Why knowledge sharing is so difficult…
Presented by Christopher Worsley at Project Challenge 2014

You've heard it before – you've probably said it yourself; " If I had only known that before. Why didn't some one tell me?…"

It could be the signature tune of many avoidable and expensive losses incurred by projects in organisations.

The sad thing is that many of the errors made are repetitive: they have been met before and resolved before, but they come upon you as 'new' and may cause you a lot of unnecessary stress!

And why does this happen? The answer probably lies in that black hole of most organisations – communications - and the sharing of information and ideas across a community.

What do you do in your organisation about promoting learning from past experiences?

We've been looking at this problem with a view to using approaches to promote good project performance – I know it is common lore than you learn from your mistakes – but how much more valuable would it be if we learned from our - and others – successes.

In the next few minutes I would like to share with you our experiences in collecting success stories from the PM community.
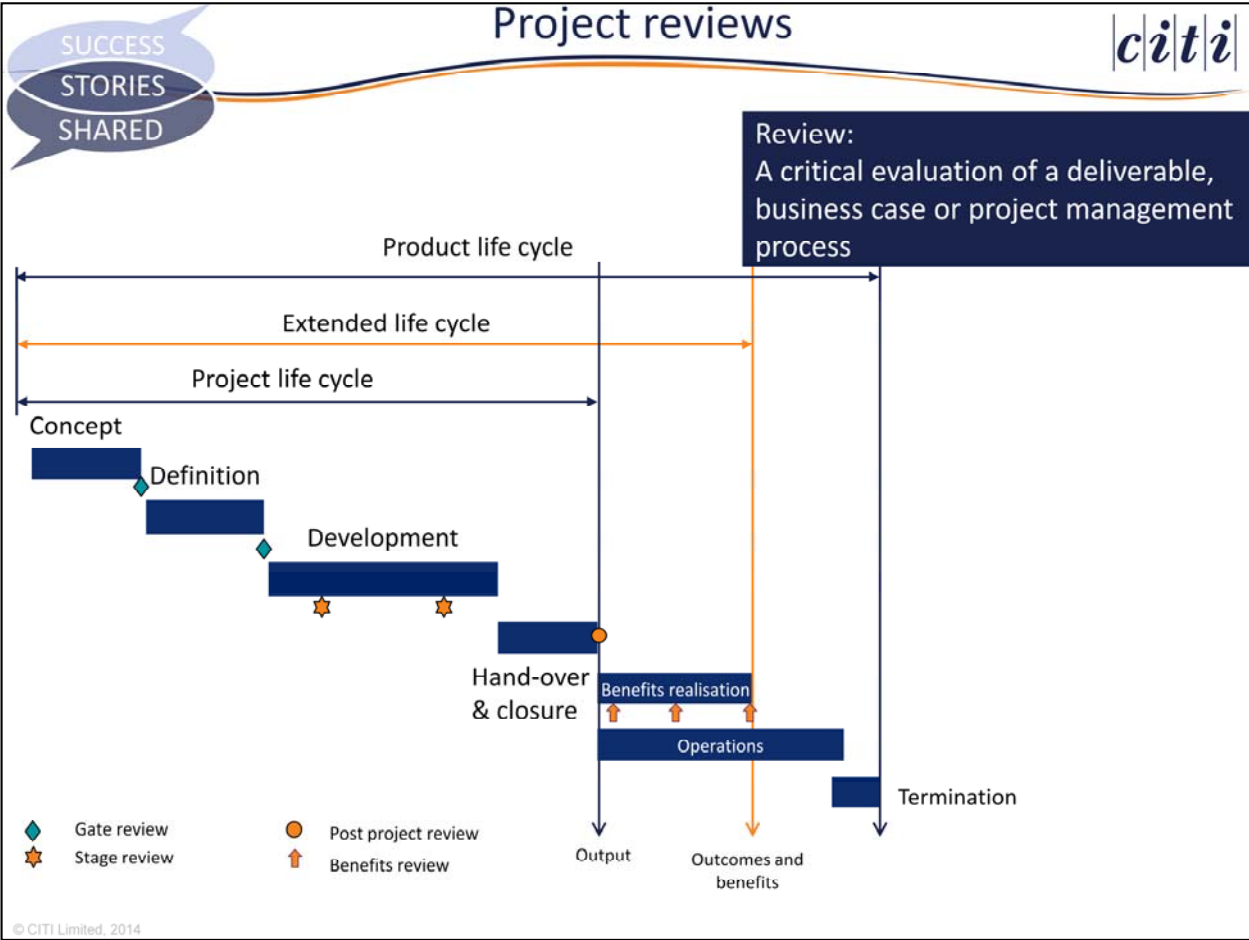
What comes to mind about 'lessons learned'?

When do you use them?   Do you use them?

When are the collected? Who is interested in them and what is the driving force?

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Let's consider the APM's generic project life cycle –

Those of you will be familiar with this – and the definition…

When reviewing the reviews, one is immediately struck by a major omission – the don't mention the collection of lessons learned – and these really should be collected in every review carried out.

A PMO manager – we will call her Jeandre; mainly because that is her name who was also a head of practice in PM became interested in the problem and eventually submitted (and got) an MSc for her research into the use and misuse of lessons learned within a project-dependent organisation.

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She was at Woolworths at the time (WW of SA is still going strong as is fundamentally M&S in SA) so she used WW as the organisation to study in details following a survey of a number of other large organisations.

WW did have a fairly strong process around running PIRs – but they were NOT being used.. Which is a bit of a double whammy! More cost and no return!

She started by looking at structured forms (the sort that is so beloved of PMISs).

Findings:

Over 90% had some form of PIR report – though she also pointed out that her sample mainly comprised mature PMOs BUT – and this is a really sad point -

She found NO evidence that reports had ever been accessed by any other project!

So why don't we apply lessons learned?

Before examining her – and our analysis – what do you think?

…………………….

All good points and in line with what she discovered…

Firstly: the form-based approach though regarded by PMOs as a highly productive and efficient way of collecting data - it does suffer from a known problem with checklist techniques, which is that it tends to channel people's thinking and responses - leading to false positives and spurious observations.

Secondly the source of the efficiency is also its principal weakness – the approach tends to strip the context from the observations; it is difficult to determine the relative significance and impact of the observations made and the 'bare bones' nature of the output makes it read like a report – and so lacks any emotional appeal.

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Example lessons learned

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Project name	Enter the project name		Date	Enter the date (mm/dd/yy) lessons learned are recorded
Project lifecycle information				
Project lifecycle and phases	(Select one lifecycle and phase only)			
Knowledge area	**Lesson learned that worked**	**What worked well recommendation**	**Lesson learned that didn't work**	**What didn't work well recommendation**
Scope				
Time				
Cost				
Quality				
Communication				
Risk management				
Human resources				
Procurement				

How do you record them?

But this form of collecting is process clever and effectiveness poor.

This example helps to show what happens when the focus is on quick and short

BUT creates the medical dictionary problem --- the structured list focuses and challenges the thinking and compartmentalises it - disassociating it and also creating false positives

Importance, emphasis – al the things that interns take years to acquires as doctors, which of the many factors presented are in fact real indicators of health /illness in a specific case

A third aspect strikes at the heart of why the approach is so ineffective: Even when done well what is often obtained are –

>   Descriptions NOT lessons – and even then lessons are 'identified' rather than lessons 'learned' (there has been one of the best – and longest - debates on LinkedIn on this subject)

AND

>   This seemingly innocuous process of distilling out lessons is registered in individuals' minds as a challenge to their personal ability - which can trigger defensive behaviour , I remember:

>   when reporting back findings on a IT security program that had gone horribly wrong that the initial response to the findings was defensive and aggressive in turns - with at one point the IT director making the interesting observation that this universally condemned programme was in fact a success! – a clear example of politics trumps practice

When faced with incontrovertible evidence about the lack of organisational use made from the expensively acquired lessons from previous projects was recognised, WW did a very clever thing –

They mandated a step in the writing of the project brief and business case whereby the authors (usually the sponsor and PM) had to identify which previous projects was the candidate project (the subject of the business case) most similar too and why.

This turned out to be an really powerful question…

Called 'reference' projects they are used to validate expected costs (and risks to costs) and benefits (and risks to benefits)… and it did make the lessons learned repository become visited and examined.

And a cursory examination of what the authors actually did to get this information revealed that the really important information on the PIR forms was 'Who was involved?'   As it was by *talking* to the people that the tacit knowledge - the 'real stuff' - was uncovered and made a genuine impact on the seekers after 'truth'.

(*Culture can get in the way here as the 'lone wolf' PM approach reduces the likelihood of seeking info as well as sharing it.*)

So we began to reason that if most is gained when the story is told by those involved why not get the story told…

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SSS participants

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- Network Rail
- Eurostar
- Cellnet
- Lloyds TSB
- Remploy

➲ *"It's amazing what we covered in one hour. Listening as he reflected on the challenges he faced and integrating this with what I know about project management – this is the best learning context for me. I came away excited by my profession…"*

➲ *"Thanks for the discussion today. It was the first time that I got to debrief about the threats and issues that I faced on the project and that was quite nice!"*

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It seemed a good starting point to hypothesise that:

For process improvement (which is PMO driven) the need is for explicit knowledge and information that is both timely and current for maximum value

While for performance improvement and the alteration of behaviour the knowledge passed has to be both implicit and tacit and so needs to occur between PMs and not done to PM. It was also noticed that the stories told often benefit from being described 'at a distance' from the actual events – as distance lends perspective and unimportant details tend to fade – as of course with some of the important details!). This thoughts led to SSS.

SSS started some 24 months ago – both here and in South Africa, which is where I now live – with CITI using the approach to achieve changes in attitudes and behaviour in communities of practice within organisations…

And we have had good experiences: These are some of the UK clients that have participated.

The process was universally regarded as valuable in itself – the approach is to use structured interviews NOT forms.

Where does the real value lie? Recording it or taking part in it – we're not really sure.

If taking part is key then peer-to-peer interactions should be encouraged to drive up capability – and this has many consequences / implications (e.g. PM 'clubs' with powerful example of this approach in practise is the and BAe top 50, group and LBG Plats Gold Silver communities in Change.)

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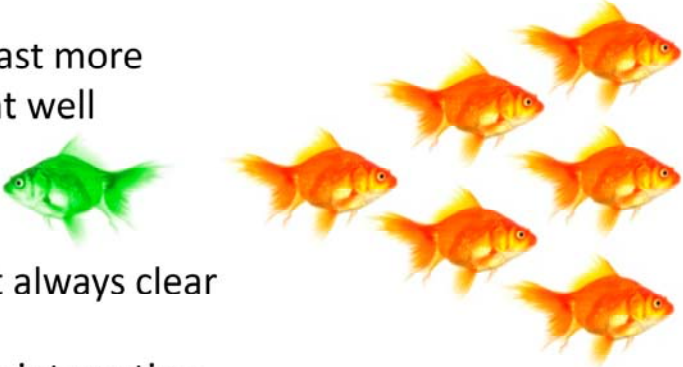Presented by Christopher Worsley at Project Challenge 2014

What how do you do it, and what have we learned?

Keep it near term for PMO and process improvement

But for community growth then more 'historical' time lines to get the 'lens of time' effect.

Tell the Michigan story… modified picture -

Ask what you see in this picture – What is the story?

The tell the story of the research the brave lone individual striking out, versus the poor lost soul desperately seeking the group

So interpretation really do vary enormously - ref back to PM cultures

And learning points are NOT necessarily obvious!

Summarising a story is often seen to be the hardest part and we'll let you try that out for yourself.

Finally, an interesting observation – We wondered, "Would it not be most beneficial to let junior PMs run the interviews or at least sit in on them? They have the steepest learning curve and the organisation would get maximum gain from improvement in their performance.sit in on interviews etc. However, we found that when junior managers were asked to dig out the nugget they were VERY different for the more experienced ones. So experience matters (link back to Michigan) – and tends to reinforce that lessons learned is probably best conducted as a peer-to-peer communication.

Perhaps discuss research on use of method (PRINCE2) with jnr, snr and mid experience pms.

The report is in a blog format because it forces brevity, it encourages a 'story''
style i.e. conversational not report, but it demands a final summary to ensure the
lessons are identified before they are acquired.

Let's have a quick tour of the process.

What we'll do is…
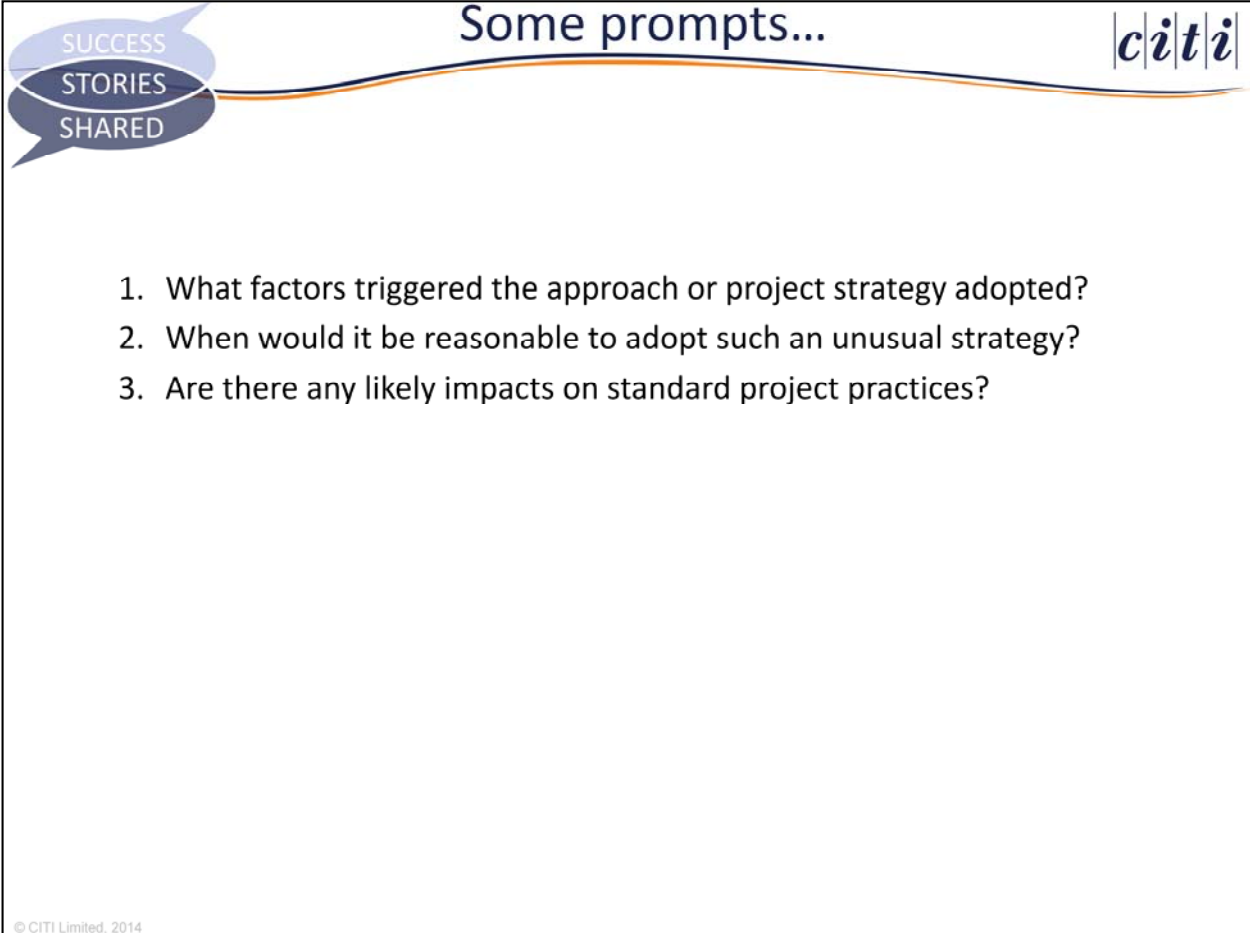
A case in point

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• At a major bank, customer's complaints were rising and the number of people in arrears on payments was spiralling out of control. From all accounts the bank processes and policies were being executed effectively – but they just were not having the right effect.

• The project sought to find the root causes of the problems. The business sponsor was keen to select the best front-line staff to be part of this team. But the PM was not convinced – these people were supportive of the processes – which were known not to be working. Instead he urged the use of a 'maverick' team – staff who complained about the processes – the ones who were always saying there was a better way.

• This kind of team is not the easiest to manage! They were co-located in one site, and the most difficult clients cases were selected for their attention. For a period of 3 weeks they worked on the phones from 8am to 3pm each day. At 3pm the reflection and analysis began. In a room full of flip charts they analysed what was going wrong: which practices seemed to work; what could they try doing to sort out a problem? The team 'put on the customers' shoes' – "If it were you – what would be good for you?"

Within one month the rates moved from just 22% of payments being paid to a massive 94% being back on a defined payment schedule.

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Some prompts…

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1. What factors triggered the approach or project strategy adopted?
2. When would it be reasonable to adopt such an unusual strategy?
3. Are there any likely impacts on standard project practices?

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Here are a few 'prompt' questions to suggest what to think about…

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Our view

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Using an investigative / experimental approach (*trying out new stuff with management blessing*) transformed a group of maverick individuals into a team who were capable (and passionate enough) to take modified practices into operations and transform the level of performance.

1. Before initiating a project, recognise the sources of complexity. Where the complexity requires innovative, experimental approaches for problem-solving prepare the team (including the sponsor) for that approach *and the consequences for management*.

2. When selecting a project team that is destined to cause organisational change, the most suitable change agents are *unlikely* to be the best performing staff; it is more likely to be those most eager for change (who may often be regarded as mavericks in the business-as-usual environment)

3. The planning and delivery stages in complex organisational change (transformative) projects are best structured as iterative cycles of action-learning, as project deliverables will be unclear at the time of initiation.

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What did you think?

……

The summarised description

These are what we came to after having a little more time to reflect on the material.

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So in summary:

To get value from lessons learned they need to adopted and adapted by PMs working on their projects, as well as the organisation taking steps to respond to inefficiencies and legacy issues in its processes.

These two are different aspects of knowledge management – and research and the literature clearly identify the importance of knowledge management in PM (and management generally.)

To maximise on the investment made by first of all having the experiences and then recording the experiences we suggest:

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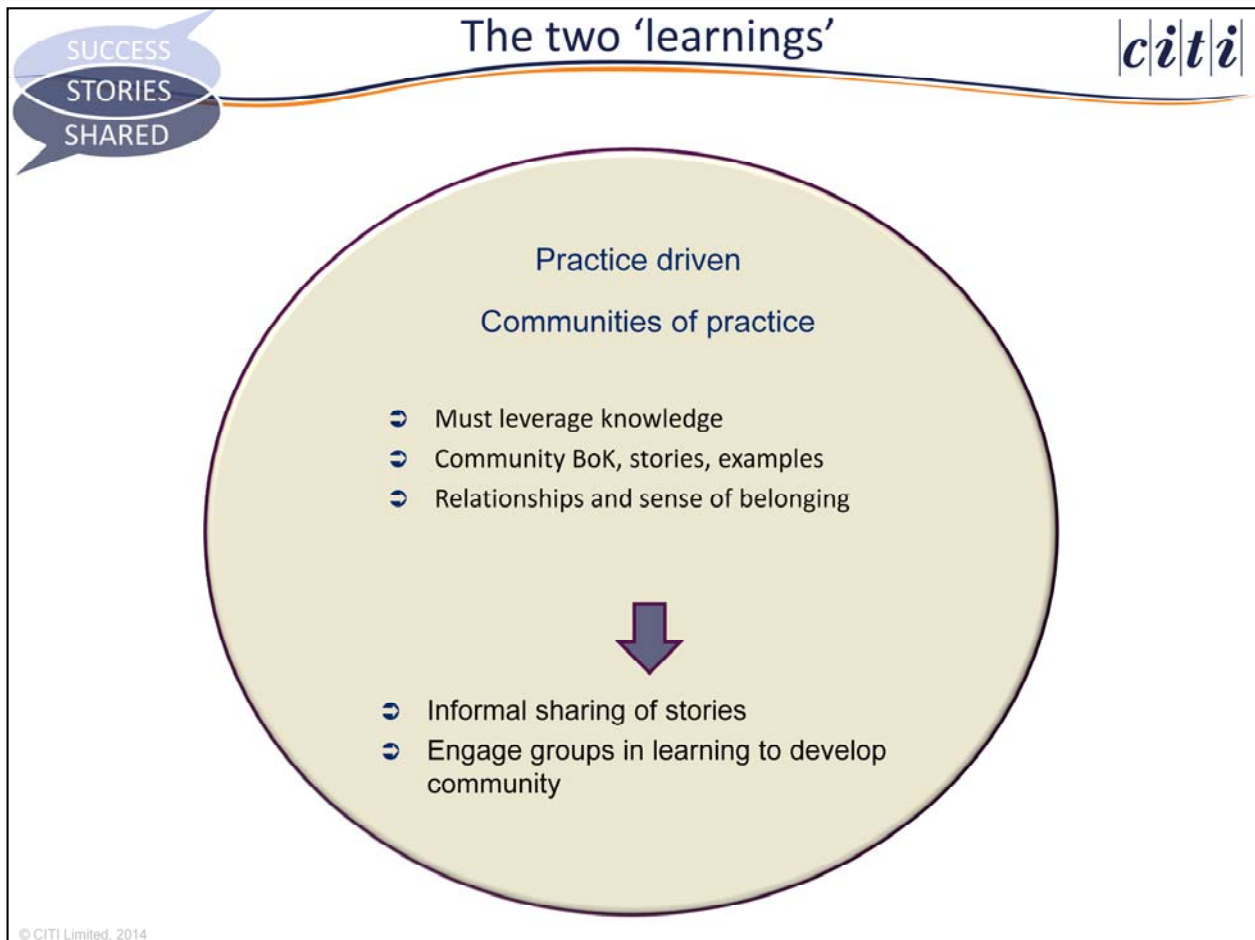Organisational knowledge management – classic processes – PMO driven

CLK

SSS:. Communities of practice – Practice driven.

CLK

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CLK

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SSS:. Communities of practice – Practice driven.

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And I would like to finish by thanking and acknowledging the pioneering efforts by PiCubed and Virtual Project Consulting in the creating

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