

Planned Change and Workforce Retention

An Improvement-oriented, Discussion Brief

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Planned change is a constant in public child welfare systems. It includes big changes such as new intake protocols, new safety procedures in the field, and new record keeping and reporting systems. It also includes small changes such as a new agency policy for “on call” and a new rule for “comp/flex time.”

Big and small changes like these are planned. At some point in time, they were someone’s “good idea,” and people developed mechanisms to communicate, adopt, and transfer these changes.

Both kinds of change influence workforce retention and turnover. In ideal circumstances, planned change enhances desirable retention.¹ In contrast, in sub-optimal circumstances planned change contributes to undesirable workforce turnover.

These two, related observations lead to an important question. *How can child welfare professionals increase the likelihood that planned change enhances desirable workforce retention?*

This question structures this exploratory brief. This brief draws on an interdisciplinary literature as well as its’ author’s direct experiences with child welfare systems experiencing change. Its aim is catalyze improvement-oriented dialogue, which ultimately results in better policies and practices that increase desirable retention.

This brief is written for a diverse audience. This audience includes officials from the New York State Office of Child and Family Services (OCFS), county commissioners and their management teams, staff developers, supervisors, caseworkers, trainers, and university faculty. Agency-based design teams comprise a special audience. All are involved in, and influenced by, the constancy of planned change.

Nine claims comprise the main argument. They are identified next to facilitate understanding and to help readers decide if they are willing to read the entire brief.

¹ The adjective “undesirable” here and elsewhere in this brief serves as a reminder that turnover is not inherently a bad thing; and also that retention is not automatically beneficial to the agency or to families. For example, when workers stay who are ill-suited for the work, the job and the agency, their retention is not beneficial. In the same vein, when these same workers leave, their turnover is beneficial, especially when their replacements are a better fit for the job, the work, and the agency.

1. The change process has a major bearing on what happens to the planned change, including how people react to it, whether it is implemented faithfully, whether it is effective, whether it lasts, and its' effects on retention.
2. The origins of the change and especially its originator(s)—the person or persons who planned it— influence the change process, the trajectory for the change, its main effects, and the side-effects.
3. Planned change is not just a technology transfer. It also is a social and cultural exchange. Importantly, this exchange depends fundamentally on the quality of interpersonal relationships, especially the presence or absence of trust and the system of power relations engrained in this exchange.
4. The change process also depends on organizational capacities (e.g., expertise and educational backgrounds of the workforce, computer technologies) and characteristics (e.g., size, location, climate).
5. Top-down, compliance-oriented change processes initiated with minimal consultation are normative in the public child welfare system. This typical pattern conditions leadership, management, and supervisory styles, and it inevitably elicits resistance and causes hard feelings. Predictable results include lower morale, diminished job satisfaction, an erosion of professionalism, conflict and resistance, and ultimately, undesirable turnover.
6. Although child welfare professionals know that this dominant approach to change causes problems, many have learned to accept it and even normalize it as “the way things are around here” and “this is what working in the child welfare system entails.” This disempowering perspective, in which staff at all levels feel “done to” by others above them in the child welfare system’s hierarchy, helps incubate undesirable turnover, especially among workers seeking working conditions supportive of professionalism.
7. There is a better way to approach planned change, and relevant theory, research, and successful change processes and experiences provide the needed principles and guidelines.
8. Improvements in desirable workforce retention and other related areas (e.g., higher job satisfaction, enhanced morale, better organizational climate, improved results for children and families) depend in part on implementing this better way.
9. It entails a “no-blame approach,” one that is strengths-based, solution-focused, and visionary (aimed toward higher ideals and better policies and practices); and which builds and sustains trusting relationships.

An entire book is needed to justify these nine claims. This brief earns its name because it merely introduces them and provides a planning framework. This abbreviated approach is consistent with this brief's aim of facilitating improvement-oriented dialogue.

Relevant Language for the Discussion

The playwright George Bernard Shaw once quipped that British citizens and some Americans are people with the same heritage who are divided by a common language. In short, words matter and so do their meanings in special contexts.

Language is especially important when diverse child welfare professionals need to communicate effectively, reach basic consensus, and then act together to make improvements. Striving for a common language for good communication, here is a simple, four-part vocabulary.

Innovation: The innovation is the substance of the planned change. Examples of innovations include new policies, rules, practices, technologies, working relationships, organizational structures, supervisory systems, teaming arrangements, and reporting-record keeping systems.

Dissemination/communication: These two related ideas are lumped together here to refer to how the innovation spreads ("moves") from its originator(s) to the intended target audiences and users. While innovation refers to the *substance* (the "what") of planned change, this word cluster refers to the *change process* ("the how"). This spreading or movement can be top-down, bottom-up, outside-in, inside-out, or some combination.

Adoption: Awareness gained through dissemination/diffusion/communication does not guarantee implementation. Adoption refers to the acceptance process and implementation process associated with an innovation over time. Adoption includes possibilities for varying degrees of acceptance, uneven and inconsistent implementation, and both resistance and sabotage.

Transfer/diffusion: This cluster refers to how an innovation spreads or transfers from one person to another; or one unit (e.g., Child Protective Services) to another (e.g., Foster Care) in the same organization; and also from one organization (child and family services) to another (e.g., mental health, substance abuse services).

This simple four part vocabulary enables individuals, groups, and teams to focus their dialogue. It calls attention to six related, but fundamentally different, aspects of planned change:

1. The substance of the innovation (i.e., "the what"), including its intended targets, uses, and purposes
2. How the innovation originates and gets communicated

3. Whether awareness leads to adoption
4. Whether adoption entails wholesale implementation, along with happy reactions and no undesirable side-effects
5. Who decides whether adoption and implementation are the “right” things to do at this time and in this organization
6. Whether and how an innovation transfers or spreads from one person to another, one unit to another, and one organization to another.

In short, a simple vocabulary helps individuals and groups “zero in” on the real priority. In other words, people are able to pinpoint and work on the “real problem” associated with the change or the change process.

At the same time, this vocabulary helps to prevent the troubles that result when “scatter-gun” problem-solving prevails. This syndrome develops because there is no consensus on “the problem” or on the personal, group, departmental, and organizational needs this change problem implicates. It also develops when front line workers, supervisors, middle managers, borough directors, and county commissioners lack “voice and choice” in the change process.

The System and Its Pattern of Top-down, Compliance-oriented Change

The public child welfare system spans federal, state, county, city, and local levels. Federal policy, manifested in part in The Adoption and Safe Families Act (ASFA) and also in the Indian Child Welfare Act (ICWA), is designed to align these multiple levels.

Alignment and Accountability

Alignment means consistency, coherence, and consensus across the several levels of the system. It entails getting federal, state, county, city, and local leaders “on the same page”-- with ASFA’s performance standards defining this consensus. It is developed through incentives such as funding and evaluation systems structured to ensure compliance and accountability.

This alignment idea is itself a planned change, and it has a dual character. First, it is standards-based. To reiterate, ASFA’s seven core outcome domains set these standards. Second, it is driven by performance-based (results-oriented) accountability systems developed in relation to ASFA’s standards.

The policy “theory” thus works in the following way.

- ❑ The federal government, via ASFA and ICWA, evaluates and disciplines the work of state departments such as OCFS. Federal child and family service reviews are especially instrumental in this evaluation and disciplining process.

- ❑ When states fail to meet their performance targets—and the majority does not—they must develop and submit for federal approval their respective program improvement plans. These program improvement plans, PIPS in shorthand, are another set of planned changes. These plans detail how states will bring their systems into conformity with the federal standards. In other words, these PIPS represent a collection of planned changes.
- ❑ Federal funding serves as the incentive for each state’s compliance with ASFA, compliance gained through the planned changes identified in its PIP. Depending on the state, funding serves as either a carrot or a stick.
- ❑ State offices like OCFS then pursue the implementation of their PIPS and all of the changes they entail. While some of these changes target state-level priorities, most are directed at county, city, and local systems. Here, state offices like OCFS seek the same standards-based, accountability-driven alignment expected of them (by federal officials).
- ❑ In turn, county commissioners and city child welfare system leaders are expected to disseminate these state-originated changes and facilitate their adoption in their respective systems. Local leaders are held accountable for doing so, with technical assistance provided by state officials as needed.
- ❑ Significantly, local leaders are expected to comply with these change mandates developed by persons higher up in the system. In this sense, county, city, and other local leaders function as intermediaries of planned changes, which originated at higher levels of government.
- ❑ Beyond the required changes from the federal government and the state, county, city, and local leaders often have their own agendas for planned changes, including some necessitated by the federal and state standards and PIP requirements.
- ❑ Front-line caseworkers and supervisors usually are the targeted adopters and users of all of these planned changes—federal, state, county, and city. Significantly, these workers tend not to be viewed as originators or designers of these planned changes. Rather, they are expected to comply with federal, state, and local change mandates.

Thus, ASFA’s policy theory structures a predictable, familiar pattern involving planned change. It is a top-down, compliance-oriented approach. This pattern influences the substance of the change—the innovations offered for adoption—as well as the change process and related dynamics. It also influences transfer and diffusion dynamics, i.e., whether the changes spread, how, and with what effects and side-effects.

Social Exchanges Involving Unequal Power Relations

Importantly, this pattern reflects and promotes a system of social relations and exchanges based on unequal power and authority. Here, power and authority are hierarchical and control-oriented. A particular kind of power—unilateral power (“power over” others)—dominates. This kind of power, system-wide, is engrained in the planned change process, and it structures behavioral and attitudinal norms that serve to perpetuate the system.

Evident system-wide, unilateral power also conditions leadership, management, and supervisory policies and practices in county and city agencies. Top-down, compliance-oriented systems and styles are commonplace, and all founded on hierarchical, unilateral power.

Moreover, this view of power and the social relations and exchanges it conditions nurtures the development of common assumptions to the effect that “this is what life in public child welfare entails”; and “you can’t change the system.” It also encourages grudging acceptance and even fear of speaking out.

For example, front-line workers and some supervisors quickly learn that “some things are not discussable;” and furthermore, “we can’t discuss the fact that we can’t discuss them” (Argyris, 2004). Norms, attitudes, and beliefs like these are among the factors that lead to undesirable turnover. They effectively push good people out of child welfare, especially persons in search of jobs and organizational conditions supportive of professionalism.

Considering the Irony of this Pattern

This pattern elicits resistance to change, along with several undesirable side-effects. This resistance is associated with a variety of emotions (e.g., anger, frustration, hostility) and coping strategies (e.g., withdrawal, sabotage, passive obedience). To the extent that workers at all levels, in essence, feel “done to” without voice and choice, over protracted periods of time this pattern influences the organization’s climate.

Above all, this pattern affects the workforce’s morale, job satisfaction, commitments to child welfare, and retention. These workforce effects and correlates start with front-line caseworkers and supervisors. These effects also include managers and even commissioners (who often feel trapped in double binds and “lose-lose” decision frameworks).

This top-down, compliance oriented approach is especially objectionable to workers with expectations, formal education, and needs regarding *professionalism*. Professionalism is associated with a career, not just a short-term job. It is associated with special norms, values, ethics, principles, and behaviors. It is grounded in voice and choice. It entails high levels of autonomy, or at least discretionary decision-making.

Professionalism in the workplace also entails power-sharing. In contrast to the kind of unilateral power (“power over”) described above, professionalism is associated

with *relational power*—“power with” others, i.e., shared power that enables collective action.²

Little wonder, then, that the aforementioned top-down, compliance oriented change pattern, in combination with the same style of leadership, management, and supervision, pushes out professionally-oriented workers and discourages the recruitment of other like-oriented persons. To the extent that this occurs—and, in the case of newly prepared social workers, there is evidence that it does—it contradicts state investments in university partnerships for social work education.

In short, *this approach to planned change helps to incubate undesirable turnover*. It continues to cause problems at the same time that the US Children’s Bureau, the Child Welfare League of America, the American Public Human Services Association, The National Association of Social Workers, and state child welfare officials have launched workforce recruitment and retention pilots. Parallel, somewhat contradictory change processes are underway in the public child welfare system.

No one “planned it” this way, and this brief should not be viewed as a blame-oriented indictment. Well-intentioned people at all levels of the system are enmeshed in a self-perpetuating pattern that has unintended, undesirable side effects.

This brief thus offers the opportunity to begin discussing the “undiscussables” with an eye toward a better system. It is based on the assumption that the same people whose orientations and actions serve to maintain this pattern are the same ones who can fix it. Together they can develop better approaches, especially ones that yield expected benefits while avoiding unintended, undesirable side-effects.

Toward Better Approaches

Research on both successful and unsuccessful planned change initiatives has yielded a wealth of knowledge and understanding about how to proceed as well as what to prevent and avoid. Fortunately, these new approaches to planned change are not in a “cookie cutter” format or a “follow the numbers” protocol. If they were, these approaches would comprise another opportunity for top-down, compliance-oriented change.

These new approaches require considerable, professional discretion and proactive planning. They are structured by action-oriented principles and guidelines. These principles and guidelines enable leaders at all levels of this system to develop sound, specially tailored approaches that fit the innovation, the local context, and the agency’s special needs. They also enable change planners to anticipate sources of undesirable resistance; and to plan strategies that prevent and address them.

² This is the kind of power associated with interagency design teams, as discussed later in this brief. This relational power also is associated with consultative and collaborative leadership, management, and supervisory styles and protocols.

Anticipating and Preventing Resistance to Change

Resistance to change is predictable and unavoidable. The key is to minimize it and the problems it causes through prevention and early intervention strategies.

Toward this end, Figure 1 (attached) presents a comprehensive list of action-oriented guidelines. These guidelines identify the forces and factors that tend to create resistance and other problematic side-effects. Together they pave the way for a checklist for planners of change, both big and small, to consider *before* they announce and launch the change.

Readers of this brief may find it beneficial to consider recent examples of planned change in the light of this list (and Figure 2 below). For example, county child welfare workers may wish to focus on a recent, small change instituted by the commissioner; or, alternatively, a major change instituted by OCFS (e.g., Connections Build 18).

OCFS staff may wish to focus on a new federal mandate (aka a planned change). And other readers should do the same with an example of their own choosing (e.g., a recent training that introduced a planned change).

To reiterate: These reflections should not occasion finger-pointing and blaming dynamics. This brief is structured to facilitate blame-free, strengths-based and solution-focused dialogue among people at all levels of the system, people who operate with good intentions. This brief's value resides in the providing planning tools such as Figure 1, enabling good people to figure out what they need to figure out, learning and improving along with way.

Facilitators for the Adoption of an Innovation

Figure 2 (attached) presents a composite inventory of the factors that facilitate the adoption of an innovation.³ Although many are designed for big changes, they also are applicable to small ones. Together they provide a companion checklist for the one comprised by factors and forces fostering resistance to change.

All, except two, are self-explanatory. These two exceptions are described next.

Relational trust. Think about all of the interpersonal relationships involved in the public child welfare system. At the county or borough agency level, for example, at least nine kinds of relationships are normative.

1. Front-line service providers have relationships with children, youth, and families
2. Front-line service providers have relationships with each other

³ Although Rogers' (1995) framework is the centerpiece in this figure, this list of facilitators also transcends this important work, thanks to the several references listed at the end of this brief.

3. Front-line service providers have relationships with their supervisors
4. Supervisors have relationships with other supervisors
5. Supervisors have relationships with managers
6. Managers have relationships with other managers
7. Managers have relationships with top level leaders (e.g., county commissioners, borough directors)
8. Top level leaders have relationships with supervisors and front-line service providers
9. Top level agency and borough leaders have relationships with their state and city superiors

Now ask these two questions. *How many of these relationships are cemented by trust? Why or why not?* Addressing these two questions puts individuals, groups, teams, and entire organizations on one path to improvement—the path paved by relational trust.

After surveying an extensive literature on organizations able to improve, two researchers, Bryk and Schneider (2002), developed this concept of relational trust. Relational trust refers to interpersonal relationships cemented by faith, confidence, credibility, integrity, dependability, and norms of reciprocity (voluntary “give and receive” norms). It paves the way for harmonious, synergistic relationships and also for the special kind of power introduced earlier—relational power (“power with”).

These researchers found that organizations with rich stocks of this interpersonal, relational trust were able to improve because they were able to implement efficiently and effectively the kinds of planned changes that best responded to their needs.

In contrast, organizations without this kind of trust made minimal, if any progress. Absent trust, the risks and costs of change-related improvements were too formidable. Absent trust, suspicion and resistance to change were ever present, especially when changes originated at higher levels of the organizational and child welfare system hierarchy. For example, if front-line workers do not trust people at the top, why would they show enthusiasm for changes they offer?

Bryk and Schneider offer another important observation about relational trust. *It is “especially important for organizations that operate in turbulent environments, that depend heavily on information sharing for success, and whose work processes demand effective, decentralized decision-making.”* (p. 33). Since child welfare organizations, like schools, fit this mold, an important question arises. How is relational trust developed and maintained?

Here is the simple, short answer. Relational trust is developed and maintained in everyday interactions. Individuals, groups, and teams make determinations, based on what they perceive, hear, see, feel, and experience, whether another person or group merits their trust—and importantly, whether they will take the risks involved in trusting others. This idea of risk is important to relational trust because trusting someone also means risking betrayal, disillusionment, and deeply hurt feelings.

Solid, vibrant relational trust literally feeds on itself. As trust in another or others proves to be warranted and safe, the stage is set for future trusting relationships, especially instances where trust is more quickly and freely given and received. In ideal circumstances, trust spreads from one network (caseworkers to other caseworkers) to others (caseworkers and supervisors; supervisors and managers).

This kind of contagious, beneficial, relational trust does not develop by accident. Byrk and Schneider (2002) emphasize that individuals, groups, and teams make important, daily decisions about their trust. As people ponder questions about whether others merit their trust, they evaluate four factors, along with the interplay among them.

- ❑ *Respect*: Manifested in the high quality manner in which people treat each other, including demonstrated abilities to listen intently to others' needs, feelings, and concerns⁴
- ❑ *Personal regard for others*: Manifested in acts of genuine caring, concern, and social support
- ❑ *Integrity*: Manifested in principled orientations and behavior, including a strong, shared ethical-moral orientation toward serving and supporting children, youth, and families in need
- ❑ *Competence*: Manifested in “follow up” and “follow through” actions based on promises and commitments made; and, more than this, doing the right things, at the right times, for the right reasons and getting desired results.

These four factors, along with the interplay among them, comprise building blocks for relational trust. Once prioritized, they are improvement targets with clear benefits.

One important benefit is individual, group, and organizational learning and improvement related to innovations. In the words of Bryk and Schneider (2002):

“...relational trust also lubricates the necessary social exchanges among ...professionals as they engage together, learning from each other in the trial and error of learning new practices. To be able to talk honestly with colleagues about ‘what’s working, what’s not’

⁴ Civility, now being promoted in one New York county system is a close relation. So is another system's initiate to stop hurtful, harmful gossip. So is kindness. And another is justice—organizational equity and fairness.

means exposing one's ignorance and making oneself vulnerable. Absent trust, genuine conversations of this sort remain unlikely." (p. 123).

A final note on relational trust: It is difficult to develop when strangers interact with strangers. In short, relational trust often is a casualty when turnover is high, when employees are treated like bureaucratic production units, and when impersonal supervision, management, and leadership styles dominate.

In this light, relational trust is facilitated by desirable retention.⁵ Reciprocally, desirable retention facilitates relational trust. In turn, both facilitate the adoption of innovations for improvement, and both encourage the development of relational power—whereby groups and teams can act together to achieve shared, important purposes.

Leadership. Leadership that is consultative, collaborative, and distributed (shared among the workforce and not monopolized by people at the top) is a facilitator for the development of relational trust, the adoption of improvement-oriented innovations, and the development of high performing, learning organizations. Obviously, this leadership is at odds with the kind of top-down, compliance-oriented, “tighten the screws” leadership, management, and supervision described earlier.

This kind of leadership requires an infrastructure and new operational processes and procedures. Not by coincidence, the intra-agency design and improvement teams being piloted in New York State County Agencies and in the Queens Borough of New York City provide visible, practical, and effective examples of both an infrastructure component and new ways of operating. These teams are designed to develop relational trust among the members who, in turn, work to transfer this trust throughout the organization.

The top level leaders who have permitted these teams to develop, supported their operations, and acted on their concerns have been exemplars for consultative, collaborative, and distributed leadership. In the process, these leaders have built relational trust. At the same time, they have benefited from it as workers see them in a new light and start to trust them in new ways.

This same kind of leadership, with comparable infrastructures in support of it, is timely for relationships between OCFS and both county and city systems. Already present in rudimentary form, it appears to need extensive development.

California provides an important example of such an infrastructure. A representative group of county commissioners serves as the intermediary between the state office and local county and city systems. State officials try out new ideas and consult these commissioners before they proceed with the dissemination, adoption, and

⁵ Research on desirable retention in New York State indicates that good, supportive relationships with co-workers comprise an important reason for the retention of front-line workers and supervisors. These relationships signal relational trust.

diffusion of a planned change. They take seriously representative commissioners' views on timing, change processes, and evaluation-driven learning and development.

This kind of consultative leadership, with a supportive infrastructure, marks a remedy to the dominant pattern of top-down, compliance-oriented change described earlier. A facilitator for relational trust, this approach also is a facilitator for the adoption of important innovations that promise improvements in both services and outcomes for children, youth, families, and communities.

Perhaps state and federal officials can work toward similar working relationships involving new, collaborative leadership and management styles. Here, too relevant infrastructure supports will be needed, including communication structures conducive to consultation.

Concluding Thoughts

A colleague, after reviewing the rough drafts for Figures 1 and 2, reacted as follows. "Everyone knows that commissioners determine who and what will change in their agencies; and then workers decide if they'll go along with it or resist it. Bulleted lists like yours are not likely to be used, nor will they make any difference in how these systems operate."

Maybe this person is correct. If so, and if this brief's rationale and findings are justifiable, then this state of affairs does not bode well for the national turnover problem in public child welfare. Unintentional and unanticipated as its negative effects may be, the current system of arrangements for planned change helps to incubate undesirable turnover.

So, if my colleague is correct, and there is no hope for the kinds of improvements suggested in this brief, then the turnover problem will remain for the foreseeable future—despite investments by federal, state, county, and city agencies in enhancing desirable workforce recruitment and retention. As the saying goes, "business as usual today will bring results as usual tomorrow."

Good people can and should do better. The developing knowledge base for this improvement agenda, focused on the relationship between planned change and desirable retention, is developing rapidly. Representative examples, peppered throughout this brief, may help to focus improvement-oriented dialogue, priority development, and action planning.

The same persons responsible for the system as it is are positioned to do this good work—creating the better system both workers and families need and deserve. The choice is clear. The time has arrived to make it and get started with the important work that lies ahead.

Figure 1. Factors and Forces that Breed Resistance to Change

- ✓ The agency has a recent history of strife, conflict, mistrust, and faulty communications
- ✓ The commissioner, top level managers, key supervisors, and the agency 's opinion leaders, individually or in combination, are not change proponents
- ✓ The reasons for change are unclear.
- ✓ The proposed change is not viewed as the solution to urgent agency priorities, problems and needs
- ✓ Prior consensus has not been achieved regarding the need for the new directions represented by this change; and the proposed change offers little hope of producing this consensus
- ✓ The commissioner lacks the will and the skill to facilitate the change, including the ability to explain it, integrate it with other agency improvement priorities and processes, "piece it out", and provide long-term supports, assistance, and resources
- ✓ Caseworkers, supervisors, and other agency staff (e.g., the staff developer) are at odds with the commissioner.
- ✓ The commissioner is at odds with state level officials promoting the change.
- ✓ Existing language systems are at odds with the proposed change, and change advocates and leaders fail to introduce and facilitate change as "a new way of talking"
- ✓ Important agency staff are convinced that the proposed change is outside of the realm of the agency 's responsibilities
- ✓ The anticipated benefits do not offset the costs (in terms of resources, time, effort, etc.)
- ✓ The proposed users of the change have not be consulted, and the proposed change is presented to them as "a done deal" or an accomplished fact
- ✓ Key opinion leaders are left out of the consultation and decision-making process regarding the desirability and feasibility of the proposed change
- ✓ Important constituencies, especially unions, agency board members, and other political officials, have been left out of the change process

- ✓ The change threatens established, cherished roles and working relationships among agency staff; and also among staff, students, parents, and community members
- ✓ Agency leaders, supervisors, and caseworkers lack the requisite knowledge, sensitivities, and skills for the change
- ✓ The change requires new organizational and community-based capacities, which agency, other community agencies, and neighborhood organizations do not possess
- ✓ Important intermediary people and organizations representing the neighborhood and the surrounding community do not accept lead responsibilities for change-related mobilizations, capacity-building, institutionalization, and sustainability
- ✓ The change threatens people's status, authority, and power in the agency, especially the status, authority, and power of key opinion leaders and groups
- ✓ The change entails loss of control over cherished opportunities (e.g., "on call"), equipment and facilities
- ✓ Change implementation plans are faulty—e.g., insufficient communication, unrealistic timetables, inadequate "phasing in" of complex innovations, and lack of access to technical assistance, professional development, and resources
- ✓ Individual and group-team practices and performances are made public with few or no safeguards and buffers against external criticisms and attacks
- ✓ The proposed change leaves little room for accommodations to agency directions, contexts, and cultures
- ✓ The agency has a risk-averse history, and its organizational climates and local environments also are risk-averse
- ✓ "The wrong mix" of agency stakeholders is assembled to plan, implement, and evaluate the change, especially when some stakeholders have questionable reputations and prior histories of exploiting others
- ✓ Change leaders have not anticipated resistance and have no plans for developing cooperative, mutually beneficial relationships with resisters
- ✓ Change leaders assume that the expanded improvement plan (on the drawing board) "speaks for itself"; and they have neglected or under-estimated needs for professional development, consultation, and "on demand", job-embedded technical assistance as the change is implemented

- ✓ Change leaders have neglected or under-estimated needs for barrier-busting protocols and trouble shooting systems
- ✓ Staff turnover is high, and agency leaders are challenged to find high quality replacements and to get them “on line” on time
- ✓ Agency leaders, especially commissioners, lack research-supported knowledge and competencies for facilitating planned change
- ✓ The agency already has embarked on an ambitious change agenda and the proposed change represents a “turning point” or threshold whereby people exclaim “enough”, “not now,” and “no more.”
- ✓ Caseworkers, supervisors, and other front-line professionals who are expected to adopt, endorse, and implement the innovation do not trust each other or the leaders (especially the commissioner) who are promoting the innovation.
- ✓ Agency leaders, especially commissioners, do not develop change-related, infrastructure supports, including collaborative and distributed leadership structures and processes
- ✓ Agency and change leaders focus exclusively on individuals, groups, and new technologies, while ignoring and neglecting the development of organizational norms, structures, and operational processes conducive to, and supportive of, the proposed change
- ✓ The agency lacks the capacity to obtain data and learn from mistakes in order to learn and improve
- ✓ The agency has in place organizational norms, structures, and processes for justifying and “normalizing” sub-optimal performance
- ✓ Agency communication patterns and policy learning are sub-optimal, and management styles are punitive, compliance-oriented, and controlling
- ✓ The change-related evaluation plan does not include measures sensitive to minute progress indicators, “baby steps” that signal success, and the development of new individual, group, and organizational capacities, which are prerequisite to success
- ✓ Evaluation-related, communication mechanisms are faulty and, as a result, hard-working people do not receive timely feedback about their progress and success stories
- ✓ The innovation is not matched to urgent problems needing to be solved, results do not improve, and yet another program or service is added on to an already-incoherent and fragmented planning agenda

- ✓ The change process is viewed as “cemented in stone” protocol demanding compliance instead of an ever-evolving, data-driven journey
- ✓ The change process is viewed simplistically and narrowly as a technology transfer, ignoring and neglecting social and cultural change-related needs; and new individual, group, and organizational capacity-building needs
- ✓ Leaders misinterpret learning and adaptation needs as resistance to change and attempt to squelch the “resistors”
- ✓ The change map, the change compass, or both are flawed

Figure 2. Factors Facilitating Adoption, Implementation, and Diffusion/Transfer

Anticipating Resistances:

- When constraining and inhibiting factors and forces in the agency have been anticipated, and preventive strategies have been implemented, adoption is facilitated.

Consensus:

- When leaders and key opinion-shapers are involved in decision-making, agree on the “problem(s)”; see the problem(s) as urgent and also see the innovation’s potential to solve the problem(s); and there is an agreed-upon path from implementation to better results, adoption is facilitated because of shared meaning-making

Leadership:

- When leaders throughout the agency, especially the commissioner or the borough director, view the innovation as a moral imperative, endorse it, and make long term resource commitments, adoption is facilitated.

Clarity/Communicability:

- When the innovation is easy to understand and can be communicated successfully to key opinion leaders and users, adoption is facilitated

Relative Advantage:

- When the innovation promises important benefits, especially improvements not likely to be achieved in any other way; and these benefits outweigh the costs, adoption is facilitated.

Observability:

- When the innovation’s benefits are noticeable to adopters and other important stakeholders, adoption is facilitated

“Trialability”:

- When the innovation is easy to try-out and visible results derive from these trials, adoption is facilitated

Divisibility:

- When the innovation can be “pieced out” and implemented incrementally, aiming for “small wins” (Weick, 1984), adoption is facilitated

Confirmation:

- When the innovation yields immediate benefits and visible advantages even as it is implemented, adoption is facilitated

Relational Trust:

- When high levels of trust exist among commissioners, borough directors, deputies and other managers, supervisors, and caseworkers, adoption is facilitated.

Voice/Choice:

- When adopters-users participate in adoption-related decisions and enjoy some choice regarding implementation timetables and learning processes, adoption is facilitated.

Will/Skill:

- When adopters-uses have both the commitment to the innovation and whatever learning and development that accompanies it as well as the ability to meet its performance and attitudinal requirements, adoption is facilitated.

Feasibility:

- When the agency has the organizational and people-related capacities and resources needed for the innovation; when proper implementation resources and supports are offered “up front”; when the timetables are realistic; when the likely barriers have been anticipated; and when new roles and responsibilities are manageable, adoption is facilitated because uncertainty is reduced and prevented.

Compatibility:

- When an organic diffusion process serves as the planning umbrella—i.e., the innovation can be tailored to fit the local context, advances existing organizational directions, “fits” smoothly into existing structures and operations, and is consistent with the priorities, principles, and values of projected users—adoption is facilitated

Timing:

- When the time is ripe for the innovation, especially when it does not compete with other innovations being disseminated, adoption is facilitated.

Social Networks:

- When existing social networks in the agency are both the target systems and the action systems, adoption is facilitated and diffusion/transfer follows.

Consultation and Coaching:

- When implementation proceeds with consultations regarding systemic changes and coaching supports for new individual and team roles, responsibilities, and practices, adoption is facilitated

Organizational Readiness and Supports:

- When agency leaders receive consultative assistance and resources, which enable them to alter existing organizational policies, structures, and practices and develop more responsive counterparts, adoption is facilitated.

Valid, Sensitive Evaluation:

- When evaluation designs are embedded in the design and implementation process, the evaluation measures are sensitive to minute progress indicators and “small wins”, and positive evaluation results are communicated widely in a timely fashion, adoption is facilitated.

Data-driven, Adaptive Learning:

- When comprehensive, continuous improvement processes enable “in-flight adjustments” and both the detection and correction of mistakes—in short, when learning organization theory drives actual agency practice—adoption is facilitated

External Supports/Legitimacy:

- When powerful external constituencies (e.g., agency boards, parent and community groups, state Office of Child and Family Services) support and promote the innovation, and when these constituencies view the innovation as something the agency and the district should or must do, adoption is facilitated

Generativity:

- When work on the innovation yields additional innovations, and these innovations are valued and incorporated as appropriate, adoption is facilitated

Penetration/Integration/Institutionalization:

- When there is a clear path from the introduction of the innovation to the agency's central missions and core technologies, especially its child and family service technologies, adoption is facilitated.

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⁶ This reference list includes many studies focused on schools. Schools are like a “sister system” for child welfare, and the parallels are striking. Most of these school-focused studies are themselves grounded in an interdisciplinary literature, and they help compensate for the comparative lack of comparable research in public child welfare.

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