The Brief

Tech-agnostic · Two modes · Seven vital signs

> *"Most transformation failures are not delivery failures. They are DNS decisions taken too late — or never taken at all."*

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DNS and DNF

Two terms that every organisation needs in its vocabulary before it moves into significant change.

DNS

DID NOT START

The DNS decision is rarely made in organisations, because not starting feels like failure. There is no institutional language for it. Leaders face pressure to adopt, to demonstrate progress, to keep pace with peers. The option of a considered pause is treated as obstruction. The Brief exists to give that option a name, a rationale, and a governance pathway.

DNF

DID NOT FINISH

A DNF is almost always more costly than a DNS. When a programme cannot finish, it almost always signals that one or more vital signs were not in place at the start, deteriorated without being named, or were carried as known risk without a recovery plan. The DNF tells you where the DNS should have been.

The Brief exists to move the DNS decision to where it belongs: before you start.

And when that moment has passed, to provide the diagnostic language for naming what is failing and why.

Two modes, one standard

MODE 01

Pre-Start Triage

Before any significant programme begins, assess all seven vital signs. If all are stable, the organisation is Briefed and can proceed. Any instability is a DNS condition — a specific, nameable gap that must be addressed or formally accepted as owned risk before a responsible start is possible. The instrument takes fifteen minutes. The conversation it opens may take longer. That conversation is the point.

MODE 02

In-Flight Diagnosis

Programmes that are struggling show a recognisable pattern: conditions that were marginal at the start have deteriorated without being formally acknowledged. The Brief in field mode produces a rapid diagnosis — which vital sign has failed, when, and what the evidence is. That is the document that goes to governance. It replaces the instinct that something is wrong with the language to say specifically what.

Seven vital signs

All seven must be stable for a programme to be Briefed. Any instability is either a DNS condition to be addressed, or a named risk that a specific individual must own. They apply regardless of whether the change involves technology, process, structure, or all three.

01

Resources

Budget, capacity, and financial case — built from the operating model, not reverse-engineered to justify a target.

02

Capability

The right people, named and confirmed. Not intended, not planned for.

03

Accountability

Named individuals own specific outcomes. Not committees. Not shared ownership.

04

Governance

A decision-making structure that can respond at the pace the programme requires.

05

Culture

Demonstrated willingness to change. Evidence of actual behavioural change, not aspiration.

06

Practices

Processes and operating patterns that are fit for purpose, or have a credible plan to get there.

07 THE CAPSTONE CONDITION

Learning

Are the people and teams involved on a genuine learning curve? The programme should leave the organisation more capable than it found it — delivered with, not to.

How to apply it

1 Before you start

Apply The Brief to any significant programme before investment is committed. Work through each vital sign honestly. If all seven are stable, the organisation is Briefed. Document the assessment and the individuals who signed off on it.

2 When a vital sign is unstable

Name it specifically. Assign a named individual to own the resolution. Set a clear condition for what stability looks like. Do not proceed until the condition is met, or formally accept the gap as owned risk with a named recovery plan.

3 During delivery

Revisit The Brief at the first sign that something is not working as expected. The instrument will identify which vital sign has deteriorated and when. Use the output to brief governance — replacing vague concern with specific diagnosis.

4 After a DNF

Apply The Brief retrospectively. Identify which vital signs were unstable at the start and which deteriorated during delivery. Use the findings to inform the next decision, not to assign blame.

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