

# How to manage the transition to a new professional body: a little free advice

By Ian Harrison, chairman of the Institute of Pharmacy Management

The Millenium Dome, the Scottish Parliament and the 2012 Olympics are but a few examples of projects — temporary activities delivering change to achieve a focused output — that have not been completed on time or have grossly exceeded budget and it is important that the project to separate the Royal Pharmaceutical Society's functions does not follow suit. There are five aspects to a project's life cycle: specification, design, development, testing and change over. Because of the Government mandate to reorganise our professional body, a feasibility study took the form of the Clarke report.

It is essential to invest time at the start of the project, which Nigel Clarke calls the transitional stage. However, the Institute of Pharmacy Management proposes that the transitional committee recommended by Clarke must have a wider role than just producing a prospectus — it must manage the transitional process. Furthermore, we suggest that the PRINCE2 (Projects IN Controlled Environments) public sector project management system is used to facilitate the mutation of the Royal Pharmaceutical Society's non-regulatory parts to the new professional body.

PRINCE2 is a well established system for identifying actions, risk issues and timelines for implementing change. The components of a full project are:

- The business case to drive success (this has yet to emerge from the Society)
- The current and future organisational structure (particularly in the initial stage)
- Planning with a high level map (overview) and detailed stage plan showing timelines and identifying actions that must take precedent (ie, building the foundations before the roof)
- Controls, such as assessments at the end of each chunk of work and regular highlight reports (these are often no more than a page of actions achieved, problems identified and how such problems are being resolved)
- Risk management (the project manager should keep a log of risks identified by the project team and this is enhanced over

the project's life and reviewed on completion to ensure risks are managed or controlled)

- Built-in quality assurance
- Configuration control (the project manager's record keeping, including sequential numbering of document revisions — ie, version control)

We suggest that the transitional committee body has responsibility to direct the project on behalf of Council and other bodies. In

other words, the transitional committee must assume the role of project board. It is important that the Society has a good project manager used to working with this system. He or she should engender good communications (and not be assumed to be clairvoyant or to have the skills of a detective) but previous involvement with the pharmacy profession is not a prerequisite.

The project's chief executive should be the transitional committee chairman and the project manager could supplement the expertise available — in other words, these roles should not be merged. Getting an experienced project manager will

cut through some of the daunting detail but, if it appoints one, the committee should approve which corners can be cut.

It will be the transitional committee's preparatory responsibility to start up the work to generate a project brief, containing the outline business case, quality expectations and acceptance criteria, and a plan for the initiation stage (ie, a detailed route to the start of the project). The latter is generally written by the project manager for the project board (in this case, the transitional committee).

The committee must approve the risk log and create an approach that outlines how it will achieve success and consider the project's stages. Realistic target dates must be set and unrealistic targets resisted. (It may be the case that January 2010 — the date set for the emergence of the two new bodies — is too early.) Then follows initiation of the project, comprising:

- Authorisation by Council of the transitional committee's role specifications.

- Preparation and authorisation of a project initiation document (the internal contract of how and why things will be done plus when by and by whom), using all the talents available
- Creation of a plan for the next stage (indeed, every stage of the project will require a plan to be formulated by the project manager in consultation with the committee chairman for approval by the committee)

The transitional committee must perform an assurance role (reassurance in the corporate governance sense, not quality assurance in the pharmacy sense). It can delegate much of this to a suitable individual, who is not the project manager, to ensure that nothing is hidden, that the right people are involved and that there is adequate liaison with stakeholders.

Time should be made for significant pre-project work, and transparent consultation with Council. However, some projects that have benefited from preliminary thinking have jumped straight to the project initiation document and omitted outlining the business case.

The transitional committee must empower members with unique skills to use them to lead or develop ideas for its consideration and consulting with a user group is an option under PRINCE2 practice. This group could, for example, include the smaller special interest groups within the profession.

Since the transitional committee and, possibly, its chairman will not be versed in PRINCE2 both will require an introductory training session and on-going updates via the project manager's highlight reports.

The transitional committee, and not the Society or the Department of Health, must be the project's voice to the profession, the healthcare family and the media. Council has to be in control legally so it needs to delegate this in a hands-off fashion but must give final approval.

In addition, a communications plan must be devised for the transitional committee itself to illustrate openness and keep the professional organisations up to date, for example, via in-house newsletters.

The transitional committee will need to retain its independence, have the ability to listen and analyse with tact and nerves of steel to deal with factional interests. I wish it well in carrying forward this vital element of change management.

The output will affect all our futures.

**The transitional committee must perform an assurance role (reassurance in the corporate governance sense not quality assurance in the pharmacy sense)**