

Leading Change

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As a nursing apprentice at a nursing home during the Covid-19 pandemic, I had first-hand experience of how patient-focused health care suffered from many of the challenges presented by the pandemic. Epidemiological data early on from the pandemic established a direct link between age and risk of severe disease and death from the SARS-CoV-2 virus. This was reflected at our facility, where several elderly residents perished during an outbreak of the virus that proved difficult to contain. To address any upcoming viruses more effectively, a key organizational change at the care home where I worked should be improving interprofessional collaboration to develop consensus between healthcare professionals from different disciplines for problem-solving.

Lewin's theory of change is premised on three key stages that eventually create a new status quo that is reflective of the desired outcome. To implement the interprofessional collaboration program, the first stage will involve building staff-wide support for the collaborative program based on a clear description of the problem. Post-pandemic analyses of the workflows at the nursing care home revealed that a lack of collaboration between nursing staff, physicians, and laboratory professionals impeded timely medical diagnoses and intervention decisions that proved fatal for residents. Thus, communicating these consequences to the staff will be key. The next stage will be persuading staff to commit to a program for greater collaboration and implementing the necessary training program in effective communication and problem-solving under time-pressure settings (Wojciechowski et al., 2017). Once successfully integrated, the improved collaboration between professionals across the nursing care facility will create a new status quo that is better equipped to timely respond to patient needs.

A key component of Lewin's change theory is undertaking a force field analysis to help elucidate the potential facilitators and barriers to the collaboration program. Based on experience, I can hypothesize that such an analysis will reveal nursing staff as willing to engage in the training program and serve as key facilitators. A key barrier could be the physicians, who may resist increased participation of laboratory and other professionals in health care problem-solving. These analysis outcomes would prove useful for designing persuasion strategies to bring on board the physicians (Drake, 2020). Nursing staff leaders could be encouraged to dialogue with physicians about the importance of onboarding all health care professionals towards a collaborative workflow that can deliver more effective patient interventions.

References

Drake, K. (2020). Change is inevitable. *Nursing Management*, 51(7).

https://journals.lww.com/nursingmanagement/Fulltext/2020/07000/Change_is_inevitable.12.aspx

Wojciechowski, E., Pearsall, T., Murphy, P., & French, E. (2017). A Case Review: Integrating Lewin's Theory with Lean's System Approach for Change. *Online Journal of Issues in Nursing*, 21(2), 4. <https://doi.org/10.3912/OJIN.Vol21No02Man04>