Pre-Mortem Analysis

Sonja Armbruster[1], John W. Moran[2], and Jane Shirley[3]

July 22, 2014

Description:

Pre-Mortem analysis is a technique to help prevent having to complete a post mortem on a total project failure. The purpose is to identify vulnerabilities in the plan. We have all been involved in a post mortem project failure where everyone points fingers, blames other departments for not collaborating, and sometimes we hear conspiracy stories of outright sabotage. Nothing good comes from a post mortem analysis since we are too busy fixing blame, we seldom learn from the mistakes made. A Pre-Mortem analysis is a forward looking process rather than the backward looking process of a post-mortem. Doing a Pre-Mortem is a process in which an improvement team imagines that their project has failed before it starts. The team then brainstorms all of the possible potential reasons that the project could fail and assigns a probability to each potential reason. For the highly likely reasons of potential failure the team can develop countermeasures to protect the project. **"Research conducted in 1989 by Deborah J. Mitchell, of the Wharton School; Jay Russo, of Cornell; and Nancy Pennington, of the University of Colorado, found that prospective hindsight—imagining that an event has already occurred—increases the ability to correctly identify reasons for future outcomes by 30%".[4]**

When to Use:

Pre-Mortem analysis should be used on medium to large scale project that could have a major impact on the organization either financially, politically, or culturally. The project to be analyzed should have a very clear scope, defined improvement goal to be achieved, specific time frame for implementation, and identifiable risks to the organization should the project fail.

---

[1] Sonja Armbruster, MA, Director of Public Health Initiatives for Wichita State University's Center for Community Support and Research and consultant for the Public Health Foundation; PHAB Site Visitor, and Adjunct Faculty for Wichita State University Public Health Sciences Program and the University of Kansas School of Medicine, Master of Public Health Program.

[2] John W. Moran, Ph.D. is a Senior Quality Advisor to the Public Health Foundation and a Senior Fellow at the University of Minnesota, School of Public Health in the Division of Health Policy and Management. He is a member of PHAB's Evaluation and Quality Improvement Committee and Adjunct Professor in the Arizona State University College of Health Solutions' School for the Science of Health.

[3] Jane Shirley, RN, BSN, MSE, is the Director of the Center for Population Health and Director of Local Public Health for the Bureau of Community Health Systems (BCHS), part of the Kansas Department of Health and Environment (KDHE).

[4] Klein, Gary. "Performing a project premortem." *Harvard Business Review* 85.9 (2007): 18-19.

Construction Steps:

Gary Klein outlines the process for constructing a Pre-Mortem in his book *The Power of Intuition: How To Use Your Gut Feelings To Make Better Decisions At Work.*[5] Plan for this exercise to take about an hour. This process requires a strong facilitator.

- **Preparation:** Convene the project team and assure that participants are comfortable and have several sheets of paper.
- **Imagine a Fiasco:** The facilitator starts by claiming to look into a crystal ball to see the outcome of the proposed plan, and then says: "Oh, no, oh, it's a failure! Not just any failure, but a complete, total, *embarrassing* disaster. It is *so* bad; no one is talking to each other! Things have gone as wrong as they can go! But this cheap crystal ball keeps buffering and won't reveal the reason(s) for the failure. The question of the hour is "What could have caused this?"
- **Generate Reasons for Failure:** Ask each person write down all the reasons they think the failure occurred, giving them just three minutes of quiet time to generate a full list. Klein explains that this is where the differing intuitions of the team members come out. "Each has a unique set of experiences, scars, and mental models they bring. The collective knowledge in the room is far greater than that of any one person." Klein has found that this activity helps the group share experiences and calibrates their understanding of the difficulties.
- **Consolidate the Lists:** Each person shares one item on their list. A facilitator records them on a whiteboard or flipchart paper. After each person has shared one item, continue to go around the room, sharing one item each time, until everyone has exhausted their lists. By the end of this step, the list should include everyone's concerns.

  Klein explains that this process liberates people who might otherwise be afraid of looking like they're not a team player. "Now, everybody is being asked to think about failure. So instead of looking like a bad teammate, you're pulling in the same direction as everyone else."[6]

- **Revisit the Plan:** Address the two or three items of greatest concern and then schedule another meeting to generate ideas for avoiding or minimizing the other problems. If the project has a charter,[7] these prioritized areas of concern can be listed in the "Assumptions, Constraints, and Risks" section, along with the planned strategies to mitigate the risks.
- **Periodically Review the List!** Take the list out every 3–4 months to re- sensitize your team to problems that may be emerging.

---

[5] Klein, Gary. *The power of intuition: How to use your gut feelings to make better decisions at work*. Random House LLC, 2007.

[6] http://freakonomics.com/2014/06/04/failure-is-your-friend-full-transcript/ Accessed July 13, 2014
[7] http://www2.cdc.gov/cdcup/library/practices_guides/CDC_UP_Project_Charter_Practices_Guide.pdf

Example:

The Kansas Public Health Workforce Development Coordinating Council convened to develop a charter after being awarded a grant to support new efforts. The participants used the Pre-Mortem to generate a list of possible failures (listed below) and then prioritized (red italicized text) the greatest concerns and developed strategies to mitigate the concerns.

- *Potential perception of unfair distribution of money*
- Key partners leave
- Lose sight of vision/mission
- *Poor internal/external communication*
- *Missing what the WF needs – inadequate assessment*
- Lost opportunity to use technology for training
- Individuals don't complete tasks
- Political climate gets toxic
- Trust in purpose for training
- Lack of facilitation
- Public Health emergency
- Seeking a training solutions for every capacity issue
- Poor planning
- Unreasonable expectation of outcomes
- Fear of change – status quo

- Intentionally sowing distrust
- Lack of foresight
- Influential people/ organizations feel left out
- *Lack of buy-in*
- Mismanagement of grant funds
- Change in administration
- Not honoring the process
- One personal does it all
- Fail to brag and tell story
- *Fail to communicate the benefits of the new funding for workforce development*
- Budget windfalls could decrease collaboration
- Fail to work on contingency/succession plan
- Overuse of technology
- Missing deadline – loss of funding
- Bad hire for workforce specialist
- Don't use assessment to inform action
- Poor conflict management