Selling Spread Game

Why Use This Game

- To help people understand the way innovation works, and that not everyone will adopt a change easily at the same time.
- To communicate the factors that may affect how quickly people will adopt a change.

Target Audience

Senior staff and QI team members who are ready to take changes they have developed to the rest of the organization, to try to implement them beyond the pilot site(s). You may also involve the people to whom the changes are being “spread.” The game works best with groups of 30-40 people.

Type of Game

A demonstration with everyone participating.

Key Concepts

- People accept change at different rates.
- People’s willingness to adopt a change will vary depending on the:
  - Relative advantage of the proposed change.
  - Change’s compatibility with the current system.
  - Simplicity of the change and transition plan.
  - “Testability” of the change.
  - Ability to observe the change and its impact.

Source, History and Resources for More Information

Sarah Fraser, a scholar on spreading good practices in health care, uses this demonstration in her teaching. She led the demonstration at a learning session sponsored by the Institute for Healthcare Improvement, which made this description available to us.

Materials

- Flip chart and markers to record the key points of the discussion

Preparation

To prepare for this session:

- Familiarize yourself with the session’s structure and content:
  - Read through the game instructions and key teaching points in their entirety.
  - Practice the game itself.
  - Practice presenting the key teaching points.
- Prepare the room:
  - Participants will need room to move around, so make sure chairs can easily be moved to the sides of the room.
Playing the Selling Spread Game

Welcome and Introductions
To begin the game, welcome participants and thank them for their participation. If necessary, ask individuals to introduce themselves to the group.

Learning Objectives
Tell participants that by the end of the session they will:
• Understand some of the challenges in implementing a change.
• Have a sense of how to present a change so more people may be willing to try it out.

Agenda
Provide a brief description of the session’s primary components:
1. Background to Selling Spread Game.
2. The game itself.
3. Debrief and discussion on what the game shows, and how its lessons can be applied to HIV care.
4. Feedback and close.

Background to the Game

Facilitator’s note
This game is a demonstration to illustrate the research of Everett M. Rogers about how innovation gets transmitted through a population. In very simple terms, Rogers says that people adapt to something new at different rates. Some people are true innovators—those who are most venturesome about taking on a change. They are followed by early adopters, the early majority, the late majority and last by the laggards. The distribution of these groups in a population roughly mimics the bell curve, with most falling into the early majority or late majority categories.

As the game is designed to show, many factors about a change affect which category a person will fall into for any given change. Rogers has identified five attributes of a change that may affect how a person feels about change. Explain these briefly to your audience, primarily to help your “sellers” design effective pitches for their ideas. Rogers introduces each attribute as follows:

1. Relative advantage of the proposed change: “the degree to which an innovation is perceived as being better than the idea it supersedes.”
2. Compatibility with the current system: “the degree to which an innovation is perceived as consistent with existing values, past experiences, and needs of potential adopters.”
3. Simplicity of the change and transition: “the degree to which an innovation is perceived as relatively difficult [or simple] to understand and use.”
4. Trialability/Testability: “the degree to which an innovation may be experimented with on a limited basis.”
5. Observability [ability to observe the change and its impact]: “the degree to which the results of an innovation are visible to others.”

Research also shows that those in the “early adopter” category are most able and helpful to influence the majority to warm up to a change. As you do your improvement work, think about who might be an early adopter on whom you can rely for help.

Key points to explain to your audience:
• People embrace change at different rates.
• How they feel about change may vary depending on the specific innovation being proposed.
• Careful explanations around key attributes can help people be more open to change.
The Game Itself

1. In a group of 30–40 people, ask for two volunteers to come up with and “sell” a good idea to the audience. It should be an idea they think is good, but might be a little tough to sell to this group. The ideas can be on any subject: some that relate to an HIV program include:
   - Providing beepers or cell phones to all patients to remind them of their appointments.
   - Installing computers in waiting rooms so patients can update their own medical records.
   - Allowing patients access to their provider “24/7” via email.
   - Allowing patients access to the program’s scheduling system so they can schedule their own visits.

2. Instruct the two people giving the “pitch” to use Rogers’ attributes of the change that affect the rate of adoption, that is, the:
   - Relative advantage of the proposed change.
   - Compatibility with current system (structure, values, practices).
   - Simplicity of the change and transition.
   - Testability of the change.
   - Ability to observe the change and its impact.

3. One of these two goes first and pitches their idea in front of the crowd in one minute.

4. The remaining people listening are asked to group in the front of the room, and to sort themselves out according to their own level of enthusiasm and likely “adoption” of the proposed idea. They sort themselves from left (innovators/early adopters) to right (late adopters/historians) along the front of the room. (Expect a roughly bell shaped curve).

5. Have people at each end of the distribution explain why they did or did not “buy” the change. People who arranged themselves in the middle of the distribution can be asked what it would take for them to adopt the idea.

6. The second “seller” then gets up and pitches his or her idea for one minute, and the group up front is asked to sort itself again by adoption of the new idea. Expect positions to change.

Debrief and Discussion

Reconvene as a large group. Review results.
- Ask participants what they think happened. Key points to elicit from the discussion include:
   - Different changes are easier or harder to sell than others, so we need to tailor our communication about the change accordingly.
   - Not everyone will adopt a change quickly (be an “early adopter.”) Expect more of a bell-shaped curve.
   - Some people are more likely to accept one type of change versus another. Some are innovators or lag-gards depending on the different type of ideas or changes proposed. It’s important not to stereotype people as always being innovative or not.
- Ask participants how they might apply what they learned from this game to their HIV programs.
   - What does this way of thinking about change tell us about how to make change happen in our program?
   - How can we better address Rogers’ attributes of change in what we do?

Feedback and Close

- Ask your audience for feedback on whether this session met its objectives. Take notes of their responses on a flip chart, and keep it for your use in the future.
- Schedule an informal follow-up session with any audience member who wants clarification or more information on the game or the concepts you discussed.
- Thank your audience and congratulate them on their hard work and success.