Creating a vision for your change

ACT Academy, NHS Improvement
The role of a vision

In this short guide to creating a vision we focus on three questions:

1. What do we mean by a vision?
2. Why is a vision important?
3. How do we create a vision?

A vision can be defined as ‘a picture that brings to life an attractive future state for the organisation or the outcome of a change’.

This simple definition tells you a lot about visions.

- They look into the future.
- They have both a descriptive and motivational role.
- They seek to define the endpoint of a change process but not the actions required to reach that endpoint.

As an attractive picture of the future, a vision is important in a variety of ways.

- It provides a foundation for planning our actions, helping us to understand the gap between the present and the desired future state.
- It helps people to understand what the change process will look and feel like, making it more real for them.
- Its attractiveness encourages commitment to the new future.

A vision is therefore much more than just a strapline or goal and performs a vital role in the process of engaging others and shaping the change programme.

How to create a vision

Just as important as the vision is the process used to create it.

‘Visioning’ (as the process rather than the output) is a way of getting multiple people involved in shaping the future. As people feel more ownership of something if they have helped create it, the visioning process is a way of building commitment. It also means that the vision can be built on the local knowledge and expertise held by a broad group of people.

Visioning is based around three main stages:

1. Those leading the change set parameters or boundaries for the vision.
2. They then support a group, representing those with a stake in the future, to create the main features of the vision.
3. The vision (as an output) is then shared and discussed with as many people as possible and interpreted locally.
These stages can be undertaken one after the other or a decision can be made to move back and forth between the stages, depending on the degree to which a vision needs to be shared and agreed before it is finalised.

**Stage 1: Setting parameters and boundaries**
Those leading the change have to make choices about how much they want (or need) to prescribe the vision before they involve others.

For example, there may be legal or financial constraints that have to be adhered to. Pre-existing decisions may confine the scope or shape of the vision. Equally there may be a view that some initial detail is needed before other people will agree to become involved in a visioning process.

The general rule here is to prescribe as little as possible but as much as is necessary, recognising the temptation to complete the detail that may best be left for others.

**Stage 2: Supporting a group to create the vision**
At the centre of visioning is the interactive and creative process of developing the ‘picture’ of the vision.

This can be done with any number of people and usually involves a cross-section of those affected by the change work (eg clinicians, managers, service users, commissioners, etc). When done as a workshop, the visioning process will usually involve elements such as:

- helping participants get to know each other (eg through ice-breaker exercises)
- setting ground rules
- sharing information about the change area
- describing the parameters or boundaries within which the vision can be created (from Stage 1)
- group activities to work on the vision
- sharing outputs across the group to move towards a shared vision
- planning further steps.

Using a template for the group activities on the vision can help. The next section provides a template and instructions on how to use it.
Stage 3: Sharing the vision with others

Once a vision exists in some tangible form it becomes a vehicle for discussing the future with more people in the organisation or system.

Sharing the vision is not simply about selling its benefits. For people to buy into a new picture of the future they need to be helped to understand what it means for them. They may also want to know how the vision was created.

A good vision helps with these conversations. If it is a model or contains pictures or images, these can become the starting point for exploring the vision. Usually this means those involved in creating the vision need to be involved in the conversations. They can explain the feelings that the images were intended to convey or discuss how the vision emerged from their conversations with others.

Although the vision exists at this point as an output and may not change further, it does not mean that the visioning process is over. Locally people will want to take the vision and decide what it means for them. For example, on a ward the nurses may ask, ‘What does this organisational vision mean for nurses specifically?’ Or they may take one aspect of the vision (eg becoming a ‘caring organisation’) and explore what this looks like for them. A vision can therefore evolve to become more detailed in different areas over time.

Top tip

The metaphor of a vision as a ‘picture’ is helpful in understanding the visioning stages.

The role of those leading the change is initially to decide the picture’s general subject and to begin drawing some of the lines that define its outline. They make choices about whether they offer a ‘blank canvas’ or provide more detail. This initial sketch shapes what follows.

Their job in the next stage is to help others add the main detail and depth, creating multiple ‘artists’ who collectively own the picture. These artists are asked to make the picture into a coherent whole rather than a collage of different parts – so the creation process involves collaboration and compromise as well as seeking out areas of agreement.

In the final stage, where even more people become involved, the picture is shared and discussed in an effort to convince the ‘critics’ (those not involved in its creation) of its relevance to them. Importantly, in this final stage it is not just about giving people the vision (picture) but discussing what it is about and how it came into existence. People can also be encouraged to take the picture and draw their own local version (eg for nurses or for the orthopaedic service) so the vision becomes an inspiration for new works of art.
Using the visioning template

The template below is used when working with small groups of four to 12 people and takes 30 to 60 minutes to complete.

1. Outcomes
   Describe what you are going to achieve

2. Doing & Being
   What are people and organisations doing and behaving differently in the future

3. How it will feel
   Use words and pictures to express how it will feel to be in this new future

4. Bring it to life

5. Guiding Values
   What values will this new future hold and use to guide us on the journey

Use the template to guide a group through a series of steps in developing its vision. It helps to have a large (flipchart-sized) copy of this template for the group to capture its thoughts. Groups will also need a variety of creative materials (eg random pictures, coloured paper, plasticine, etc).

The template’s elements are explained to the group, which is asked to work from the centre outwards (in the numbered sequence shown).
Outcome

Here the group identifies the goal(s) that the vision is intended to achieve (e.g., reduced staff turnover, lower patient mortality rates, etc).

Getting clarity on the goals is a vital first step as there may be multiple, conflicting aspirations for the change. It also helps to uncover assumptions about what is important to different group members.

Doing and being

The group moves on to describe what people will be doing in the future and how they will be thinking or behaving in different ways.

This begins to create the picture as we see it in our mind. Group members may think about ‘a typical day’ or ‘how a patient would experience the service’. Conversations may follow a patient journey or talk about the role of a particular professional or group.

Typically the group can spend a lot of time on this element, exploring the future from different perspectives.

How will it feel

From this visual expression of the future the group is now encouraged to develop a sense of how the future will feel.

Expressing a feeling is harder than describing what people will be doing or how they will be behaving. It requires teams to use pictures, key words or metaphors to convey things that are important to them, like trust or caring. Sometimes something abstract like a picture conveys feelings better than sentences (e.g., a postcard showing a mother smiling at a baby may be used to convey feelings of safety or nurturing).

At this point the vision becomes significantly more than what is captured on the template and starts to become the vehicle for later communication with others.

Values to guide us

Now the group considers the values that are important to it in its vision and in the journey towards its vision.

In the template this appears along the bottom as the values have this dual perspective. They are part of the vision for the future (i.e., the values embedded in it) and can also relate to how the vision is reached. For example, in a change process people may want to see values enacted about inclusion or valuing diversity.

Strapline

The last step is to create the memorable phrase or words that sum up the vision.

The strapline is deliberately left to the end since too many ‘visions’ are based on straplines without much substance underneath.
The template is designed for small groups to complete. If a visioning session involves larger numbers, it is possible to split the room into table groups and still use the template. However, an added step is needed to share and consolidate the outputs.

This can be done in a variety of ways:

- pairing groups to compare, contrast and combine their visions to gradually reduce the differences
- getting each table to describe its vision and record the main points from all of them
- moving people around the room to hear the visions from other groups, then returning them to their original group to try to incorporate the ideas.

Combining different vision templates is an art rather than a science. But the underpinning principles are about continuing conversations and not allowing a single voice (or group) to dominate. Also it is not necessary to entirely complete ‘the’ vision in a workshop. It can be enough to hear lots of perspectives then get agreement for a smaller group to finalise something that represents the wider views.

**Top tip**

John Kotter in his eight-step process for leading change defines six key characteristics of visions:

- **imaginable** – they convey a clear picture of what the future will look like
- **desirable** – they appeal to the long-term interest of those who have a stake in the enterprise
- **feasible** – they contain realistic and attainable goals
- **focused** – they are clear enough to provide guidance in decision-making
- **flexible** – they allow individual initiative and alternative responses in light of changing conditions
- **communicable** – they are easy to communicate and can be explained quickly.

These characteristics can be a useful prompt or challenge for those developing a vision.
This template was created by the ACT Academy, NHS Improvement.
It is free for NHS staff to use, copy and adapt. It is provided on the basis of
a creative commons licence (attribution, non-commercial, share alike). This
means if you share it with others or adapt it and share it, you need to reference
its original source. Neither the original nor any adaptations can be used for
commercial purposes.

If you have any suggestions for improving the resources or want to share an
improved version with us, please email us at NHSI.ACT@nhs.net