Chapter 2

Change and Innovation

Change

- Change is inevitable in health care.
- The pace of change is accelerating.
- Change is complex.
- Nurses are always adapting to change.

Definitions

- Change
- Planned change
- Emergent change
- Transformation
- Resistance
- Change agent

Theoretical Framework

- Planned and emergent change
- Roles and responsibilities
- Change agents and recipients

Background of Change

- Top-down change
  - Focus is top administrators and management
- Emergent view of change
  - Focus is on those affected at the frontline

Organizational Change

- Conscious change leadership
- Transition an organization from a current state to a desired future state
- Critical leadership competency for nurses

Change Theories/Models

- Lewin's planned change theory (1947, 1951)
  - ➢ Unfreezing, moving, and refreezing
- Kotter's model of change (1996)
  - ➢ 8 steps of change
  - ➢ Emphasis is on helping others to see the need for the change and to embrace it.

Kotter's Model of Change

- Establish a sense of urgency.
- Create a guiding coalition.
- Develop a vision and strategy.
- Communicate the change vision.
- Empower employees for broad-based action.
- Generate short-term wins.
- Consolidate gains and produce more change.
- Anchor new approaches in the culture.

The Process of Change

- Emergence of events
  - ➤ Essentially change by chance
- Talking with one another
- Development of practice
  - ➤ Result of a chain of activities, purposeful and planned

Readiness Assessment

- Open communication within the change process
- Early involvement of staff
- Listening to their input and concerns
- Engaging them in the change

Change Fatigue

- Utilize effective communication
- Show support and meet staff where they are in the acceptance of the change
- Forfeit control and involve staff in the change process
- Identify where and how staff can fit into the change process
- Give them hope by modeling a positive outlook and energy

Emergent Process Methods

- Rapid cycle change
- Transforming care at the Bedside (TCAB)

Resistance

- Resistance to change should be expected as integral to the whole change process.
- Resistance may be rooted in anxiety or fear.
- Not all resistance is bad; it may be a warning that something needs readjusting or clarity.
- Viewing the nurse or resister as the solution rather than the problem helps reframe the issue.

Managing Responses to Change

- Fear
- Sadness
- Outrage
- Stress
- Disorientation
- Eroded loyalty
- Lack of commitment
- Low risk taking

Transtheoretical Stages of Change Model

- People move through stages when modifying behavior
- Time spent at each stage is variable
- The five stages are:
  - Precontemplation
  - Contemplation
  - Preparation
  - Action
  - Maintenance

Leadership and Change

- Articulate a clear need for change.

- Get group participation by leaving the details to the people who must implement the change.

- Get reliable information to the implementers.

- Motivate through rewards and benefits.

- Do not promise things that cannot be delivered.

Power and Politics

- Power issues and politics are central in considering change.

- Hierarchical managerial practices and top-down control often make change difficult to implement.

- Long-term consequences of change must be assessed prior to implementation.

Innovation Theory

- Definition of innovation
- Organized abandonment
- Purpose and role of innovation in organizations

Rogers' Innovation Theory

- Five stages of innovation-decision process:
  - Knowledge of innovation's existence/functions
  - Persuasion to form an attitude toward the innovation
  - Decision to adopt or reject
  - Implementation of the new idea
  - Confirmation to reinforce/reverse the innovation decision

Innovation in Health Care

- Characteristics of Nurse Innovators
  - Willing to take risks
  - Frequently question common beliefs and practices
  - Comfortable with uncertainty
  - Knowledgeable experts
  - Comfortable with occasional failures
  - Able to apply innovation
  - Professional networkers

Disruptive Innovation

- Simplifying technology takes root and displaces more established technologies

- Business practices that are slower to change, rooted in tradition, or constrained by regulation and the status quo

Leadership and Management Implications

- Major change areas in nursing practice
  - Organizational structures
  - Nursing labor force
  - Reimbursement
  - Information systems

Learning Organizations

- Four practices for workplaces
    - Empowerment
    - Shared decision making
    - Self-direction
    - Shared governance

Current Issues and Trends

Change Influencing health care:

1. Population as customer
2. Wellness care and prevention
3. Cost management
4. Interdependence among professionals
5. Client as consumer of cost and quality
6. Continuity of information

Question #1

Evidence shows that planned change is best carried out with the input of:

A. Top leaders and managers only.
B. Those affected by the change.
C. Outside consultants.
D. Anyone interested.

Question #2

Empowerment and shared decision making are practices found in:

A. Small organizations.
B. Learning organizations.
C. Innovative organizations.
D. Stagnant organizations.