9.6: The Nursing Process as the Change Process

The change process can be related to the nursing process and is described by Sullivan (2012) in four steps. **Assessment**, the first step, entails identifying the problem. It involves collecting and analyzing data. Pinpointing the problem enables individuals affected by a proposed change to have a clear and accurate understanding of the problem.

Once the problem is identified, the change agent collects external and internal data as needed (e.g., patient satisfaction questionnaires, staff surveys). A critical analysis of the data supports the need for change, at which point the change agent determines resistance, identifies potential solutions, and begins to develop consensus regarding change. Assessing the political climate by determining who will benefit from the change, accessing resources, and having credibility with and respect of the staff will enhance the leader’s ability to increase the driving forces and reduce the restraining forces (Lewin, 1951). Sullivan (2012) recommends converting data into tables or graphs, thus making the results easier for administration and frontline providers to understand, and perhaps accept, the change.

**Planning** requires the participation of staff that will be affected by the change. Relationships among staff may be altered if structures, rules, and practices are modified. This in turn alters workforce requirements, which may then lead to hiring new people with different skills, knowledge, attitudes, and motivations (Sullivan, 2012). It is anticipated that less resistance will be encountered if staff are involved at the planning stage, since attitudes, ways of thinking, and behaviours need to shift to accommodate a new way of working.

Weiss and Tappen (2015) recommend three tactics that can be used to unfreeze members or staff. First, **sharing information** is a way to help staff understand the rationale for a proposed change. Second, **disconfirming currently held beliefs** is a way to demonstrate that a current goal of the target system is inadequate, incorrect, or inefficient and therefore needs to be modified. Third, **providing psychological safety** is a tactic that minimizes risk by affording sufficient security to staff. This tactic is highly valuable as it generates a feeling of security and facilitates members’ ability to trust and accept the change. These three tactics decrease anxiety about the change. Establishing target dates
and time frames to determine progress and providing opportunities for members to offer feedback will support the change.

In the **implementation** stage, plans are put into action. The change agent sets the tone for a positive and supportive climate, and methods are used to continue persuading members toward the change (providing information, training, assisting with personnel changes). Strategies are used to change the group dynamics to encourage members to act based on group decisions.

During **evaluation**, indicators are monitored to determine whether goals have been met, and what, if any, undesirable outcomes occurred and how to respond to unintended consequences. Once the desired outcome is reached, the change agent terminates the role by delegating responsibilities to members. Policies and procedures may be necessary to stabilize the change as part of everyday practice. The leader, as energizer and supporter, continues to reinforce behaviours through ongoing feedback.