



The Human Factor in Organizational Change

By Tammy McCausland

Healthcare organizations are continuously under pressure to evolve to meet patient needs while maintaining standards of care and keeping costs contained. Getting people on board with organizational change or innovation is hard, especially in health care.¹ Staff are less likely to adopt new behaviors and practices if they perceive change or innovation clashing with longstanding patient care values.¹

Whether a change is departmental or organization wide, the transition from plan to rollout can be challenging. Surprisingly, the human element is often considered too late in the process. “What I often see is that people have great plans—great transition plans, great implementation plans, well-thought-out strategy—but no people piece. If they’re not addressing the human component in these transitions or changes, the change is likely to fail,” said Lucy Zielinski, managing partner for Lumina Health Partners. “It’s hard to explain the ROI on the human piece.”

When implementing organizational change, leaders will be more successful if they understand why change is hard for staff, listen to and engage staff early and support staff throughout the process.

Why Change Is Hard

Joan Brett, associate professor in the WP Carey School of Business at Arizona State University, said change is hard for people “because it fundamentally threatens what their expertise is and what they’ve been doing. They’ve been doing things successfully, and now they’re being told they have to do it differently, and they don’t understand, often, the ‘why’ behind it.”

“Human beings like things to be predictable, and the moment something changes, it challenges us and we start thinking, ‘How’s this going to impact me? What’s in it for me? Gosh, I was content with the way things were going, and now you’re changing things up on me,’” Zielinski said. “There’s this fear of the unknown that’s present, especially if it’s unexpected. If it’s planned out and people are informed, it’s an easier transition.”

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Listening To Staff

Sometimes when leaders listen, they do so halfheartedly. “They are listening to put in the time, but they’re not listening to hear,” Brett said. “If leaders can listen to really hear and keep asking, ‘Well, tell me why you think that way,’ the more staff are going to break it down.” Once leaders feel as though they’ve genuinely heard the issues, they can engage staff and figure out how to undertake the change together. “You elicit them as part of, ‘Here’s my ‘why’ I have to do this, and it’s something we’re going to do, and I would rather have you help me be part of how we implement it rather than not be part of it, because I value the input that you have,’” Brett said.

Zielinski encourages leaders to make time to listen to staff because engaged teams are the key to helping any initiative succeed. “Listen with empathy to understand where staff are. I recommend asking clarifying questions and saying things like, ‘Tell me more. Help me understand,’ and then mirroring back their concerns,” she said. “Then it’s important to address what they’re saying and collaborate to come up with a solution to address their concerns or their issues.” Leaders should tune in to any negative energy or comments that may come with plans to implement change. As well, a leader should not be fixated on their plan. “I don’t think a



leader should have pre-scripted expectations of what things are going to happen. They have to be ready for a little disruption or things not to go smoothly,” she said.

Engaging Staff

When leaders fail to tune into employees’ resistance, they miss important cues about what’s going to keep employees from implementing changes. “Leaders assume employees don’t want to do it, when in fact, they don’t realize the barriers their employees are up against,” Brett said. When leaders are tuned in, they may uncover an issue different from what they expected. For example, perhaps there was a negative outcome the last time a change was implemented and now staff are averse to change.

Reluctance to change may have nothing to do with a change being mandatory because sometimes staff like mandatory changes. “I don’t think the issue is the mandatory nature of it. I think what underlies it is the healthcare providers’ understanding of the ‘why.’ Why are we doing this? A leader, on a mandatory change, can help people to understand why and link it to the values that the employees hold,” Brett said. To get staff committed, leaders need to be open to employees’ ideas. “Employees can figure out a system that they can embrace once they understand the ‘why,’ and they’re part of the ‘how you’re going to make it happen,’” Brett said.

Zielinski recommended that leaders look for others in the organization who can provide support. “There’s probably a good volunteer who will step up, somebody with people management skills, to assist you,” Zielinski said. Leaders can identify and build a transition team comprising “change champions,” employees who are respected by others and who have managed departmental changes well in the past.² She also suggested creating problem-solving groups² made up of different staff—not necessarily leaders—to discuss issues and represent staff as a whole. “They work productively on issues, come up with some recommendations, or ask for leaders’ support to help them, and they report up to the leaders in a confidential, productive way,” Zielinski said. She recommends that problem-solving groups be created at the outset and also include a naysayer so leadership can understand where resistance or obstacles might be coming from, and they can take steps to address or mitigate those challenges.

Leaders need to look at what support employees need as they make changes. In [“3 Steps for Engaging Health Care Providers in Organizational Change”](#) Brett and Luciano wrote about a hospital handwashing campaign that created a Speak Up program in which everyone, regardless of their staff level, was empowered to remind others to wash their hands.² “They were trying to empower anybody to remind a doctor or anyone in the healthcare structure who wasn’t washing their hands. They were trying to change that culture,” Brett said.



Leaders can use data to engage employees by creating an awareness of problems and a goal to measure progress.²

Managing Staff

“Once the strategic objectives are identified, leaders need to align systems and processes to support them,” Zielinski said. People are one big component of change, but organizational leaders don’t think about all the other embedded things that reinforce people doing things the old way. Some examples Brett noted include an incentive system, a processing system or an IT system. “We want people to change, but then when they try to implement the change, they bump up against structural things in the organization that push them back into the old way of doing it,” she said. “Sometimes the systems pull them back into their old way of doing things because you haven’t fixed all the things that are needed to help support them.”

Leaders themselves must embrace the change, Brett said, and think critically about whether they have the skills, knowledge, motivation and priority to make the change happen. “We don’t pay enough attention to whether or not we have leaders committed to implementing that change,” she said. “As a leader you have to say, ‘Is this change a priority for me? Can I give it enough attention? What’s my attitude about it?’ because if you resist it, your employees can sense that you’re resistant, and then you’re going through the motions.” Leaders also have to figure out what help they need to get the change implemented and how they’re going to fit managing the change into their jobs.

Leaders need to be flexible, and avoid dictating a plan and operating in a silo. “Leaders shouldn’t say, ‘Let’s just do this because I said,’ without giving any reasons why they’re doing it,” Zielinski said.

(L-R) Joan Brett, associate professor, WP Carey School of Business, Arizona State University; Lucy Zielinski, managing partner, Lumina Health Partners



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Sustaining Change

After a change has been implemented, it’s important to check in to see: what’s the success rate; what’s working and why; where something isn’t working and why; what barriers or roadblocks exist; and what new roadblocks have

come up. “Just because it [a change] got implemented doesn’t mean the diagnostics are done. It’s not just, ‘We’re going to implement this thing.’ You have to do the follow-up. You have to stay on it. You have to eliminate the barriers,” Brett said. New problems can arise and there can be pushback if another unit isn’t making changes. “In health care, there are lots of multiteam systems, and the other team they’re working with that they hand it off to may want it done the old way,” she said.

“Periodic check-ins are important to see how that change is going. Continuing to keep your eye on why you did this [change] in the first place and celebrating some of the wins or the successes, the benefits of that change, is important,” Zielinski said. “It’s also about recognizing if things fail or deadlines aren’t met, reprioritize and put things on track or take a different direction.”

Takeaways

Organizational change is complex and without staff buy-in, rolling out a plan can be challenging. Following these takeaways can help make the process smoother:

1. Take time to explain the all the “why’s” related to the change.
2. Listen earnestly and honestly to staff. Give them opportunities to voice their concerns and be prepared to dig deeper by asking clarifying questions. Don’t discount people’s reluctance—you may find legitimate issues that require attention.
3. Develop a transition team with staff (change champions) who have experience with change. Also, create problem-solving groups comprising non-leaders who can work productively on issues and develop recommendations they can share with leaders.
4. As a leader, take time to reflect on your attitude about the change and how prepared you are for implementation. Figure out what changes you might need to make so you’ll have time in your schedule to give the plan, and your staff, the attention needed.

5. Make sure, as much as possible, that your systems and processes are aligned to support staff as changes are implemented. Give careful consideration up front about how to prepare all the components (human and structural) needed for success.
6. After a change has been implemented, check in to see what’s working and what isn’t, as well as what adjustments might be necessary to finesse things or to ensure the change stays in place. You’ll need to check in periodically—it’s not just a “one and done” scenario.
7. Be flexible. It won’t be a seamless transition, so if things fail or deadlines aren’t met, adopt an approach that makes it easier to reprioritize or adjust timelines, etc., as needed.

References

1. Brett JF, Luciano MM. “3 Steps for Engaging Health Care Providers in Organizational Change.” *Harvard Business Review*. October 18, 2018.
2. Zielinski L, Rodriguez M. “Change Management in Health Care: Navigating the Human Side of Successful Transitions.” *Lumina Health Partners*. October 18, 2018.

Culture Change

When attempting to change the work culture, Brett said leaders often lose sight of the fact that the worst behavior tolerated becomes the cultural norm. Leaders want to change some behaviors, but they tolerate the bad behavior of “superstars” or high-status employees while expecting other employees to make changes. “That sends a really inconsistent message,” she said. “You have to align your behavior and everything to the behavior that you want your employees to adopt, and there’s a lot of misalignment between either what leaders say they want versus what they foster and encourage.”

Culture change can fail if leaders don’t model the change that needs to be made in the culture. “Leaders send a message that they want a collaborative culture, and they want people’s ideas, but then when somebody comes up with an idea that’s different from theirs, they shut them down,” Brett said. And failure is likely also in instances where leaders struggle with competing goals. They may aim to have innovation and collaboration, but they may have a competing goal of getting something done by a particular day in a particular way. “It’s almost like they have paradoxes that they have to balance,” she said. “While they want this culture change, they also need speed and efficiency, and there are inconsistencies across those two things.”

