

Navigating an environment of continuous change

Plan, communicate, and collaborate for success.

By Rose O. Sherman, EdD, RN, NEA-BC, FAAN, and Tanya M. Cohn, PhD, MEd, RN



BRAD is an emergency department (ED) director in a hospital that was a COVID-19 hotspot, but as a result of widespread vaccination, is now seeing only a few cases. Throughout the pandemic, many policy and practice changes have occurred. The staff complained about change fatigue and sometimes reacted negatively to practice changes. Early in the pandemic, a phone app that uses GPS technology to enable paramedics to alert an ED before arrival with a patient so staff can prepare, was put on hold. Using the app, paramedics can share essential details, such as ECGs or images from the field. Before COVID-19, the staff seemed excited about the technology but not now. Brad knows that he'll need to strategically plan before reintroducing this technology.

Timing is essential in managing change. During the pandemic, best practices in change management haven't been top of mind. At the beginning of the pandemic, leaders such as Brad needed to pivot quickly in response to unexpected events and problems, such as the availability of personal protective equipment (PPE). The traditional channels that allow staff to provide input sometimes weren't used, and staff became exhausted by the pace of change, which led to the change fatigue that Brad sees in his team.

None of these findings are surprising. The human brain loves predictability. We feel safer when we know what to expect. Over time, our work and personal lives become a series of

habits. Change involves altering a practice that's become part of our routine. It forces us to move out of autopilot, which can feel uncomfortable. With time, some of the current healthcare chaos may subside, but it's unlikely that the pace of change will slow any time soon. We're all asked to learn new things, unlearn them, and then learn other new things. Some of us are more adaptable than others to these shifts in our environment, but almost everyone experiences change fatigue at some point in their work life.

Why change is hard

Change can be seen as difficult because it can create uncertainty and feel psychologically unsafe. When we feel threatened, our brains go into fight or flight mode. A typical human response is to push back even when a new initiative may have obvious value. If the change involves learning a new skill, such as the GPS technology that Brad plans to implement, staff may need to adjust their work routines and develop new skills. Some staff may feel threatened by the unknowns of the latest technology and worry about their ability to adapt. Experienced nurses may feel like novices again as they learn the new software. Nurses working in the ED who've experienced intense change during the pandemic may see the technology as a disruption in their new normal flow of patient care. Initially, the change might add a few steps to the admission process or make it more time-intensive.

However, Brad is in a situation where he must introduce the new technology. How he messages the change to staff is critical to how it's received.

- **Start with a direct, clear message.** Brad will need to let the staff know that this is a final, non-negotiable change that must be implemented.
- **Explain the “why” of the decision.** Brad should discuss the rationale for the change and the process used in decision-making. He'll want to link expected outcomes to the benefits it will provide to ED patients.
- **Allow staff to vent but not to debate.** After Brad discusses the need for the change, he should ask staff for their reactions. Part of his role as a leader is to be the shock absorber for his team.
- **Focus on the future.** Allow some time for the news to be absorbed and understood after the initial messaging. Some staff may want to discuss their concerns. Brad should then shift the focus to the future.

Best practices in change management

Great ideas and initiatives can fail when leaders don't plan strategically. Before implementing the GPS technology in the ED, Brad should consider the following questions to design a plan that will work:

- What are the desired outcomes of the change?
- What do I need to do to build an environment for success?
- Who are the stakeholders?
- What's the timeline?
- What are the driving forces and restraining forces (barriers and challenges)?
- How will I know if the initiative is successful?

After Brad has answered these questions, he can begin planning the change implementation using some of these best practices:

- 1. Build a bridge of familiarity.** Staff will be less fearful of a new change or process when it's linked to their current professional expectations.
- 2. Develop a clear implementation plan.** Change efforts frequently fail because of miscommunication. Plans should include a step-by-step process with a timeline that staff can easily understand.
- 3. Meet staff where they are in the change process.** Not all staff accept change in the same way or on the same timeline. Some

nurses are natural innovators or early adopters, while others will be slow to adopt change. Ask early adopters to serve as superusers to help others adapt.

- 4. Involve staff in the implementation and offer choices when possible.** Humans want control over what happens to them and resent when they're told what to do. Even small decisions such as the day and shift the technology will be introduced may help staff feel they have some control.
- 5. Establish a plan to make the change stick.** Initiatives must be embedded in the culture to succeed. Paradoxically, change leaders frequently focus all their efforts on the “upstream” issues of getting change through the starting gate and then wonder why an initiative stalls after a few months. A successful early drive is rarely sufficient to overcome internal resistance and people's longing for the “old ways.” Brad must ensure that the GPS technology is consistently used after the initial launch date.

Managing change fatigue

Brad is in an unusual situation. Change management is always challenging, but the staff's recent experiences with COVID-19 has likely left many burned out and physically exhausted. Change fatigue is the direct result of repeated change over time and can lead to feelings of apathy, burnout, and anger about the level of expected self-sacrifice. For the nurses in Brad's ED, these feelings may have occurred sporadically during the pandemic. Policy changes about PPE led many nurses to feel that they were putting the needs of others first at the cost of jeopardizing their own health and well-being.

As Brad develops his strategic plan for introducing the GPS technology, he'll need to use a trauma-informed approach to manage change fatigue. Trauma-informed leadership is an appreciation for the emotional world of personal and professional experiences that rumble beneath the surface. Trauma is like an iceberg. What you see on the surface may not indicate the depth of the problems. Understanding COVID-19 as trauma and nurses as trauma victims can help explain the anger, negativity, and outsized emotional reactions to change that Brad may see from staff.

Managing and ultimately overcoming the barrier of change fatigue begins with employ-

ee engagement. Brad should identify effective ways to engage employees without making them feel that the GPS technology is just another demand placed on them. The lines of communication should be kept open, and Brad might consider using one-on-one check-ins to gauge the climate of the department.

Developing an advisory board of nurses can help Brad implement the practice change and mitigate some of the psychological uncertainty. Members of the board can serve as social influencers for the positive benefits of implementing the new technology and improving patient care. They also can advise Brad on how to reward progress, celebrate project milestones, and sustain momentum.

Plan strategically

Whether it's practice modifications, leadership turnovers, technology upgrades, or a merger with another health system, each new workplace change requires time, effort, energy, and adaptation. It's not surprising that periods of upheaval can easily cause change fatigue at an individual and organizational

level. We sometimes forget that change comes at a cost when its cumulative effects can lead to staff feeling depleted. Successful leaders are strategic planners who understand that the building blocks must be in place for initiatives to succeed. **AN**

Rose O. Sherman is an adjunct professor at the Marian K. Shaughnessy Nurse Leadership Academy, Case Western Reserve University in Cleveland, Ohio, and author of *The Nuts and Bolts of Nursing Leadership: Your Toolkit for Success* and *The Nurse Leader Coach: Become the Boss No One Wants to Leave*. You can read her blog at emerginleader.com. Tanya M. Cohn is an associate professor of practice and a consulting nurse scientist at Simmons University in Boston, Massachusetts

References

- Duhigg C. *The Power of Habit: Why We Do What We Do in Life and Business*. New York City, NY: Random House; 2012.
- McMillan K, Perron A. Change fatigue in nurses: A qualitative study. *J Adv Nurs*. 2020;76(10):2627-36. doi:10.1111/jan.14454
- Rogers EM. *Diffusion of Innovations*. 5th ed. New York City, NY: Free Press; 2003.
- Tweedy D. Trauma-informed leadership: An approach for healthcare. healthadministrationdegree.usc.edu/blog/trauma-informed-leadership