

# **Residency PD Section**



### Evaluation/Feedback:



**APPD 2023 Annual Fall Meeting** 

September 21-22, 2023 Renaissance Arlington Capital View Hotel Arlington, Virginia

### Agenda



- \*1:15-1:25p Welcome
- \*1:25-1:40p ERAS Update
- \*1:40-3:05p Change Management
- \*3:05-3:15p PDEC Updates



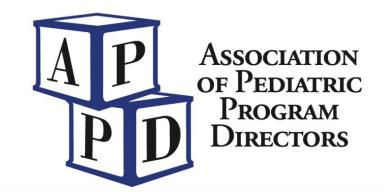
### Welcome & Introductions



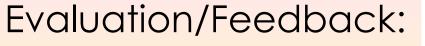
\*PD Exec Committee Members

- \* Meg McNamara, MD Chair
- \* Alan Chin, MD Chair-Elect
- \*Beth Nelsen, MD Past-Chair
- \*Dan Sklansky, MD
- \*Rebecca Wallihan, MD
- \*Caren Gellin, MD





## ERAS PDWS Update & Thalamus Intro





**APPD 2023 Annual Fall Meeting** 

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### New User Interface

Bulk Print Requests

- Dashboard
  - \* Things have moved around
  - Bulk Print Requests moved to the Top L
  - Stats & Interview
     Progress data
  - Quick link to favorite filters

#### Current Screened Data Settings (but need to changed in Setup)

AAMC POWS

Quick Links Manage Filters Create New Event

Bulk Print Requests Link to EAM

Create New Invitation

Job Aids & Training Videos Contact Support C
PDWS Terms and Conditions

Event History
PDWS User Guide

About Thalamus Core

<b>APPD 2023</b>	Annual Fo	all Meeting
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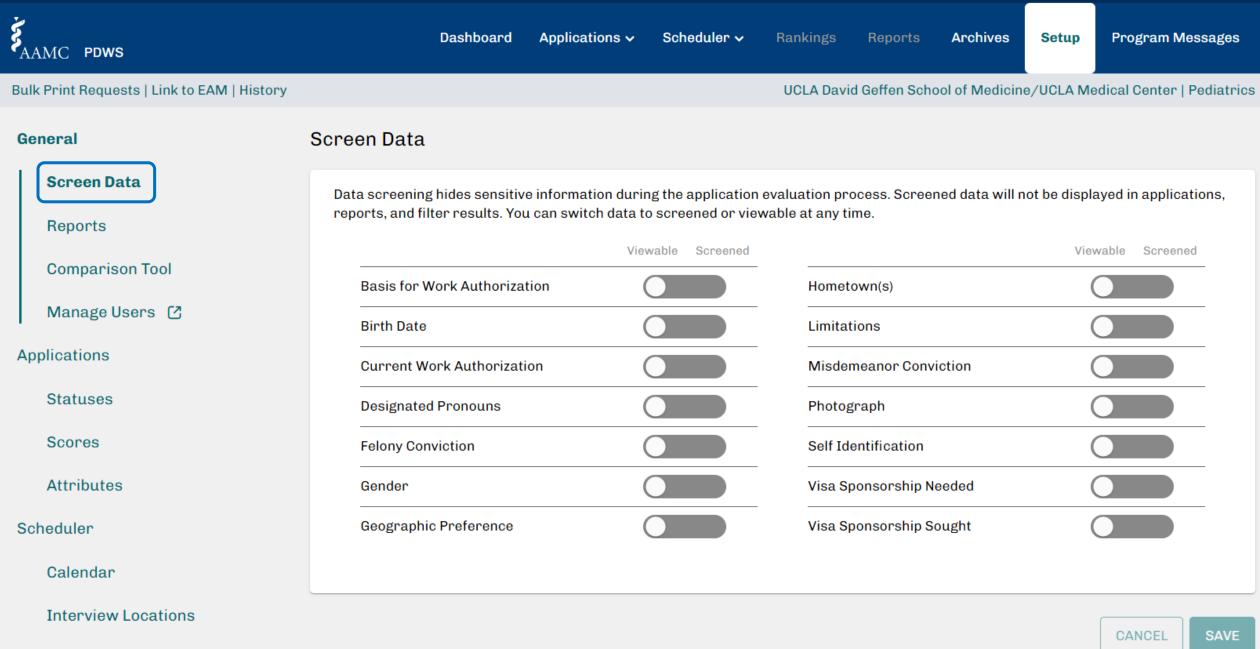
		Q     Search Applicants     Alan Chin 11502580     Ac
	Dashboard	Applications - Scheduler - Rankings Reports Archives Setup Program Messages
		UCLA David Geffen School of Medicine/UCLA Medical Center   Pediatrics
Welcome to PDWS		<b>†</b>
Stats		Application Activity Change Programs
0		Start End
Applications Received		MM/DD/YYYY
0		Applicant Name Change Date Updated
Applications Reviewed	O Total Applicants Active	No results displayed
0 No Longer Under Consideration 🌒		
Favorite Filters		Reports
Alan's List		Applicants Applying as a Couple
By Date-Sch to interview		Withdrawn Applicants
Group 1		
Group Neuro		
Invited to Interview 2021		
LCME - not reviewed		
Lists not yet invited		
Interview Progress		Upcoming Events @
Selected to Interview	0	Event Type Start Date
Invited to Interview	0	No populto displayed
Waitlisted	0	No results displayed
Scheduled	0	
Interviewed	0	
Declined	0	

#### Screened Data

Data screening hides sensitive information during the application evaluation process. Screened data will not be displayed in applications, reports, and filter results. You can switch data to screened or viewable at any time via the setup tab.

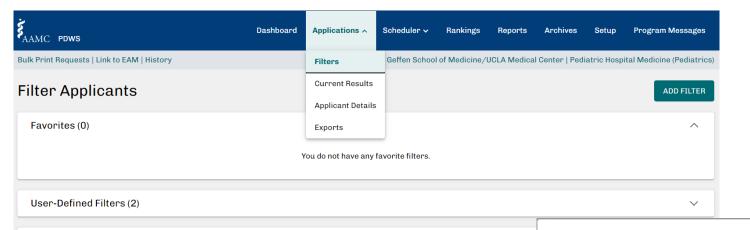
Last Updated By: Lisa Payne on Jul 31, 2023 at 3:35 PM EST

Basis for Work Authorization	۲	Hometown(s)	۲
Birth Date	۲	Limitations	•
Current Work Authorization	۲	Misdemeanor Conviction	0
Dosignatod Pronouns	۲	Photograph	0
Felony Conviction	۲	Self Identification	0
Gender	۲	Visa Sponsorship Needed	•
Geographic Preference	۲	Visa Sponsorship Sought	



Scheduler Reports







System-Defined Filters (51)

- 2 LoRs and COMLEX-USA Transcript
- 😚 3 LoRs and COMLEX-USA Transcript

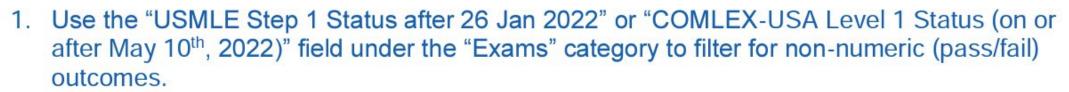
57	3 LoRs and USMLE Transcript

2 LoRs and USMLE Transcript

lew Criteria			CANCEL SAVE CRITER
Q Search categories	Q Search fields	]	
Applicant Ranking	Applicant Applied Date	Equals	Value
Applicants Type	Application Reviewed		⊖ Yes
Application Status	Application Reviewed Date		O No
Assignment Information	Complete Application		
Awards and Recognitions	Complete Application Date		
Communication	Inactive		
Composite Score	Inactive Date		Ask for Value at Filter Run T
Custom Scores	Incomplete Application		
Custom Status	Incomplete Application Date		
Demographics	On Hold		



### USMLE Step 1/COMLEX Level 1 – Pass/Fail filter



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645(0))) 300(05	^	GUIVILEA-USA LUVUI S SIAIUS	^	Equals	Value
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Demographics		USMLE Step 1			Pass
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Documents		USMLE Step 1 Status			
Exams		USMLE Step 1 Status after 26 Jan 2022			
64510111 3601785					
Custom Status	^	COMLEX-USA Level 1	^	Equals	Value
Demographics		COMLEX-USA Level 1 Date		Not equal to	Fail
Document Scores		COMLEX-USA Level 1 Status			Pass
Documents		COMLEX-USA Level 1 Status (on or after May 10th, 2022)			
Exams		COMLEX-USA Level 2 CE			

# Application Screen – Current Results

AAMC PE	pws			Dashboard	Applications <b>^</b>	Scheduler 🗸	Rankings	Reports	Archives	Setup	Program Messages	
Bulk Print Re	equests   Link to EAM   History				Filters	Geffen School	of Medicine/L	JCLA Medical	Center   Pedi	iatric Hospita	al Medicine (Pediatric	us)
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Click "Add	d Group" to begin adding criteria for your filter.										ADD GROUP	
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### **Applicant Details**

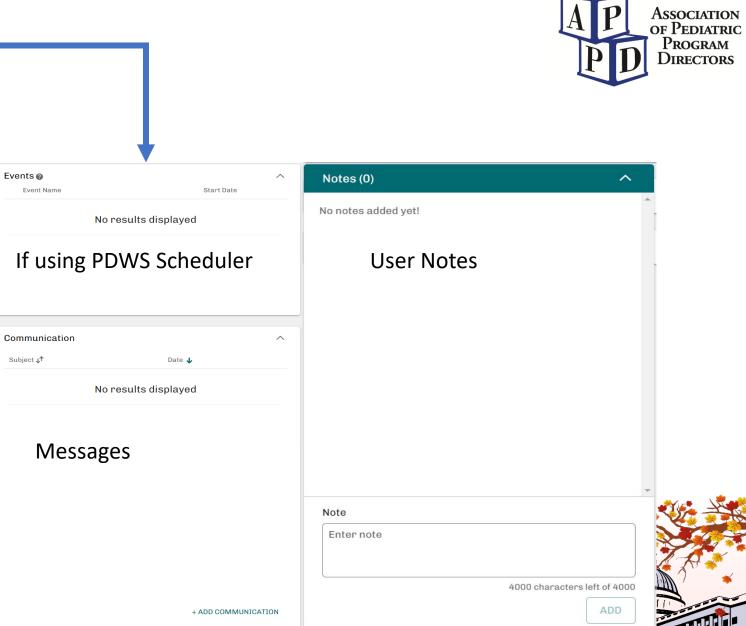
< PREVIOUS Applicant 8 of 35 NEXT > ACTIONS ~ At-a-Glance ~ **Assigned To** 1 Photo **Tracks Applied by Applicant Tracks Considered by Program** 1 AAMC ID Statuses 🧪 **Applied Date** Application Reviewed **Most Recent Medical School Geo Preferences** Experience Personal Education Publications Exams/Licences **Limiting Factors** Documents (10) Most Recent Residency Personal Contact **Preferred Name Preferred Phone** Scores V Gender Email **Designated Pronouns Birth Date** Attributes  $\sim$ Self-identification Events @ V Address Communication V **Current Address Permanent Address** Work Authorization Authorized to Work in the US? **Current Work Authorization** 

Association

Notes (0)

Scores	~
Attributes	~
Events 🝘	~
Communication	~

Scores	/
Composite Score	>
Board Scores	>
Document Scores	>
Interview Scores	>
Post-Interview Scores	>
Reviewer Scores	>
Post-Review Scores	>
Custom Scores	>
Attributes User Attri	ributes 🦯
Checkbox Attributes	>
Textbox Attributes	>
Date Attributes	>
Dropdown Attributes	>





### \* Personal

- \* Name, gender, pronouns, DOB, Self-identification, contact info
- \*Address (current & permanent)
- \* Work Authorization
- Match info, Service Obligations
- \*Geo Preferences
  - \* Division preference
  - \* Setting preference





### \*Education

- \*ACGME Residency (if applicable) specialty, dates, PD, etc
- Medical Education Medical school name, dates, location, degree
- \* Higher Education name, dates, field, degree
- \* Awards Medical School, Other
- \* Membership in Societies AOA, GHHS, SSP, Other
- \*Hometown(s) city, state, country, zip code, setting
- Other Languages, Medical education interruption





### \* Experience

- \*Impactful Experience Essay (if applicable)
- Meaningful Experiences sorted by type (Education, Research, Prof org, etc)
  - "Top 3" position, dates, location, setting, participation, primary focus, key characteristic, context/role, meaningful explanation
- \* Experiences up to 7 additional, sorted by type
  - position, dates, location, setting, participation, primary focus, key characteristic, context/role
  - Types: Education, Research, Teaching/mentoring, Volunteer, Professional organization, Other activity





\* Publications – sorted by publication type

### \*Exams/Licences

- \* USMLE/NBOME ID
- \* Exam scores/status
- \* Certifications Board cert (if applicable), BLS, PALS, DEA (if applicable)
- \* Licenses (if applicable)
- Licensure Information license suspended/terminated, malpractice, history that would limit ability to be licensed

### \*Limiting Factors

- \* Can you carry out responsibilities?
- Misdemeanor?
- \* Felony?





### \* Documents

- \* General ERAS application, CV, Transcript, MSPE, PS, Photo
- \* LORs icon for "waived", date received, last updated, SLOE?
- \*Board Transcripts USMLE/COMLEX transcript(s)
- \* Local







### \*Program Signals

\* Unclear where this will be in new PDWS, but previously in "At-a-Glance"

Tracks Applied by Applicant Tracks Considered by Program	Assigned To	/	
Tracks Considered by Program	racks Applied by Applicant		
	racks Considered by Program	1	
	Statuses 🧪		

### \*Elimination of Hobbies/Interest Section

 AAMC encourages applicants to use as Experience or discuss at interviews



### **Printed/PDF Applications**

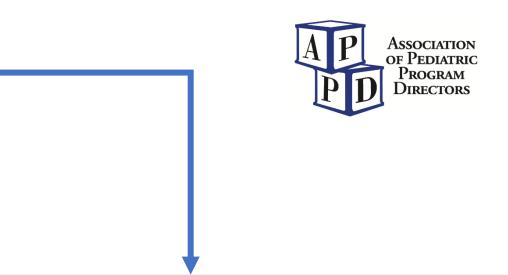
\* Essentially the same except for how Experiences are displayed



Experiences

Co-investigator Role			
Organization		Dates	
Location	a	Participation Frequency	Monthly (recurring)
Setting	Urban	Experience Type	Research
Primary Focus	Clinical/translational science	Key Characteristic	Cultural Humility and Awareness
Context, Roles & Responsibilities	Description of Activity		
Most Meaningful	If 1 of 3 Most Meaningfu	ıl – additional text	
	-		

	Filters Current Results	Geffen Schoo	l of Medicine/
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#### Exports

Configure	CSV	Export
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Alpha Omega Alpha (Yes/No)

Authorized to Work in the US Basis for Work Authorization

CSV Export Name

Enter CSV Export name

Type of Data to Export
Personal

Available Fields

Alternate Phone #

Cell Phone # Contact Address 1 Contact Address 2 Contact City Fields to Export

	AAMC ID	
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CANCEL

CLEAR

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- \*Summer 2024 integration of ERAS with Thalamus Core
- \* Programs can use Thalamus Core now for free
  - \* CSV export of data from ERAS to import into Thalamus
- \*Used to Create/Schedule/Invite for Interviews
  - \* Setup events in a Calendar
  - Invite templates bulk send invites, with invite scheduling links
- Initial Program Setup



## **Thalamus Program Setup**

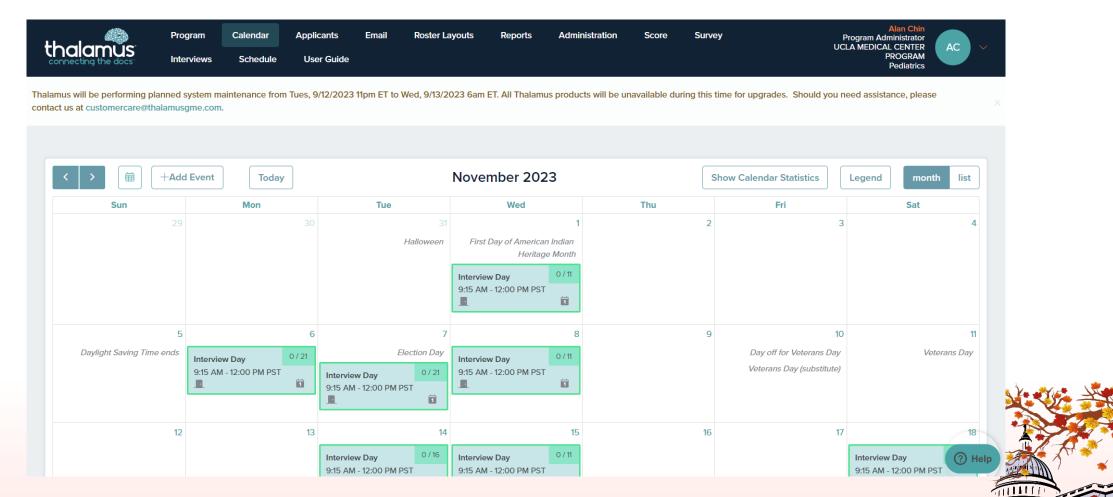
**APPD** 



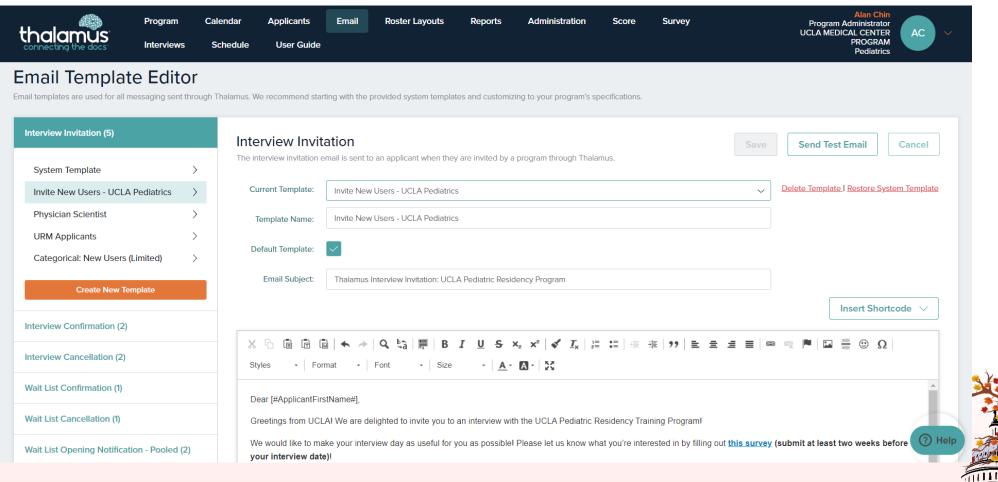
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Contacts & Locations							-		a du	
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### **Thalamus Calendar**





## **Thalamus Invite Email Templates**



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### Thalamus – ERAS export fields

1.⊕ Email	25.  Perm Country	49. D COMLEX 2 PE	73. 🕂 Training Interrupted Explanation
2. TAMC ID	26.     Phone Number	50.  COMLEX 3	74. 🕀 Medical Degree Expected
3.⊕ Gender	27.      Preferred Phone	51.   AOA? Yes/No	75.  Training Interrupted
4. ⊕ Medical School	28. 🕂 Mobile Phone	52. 🕂 AOA? Response	76. 🕂 Medical School Attendance Dates
5. I Tags	29.   Birth Date	53.      Gold Humanism Honor Society (Yes/No)	77.     Medical School Clinical Campus
6. 🕆 Track(s)	30.      Self Identify	54. 🕀 Gold Humanism Honor Society	78.   Medical School State
7. ⊕ Tier	31.     Preferred Name	55.   Nrmp Id	79.      Most Recent Training Specialty
8. Interview Status	32. I Hobbies	56. 🕂 NRMPCouple	80. 🕂 Interview Event Id
9. Invited Date	33.      Designated Pronouns	57.   Couple Name	81. Cortex Score
10. ⊕ Scheduled Date	34. ⊕ Thalamus Account	58.   Couple Specialty	82. Cortex Notes
11. 🕂 Interview Date	35.      Medical School of Graduation	59. 🕀 Current Work Authorization	83. $\oplus$ Internship
12. ⊕ Survey Answers	36.    Medical School Type	60. 🕀 Visa Sponsorship Needed	84. $\oplus$ Internship State
13.    Documents	37.       Medical School Country	61.⊕ Invited	85. C Language Fluency
14. $\oplus$ Notes	38.     Medical Degree	62.⊕ Scheduled	86.  Preference Signal
15.   Interview Score	39. 4 US or Canadian Applicant	63. 🕂 Interviewed	87. 🕂 Division Preference
16. ⊕ Overall Score	40.      Higher Education Institution	64.     Canceled Date	88.   Division Preference Description
17. • Rank	41.      Higher Education Degree	65.      Most Recent Postgraduate Training Program	89.   Setting Preference
18.      Address 1	42. ⊕ USMLE ID	66. 🕀 Waitlisted Date	90. ⊕ Setting Preference Description
19. $\oplus$ Address 2	43. 1 USMLE Step 1	67. 🕂 Most Recent Postgraduate Training Discipline	91. 🕂 Experiences
20. 4 Home Town	44. ⊕ USMLE Step 2 CK	68.      Authorized to Work in the US	92.      Sigma Sigma Phi (Yes/No)
21. 4 City	45.   USMLE Step 2 CS	69.      Most Recent Postgraduate Training City	93. 🕂 Sigma Sigma Phi
22.	46. ⊕ USMLE Step 3	70. 🕀 Basis for Work Authorization	
23. 🕂 Zip Code	47. + COMLEX 1	71. 🍄 Most Recent Postgraduate Training State	
24. ⊕ Country	48.      COMLEX 2 CE	72. 🕀 Graduate of US or Canadian Medical School	



### Do We Have To?: Change Management for Leaders in Medical Education



### Ingrid Walker-Descartes, MD, MPH, MBA, FAAP

Associate Professor-SUNY Downstate School of Medicine Maimonides Children's Hospital of Brooklyn Vice Chair of Education - Pediatrics Program Director – Pediatric Residency Training Program Fellowship Director – Fellowship in Child Abuse Pediatrics

**APPD 2023 Annual Fall Meeting** 

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### I have NO financial disclosure or conflicts of interest with the presented material in this presentation.





### Mr. Herbert L. Walker

APPD 2023 Annual Fall Meeting



# Happy Birthday Mi Fadah!

Sunrise: September 21, 1944 Sunset: December 31, 2022



## **Presentation Objectives**



\*Identify the core elements of change management

- \*The Why
- \*The Who
- \*The What
- \*The How
- \*The Woes

\*Apply concepts on change management to address proposed changes aligned with new ACGME requirements for July 2025





## The WHY





### The WHY



New ACGME requirements that will be publicize shortly for compliance by July 2025.

\*The incorporation of many of these requirements will require change/transformation for many programs

Studies suggests >70% of transformation efforts fail!

Al-Abri, R. Managing Change in Healthcare. Oman Medical Journal 2007, Volume 22, Issue 3, October 2007

## **Possible Changes/Challenges**

\*Changes to experiential curriculum

\*inpatient vs. outpatient time, mental health training, individualized curriculum

\*Building and incorporating new curriculum

\*Negotiating protected time for core faculty

\*Transitioning to the X+Y scheduling model

\*Incorporating a holistic interview process for recruitment





## THE WHAT





## What is Change Management?



\*The concept of Change Management dates back to the early 1900s

\*Has roots in the study of:



### **Human Behavior**



### Why the Need for Change Management?



\*The success of any change management process depends on **effective planning** 

\*Includes

- 1. establishing objectives
- 2. communicating objectives to stakeholders
- 3. establishing the framework to deliver goals
- 4. defining **benchmarks**







## The Who



## The Chicken or the Egg





# Change mindset drives change management, not the other way around!!!

Rinne, A. Change Management Requires a Change Mindset. Harvard Business Review. May 18, 2023



### Self Management



\*Our ability to manage change hinges on our ability to manage ourselves (i.e. our fears and anxieties)

\*These realities and their impact on our decision making are often underemphasized, but are significant!

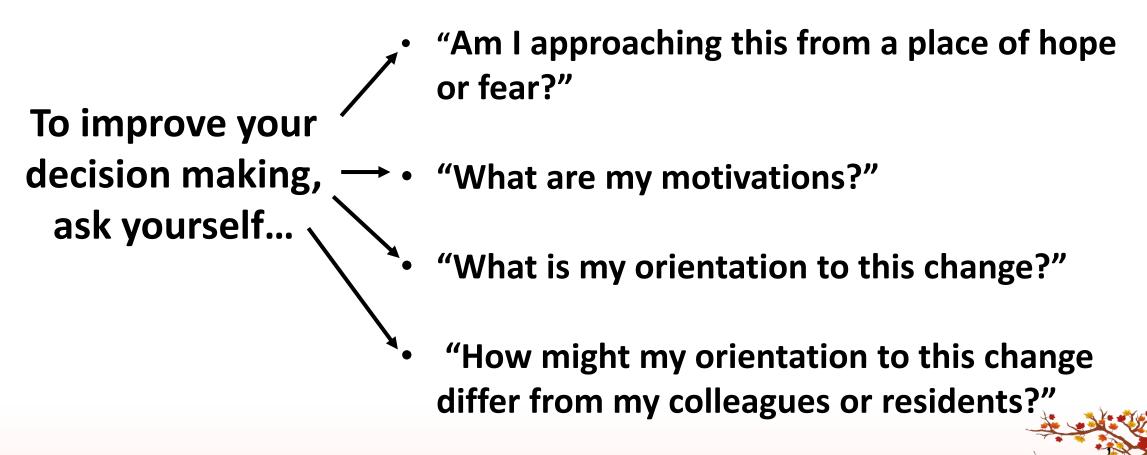
\*The more you know how you will react during change, the better equipped you will be to foster real change in yourself and your programs

Carucci, R. Organizations Can't Change If Leaders Can't Change with Them. Harvard Business Review. October 24, 2016



### Key Questions for YOU!





Rinne, A. Change Management Requires a Change Mindset. Harvard Business Review. May 18, 2023
 APPD 2023 Annual Fall Meeting

### Identifying Your Operative Narrative(s)



#### \*Operative Narratives

- personal philosophies used to navigate our lives
- \* includes "+" and "-" scripts
- may provoke unproductive behavior in ourselves and those we lead
- \*Leading change forces our operative narratives to surface

- To lead change, "-" scripts must be rewritten which requires:
  - <u>Step 1</u>: Knowing who and what triggers you
  - <u>Step 2</u>: Uncover and re-write your "unproductive" narratives
  - <u>Step 3</u>: Apply the new narrative



Carucci, R. Organizations Can't Change If Leaders Can't Change with Them. Harvard Business Review. October 24, 2016 APPD 2023 Annual Fall Meeting

#### The Role of "Transference"

By knowing who and what triggers you can break the cycle of triggers by identifying unproductive behaviors

#### \* <u>Example</u>: **"Transference**"

- In these moments, your behavior is shaped and motivated more by past experiences
  - \* i.e. When people asked questions for clarification about your ideas
    - \* can be interpreted as resistance to a vision or passive-aggressive doubt about one's ability
  - An angry response can then create the very resistance feared

Carucci, R. Organizations Can't Change If Leaders Can't Change with Them. Harvard Business Review. October 24, 2016
 APPD 2023 Annual Fall Meeting





#### **Applying the New Narrative**

\*It is imperative that you...

\*take notes on your behaviors

\*spot trends and correct as necessary

\*solicit feedback from team members

 track the impact of your behavior on others and how closely your actions align with intentions

Carucci, R. Organizations Can't Change If Leaders Can't Change with Them. Harvard Business Review. October 24, 2016 APPD 2023 Annual Fall Meeting







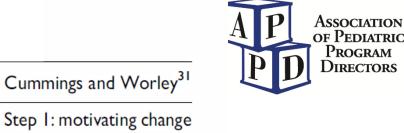


# THE HOW





#### **Change Management Approaches**



Lewin	Kotter	Mento et al.	Cummings and Worley
Unfreezing	Step 1: establish a sense of urgency	Step 1: determine the idea and its context	Step 1: motivating change
	Step 2: create a guiding coalition	Step 2: define the change initiative	Step 2: creating a vision
	Step 3: develop a vision and strategy	Step 3: evaluate the climate for change	Step 3: developing political support
	Step 4: communicate the change vision	Step 4: develop a change plan	
		Step 5: identify a sponsor	
Moving (transition)	Step 5: empower broad-based action	Step 6: prepare the recipients of change	Step 4: managing the
	Step 6: generate short-term wins	Step 7: create the cultural fit	transition
	Step 7: consolidate gains and produce	Step 8: develop and choose a change leader	
	more change	team	
		Step 9: create small wins for motivation	
		Step 10: constantly and strategically	
		communicate the change	
		Step 11: measure progress of the change effort	
Refreezing	Step 8: anchor new approaches in the	Step 12: integrate lessons learned	Step 5: sustaining
	corporate culture		momentum

Monto et al 36

Errida A, Lotfi B. The determinants of organizational change management success: Literature review and case study. International Journal of Engineering Business Management. 2021;13.

APPD 2023 Annual Fall Meeting

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### **Musical Tables: Find Your Table**

#### \* <u>Table 1</u>:

\* Changes to an existing experiential curriculum

#### \* <u>Table 2</u>:

\* Building and incorporating new curriculum

#### \* <u>Table 3:</u>

\* Negotiating protected time for core faculty

#### \* <u>Table 4</u>:

\* Transitioning to the X+Y scheduling model

#### \*<u>Table 5:</u>

\* Incorporating a holistic interview process for recruitment

#### \* <u>Table 6:</u>

\* Resident & Faculty Wellness







\*An approach designed by John Kotter (1996), a Harvard Business School Professor and change expert.

Developed this model from research involving 100 organizations experiencing the process of change.



#### 1. Creating an Urgency

- Identifying and highlighting the ACGME requirements
- Discuss the realities of not incorporating these changes
  - (i.e. citations, patient safety)
- Initiate honest dialogues to identifying assumptions and competing commitments
- Request the involvement and support of key stakeholders

### 2. Forming Powerful Guiding Coalitions

- Identifying effective change leaders in your department for your "change coalition"
- Continue to request involvement and commitment of key stakeholders the process in its entirety
- Identify skills gaps in the coalition teams and involve a diverse group of people from various divisions



## 3. Developing a Vision and a Strategy

- Determining the core values, defining the ultimate vision
- \* Identify strategies for realizing the change(s) needed
- Ensure that the change leaders can communicate the vision effectively to others

#### 4. Communicating the Vision $\mathbb{P}^{\mathbb{P}}$

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Program Directors

- Communicate the vision powerfully and convincingly.
- Connect the vision with crucial aspects departmental reviews, training, etc.
- Handle the concerns voiced honestly and engage with the reporters in meaningful ways.

#### 5. Removing Obstacles

- Ensure supportive departmental processes and structures are in place
- \* Continuously check for barriers/ resistance.
- Implement proactive actions to remove the obstacles involved
- Reward people for endorsing change and supporting in the process.

#### A SSOCIATION OF PEDIATRIC PROGRAM DIRECTORS

- \*6. Creating Short-Term Wins
  - Must be early in the process to give a feeling of victory in the early stages of change for marale.
  - Create achievable short term targets instead of one long-term goal
  - Reward the contributions of people involved in meeting the targets



#### 7. Consolidating Gains

- Achieve continuous improvement by analyzing the success stories individually
- Make improvement from the individual experiences.

### 8. Anchoring Change in the Program's Culture

- Use every opportunity to discuss the successful stories related to change.
- Ensure that the change becomes an integral part in your programs culture with visibility.
- \* Ensure that the support of the existing institutional and departmental leadership to anchor the change.





#### **Advantages**

- It is a step by step model which provides a clear description and guidance on the entire process of change.
- Emphasizes the involvement of the stakeholders for the success in the process.
- Major emphasis is on preparing and building acceptance of change instead of the actual change process.

#### Disadvantages

- With a step by step model, skipping even a single step might result in more challenges.
- \* The process may be time consuming.
- It is a top-down model and may discourage innovation from those not in leadership.

David A. Garvin and Michael A. Roberto. Change Through Persuasion. Harvard Business Review, February 2005 APPD 2023 Annual Fall Meeting

# THE WOES





# Habits & Routines

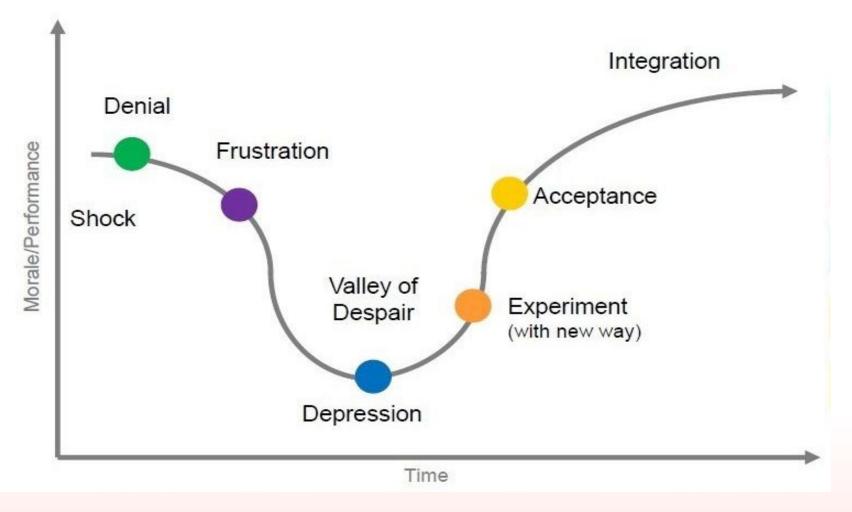


- People are creatures of habit.
- Organizations thrive on routines!
- Routines are thought to lead to more efficient cognitive processing.

- \*Routines are
  - \*predictable
  - \*automatic
  - unstated
  - \*self-reinforcing
  - \*resilient



#### How People Respond to Change



Attributions: Marsha Anderson & Lisa McQueen: Leading Change; APPD LEAD Presentation Association of Pediatric Program Directors

### **Dysfunctional Routines**



\*Unlike habits and routines, dysfunctional routines are barriers to change.

#### \*Some may be

- \*outdated behaviors that are now unhelpful
- \*knee-jerk reactions
- \*behaviors of passivity
- \*unproductive foot-dragging
- \*active resistance



### **6** Dysfunctional Routines



- \*A Culture of "No"
- \*The Dog & Pony Show Must Go On
- \*The Grass is Always Greener
- \* After the Meeting Ends, the Debate Begins
- \*Ready, Aim, Aim...
- \*This Too Shall Pass



# A Culture of No

AP ASSOCIATION OF PEDIATRIC PROGRAM DIRECTORS

In divisions dominated by cynics and critics, there is always a good reason not to do something.

Piling on criticism is an easy way to avoid taking risks and claim false superiority.

- This routine has two sources a culture...
  - \*that overvalues criticism
  - \*with complex decisionmaking processes
    - requires multiple approvals, where anybody can say "no" but nobody can say "yes"

# The Dog and Pony Show Must Go On

Association of Pediatric Program Directors

\*Some divisions place a lot of weight on process which confuses ends vs. means and form vs. content.

\*The presentation of a proposal becomes more important than what is actually proposed.

\* Change agents then devote large amounts of time to constructing presentations in hopes of obtaining sign-offs.

Despite the appearance of progress, there is little real headway!



### The Grass Is Always Greener

\*To avoid facing challenges, change agents may derailed initial plan by jumping from one proposed idea to the next.

\*At times, such "diversification of ideas" can be good.

 Other times, these efforts may be an avoidance tactic to not address any challenging issues







# After the Meeting Ends, the Debate Begins



 \*This routine is often hard to spot – cordial and cooperative meetings are followed by resistance
 \*resisters can be covert - after the meeting they take their concerns directly to departmental leadership

The result?: Politics is prioritized over substance!
 staff meetings then become empty rituals



#### Ready Aim, Aim...



Here, the problem is the inability to settle on a definitive course of action for change.

\*Team members generate a continual stream of proposals while change agents repeatedly fine-tune their choices without ever making a final decision.

#### \*Results in "analysis paralysis,"

\* common in perfectionist cultures where mistakes are considered "career threatening"



#### **This Too Shall Pass**



In organizations where prior leaders repeatedly proclaimed a state of crisis - but nothing changes..

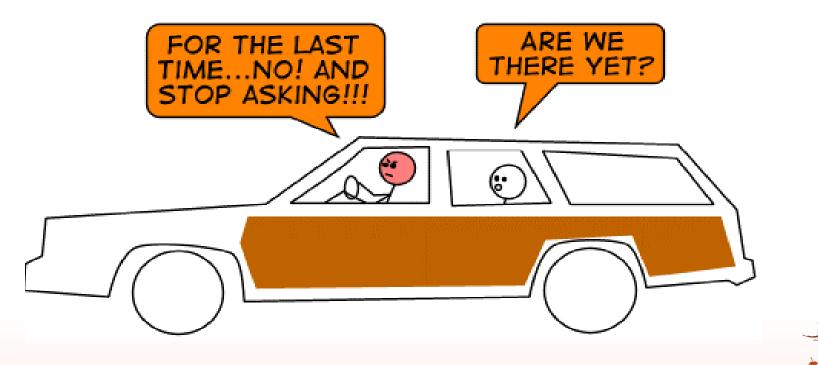
Stakeholder become jaded and

- \*develop a heads-down, bunker mentality
- \*display reluctance to respond to any directives related to change
- \*believe that the wisest course of action is to ignore new initiatives, work around them, or wait things out





# When to Say When?



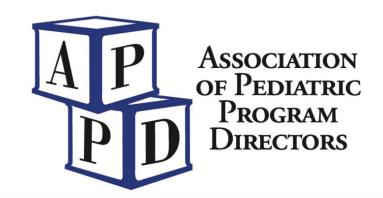
# Factors Critical for Success



- Clear and shared change vision strategy
- Change readiness and tangible capacity for change
- Activities focused on Change Management
- \*Resistance management

- \*Effective flow of communication
- Motivation of Change
   Agents
- \*Stakeholder engagement
- \*Reinforcement of change
- Monitoring and measurement

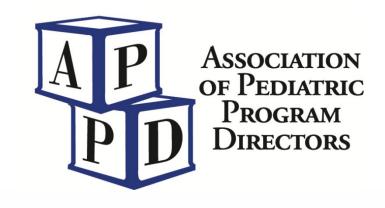
Errida A, Lotfi B. The determinants of organizational change management success: Literature review and case study. International Journal of Engineering Business Management. 2021;13



# Questions

**APPD 2023 Annual Fall Meeting** 

September 21-22, 2023 Renaissance Arlington Capital View Hotel Arlington, Virginia



# **Thank You!**

#### **Acknowledgements**

#### Program Director's Executive Committee Ms. Luisa Vaca Condado Mr. Herbert Walker

APPD 2023 Annual Fall Meeting

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# **APPD LEAD Council**



Interested in developing pediatric academicleaders and furthering the mission of the APPD?

This Leadership Opportunity may be for you!

LEAD is recruiting 2 Council Members this year

Application opens late September/early October 2023!

\*Prior LEAD participation not required!!!



#### **PDEC Updates**



\* PD Survey
\* PD Handbook
\* Peer Mentoring/Support

APPD Program Director Peer Support/Mentoring Network Sign Up



#### **Session Evaluation/Feedback**



APPD Section Specific Programming at Fall Meeting: Program Directors



