



# International Collaborative Leadership Institute

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## What Leaders and Managers Need to Know about Using Diagnostics

There is a very big difference between organizational *Diagnostics* and *Survey Guided Action-Learning-Planning* (ALP). All leaders should be keenly aware of the difference because, *used the wrong way, Diagnostics can be catastrophic*. All effective “survey-guided” improvement programs follow several core/ethical principles:

- **Confidentiality:** All survey information must be collected anonymously – that’s why a respected third party (neither management nor the workforce) should collect the data and aggregate it. Confidentiality is essential and must be preserved at all costs.
- **Questionnaire Design:** The design of questions is both an art and science. Poorly designed questions provide little value and can often backfire. Organizations are complex, along with the people who compose them. That’s why it’s important to query people from more than one direction, to see things from a variety of sides and dimensions.
- **Commitment to Improvement:** The simple act of administering a survey (Diagnostics) will *create expectations* from those taking the survey: that something positive will be done to take corrective action (Action-Planning). But if nothing is done after the survey to improve poor situations, those expectations will actually create both a heightened awareness and a tension between *what is* and *what should be*. This back-pressure can be destructive; thus if leaders have no intension of making improvements, otherwise it’s best to keep the lid on “Pandora’s box.”
- **Feedback Methodology:** If this process is misused, the results can be disastrous.
  - First, feedback of the data should be done by an experienced consultant/facilitator, in a “cascading” manner, starting with senior leaders, then senior managers, then to the field teams (not individuals, although individuals are welcome to the data after the engaging in an Action-Learning-Planning (ALP) process. Consultants who make the mistake of trying to “interpret” the data (like a doctor does with a patient) will likely miss key factors that can only be discovered by jointly digging into root-causes. It’s vitally important senior leadership teams remain committed to improvement, engaged, and don’t try to defend the indefensible.
  - Second, the consultant should not “interpret” the data first. This should be left to the leadership teams, with the consultant asking insightful questions (but not in a critical manner) to explore root causes, key issues, pathways forward, feasibility, and so forth. This process gains the commitment of leadership and management to see improvement in a beneficial light.
  - Third, a quality program for Feedback and Action-Learning-Planning/Problem Solving should quickly be established in the immediate future for those who will be benefited by the information. The design of these sessions is both *art* and *science*. The outcome must be positive, enlightening, and people must have new mindsets, skillsets, and toolsets as a result that will help them continue to break down barriers. Poorly orchestrated by someone not adept at facilitation or mediation, the outcome can become an entanglement. A coach should remain in place to help overcome any seemingly intractable problems as solutions unfold.
  - Lastly, the *Learning* component of the ALP should remain ongoing to provide new insights, ideas, strategies, processes, practices, tools and metrics to continue to build capabilities and imbed the new system deep into the DNA of the corporate culture.