Leading Adaptively In Child Welfare

As child welfare agencies reform systems to improve outcomes, the National Implementation Research Network (NIRN) highlights three categories of “drivers” necessary for effective implementation—leadership, competency and organization. While much attention has been focused on competency and organization, fewer resources have been available in the area of leadership.

This issue focuses on our recent efforts, in conjunction with the consulting firm Cambridge Leadership Associates (CLA), to address this by integrating the concepts and tools of adaptive leadership into our training and technical assistance (TTA) work. Our work with CLA in New Mexico is a good example.

We also include a perspective on exercising adaptive leadership on the frontlines and using adaptive leadership concepts in continuous quality improvement systems. We hope you find this information useful as you lead changes to improve services for children, youth and families.

Your goal is to help children, youth and families.

Our goal is to help you.

- Peter Watson

Providing training and technical assistance (TTA) over the years has taught us that organizations and the people within them struggle to define and implement effective systems change. We have also watched people at all levels of organizations lead and adapt to changes and challenges in order to improve their systems and outcomes. We want to understand how this happens and support sustainable system change in a purposeful and meaningful way. This article explores leading adaptively in child welfare, highlighting our work with New Mexico’s (NM) Children, Youth and Families Department (CYFD), in partnership with Cambridge Leadership Associates (CLA). The concrete experiences and impacts in New Mexico have moved adaptive leadership concepts off the page and into the child welfare workplace.

Adaptive Leadership is the practice of mobilizing people to recognize and intervene in challenges that are hard to define and for which existing knowledge, structures or processes are not sufficient to bring about the desired change.

The capacity to lead adaptively is particularly necessary in child welfare given the almost relentless pressure to do the right thing and do it fast. In

We had provided training, training, and more training. New forms, new policies, new procedures weren’t working. We had to answer the question, what would it really take to make this change?

- A member of New Mexico’s executive leadership team reflecting on past system change efforts
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such a passionate, purpose-filled and value-driven field, efficient, effective responses are extremely important. Pressure and conflicting expectations often arise from sources with genuine and vested interest in the safety and well-being of children and families—constituents, the community, the media, the legal system, the legislature, and others. This combination of factors can be the perfect storm for a reactive system whose purpose is genuine, but whose outcomes and impacts may be less than hoped for, and hard to sustain.

One of the biggest lessons from the adaptive leadership framework is carving out adequate time to identify and diagnose the actual challenge. This concept relates to a foundational idea within the Children’s Bureau, the Training and Technical Assistance (TTA) Network and NRCOI—using data and information to understand a challenge and its possible solutions. Past TTA experiences have taught us that while agencies can move forward on system reform, they often fail to develop targeted solutions because they haven’t taken enough time to identify and understand the challenge. In these situations, the inclination often is to work harder, do more and make quicker decisions. The more fruitful response can feel counter-intuitive: slow down, look at the data and information and understand more before leaping to action. New Mexico’s effort to implement a child welfare practice model provides an opportunity to explore these challenges and the potential to lead adaptively.

Beginning the Work, Building the Foundation

In 2010, New Mexico began working with the Mountains and Plains Child Welfare Implementation Center to develop and implement a new child welfare practice model, known as Piñon. In May of 2011, the New Mexico child welfare director and two of his deputies attended the Children’s Bureau’s Executive Leadership Institute, organized and delivered by CLA and NRCOI. At around this same time, New Mexico learned that a hiring freeze had been lifted, allowing the agency to hire county and regional managers. The timing was right to focus on building new leadership capacity at all levels to successfully implement the Piñon Project.
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Employing the tools and techniques the New Mexico team learned from the Executive Leadership Institute, NRCOI and CLA joined with New Mexico to explore strategies for building knowledge and identifying adaptive challenges both within their executive team and across staff in the organization. Even more critically, we wanted to help implement a structure and environment that would build both the will and the skills to take on adaptive challenges in implementing Piñon in a more purposeful way.

A strong leadership team is a critical foundation to any system reform. To strengthen and prepare the executive team for their role in the work ahead, TTA included coaching individuals and the team to explore their own adaptive challenges, how they interacted with each other and the field, and how they communicated policy decisions.

Addressing adaptive challenges during the practice model implementation required working across all levels of the organization, so TTA expanded to inform and engage leadership, supervisory and line staff at the State, regional and county levels. This TTA included coaching, small team meetings and large summit sessions, all designed to teach and hone adaptive leadership skills at multiple levels.

The Art of Diagnosis

Developing and implementing a practice model in any State provides multiple opportunities and challenges. While defining and implementing Piñon was an exciting time of engaging staff and stakeholders to revisit a core vision and values, define practice standards, and articulate outcomes, New Mexico also encountered countless technical challenges related to training, communication, information technology, policy and procedure changes—the list was complex and lengthy. Alongside this important work was the realization that to change people and their behavior, staff in New Mexico needed to slow down and seek much greater insight and understanding as to why, in spite of all this activity, some changes were simply not happening.

What we’ve begun to see is a different way of looking at challenges, and not going to the technical fixes: let’s change policy, let’s create new forms... It’s about getting a group together to think it through from all levels of the agency, to inform and challenge... It is taking more time to get at a diagnostic effort.

– A member of New Mexico’s executive team

Piñon Project in New Mexico

www.cyfd.org/pinonproject

Read more about Adaptive Leadership in New Mexico in the Piñon Newsletter:
Leading Adaptively in Child Welfare

Toward this end, CLA and NRCOI assisted a group of about 25 staff from the central, regional and county offices to identify the most critical adaptive challenges as Piñon implementation efforts began in county offices. These challenges were hard to define, solutions were unknown, and staff would likely experience learning and loss on their way to finding answers. (See Defining the Challenge: Technical vs. Adaptive, below.) Three challenges were identified:

- creating conditions for better partnerships with external partners;
- improving relationships with licensed providers, especially foster parents; and
- applying the New Mexico safety assessment process more consistently and effectively.

With a shared commitment to learning more about these challenges, the next step was to create the knowledge, time, space and support for the first implementer counties to explore and address them.

### Defining the Challenge: Technical vs. Adaptive

<table>
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<tr>
<th>Technical</th>
<th>Adaptive</th>
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<tbody>
<tr>
<td>Perspectives of major stakeholders are aligned.</td>
<td>Perspectives differ.</td>
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<tr>
<td>Definition of challenge is clear.</td>
<td>Definition of challenge is unclear.</td>
</tr>
<tr>
<td>Solution and implementation of solution is clear and within existing capabilities and knowledge.</td>
<td>Solution and implementation is unclear. Existing knowledge, structures or processes are insufficient. Requires new learning, behaviors or expertise.</td>
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<tr>
<td>Leader can take primary control and responsibility.</td>
<td>Primary control and responsibility is not with the leader. Solution can only be addressed through changes in people’s priorities, beliefs, habits and loyalties.</td>
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Learning to Observe and Interpret

Observing and interpreting... these seem like simple skills all professionals should have. A closer look often reveals how much time and practice is needed to build and strengthen these skills to effectively gather data and make decisions. New Mexico’s initial adaptive work focused on building and strengthening these skills at all levels. The executive team knew shared ownership and responsibility for the work was key. To encourage local investment, the executive team authorized the creation of diverse county teams including managers, supervisors and casework staff responsible for the work. The structure for team meetings was a CLA consulting model known as “Office Hours.” The sessions were designed to develop capacity to observe, interpret and intervene to make progress on adaptive challenges. Particular emphasis was placed on intervention skills and action planning. This approach provides a safe environment for teams to identify and challenge established norms, competing commitments and long-standing behaviors that impede progress.

Through Office Hours meetings, each New Mexico county team used a four-step process to surface and test assumptions about its particular challenge and to conduct small experiments the results of which could inform their thinking and decisions.
1. Have a healthy respect for the status quo. It works for you 80-90% of the time. At the same time take a risk to challenge or change it.

2. Beware of experiments that are merely elaborate justifications to do what you always do.

3. Surface the conflict; don’t avoid it.

4. Involve the people who need to do the work.

5. Manage content of the work and the “politics” of it.

6. Don’t shy away from using your authority if you need to move people to action and hold them accountable.

7. For big, risky issues, start small; if it’s a small risk think bigger.

8. Starting the first experiment is more important than getting it perfect. Remember to use data to measure its impact.

9. It’s called an ‘experiment’ because it can fail. Absence of failure is directly linked to the absence of innovation.

10. You’re asking people to behave themselves into a new way of thinking, not vice versa.

As sponsors of these teams, the executive leadership moved away from “providing the answers,” to offering observations and interpretations about the team process and activities. They gave permission and set an expectation of spending time and resources to do this work. All staff learned the power of courageous conversations that surfaced values, beliefs and perceived losses related to practice changes that Piñon would bring. For most it was a new way of acting and interacting—embracing it came with adaptive challenges of its own.

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**Experiment Framework**

1. **What is the adaptive challenge?**
2. **What assumption are you testing?** Your assumption should relate to the adaptive challenge. Frame it in a way that invites people to participate with some investment in the outcome.
3. **How will you test the assumption?** The action should be specific, observable and involve the people (stakeholders) who need to work on the adaptive challenge.
4. **How will you evaluate the success of the experiment?** Use data and measurable indicators of success.

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**10 TIPS FOR GETTING YOUR FIRST EXPERIMENT OFF THE GROUND**

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– Adapted from New Mexico Office Hours Work
**Leading Adaptively in Child Welfare**

**Intervening**

New Mexico county office teams put this process into action multiple times. One county team focused on improving relationships with foster parents. They tested the assumption that providing foster parents with more information about new children placed in their homes would improve the relationship and learned that while foster parents appreciated the information, what they wanted more was to provide information to the workers. Foster parents wanted time with the workers to talk about what they were learning and understanding about the child in their home. They also tested assumptions by experimenting with teaming investigative, permanency or placement workers to communicate with and support foster parents. As these experiments continued and expanded, some of the positive impact and learning resulted in larger-scale policy and practice change.

Another county team worked on the challenge of more consistent application of the safety assessment process and tested the assumption that teaming across units would increase shared responsibility and reduce miscommunication. After multiple tests of this assumption showed positive impact, the office made this teaming standard practice. In fact, a number of the first implementer counties had tested some version of a “teaming experiment.” As a result, the NM leadership and the Piñon Implementation Team decided to define and scale a teaming expectation statewide.

**What We’ve Learned So Far**

Many lessons and some surprises have emerged through this work. Most teams learned it takes practice and discipline to surface an assumption, design a small test or experiment and, most critically, find a way to measure the impact. In addition, knowing if and when to scale an experiment with a small number of cases to a larger population, and ultimately to a system-wide practice and policy change is an area for continued learning and growth. A somewhat surprising outcome for a number of the county teams was that even though the adaptive challenge they were working on had an “external” focus, experiments and open conversations among team members often uncovered internal work that needed to be done on strengthening relationships, defining expectations, or sharing power and control.

The executive team and regional managers have continued to resist giving directives or answers and keep giving the work back to the people, who are part of both the challenges and the solutions. For example, at a recent Piñon meeting the leadership gave the group 45 minutes to develop a plan to scale a teaming strategy statewide—and then left the room! While there was surprise and some angst, the broader group members from county and central offices pulled together and produced preliminary ideas to move the work forward. Everyone involved in this effort has had to resist the pull back toward the power of the status quo and business as usual, often experienced as pressure to get Piñon implemented faster through top-down decisions and directives.

Piñon practice model implementation continues in New Mexico, as does the State’s partnership with NRCOI and CLA. This work and these lessons have also found their way into NRCOI internal processes and TTA with other States, Tribes and localities. We look forward to ongoing opportunities for supporting those who lead system reform efforts, mobilizing people to understand challenges, take smart risks and begin to create sustainable change.
Lessons Learned in New Mexico

Embrace change, but understand loss. Change is inevitable, especially in the child welfare system. This work teaches us that people don’t generally resist change. Rather, they resist the losses they perceive might result from the change. Equipping people to lead in a way that surfaces and acknowledges losses and keeps the system moving past the status quo is important and necessary.

Fix the “right” challenge. Child welfare staff are often driven by passion and purpose; they want to do the right thing and make a difference. However, this motivation, combined with numerous system pressures, can result in applying a “technical” fix to what is actually a complex, adaptive challenge. A broad-based understanding of adaptive work helps people realize that if current knowledge and past interventions haven’t changed the outcomes, the challenge is an adaptive one.

Hone diagnostic skills. In a culture of limited resources, crises, and reaction-driven responses, it becomes even more important to slow down, step back and purposefully consider the challenge, the stakeholders, the values, the preferred outcomes and the potential losses that are all part of a potential change. Using adaptive leadership processes and tools results in a better process and stronger decisions.

Practice smart risk-taking and experiments. Words like “risk-taking” and “experiments” aren’t typically a part of the child welfare world. It takes strong leadership commitment and support to create a culture that celebrates and supports this approach to learning, understanding and system change.

Commit to scaling successful experiments beyond the initial group involved in the work. Decisions and actions about what, when and how to scale are difficult and come with technical and adaptive challenges all their own.

How NRCOI Can Help Diagnose and Address Adaptive Challenges

• We can work with you to assess the challenges you face, identify adaptive challenges, and address them more effectively as a team.

• We can coach your agency’s executive team using diagnostic interviews and feedback sessions to help you improve how you operate and communicate.

• We can help you develop and implement strategies to engage a wide array of key stakeholders, including frontline staff. We’ll help you explore the best way to share ownership and mobilize others to address challenges.

• We can coach teams to diagnose, observe and interpret, and to design and learn from small experiments. We can guide teams through this process, developing their capacity to continue on their own.
Tips and Traps for Social Workers Exercising Adaptive Leadership on the Frontline

by Eric R. Martin, Senior Leadership Consultant, Cambridge Leadership Associates

It’s a pattern familiar to nearly every social worker: You understand intuitively—and from hard experience—that even your best efforts and your agency’s best services can’t address the multitude of needs of the child or family. Even so, you push forward as best you can, under-resourced and with unrealistic time constraints placed upon you.

At Cambridge Leadership Associates (CLA), we see this pattern repeated time and again, particularly in child welfare and health care systems. Neither “system” tends to be set up to easily serve the whole client/patient or the whole need. People function in their professional silos, often focusing on the most critical, short-term needs. The consequences of this pattern as it plays out in community after community and health clinic after health clinic across the country are skyrocketing costs of service, limited effectiveness and, often, professional frustration.

Fortunately, extraordinary leadership efforts by social workers on the frontlines are underway to interrupt this non-productive pattern. The New Mexico Piñon Practice Model Initiative, described in this newsletter, is one such example. Another is a cutting-edge initiative underway at Sanford Health, one the nation’s top hospital systems and the single largest healthcare provider in rural America, to fully integrate behavioral health, primary care and a patient-centered “medical home” case management model.

Two things make the New Mexico and Sanford initiatives notable: an explicit focus on doing adaptive work and the phenomenon of social workers exercising leadership on the frontline.

Focus on Adaptive Work

A few years ago, Bryan Samuels, the Commissioner of the Administration on Children, Youth and Families (ACYF), kicked off the Executive Leadership Institute, a three-day workshop organized and delivered by NRROI and CLA. He called on State Directors in attendance to shift their systems’ focus “from safety and permanency to social and emotional well-being.” No ready-made solution or technical expertise currently exists to tackle this kind of challenge. The type of work required to address it is adaptive in nature and requires that an explicit, strategic choice be made to focus on it as distinct from the technical work.

New Mexico made such a choice when designing the Piñon Practice Model Initiative. They began by identifying adaptive challenges and carving out time and resources to work on them. Teams of social workers, supervisors, county managers and even regional and central office staff then met monthly to design and run small, iterative experiments to improve practice. They mobilized key stakeholders through a sometimes enlightening, sometimes painful process of learning new ways, and unlearning old ways, of working together and with families.
Adaptive Leadership by Social Workers on the Frontlines

Interestingly, and not altogether coincidentally, a similar call was being sounded at Sanford Health and more than 100 other health care systems across the country. The adaptive challenge: shift the focus of care from how many patients we serve, to the behavioral and social determinants of well-being.

To paint a picture, imagine at your next doctor visit partnering with a team of doctors, specialists, nurses and health coaches coordinated by a social worker to address your entire health and lifestyle, not just the isolated body part for which you came in for a technical fix. This is highly adaptive work. As in New Mexico, it involves challenging long-standing norms about the role of social workers and other experts at the frontline and how they relate to their co-workers and people in higher positions of authority.

While the adaptive work in both systems continues, we have learned some lessons about the struggles frontline workers face and actions they can take to move forward.

5 Tips and Traps for Leading from the Frontline

Official authority figures and senior executives are not the only people with the power to lead practice change. In fact, they are often the last to do so because of the extraordinary expectations on them to perpetuate the status quo. As we’ve seen in New Mexico and at Sanford Health, opportunities abound for frontline staff closest to the work to exercise leadership without full authority or the “official” designation. Leading adaptive work from the frontlines begins with some simple ideas and attitudes:

- **Remember, your job isn’t to provide answers.** It is to help people see through the blind spots of the dominant point of view to move the group forward.
- **Get comfortable with operating a bit beyond your own job description,** challenging your closest colleagues’ expectations of you, and engaging people across silos who would ordinarily pay you no mind.
- **Pay attention to your “voice.”** Often what it takes to speak up from below (passion, anger, frustration) is hard for others to hear.
- **Beware of becoming a “lightening rod” or a “martyr” for the cause.** Instead, use a current crisis or initiative to bring attention to the adaptive challenge.
- **Nobody leads alone.** Find partnerships with allies, outside groups, and with the authorized leader(s).

As our models of care increasingly come under pressure to address long-term health and well-being, we expect the need and the opportunity for leadership on the frontlines to continue to grow. It can feel exciting and a bit risky, but the learning and outcomes are proving to be worth it.
CQI Corner—Exercising Leadership in CQI

by Peter Watson, Director, NRCoI

The current focus on expanding CQI in the child welfare field presents an unusual opportunity that CQI professionals and agency managers should seize to drive program improvements. Over the last twenty years, we have dramatically expanded our data collection and analyses focused on practice and outcomes. Child welfare agencies have access to numerous reports from various quantitative and qualitative data sources that can help track critical outcomes. However, most agencies struggle to use this enormous amount of information effectively across their diverse organizations and staff.

As a result, we are now engaged in a field-wide effort to understand and implement more comprehensive approaches to CQI. Rather than focusing on just data collection and reporting, we need to remember that CQI is “the complete process of identifying, describing and analyzing strengths and problems and then testing, implementing, learning from and revising solutions.”¹ This definition underlies the Children’s Bureau’s Information Memorandum (IM) on CQI from August, 2012, defining five functional CQI components and setting the expectation that States review and strengthen their CQI systems before the next round of the Child and Family Services Reviews (CFSRs).

Since the IM’s release, the NRCoI has worked with a number of States on CQI self-assessment efforts, developing materials and facilitating intensive self-assessment meetings. We have learned that, in addition to improving their quantitative and qualitative data collection and their capacity for targeted data analysis work, agencies must address critical adaptive challenges if they expect to use CQI results effectively.

The adaptive leadership framework and techniques we profile in this issue of Child Welfare Matters offer some ways to make progress that should resonate with CQI staff. CQI staff will need to hone and exercise their leadership skills to promote the effective use of data and information now envisioned for the child welfare field. Put another way, agencies need to use data and information to challenge the status quo and address persistent issues in new ways. CQI staff should consider trying the following skills and approaches.

Find ways to hold staff in the diagnostic stage.

Too often, our CQI efforts in child welfare consist of reviewing basic data and reports and then developing potential solutions before fully understanding the scope of the problem. To interrupt such patterns and resist the pressure to jump to solutions, CQI staff need to set the expectation for and support the effort to dig into the data, supplement it with information from staff and stakeholders and help groups “interpret” the results.

Before meetings, CQI staff should work with data and information, developing multiple analyses and interpretations for “CQI Committees” or other groups tasked with reviewing results and making changes. During meetings, CQI staff must take an active role, pushing… agencies must address critical adaptive challenges if they expect to use CQI results effectively.

¹ Definition from “Using Continuous Quality Improvement to Improve Child Welfare” publication: http://www.nrcoi.org/telefiles/6.09.05.pdf, NRCoI and Casey Family Programs, 2005.
participants to develop (and hold simultaneously) multiple interpretations of what the data may show and the underlying issues that may need to be addressed. For example, placement stability problems in a system may reflect a lack of available foster homes for certain types of youth, inadequate assessment processes after youth enter care, lack of support for foster families, etc. Each of these may need to be explored further as part of the diagnostic process before an informed decision can be made about how to intervene effectively. CQI staff might even call explicit “interpretation” meetings where the main purpose is to discuss the scope of challenges and propose ways to test assumptions further before proposing solutions.

**Facilitate the use of small experiments to test assumptions and potential solutions.**

Using small experiments as part of a CQI process offers an accessible way for CQI Committees to learn more about challenges and test solutions. It also reduces the pressure many groups feel to act immediately, avoiding the premature implementation of large-scale changes that may impact frontline staff adversely. Many CQI systems embrace similar approaches (e.g., Plan, Do, Study, Act, etc.). CQI staff often will have to push groups to be clear about the assumptions being tested, the specific actions to be taken, and how they plan to measure results. Also, groups must commit to reviewing results and using follow-up experiments as necessary to develop scalable solutions. The 10 Tips on page 5 offer useful reminders for CQI staff as they facilitate the experimentation process.

**Identify the “losses” people may fear through organizational changes.**

We frequently hear people voice a generic resistance to change within organizations. Often, however, people are actually resisting real or perceived losses that may occur for them as a result of the change. For example, people may fear the loss of competency—they know how to do their jobs currently but aren’t so sure under the proposed solution. Other losses include autonomy, influence, flexibility, power, responsibility, relationships, etc. CQI staff need to test and explore these perceived losses in order to develop proactive strategies and help people accept them as the system moves forward.

**Develop and test assumptions about different CQI group members and the stakeholders they represent.**

One of the keys to facilitating adaptive work is understanding the people involved and what they bring to the work. CQI staff facilitating groups should step back periodically—or “get on the balcony,” as it is known in the Adaptive Leadership vernacular—to analyze the dynamics among the participants: What are the patterns in conversations and how do they reflect on the pressures in the current system? Who sets the agenda for meetings? Who contributes regularly? Who jumps to solutions? Who follows up?

Similarly, CQI staff can “map the system” by examining the following for each CQI group member: Whom do they represent during the discussions? What are their preferred outcomes for the current challenge being discussed? What are their values and loyalties? What are their real or perceived losses for different outcomes or solutions being considered? Keeping this “map” in mind will help CQI staff make strategic decisions about how to introduce information and ideas to the group and how to intervene when the group struggles to move forward.
NRCOI Hones Its Diagnostic Skills

Internally at the National Child Welfare Resource Center for Organizational Improvement (NRCOI), we have found imbedding diagnosis, observation and interpretation into our assessment and planning for direct training and technical assistance (TTA) delivery has enhanced our thinking and approaches, particularly when helping States and Tribes address adaptive challenges. At our regular staff and consultant meetings, we use a structured, six-step “peer consultation” process developed by CLA to help with diagnosis by offering alternative ideas and interpretations to identified challenges.

1. **Case Presentation**: A staff member or consultant does a brief overview of the TTA request and work accomplished to date, with a particular focus on emerging adaptive challenges.

2. **Data Gathering**: The group briefly asks questions, gathering more data to better understand the complexities surrounding the challenge and to inform the next step of the process.

3. **Diagnostic Brainstorming**: The presenter then “goes silent,” and the group conducts a structured brainstorming in an effort to interpret what seems to be happening, offer alternative interpretations, and illuminate new ways to understand the challenge.

4. **Action Step Brainstorming**: In this step, the group offers specific ideas for small, smart steps or experiments the presenter could consider to move the challenge forward.

5. **Case Presenter Reflections**: The presenter then offers their reflections on what they heard and ideas they might consider.

6. **Group Debrief**: In the final step everyone “gets on the balcony” to reflect on how well the consultation went and how to improve the process in the future.

We have found this process enlightening, as it raises different perspectives and helps illuminate underlying loyalties and pressures in the system, giving the TTA provider some ideas about how to move the site’s organizational change work forward.

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**RESOURCES**


For the following articles and other reading on adaptive leadership, see the Harvard Business Review website: [www.hbr.org](http://www.hbr.org)


Cambridge Leadership Associates
Website: [www.cambridge-leadership.com](http://www.cambridge-leadership.com)