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"BOSSES" VS. "COACHES": A Transformational Shift In Thinking & Behavior

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Peter Senge describes "mental models" as "the images, assumptions and stories we carry in our minds of ourselves, other people, institutions and every aspect of the world."

Mental models act like the mirrors in a carnival funhouse – they frame and subtly distort our vision, determining what we see and how we understand things.

Because we all live inside complex, dynamic systems that are constantly evolving, it is only natural that we develop "mental maps" or "mental models" to help us make sense of the ever-changing world and navigate our life journey.

The problem is many people have a mental blinder called "*my reality is the reality*" -- which often means we cannot see the larger reality of the whole truth. Our mental models become blinders.

Henry Mintzberg's "*Doers*" and "*Helpers*" framework (see June 5th blog) provides "mental maps" that represent a transformed delivery system – with a fundamentally different DNA in which there are people who do the work, and some people whose purpose is just to help. If the "Helpers" thought or behaved like "bosses", we would have a top-down, command-and-control, one-size-fits-all system.

Clearly, the *Health Link's* local health and support services system isn't like that. They are designed to be transformative. "**Dream. Imagine. Make it happen**," says Health Minister **Deb Matthews**.

"*Doers*" and "*Helpers*" are mental models that enable us to understand our role, and what to expect. Another paradigm shifting framework is the "***Bosses Vs. Coaches Mindset***", which is rooted in the beliefs that we hold – because it is our beliefs and assumptions that drive our thinking and behavior.

Take a moment to reflect on the following points about *transforming the practice of healthcare management* -- from "**Bosses**" to "**Coaches**". Here are the transformational mindset shifts required:

- Bosses believe in controlling others through the decisions they make; coaches believe in facilitating others to make decisions as well as empowering them to implement their own decisions.

- Bosses believe that they should talk at people by telling, directing, and lecturing; coaches believe in engaging in dialogue with people by asking, requesting, and listening.

- Bosses believe that their job is to push people or drive them; coaches believe that they are there to lift and support people.

- Bosses believe they know the answers; coaches believe they must seek the answers.

- A boss triggers insecurity through administering a healthy dose of fear as an effective way to achieve compliance; a coach believes in using purpose to inspire commitment and stimulate leveraged creativity.

- Bosses believe that their job is to point out errors; coaches believe that their job is to celebrate learning.

- A boss believes in solving problems and making decisions; a coach believes in facilitating others to solve problems and make decisions.

- A boss believes in delegating responsibility; a coach believes in modeling accountability.

- Bosses believe in creating structures, rules and procedures for people to follow; coaches believe in creating a vision, and promoting flexibility on how to achieve it.

- Bosses believe that their power lies in their knowledge; coaches believe that their power lies in their ability to help bring the best out of people.

- A boss believes in focusing on the bottom line; a coach believes in focusing on the process that creates the bottom-line result.

- A boss believes in doing things right; a coach believes in doing the right things.

As you can see, "Bosses" are "Doers". They also take on "burdens", and protect the front-line from the "whole truth". Hard job: being a boss. Very hard. In a transformed system, bosses become coaches and "Helpers". It is an easier job -- the hard part is "letting go of control", or letting go of the "illusion of control".

Queen's Park -- and some LHINs -- need to become comfortable with "letting go of control" and empowering *Health Links* to self-organize to achieve the outcomes listed in their approved **Business Plan**. How can MOHLTC and LHINs become coaches to HSP? How can senior managers become coaches to middle managers, and how can middle managers be in service to front-line care providers?

Coaches are indeed "Helpers". They find ways to "add value" with the appropriate support that enables the "Doers" to succeed. Coaches also function with a set of <u>beliefs</u> and <u>assumptions</u>. Are your own beliefs aligned with the ***Coach's Credo*** that says:

- **Self-knowledge, and being self-aware, makes people more empathic, as well as more emotionally intelligent.**

- **People are inherently good and want to contribute.**

- **People support the changes and commitments they create and freely make -- not the ones forced on them.**

- **Unnecessary control is resented; people prefer to be "led", rather than "managed".**

- **People are doing the best they can with what they know and are aware of at any given moment.**

- **People make mistakes, but most do not set out to make mistakes on purpose.**

- **People really do want to improve.**

- **Mistakes can be framed positively, as learning opportunities for everybody on the team.**

- **Most people's limiting beliefs about their capacities and capabilities keep them from accomplishing more than they do.**

- **Outside input is most helpful when it is actually wanted.**

- **Coaches can build strong, trusting relationships by being open and honest in owning and disclosing their own thoughts and feelings.**

- **People's feelings must not be ignored -- a holistic view of people allows one to see the "whole person", in all domains of their life.**

- **People appreciate clear, honest feedback delivered in a straightforward manner.**

- **A safe, supportive, team-based collaborative environment produces synergy and innovation.**

- **Leaders need to be "in service to" their people, not in "control of" them.**

- **A boss's job is to remove barriers, provide the supports required to be successful, and hold people fully accountable for the outcomes -- results -- for which they have the "supports required" to be successful.**

If you too hold these assumptions, and a critical mass of people in your organization also holds these, or similar assumptions, you will want to become a *Learning Organization*.

Peter Senge describes a *Learning Organization* as "a group of people who are continually enhancing their capacity to create the results they want".   He believes that the building of learning organizations requires basic shifts in how we think and interact. It is an exercise in personal commitment to being open to learning. Without communities of people who are genuinely committed, there is no real chance of transformation.

According to **David Carnevale**, author of ***Trustworthy Government,*** one of the key differences between learning organizations and traditional controlling organizations "is that deeply ingrained defensiveness so characteristic of low-trust, traditional bureaucratic organizations undermines necessary learning. Trust expedites learning."

I love what Carnevale says. He says that "healthy learning organizations are managed with the objective of liberating and using employee know-how to improve work processes. The emancipation of employee know-how is enabled through a different philosophy of organization and job design, communication patterns, labor-management relations, participatory methods, and other processes that reduce the climate of fear and allow staff the necessary psychological peace of mind to fully engage their work".

Traditional bureaucratic organizations are dominated by the need for <u>control</u> and <u>conformity</u>, assuming that workers are incompetent -- and therefore must be carefully managed. In turn, this creates high degrees of mistrust, defensiveness and fear -- all of which undermine learning. Sounds a lot like our current environment, doesn't it?

A **Learning Organization** must be built on trust, togetherness and a sense of true community. Few, if any of the problems organizations face nowadays can be handled by one person acting alone. Energy and wisdom emerges from a sense of togetherness, and the skill of team learning -- to get things done; to encourage the kind of innovation that is essential for transformation; and, to create the conditions required for trust to develop.

Trust, in turn, improves togetherness and creates a culture and a community in which learning can flourish, innovation can emerge, and collective intelligence can surface. In such environment, people feel connected to purpose, and as a consequence, lead much more fulfilling lives.

Could the new *Health Links* be like that? Will the collaboration that takes place around this initial population cohort (the top 5%) ultimately lead to a transformed way of <u>thinking</u>, <u>doing</u> and <u>being</u>?

While it may be still too early to tell, the *Health Link* reports and slide-deck case history presentations I have seen -- and one partner retreat I have facilitated -- has me feeling fairly optimistic that this initiative just may succeed. I know 40% of you are saying "yeah, sure Ted, we've been here before". But have we? Or, is this actually our last opportunity to preserve our healthcare delivery system through transformation?

Is this our cause, our purpose? Are we ready for a transformation that starts by make a change in ourselves, a change in our own thinking and behavior? Can we shift from "*Bosses*" to "*Coaches*"? Can we shift our behavior as a "*Helper*" or a "*Doer*"?

If we can, we can transform -- and therefore preserve our healthcare system.

Next week's blog: *"THE GALILEAN SHIFT IN HEALTH SYSTEM DESIGN AND STRATEGIC ALIGNMENT"*.

FORWARD THIS BLOG TO COLLEAGUES WHO MAY BE INTERESTED IN ADDRESSING THE LINK CHALLENGES FACING HEALTH LINKS.