

Assessing Organizational Readiness for Change with the OCRBS: A PDSA Project Report

INTRODUCTION

The Organizational Change Recipients' Beliefs Scale (OCRBS) is an assessment tool that has proven useful and effective in assessing an individual's readiness for different sizes and types of public and private organizations and industries, in countries around the world.

The individual, self-report questionnaire can be administered at various stages of the change process and research shows it can provide: 1) a measure of current buy-in; 2) an assessment of barriers to successful organizational change; and 3) a foundation for increasing buy-in among organizational change recipients. Thus OCRBS can be used in three phases of organizational change; readiness, adoption, and institutionalization. The OCRBS is not specific to any particular change.

Excerpt: Social Determinants of Health (SDOH) Learning Network, Infant Mortality COIIN. (March 2017)
Assessing Readiness for Change: A Workbook. Page 8.

METHOD

Staff members of the Lifespan Health Unit in the Division of Public Health, Nebraska Department of Health and Human Services, were invited to participate in a test of the modified OCRBS tool (Appendix A). Staff were informed of the opportunity and the lead administrator's support at a staff meeting; every staff member received an email the following week with the survey attached and instructions on returning completed paper copies of the survey; every staff member received one reminder email regarding the survey. Communications to staff are also found in Appendix A. Completed surveys were returned anonymously to a central collection point. A single staff member was assigned responsibility for retrieval and collation of results.

RESULTS

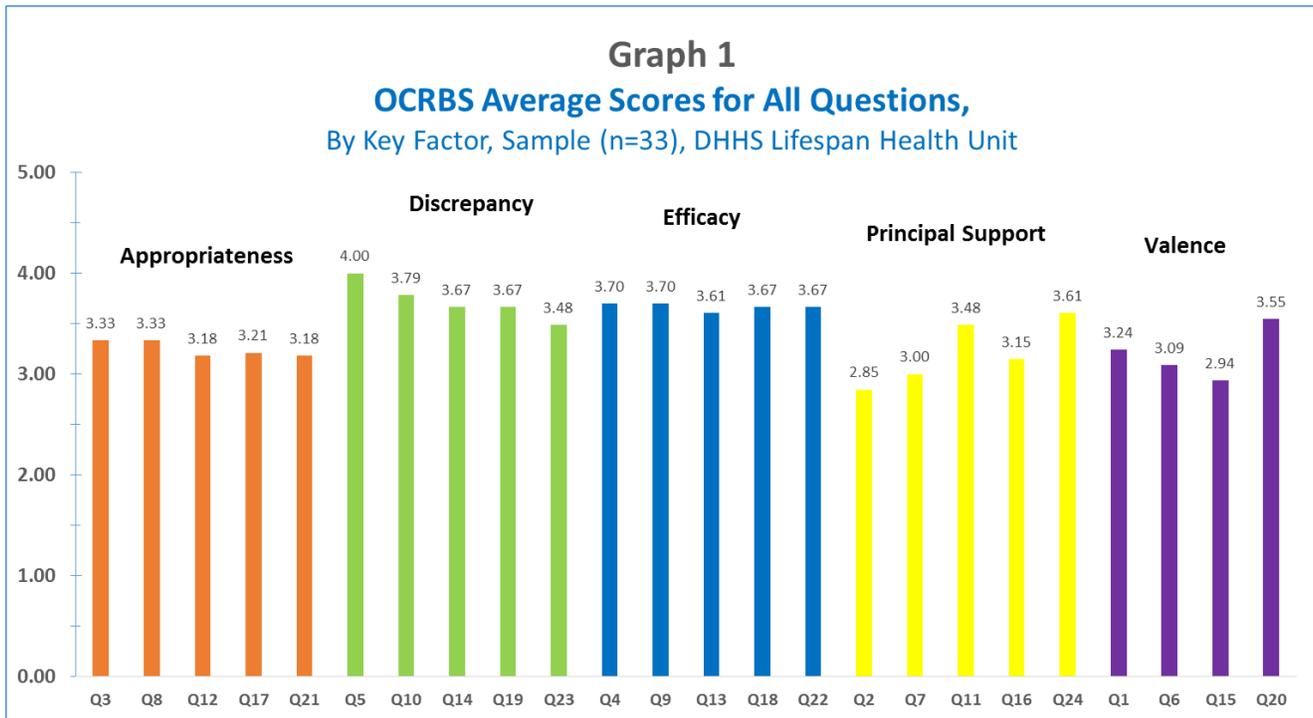
The response rate was 57%, with 33 of 58 unit employees returning completed surveys, two of which contained additional comments. These were provided directly (and anonymously) to the Unit Administrator, and not considered further for the purpose of this brief analysis.

The OCRBS questions align with five factors that are most likely to affect individual readiness for change. Each of the five factors has a subset of questions in the OCRBS tool. These factors can be measured and discussed within the organizational change processes. **Table 1** summarizes the five factors. **Table 2** shows the scoring matrix for easy reference. Our results were compiled and organized according to the national SDOH Learning Network workbook model, made available through the Infant Mortality Collaboration and Innovation Implementation Network. **Graph 1** shows the average for each question, grouped by factor subset in the Lifespan Health Unit sample. Variations expected within a team or unit within an organization.

Table 1: Five Factors Influencing Readiness	
Discrepancy: <i>Need for Change</i>	Defined as the extent to which one feels that there are or are not legitimate reasons and needs for the prospective change.
Efficacy: <i>Confidence in Ability to Change</i>	Defined as the extent to which one feels that s/he has the skills and is able to execute the tasks and activities associated with the implementation of the prospective change.
Principal Support: <i>Commitment of Formal and Opinion Leaders</i>	Defined as the extent to which one feels that the organization's leadership and management are committed to and support implementation of the prospective change.
Valence: <i>Beneficial to individual and organization</i>	Defined as the extent to which one believes that s/he will or will not benefit from the implementation of the prospective change.
Appropriateness: <i>Appropriate action to address needs or gaps, eliminate discrepancy</i>	The extent to which one believes that the organization will or will not benefit from the implementation of the prospective change.

Source: Social Determinants of Health (SDOH) Learning Network, Infant Mortality COIIN. (March 2017) *Assessing Readiness for Change: A Workbook. Page 8.*

Table 2: Key to Scoring Level of Agreement on the OCRBS	
1	Strongly disagree
2	Disagree
3	Neither Agree nor Disagree
4	Agree
5	Strongly Agree



Over all responses from the Lifespan Health Unit sample, most questions averaged responses between 3 (neither agree nor disagree) and 4 (agree). One average response reaches a score of 4. **The question receiving strongest agreement is:**

(Discrepancy) Q5: We need to change the way we do some things in this organization.

Two average responses fall below 3. **The questions which receiving weakest agreement, are:**

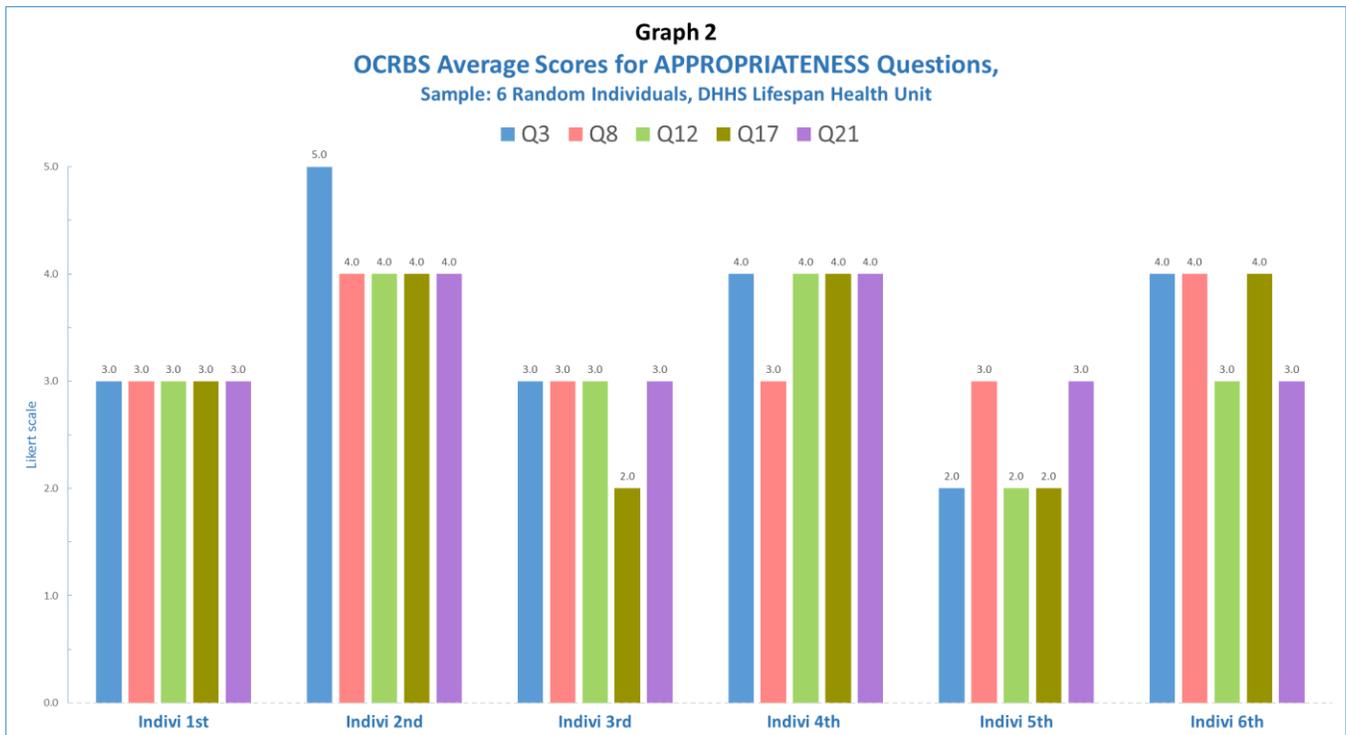
(Principal Support) Q2: Most of my respected peers embrace the proposed organizational change. (2.85)

(Valence) Q15: The change in my job assignments will increase my feelings of accomplishment. (2.94)

Of the five subsets, the average scores for **Discrepancy** are the highest of the five factors. The average for the subset across all respondents is 3.72. This factor with strongest agreement overall reflects a feeling there is a need for change.

Of the five subsets of questions, the average scores for **Valence** are the lowest of the five factors. The average for the four Valence subset questions across all respondents is 3.21. This area of weakest agreement overall is in the extent to which respondents believe they will benefit from the prospective change. It is important to note that the next two subset areas after Valence, and very close in score, were Principal Support with 3.22; and Appropriateness with 3.25. From there, average scores across subset questions jumped to 3.67 for Efficacy, and 3.72 for Discrepancy.

In order to better understand the variation in one subset between respondents, we selected every sixth completed OCRBS, and created **Graph 2**. In this display, the responses by six individuals (randomly assigned numbers 1 through 6) are considered for the subset of questions related to **Appropriateness**.



For this group of six individuals responding to the subset of questions about Appropriateness, one (Indivi 2nd) of the six individuals had higher scores overall with an average above 4. Indivi 5th shows the lowest scores of the six for the subset. Three of the six individuals (2nd, 4th, and 6th) show scores in agreement averaging above 3. A total of four questions (one from Indivi 3rd and three from Indivi 5th) received responses of 2, indicating disagreement. In summary, Graph 2 provides a glimpse into the variation within and between individuals. Taken as an entire group, Graph 1 shows neutral to only slight agreement on appropriateness. Looking at our sample in Graph 2, approximately half the group showed stronger agreement than the average overall would suggest.

CONCLUSIONS

The SDOH Learning Network recommends a “Data to Action” approach in response to the OCRBS. Users are urged to consider the findings as the basis for discussion and strategizing to increase readiness for change. Specifically, as shown in the Introduction, the OCRBS can provide: *1) a measure of current buy-in; 2) an assessment of barriers to successful organizational change; and 3) a foundation for increasing buy-in among organizational change recipients.* (Workbook, page 8.)

A Measure of Current Buy-In

Results generally are in the range of neutral to agree. The focus area with strongest agreement is Discrepancy. Results suggest that the staff group responding recognizes the need for change.

The weakest focus area overall is Valence. This result might suggest that staff seek information as to how change will benefit the individuals making the change. Close to Valence in average score is Principal Support, and Appropriateness. These scores might indicate a more affirmative leadership voice about how the organization will benefit from the change would be helpful.

Assessment of Barriers

The focus area of Appropriateness may deserve consideration as a possible barrier. In this subset of questions, the group average shows no score in the subset higher than 3.33. Appropriateness speaks to the extent to which the change is seen as beneficial to the organization. Neutral to only slightly favorable responses in this area may suggest staff lack an understanding of an overarching vision of how change will benefit the organization. This may deserve more discussion with staff. Do staff perceive “organization” as DHHS, the Division of Public Health, or Lifespan Health Services? By increasing buy-in, addressing how the well-being of the organization is being considered might address a barrier to change.

Foundation for Increasing Buy-in

The OCRBS may prove to be a valuable communication-starter for more discussion about the readiness of the Lifespan Health Services Unit for change. The five focus areas, with definitions and subsets of corresponding questions, may provide useful vocabulary and concepts for staff and leadership.

The area of Valence may be a place to consider as a place to start. The four subset phrases about change speak to: personal benefit, self-fulfillment, and feelings of accomplishment. A consideration for leadership to increase buy-in could be the challenge of communicating to staff how they will benefit from change, also known as “*What’s In It for Me?*”

LIMITATIONS

Response rate of 57% provided a robust sample of results. However, 43% of the staff group responses are not known due to non-response to the survey.

The analysis provided shows not only the average scores of the group by focus area, but also shows considerable variation within and between individuals. The results are not intended to suggest homogeneity or a one-size-fits-all approach that will meet the needs of each individual.

APPENDIX A: OCRBS Questionnaire (2 pages)

Page 1:



Department of Health and Human Services Assessing Readiness for Change

The Organizational Change Recipients' Beliefs Scale (OCRBS)* *For the Infant Mortality COIN, Social Determinants of Health Learning Network*

The Organizational Change Recipients' Beliefs Scale (OCRBS) is a 24 item assessment tool that has proven useful and effective in assessing an individual's readiness for organizational change, as well as helping to predict adoption, and institutionalization of a change. It has been validated in multiple settings, for different sizes and types of public and private organizations and industries.

This individual self-report questionnaire can be administered at various stages of the change process and research shows it can provide 1) a measure of current buy-in; 2) an assessment of barriers to successful organizational change; and 3) a foundation for increasing buy-in among organizational change recipients.

For the Lifespan Health Services Unit, this will be a useful tool for determining collective readiness for organizational change, such as new organizational practices, constricting budgets, unfilled vacancies and new leadership. Use of the tool in our unit also provides the NE COIN SDOH workgroup valuable insight on user experience with the tool and response rate.

INSTRUCTIONS:

The focus of change is moving to a leaner organization with new leadership, while sustaining commitment to helping Nebraskans lead better lives and fulfill program requirements.

Please note that the readiness assessment does not require that you know now what exactly the changes will be. You are being asked how you feel now about change toward a leaner organization more focused on business principles, under new leadership, while still working toward specific program and funder requirements.

- Each individual in Lifespan Health Services will be invited to complete the OCRBS (page 2).
- Answer the 24 questions on paper, based on your own individual beliefs, perceptions, opinions, and values. Only one response per person, please. No personal identifiers are collected.
- Submit your responses by dropping them off in the tray marked "Survey" at Christy Wheeler's cubicle by March 31, 2017.

RESULTS:

Result will be shared only in aggregate form, compiled by Mai Dang, first with Sara then by Sara with the Lifespan Health Unit team via email.

**For the SDOH Learning Network, this tool was slightly modified. The original assessment instrument can be found in: Armenakis A Bernerth J, Pitts J, and Walker H (2007). Organizational Change Recipients' Beliefs Scale: Development of an Assessment Instrument. Journal of Applied Behavioral Science 2007; 43:481. Downloaded from <http://jfab.sagepub.com>.*

Also see Hold DT, Armenakis AA, Feild HS, and Harris SG. Readiness for Organizational Change The Systematic Development of a Scale Journal of Applied Behavioral Science, 2007; 43(2)232-255. <http://jfab.sagepub.com/content/43/2/232.abstract>

APPENDIX A: OCRBS Questionnaire (2 pages)

Page 2:

Assess Your Readiness for Organizational Change

Check the box that best fits your beliefs, opinions, and Perceptions.

Strongly agree
Agree
Neither agree or disagree
Disagree
Strongly disagree

1. This change will benefit me.	<input type="radio"/>				
2. Most of my respected peers embrace the proposed organizational change.	<input type="radio"/>				
3. I believe the proposed organizational change will have a favorable effect on our operations.	<input type="radio"/>				
4. I have the capability to implement the change that is initiated.	<input type="radio"/>				
5. We need to change the way we do some things in this organization.	<input type="radio"/>				
6. With this change in my job, I will experience more self-fulfillment.	<input type="radio"/>				
7. The top leaders in this organization are "walking the talk".	<input type="radio"/>				
8. The change in our operations will improve the performance of our organization.	<input type="radio"/>				
9. I can implement this change in my job.	<input type="radio"/>				
10. We need to improve the way we operate in this organization.	<input type="radio"/>				
11. The top leaders in our organization support this change.	<input type="radio"/>				
12. The change that we are implementing is correct for our situation.	<input type="radio"/>				
13. I am capable of successfully performing my job duties with the proposed organizational change.	<input type="radio"/>				
14. We need to improve our effectiveness by changing our operations.	<input type="radio"/>				
15. The change in my job assignments will increase my feelings of accomplishment.	<input type="radio"/>				
16. The majority of my respected peers are dedicated to making this change work.	<input type="radio"/>				
17. When I think about this change, I realize it is appropriate for our organization.	<input type="radio"/>				
18. I believe we can successfully implement this change.	<input type="radio"/>				
19. A change is needed to improve our operations.	<input type="radio"/>				
20. My immediate manager is in favor of this change.	<input type="radio"/>				
21. This organizational change will prove to be best for our situation.	<input type="radio"/>				
22. We have the capability to successfully implement this change.	<input type="radio"/>				
23. We need to improve our performance by implementing an organizational change.	<input type="radio"/>				
24. My immediate manager encourages me to support the change.	<input type="radio"/>				

For more information contact: MCAH Feedback@nebraska.gov

What is the "change" this questionnaire asks about?

The focus of change is moving to a leaner organization with new leadership, while sustaining commitment to helping Nebraskans lead better lives and fulfill program requirements.

Please note that the readiness assessment does not require that you know now what exactly the changes will be.

You are being asked how you feel now about change toward a leaner organization more focused on business principles, under new leadership, while still working toward specific program and funder requirements.

Thank you for completing this assessment.

PH-26

APPENDIX B: COMMUNICATIONS

Message 1:

Reply Reply All Forward IM



Wed 3/22/2017 9:44 AM

Morgan, Sara

Assessment Tool

To

Attachments OCRBS Survey fillable.pdf (407 KB)

Lifespan Health Services Staff:

At our recent meeting March 15 Kathy Karsting and Mai Dang described the work of the Social Determinants of Health workgroup, which is testing organizational assessment tools relevant to understanding the capacity of organizations to work with a focus on equity. One of these is an assessment of change readiness among an organization's employees. With your help, we would like to test the instrument called Organizational Change Readiness Belief Scale among the Lifespan Health Services staff.

Please see the attached; complete the back page; and print.

Deposit your copy with responses but no names in the box at Christy Wheeler's cubicle ([look for the sign "Survey" above the white board](#)).

Please complete your survey by **March 31, 2017**.

More information is available on the survey. If, in addition to completing this survey, you have comments you wish to make, we hope you will make them by dropping an additional note in the box, still anonymous.

Thank you!

Sara Morgan | DHHS Administrator II
PUBLIC HEALTH

Nebraska Department of Health and Human Services

OFFICE: 402-471-0196

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Message 2:

Reply Reply All Forward IM



Tue 3/28/2017 11:34 AM

Karsting, Kathy

RE: Assessment Tool

To

Attachments OCRBS fillable.pdf (407 KB)

Greetings All! This short message is to bring to mind the survey we are asking you to complete. Please see below for Sara's message. The survey should take less than 10 minutes to complete. Your input is valuable to us, both in the form of results of the survey and any comments you may have about the instrument and your user experience! The survey end date is close of business Friday, March 31. Thank You!

Kathy Karsting and Mai Dang

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Thank you!

Sara Morgan | DHHS Administrator II
PUBLIC HEALTH

Nebraska Department of Health and Human Services

OFFICE: 402-471-0196

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