Leading Change Management for Program Delivery and Partnerships

Health District of North Larimer County

AGENDA

- Strategic plan for the Health District of North Larimer County
  - Context
  - Roles of the leadership
- Transformational nature of the partnership program
  - Organizational identify
  - Relationship to the system
  - Organizational process
  - Community engagement
- Implications for the transformation
- Keys to future success in transformation
- Duty of care responsibilities and successful transformation

"What if we don't change at all ...
and something magical just happens?"

Context

- Established the strategic plan
- Emphasized partnerships as a key strategy
- August 2024 budget study session determined to expand service delivery to invest in community organizations
- Evolving three existing partnerships
- Making investments in people, process and technology
- Executing the strategy in a multi-phased, evolving process

Leading change is shared leadership
ATTEND TO THE ORGANIZATION'S ACTIVITIES AND OPERATIONS

Board of Directors
Duty of Care

Shared leadership for transformational change is best employed using Appreciative Inquiry and Adaptive Leadership

- Establish strategy
- Legal and ethical obligation to act in the best interests of the Health District
- Ensure resources are managed effectively and ethically
- Engage actively and seek expertise and information to make informed decisions
- Review organizational data to assess performance inform oversight

Organizational leadership
Operational expertise

- Harness internal and external expertise to execute the strategy
- Develop and deliver operational excellence
- Provide operational information to the Board

The decision to partner is transformational
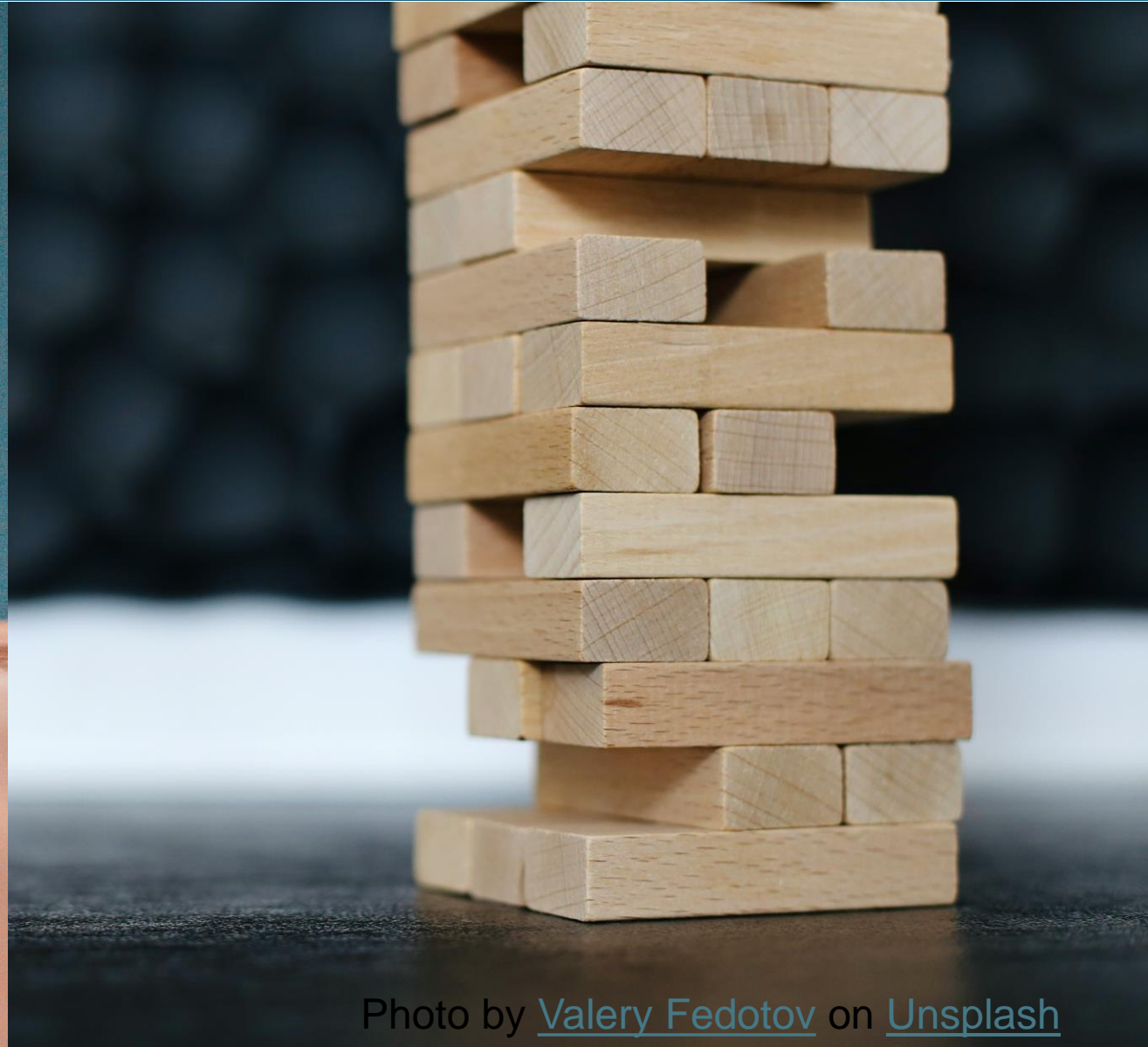
Focus on partnership

PARTNERSHIPS

Broad, cross-sector partnerships are needed to effectively address the full array of complex factors impacting community health.

GOALS

1. Assess partner relationships and opportunities for community engagement.

2. Build and strengthen partnerships that maximize impact on community health.

3. Improve collaboration between the Health District and our partners to advance health equity.
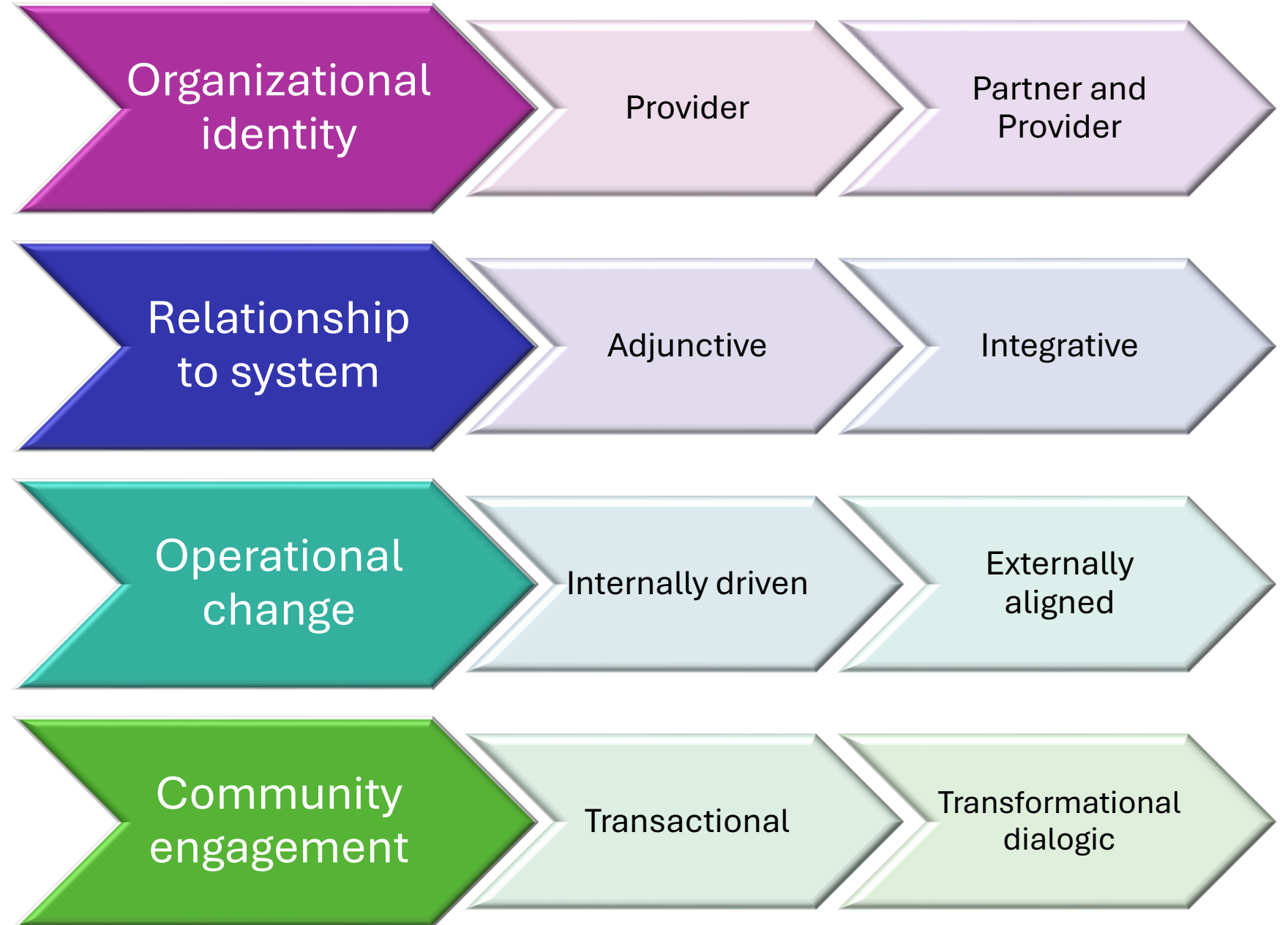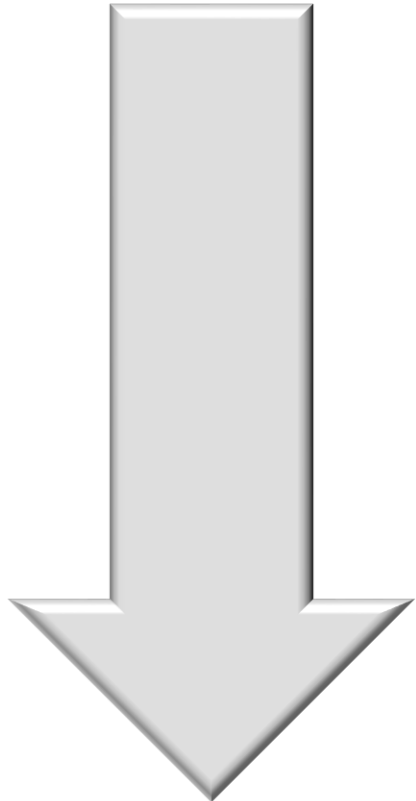
Key phrases:
- Community **engagement**
- **Impact** on community health
- Improve **collaboration**
- Advance health **equity**

The most difficult organizational changes

- Culture change
- Shifting mindsets or mental models
- Organizational restructuring
- Technology or digital transformation
- Changing performance metrics and incentives
- DEI Initiatives
- Changing core business/organizational models

Partnership as a primary strategy drives transformation on multiple levels

Organizational identity	Provider	Partner and Provider
Relationship to system	Adjunctive	Integrative
Operational change	Internally driven	Externally aligned
Community engagement	Transactional	Transformational dialogic

Organizational identity shifts

CLOSED SYSTEM

- Adjunctive to the system
- Defined interaction with external environment
- Focus on internal processes and structures
- Rigid boundaries
- Reliance on internal expertise and develop solutions to solve system gaps
- Community provided input
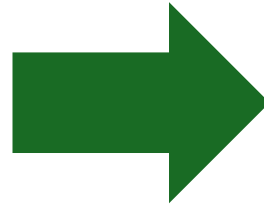
OPEN SYSTEM

- Integrated into the system
- Active, bi-directional engagement with environment
- Align with external environment (industry changes)
- Transparency and accountability
- Increased flow of information, people, and resources
- Co-created services and solutions in partnership relying on both internal and external expertise

Expanding organizational identity to include partnering and investing in community organizations as a key component of the goal of health equity for the residents of your district

| Organizational identity | Provider | Partner and Provider |
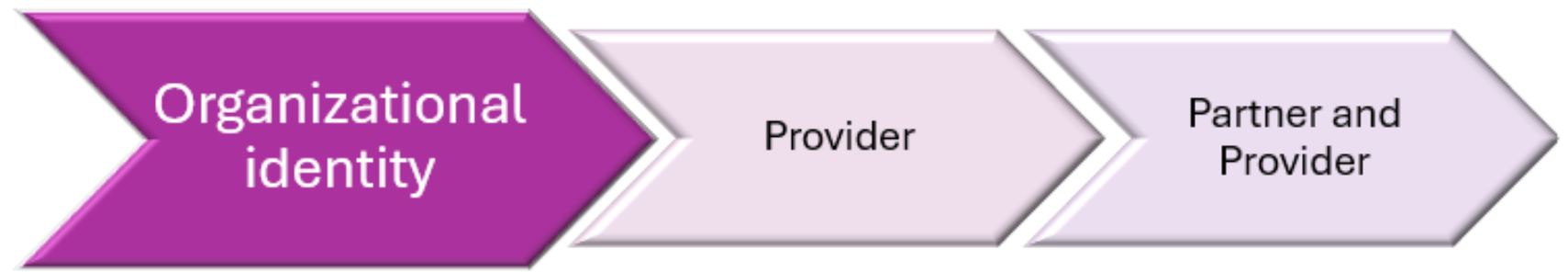
Expanding your organizational identity will drive transformation across multiple domains at the Health District

- Evolve relationship between the Health District and the broader system through greater integration to better assess, co-design, make investments, and monitor impact
- Operational excellence to administer effective partnerships
- Clinical and operational excellence in service delivery aligned with industry standards and best practices as part of the community health ecosystem
- Continuous bi-directional community engagement to review data, identify emergent and evolving needs and evolve services to address health equity gaps
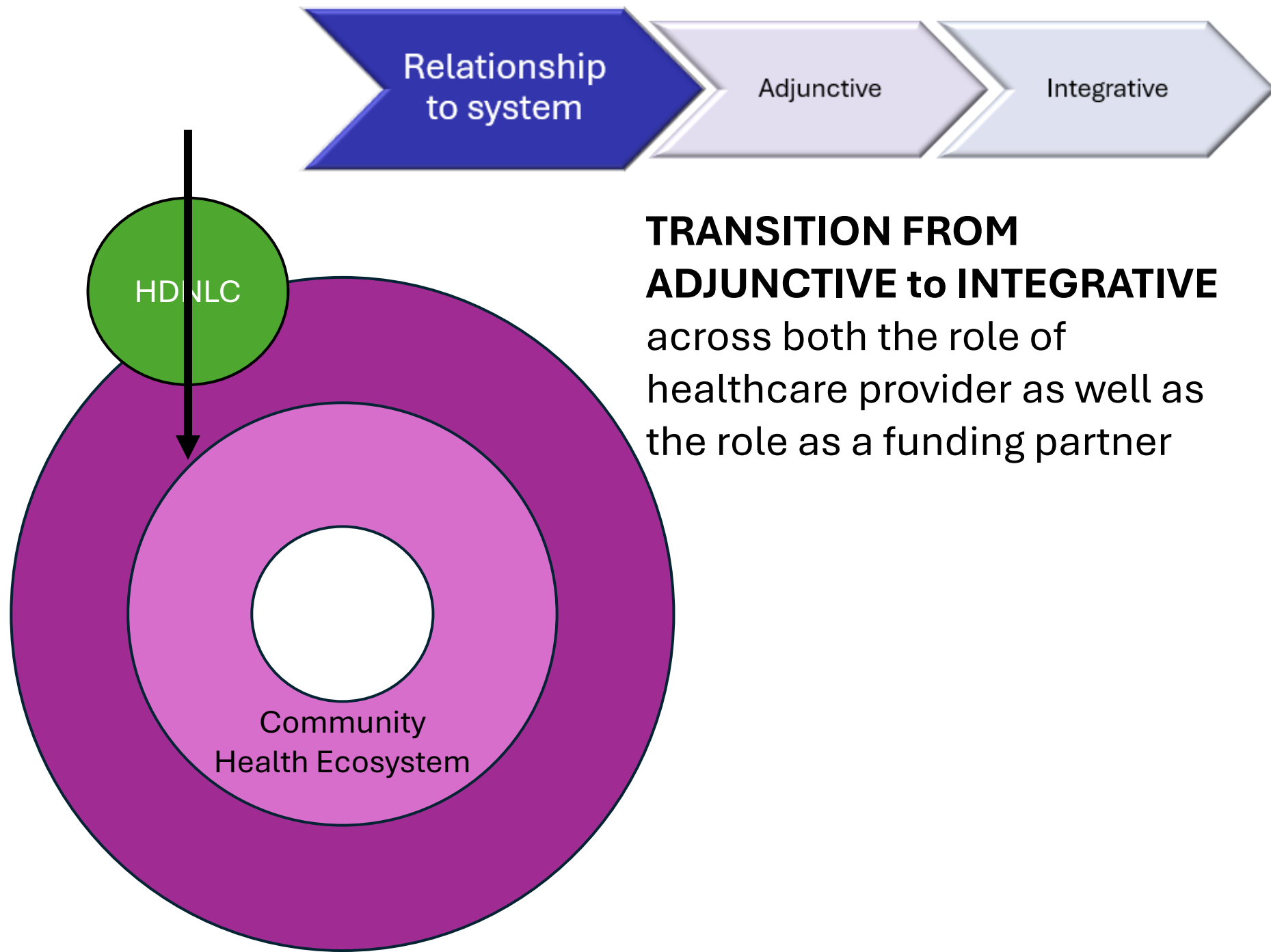
Partnership requires integration into the current system to gain insights, monitor results and address inequities at the levels of system AND care delivery

| Relationship to system | Adjunctive | Integrative |
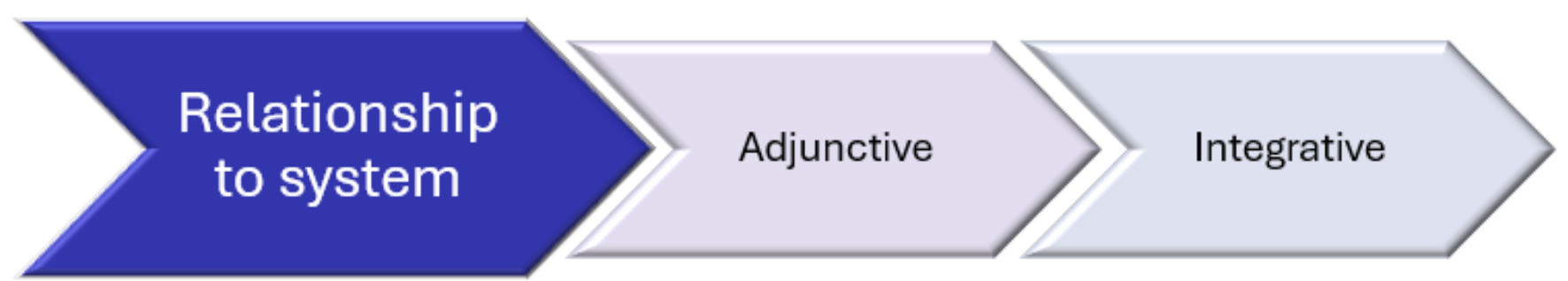
EFFECTIVE PARTNERSHIP

- Develop a partnership strategy that includes **clear priorities for Health District investment** (oral health, behavioral health, access)
- Identify **health equity gaps** (historical/ongoing, evolving AND emergent)
- **Assess partners'** organizational capabilities
- Engage **internal experts** to **support and build capacity** across the community health ecosystem
- **Leverage relationships** to design, monitor and improve systems and build positive working relationships for future collaboration
- **Co-design** services, data sharing and coordination processes with community partners
- Assess performance to **ensure the value of investments** with partners

Partnership requires alignment of operational and care practices, policies, and standards with the larger ecosystem for consistent standards and expectations for internal AND external investments.

| Relationship to system | Adjunctive | Integrative |

EFFECTIVE SERVICE DELIVERY
- Develop and/or hire talent to **deliver care according to best practices** and administrative team to support and review clinical and operational performance
- Operate in **alignment with the larger ecosystem** as an integrated care partner
- **Leverage relationships to develop** reliable, seamless **systems** of access and coordination
- **Share clinical information** with care team across ecosystem
- Collect, ddigest, analyze, and review **aggregated clinical care data to assess** clinical quality and **impact**

Opportunities
INTEGRATING INTO THE SYSTEM

PROVIDER

- Reputation as a valued care partner and collaborator as part of the system

- Enhanced coordination and clinical information sharing with larger ecosystem

- Equitable access if relationship determines access

- Perception of community partners that investments in HD programs are rigorously held to the same standards as external partners

FUNDING PARTNER

- Improved line of sight into how the system functions and its gaps will inform funding decisions

- Enhanced collaboration with partners drives transformational, bi-directional relationships and partnerships

- Continuous engagement and participation will help to uncover inequities

Effective implementation of the strategic plan require investments in people, process and technology to deliver programs and partner meaningfully

| Operational change | Internally driven | Externally aligned |

Develop and engage talent to execute strategy effectively

Technology and digital transformation

Evaluation and performance processes

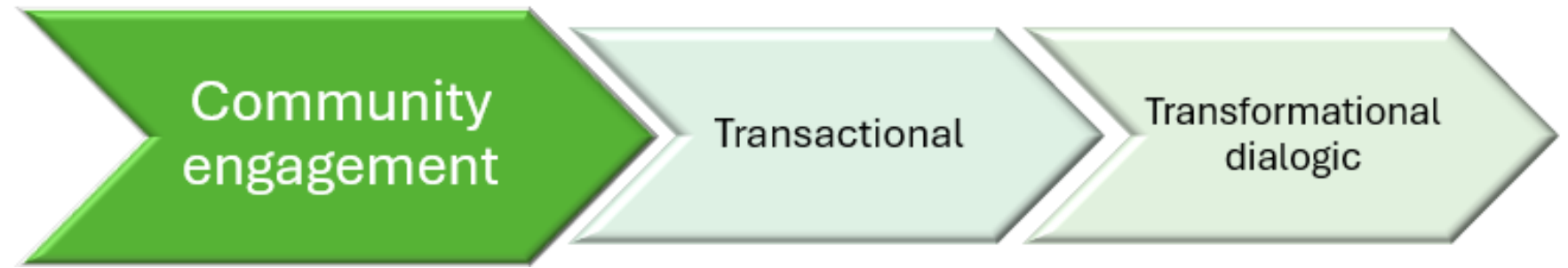Robust communication planning

Focused and intentional approach to change management

**Budget adopted in 2025 directs operational leadership to make these operational changes.**

Partnership requires continuous, bi-directional community engagement

Community engagement	Transactional	Transformational dialogic

- Facilitate a transformational vs. transactional relationship to community

- Keep your finger on the pulse of your investments, capture important learning and adapt to improve and build on success

- Engage in thought partnership alongside funding partnership

- Identify capacity needs across community providers to support success of investments

- Reach deeply into the community to uncover voices, perspectives, and experiences of marginalized county residents and better address equity

Good news!

- HDNLC has a well-crafted strategic plan to achieve transformational change across these levels
- 2025 budget resources key operational processes to execute the strategy
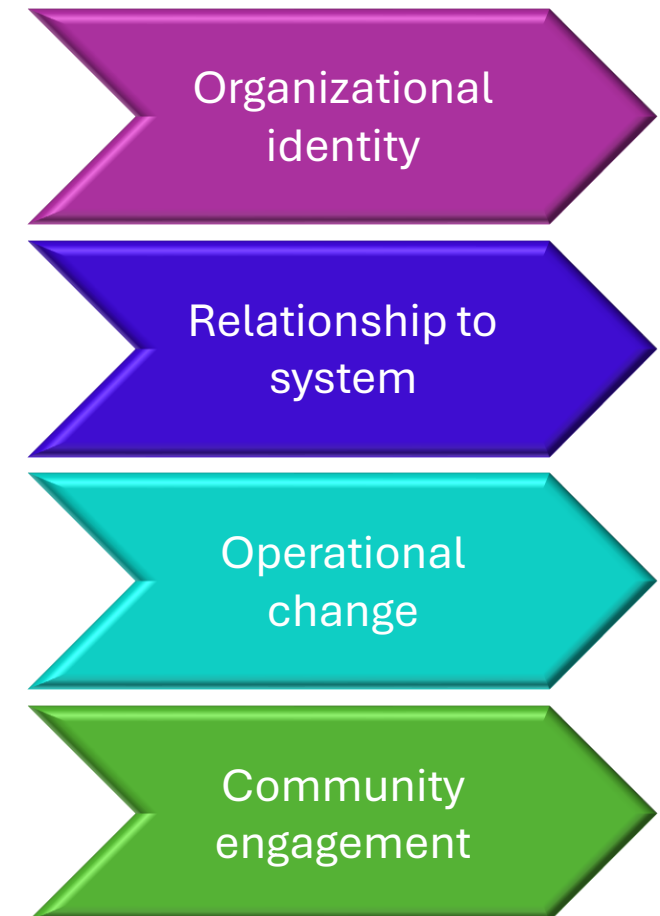
Why is the change so hard?

- Triggers loss aversion
- Requires energy and confidence
- Generates uncertainty and ambiguity
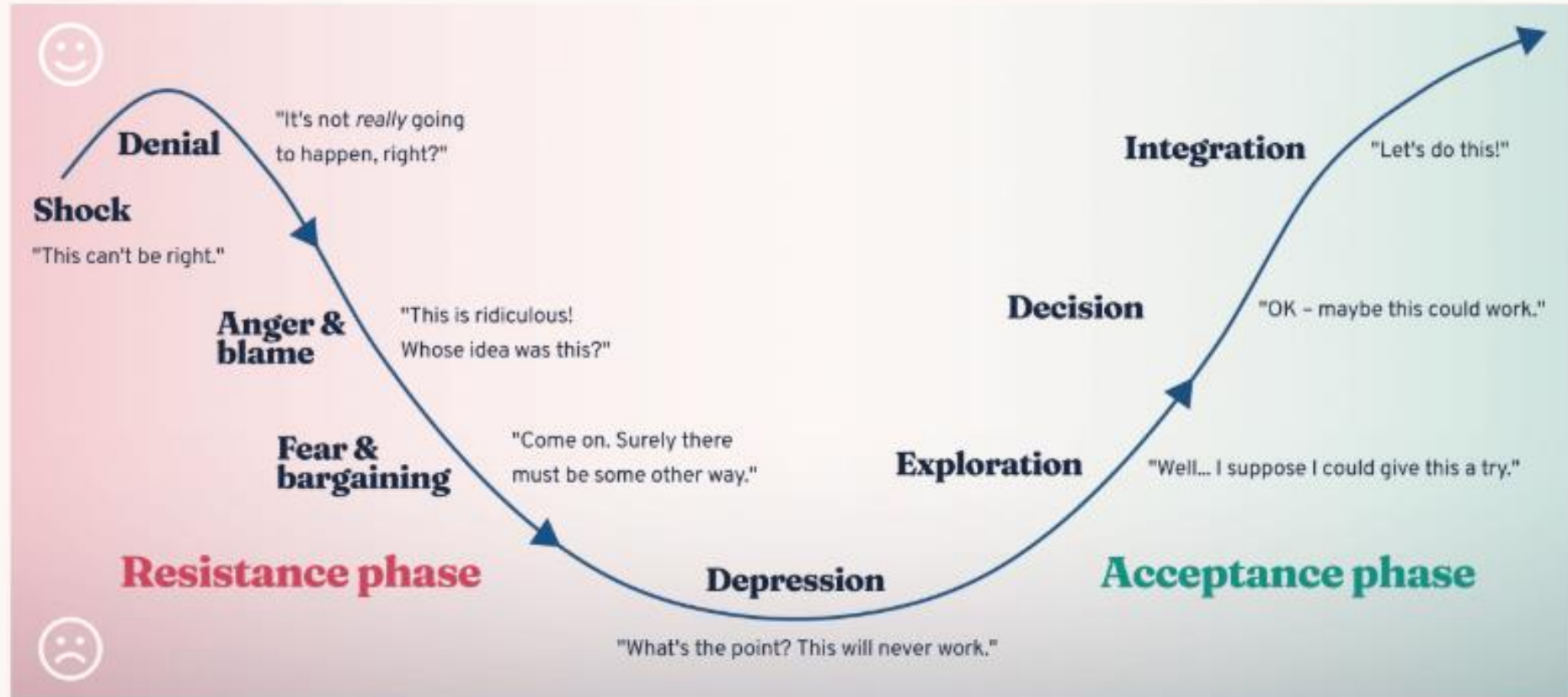- Engenders reactivity

Tall order for change to transform

- Magnitude and layers of change is enormous and multi-level

- Expect resistance and turnover at a higher-than-normal rate
    - Changes that impact organizational and professional identities will results in greater turnover —particularly if there is a strong emotional attachment to a special microsystem
    - Insularity or "special" system will complicate the change process and increase reactivity with integration into the larger ecosystem

- Abandonment of past change efforts reinforces and fuels resistance for future change efforts

- Specific, planned change management actions will need to be implemented at all levels from client-facing staff to the board of directors

- Shared leadership of the Board and organizational leadership must align to navigate the challenge of transformation

- A methodology for change applied repeatedly, continuously will be necessary to support transformation

Kubler-Ross Change Curve

The change curve

Denial — "It's not *really* going to happen, right?"

Shock — "This can't be right."

Anger & blame — "This is ridiculous! Whose idea was this?"

Fear & bargaining — "Come on. Surely there must be some other way."

Depression — "What's the point? This will never work."

Resistance phase

Exploration — "Well... I suppose I could give this a try."

Decision — "OK – maybe this could work."

Integration — "Let's do this!"

Acceptance phase

Keys to success
SHARED ADAPTIVE LEADERSHIP and APPRECIATIVE INQUIRY

Adaptive Leadership

Decades of research initiated at Harvard at the Kennedy School of Public Policy to identify how to lead change in an organization

- Supports organizational change as developmental
- Welcomes diverse viewpoints

Approach

- Identify adaptive challenges
- Regulate distress
- Draw on emotional intelligence
- Focus on the development of people and systems

Appreciative Inquiry (AI)

Decades of research demonstrating its effectiveness in support organizational change

- Cultivates resilience and reinvention
- Change is a continuous development process

Approach

- Lead with questions
- Co-create with stakeholders
- Prototype and pivot
- Leverage strengths

Transformational change
ROLE OF THE BOARD AND DUTY OF CARE

Ensuring stability while guiding an organization through uncertainty is crucial balancing fiduciary duties with adaptability.

- **Shared Vision** for alignment on change direction.
- **Support & Empowerment** for leadership to make bold moves.
- **Clear Communication** to foster trust and keep everyone informed.
- **Active Engagement** from the board in its strategic decisions and continued commitment to the strategic direction.
- **Accountability & Adaptability** to adjust governance as needed.

Successful change is a collaborative effort, enhancing an organization's impact and resilience.

A culture truly changes only when a new way of operating has been shown to succeed over some minimum period of time.

-John Kotter

Questions and comments

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Poudre School District, SummitStone Health Partners & CAYAC Partnership

April 24, 2025 – Regular Board Meeting Presentation

Transformational Partnership

HEALTH DISTRICT

POUDRE SCHOOL DISTRICT

SUMMITSTONE HEALTH PARTNERS

Health District
OF NORTHERN LARIMER COUNTY
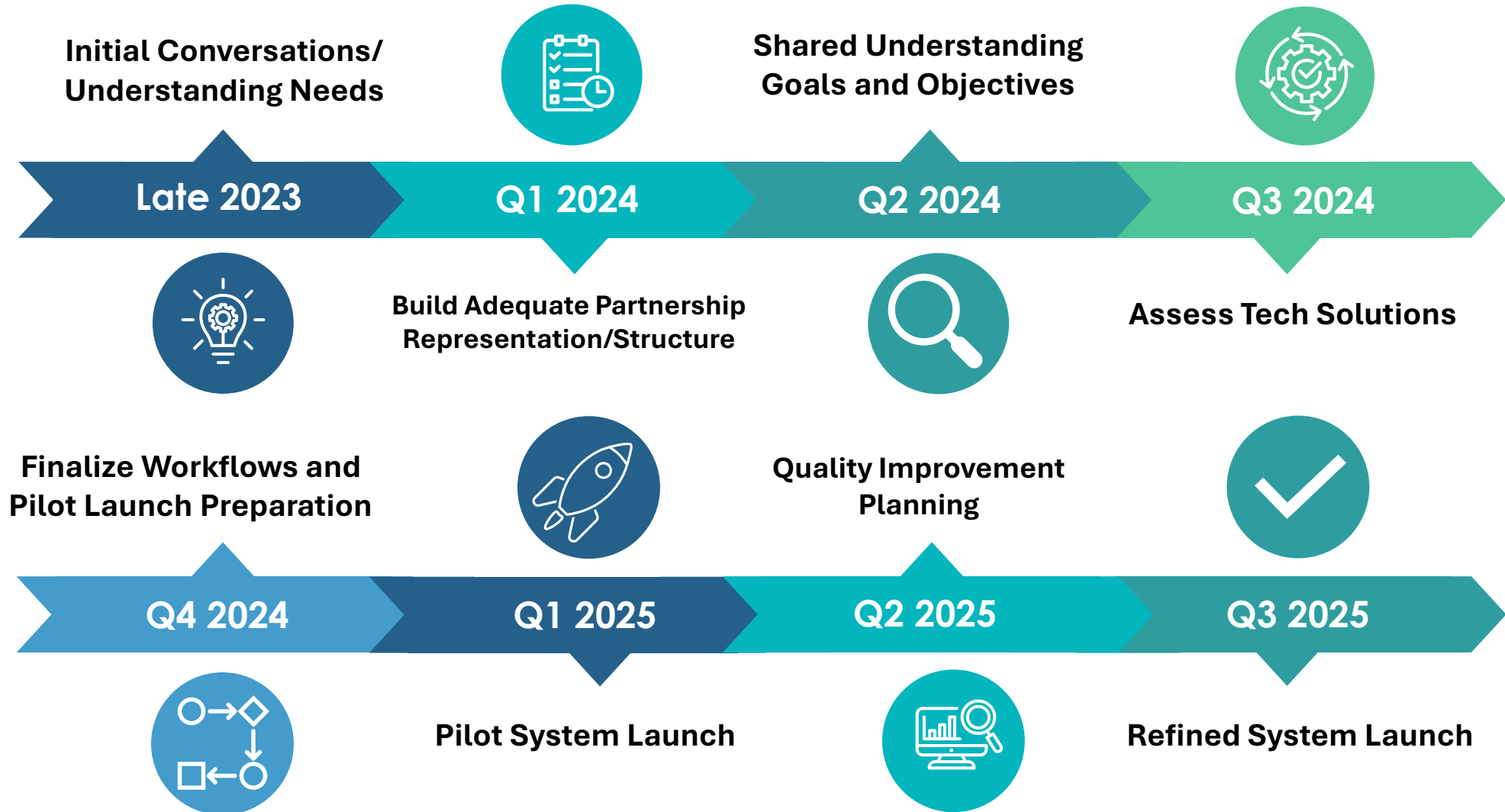
THE NEED

1 Timely, Efficient, and Equitable Coordination

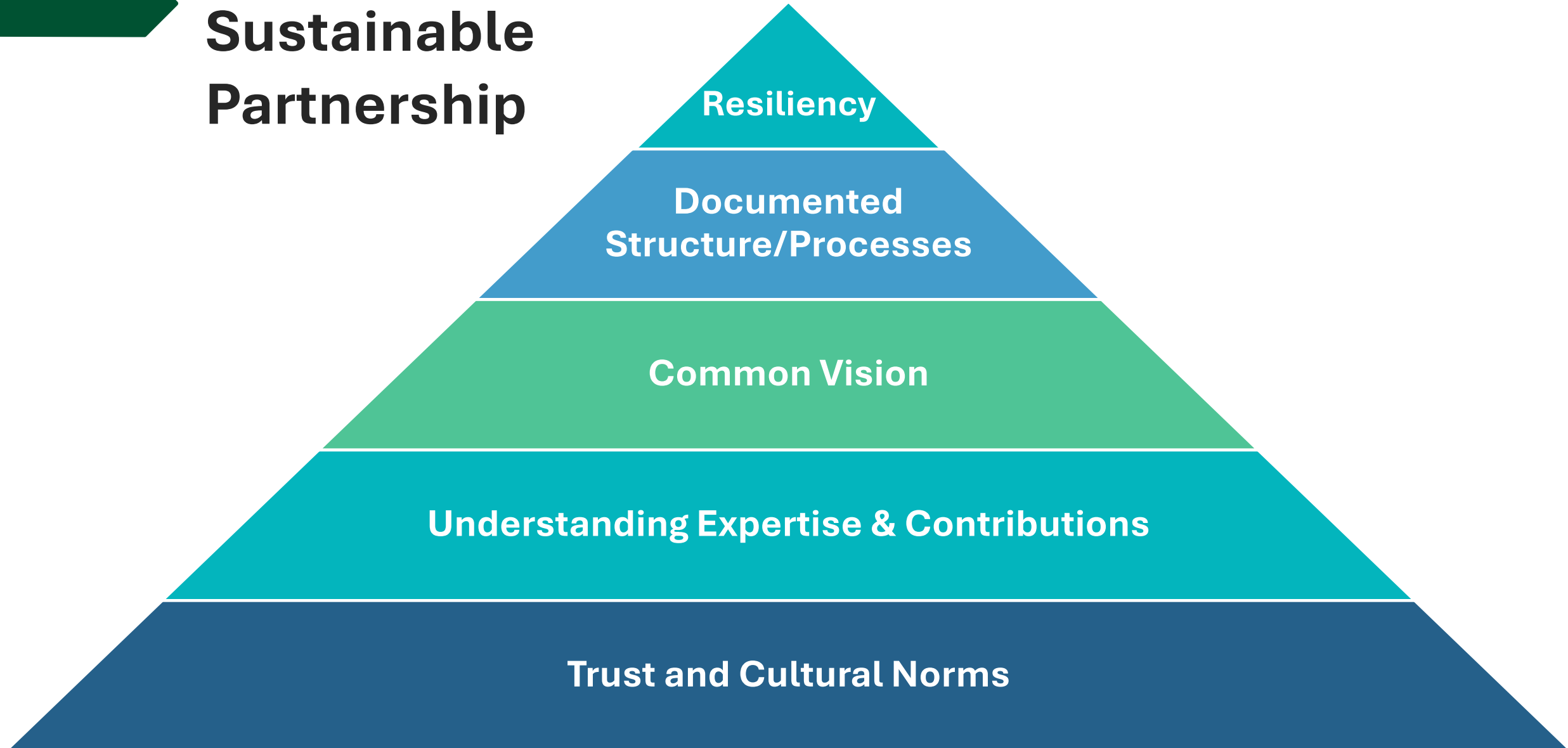**2** Centralized Front Door System for BH Service Referrals

3 Consistent Communication and Follow-Up Processes

Health District
OF NORTHERN LARIMER COUNTY

Foundation for a Sustainable Partnership

Pyramid from top to bottom:
- Resiliency
- Documented Structure/Processes
- Common Vision
- Understanding Expertise & Contributions
- Trust and Cultural Norms

Foundation for a Sustainable Partnership

PSD YOUTH & FAMILIES
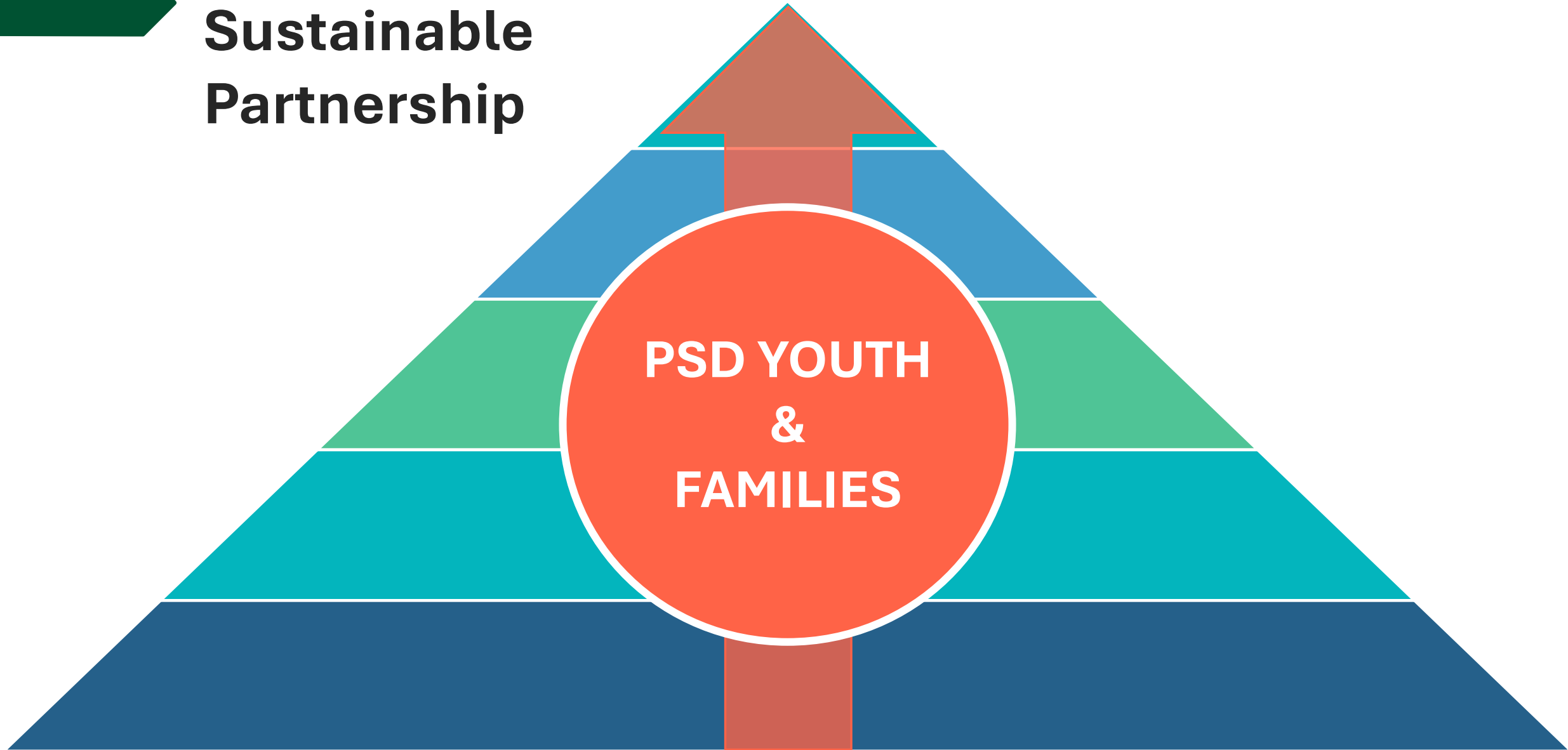
Worklow Cont'd:

- Define a shared procedure in the workflow for when ROIs and consent must be captured.

- What off-platform communication needs exist b/w CAYAC & SHP Care Team members?

- How do we standarize Communication & Coordination?

- What are shared expectations around Comms & Coordination?

Workflow Cont'd:

- How do we create a Consistent experience for students & families at entry points and at follow-up points?

Communication & Coordination?

- What are shared expectations around Comms & Coordination?

Workflow Cont'd:

- How do we create a Consistent experience for students & families at entry points and at follow-up points?

Logistical:

- Have triage criteria easily accessible for Care Team to reference.

Data Collection & Info Sharing:

- How/when do we share outputs and outcomes?

Question Parking Lot

Roles & Responsibilities:

- Build a shared definition of the Care Team.

- Define responsibilities expected of each member w/in the Care Team.

Workflow:

- What is the defined workflow for the Care Team to access the Sharepoint Repository?

COLLABORATION OBJECTIVES

1 Develop a "front door" for PSD behavioral health referrals

2 Enhance coordination and information sharing across all partner organizations.

3 Build a system that allows us to work towards understanding outcomes

Health District OF NORTHERN LARIMER COUNTY

WHAT WE BUILT TOGETHER

FRONT DOOR: Centralized Referral Platform!

ENTRY WAY: Collaborative cross-agency team to meet youth and families at the front door!

GATHERING SPACE: Ongoing, real-time feedback loop to iterate and improve services - Understanding of how to remodel the house and the understanding our guests.

FOUNDATION: Collaborative system that is not dependent on relationships and people.

Health District
OF NORTHERN LARIMER COUNTY

The Information Technology Solution

Behavioral Health
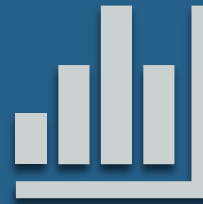Referral Team
(BERT)

Next Steps

Meet & Greet Tours with PSD Staff	**Shared ROI to further streamline the referral process**	**Outcomes & Evaluation Planning**	**Prepare for full launch 2025 - 2026 school year**

Health District
OF NORTHERN LARIMER COUNTY

THANK YOU STAFF & PARTNERS!

Health District
OF NORTHERN LARIMER COUNTY

BRANDING: VISUAL IDENTITY AND MESSAGING

Health District Board of Directors meeting
April 24, 2025

FOUNDATION.

CREATE A BRAND MARK AS A BASE TO BUILD AN IDENTITY THAT NOT ONLY MORE ACCURATELY PORTRAYS THE HEALTH DISTRICT TODAY, BUT ALSO SETS IT UP FOR SUCCESS IN THE FUTURE.

DESIRED TONE.

ASPIRATIONAL

ACCESSIBLE

MODERN

RESPECTFUL

CLEAN

ENERGETIC
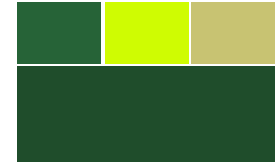
MOVING AWAY FROM SUB-BRANDING.

- Allows the Health District to cut down on confusion and have a cohesive look across the organization.

- Helps staff align to the brand for correct use and brand ambassadorship.

- Clear identity communicates one front door for different services.

- Allows dedication of resources to one strong identity instead of diluting it by splitting them among several identities

NEXT STEPS: VISUAL IDENTITY.

LOGO CHOICE AND REFINEMENT

COMPREHENSIVE BRAND GUIDELINES

PRINT AND DIGITAL MEDIA ASSETS

BRANDING + MESSAGING.

REASONS TO BELIEVE: THE SIMPLE EXPLANATIONS AND COMPELLING EXAMPLES THAT SHOW WHY CLIENTS CAN BELIEVE IN THE HEALTH DISTRICT AND ITS BENEFITS.

OUTSIDE-IN MESSAGING.

- We're in an attention economy. Breaking through the noise is essential.

- Compelling messaging means providing answers to people's needs, not sharing what's compelling internally.

- Part of outside-in is recognizing that people generally won't care about internal structures or innovations. They're interested in the solutions you can provide.

ON THE HORIZON FOR 2025.

NEW WEBSITE

LOCAL SEARCH

REIMAGINED DIGITAL AD STRATEGY