by regional quality advisors. This person will need to ensure the workshops are facilitated consistently and outcomes captured/shared.
- **Exiting business reps:** That we can use existing relationships to validate this approach.
- **Senior sponsorship:** That we want to use the system roll out to support cultural change and therefore use it as an opportunity to brand IQ and create engagement.

## 8 Risks

- **Business Performance:** We do not understand the impact of this project on business performance measures due to lack of engagement.
- **Project Management:** No 'as-is' mapping means the impact is not understood.
- **Stakeholders:** Donor Services and Manufacturing cannot release employees for workshops and consultation and involvement.
- **Stakeholders:** The business is unaware of the scale of change due to lack of visibility of the project and lack of engagement.
- **Regulatory/legal:** Donor Services and Manufacturing have capacity to accept the changes and work within the QMS future state, measured by adoption and usage.

## 9 Issues

- **Reputational:** The reputation of IQ has had a substantial impact on stakeholder views. The historical reputation of CICA also has a legacy impact because it was seen as a punitive tool to finding problems and assigning ownership. Feedback suggests this continues to be an issue with Deviations which will be addressed through leadership communications.
- **Stakeholders:** Minimal stakeholder engagement so far means that we need to build confidence in this next rollout to be successful and ensure people have had input.

## 10 Acceptance Criteria

This plan and its deliverables are to be approved by the Steering Committee and Business Stakeholders.

Ultimately the goal is to add value by driving quality improvements but in the short term, measures of success will be:

- **Adoption:** how quickly do people get on-board with the QMS and IQ measured by speed of usage.
- **Utilisation:** how many people use IQ and what is the quality of data being recorded.

## 11 After go-live

- The training plan will include **post-go-live support** delivered mainly by regional quality teams. This could be in the form of a rotation of site visits, telephone support and forums with business champions for feedback.
- We also recommend a **post-go-live pulse check** but this is most useful if a pre-go-live pulse check is used because it will demonstrate where capability has shifted from readiness to implementation.
- A post-go live plan will be needed.