

## **Exponential Consulting White Paper**

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## **Bringing About Change in Mental Health NGOs: Seven Special Alert Factors**

By Stephen Billing

This white paper is based on experience gained in successfully bringing about **dramatic** change in Mental Health NGOs in New Zealand.

Mental Health NGOs are feeling the forces of change all around. Many NGOs are considering how to position themselves for an uncertain future that is emerging from the dynamic interplay of complex factors:

- Continued requirements to deliver contracted services effectively within the funding available.
- Pressure from DHBs and others to reduce the number of NGOs which may mean mergers, reconfiguration of services, politics and power shifts.
- Opportunities for NGOs to establish and develop shared services models to reduce administration and other overhead while balancing the need to maintain their own unique identities at the point of delivery of services to service users.
- Increasing demands for more visible accountability and measurement in the delivery of services.
- Potential for convergence of social and health service providers.
- Relationships with other NGOs that must be paradoxically competitive and collaborative at the same time.
- Continued movement towards outsourcing of non-core services.

With this uncertain environment come the seeds of both opportunity and threat, which are often two sides of the same coin. The question then is how can NGOs best position themselves to take advantage of the opportunities while mitigating risk and reducing threat?

Paramount is the requirement to continuously deliver services to a high standard within the contract funding available. How do you do this while maintaining the capacity to gear up quickly for unexpected opportunities that present themselves? How do you foster cooperation with other NGOs to share some of the costs of specialist expertise such as human resources or transactional accounting without giving away your organizational secrets?

NGOs that been founded on a base of long-standing contracts to provide core services now have to think about new functions. For example, do you build an effective business development function that enables you to:

- Find ways to identify (or create) the opportunities that are possible in such a dynamic environment.
- Establish credibility in new services, new locations or new combinations of services.
- Develop new services for people with unmet need through various means including lobbying, marketing and promotion.
- Gather relevant organizational information and conceptualise a new service and write persuasive proposals.
- Mobilise resources to support new opportunities without compromising delivery of current services.
- Establish mechanisms for starting new services and integrating them in harmony with existing services.

These kinds of dilemmas are increasingly facing CEOs and management teams of mental health NGOs. If you're not grappling with them now, you soon will be.

Whether you want to change the distribution of functions amongst current positions, add new functions (such as business development), introduce shared services or strengthen frontline management, you are talking about changes to people's ways of working and maybe also their job accountabilities. While standard restructuring approaches have their place, mental health NGOs have the following seven additional alert factors to deal with when introducing change. CEOs ignore them at their peril.

## Seven Alerts for Mental Health NGOs Undergoing Change

- 1. Some Mental Health NGOs have funding for short term contracts for the delivery of what can be very long term services. This means forecasting capital expenditure needs, negotiating leases appropriately, getting the right mix of permanent and casual staff, and the challenge of providing certainty for employees and service users in a world in which certainty seems not to extend past the expiry date of the current service contract. It can be quite difficult to balance the needs of employees and service users within the imperatives driven by funding peccadilloes.
- 2. You can't just "implement change." Every organisation is different and has a unique set of initial conditions. This is why "best practices" might be a fallacy at best. While some practices might certainly be good to do in theory, they have to be adapted if they are to work in your organisation, with your particular people, your

particular history, your particular politics and your particular funding. Similarly, your change process must be adapted to your own particular organisation and situation. Most NGOs including those in mental health are well politicized with activist staff and managers – they have to be in order to survive. Mechanical restructuring processes can unleash powerful waves of opposition that can threaten the NGO's survival.

- 3. For a user of mental health services, these services are more than just an addendum to their lives. The services are interwoven into the fabric of their lives and change in the service affects other aspects as well the service cannot be isolated from other aspects of a service user's life. For example, change of a residential service provider may mean moving house, change in routines and the disruption of relationships that develop over long periods of time between support workers and service users. These relationships are important to both service users and employees alike. A service user cannot chop and change providers the way you can walk out of restaurant if you don't like the service or the meal. These services are often provided over the long term and can be central to the wellbeing and very survival of the service user.
- 4. The peer service model involves people with experience of mental illness and who are on their way into recovery supporting others in their recovery process. If your NGO provides peer services, then you are supporting recovery at two levels. Not only in the form of direct support to service users, but you are supporting the continued recovery process of your peer-identified employees by providing part time or full employment as a key milestone in their recovery process. As well as your obligations as an employer, you have now taken on another, perhaps unspoken agreement with your peer staff in terms of how their employment with you supports their own recovery process. Standard restructuring processes have no understanding of this and can easily run rough-shod over the perceived recovery agreement with devastating effects on trust and those working in the NGO.
- 5. In a Mental Health NGO, you are in a business that supports recovery from mental illness, in an environment where it is very hard to define what recovery is, because it is such an individual thing. This challenge is made more difficult by the constant pressure to measure and show outcomes in a field in which outward behaviour is about the only thing you can reliably report but it may or may not be an accurate representation of a service user's actual mental state.
- 6. Then you have the challenges of the stigma of not only the mental illness itself, but living with the history and reputation of particular individuals and the need to form relationships and work with people whose behaviour may range from intimate, joyful, puzzling, repellant, or even disgusting to the members of your workforce.

7. All this is taking place in an environment in which the only thing that seems to be predictable is that the unpredictable is likely to occur. The safety and well being of staff and other services users must be paramount and incident management and debriefing takes priority for support workers and front line management.

## "N-Step" Change or Restructuring Processes are Not Enough

This means that when attempting to bring about change in Mental Health NGOs, having an "n-step" change process is not enough. "N-step" change processes are those with a number of steps to go through. Sometimes they are in a "U" shape. These approaches are relatively common in both the private and public sectors.

Such change processes emphasis the process and leave out of the equation the people who are going to have to make it work. It is more important that you also are able to skillfully navigate these seven special alert factors that are characteristic of Mental Health NGOs, if you want to successfully bring about change.

In our dynamic and uncertain environment, the skilful navigation of change takes on increased importance - the stakes have never been higher.

Stephen Billing is Director of Exponential Consulting Ltd, a New Zealand-based consulting firm that helps organisations bring about dramatic change for business improvement. Stephen is the only person in Asia Pacific with a Doctor of Management degree in Organisational Change from Hertfordshire University in the UK, which he completed while maintaining a full schedule of consulting in New Zealand.