

The Role of Managers and Leaders in Change Management within the Health Care and Its Impact on Performance Improvement

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Abstract— This review paper will provide knowledge and understanding about Change and Change Management within the business and health care sectors and its impact. What are the importance of Change Management and how the benefit of change can be a useful process in an organisation. It also defines and outlines the summary of change theories and change models.

The relationship of change management and performance improvement is expounded. Whereas, the performance and performance improvement is also characterized. This paper also explores how change management and performance improvement will impact patient care, successful examples of implementation of change management in clinical setting are written. In addition to this, the differences and similarities between management and leadership role in change management are written in details.

Index Terms— Change Management, performance improvement .

I. INTRODUCTION

The vision2030 of Saudi Arabia is the biggest transformational plan for the Kingdom since its foundation. It is a CHANGE in all aspects of the government. The vision is based on the three (3) strong pillars in the achievement of A Vibrant Society, A Thriving Economy and An Ambitious Nation. It is a long-term economic and social plan focusing on its strengths and policies, and freeing its economic dependence to oil exports and diversify its economy through development in public service sectors such as health, education, infrastructure, recreation and tourism.

“It expresses our long-term goals and expectations and it is built upon our country’s unique strengths and capabilities. It guides our aspirations towards a new phase of development – to create a vibrant society in which all citizens can fulfil their dreams, hopes and ambitions to succeed in a thriving economy”- His Royal Highness Prince Mohammed bin Salman bin Abdulaziz Crown Prince, Vice President of the Council of Ministers and Chairman of the Council of Economic and Development Affairs

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defines and outlines the summary of change theories and change models.

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II. CHANGE MANAGEMENT

DEFINITION

Oxford Dictionary defines:

- **Change noun, (in/to something)** the act or result of something becoming different
- **Management noun,** the act of running and controlling a business or similar organization

Change management has been defined as “the process of continually renewing an Organisation’s direction, structure, and capabilities to serve the ever-changing needs of external and internal customers” (Moran and Brightman, 2001: 111)

III. WHY CHANGE MANAGEMENT?!

Change management empowers workers to adopt a change or modification so that business objectives are accomplished. It is the bridge between solutions and results (Hiatt and Creasey, 2012). Balogun and Hope Hailey (2004) report a failure rate of around 70 percent of all change programs started (Todnem, 2005). Therefore, profound knowledge and skills of change management theories and models are fundamental needs for eminent organisations and regarded as a corner stone competence for managers and leaders of these days world.

In health care, there is a tremendous pressure to improve the clinical services provided for the patients. Media, medical errors, and accreditation bodies are the driving forces behind this pressure. Needless to say, the improvement of the clinical services, clinical guidelines, policies, and procedures are ought to be changed ceaselessly and new technologies and innovations are needed to be enforced. And for all of these to attain success, the change has to be managed very well.

IV. CHANGE THEORIES

Senior (2002) identified Change into three categories: (1) Change characterised by the rate of occurrence, (2) Change

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characterised by how it comes about, (3) Change characterised by scale (Senior, 2002)

The main types of change categorised by the *rate of occurrence* are discontinuous, incremental, and continuous. Details of this type are beyond the scope of this paper. However, organisations and people in this era should be able to undergo continuous change (Burnes, 2004; Rieley and Clarkson, 2001).

Change characterised by *how change comes about*, is ruled by planned and emergent change (Bamford and Forrester, 2003). In 1946, Lewin introduced the *planned approach* to change (Bamford and Forrester, 2003). However, due to its some limitations, in the illustration at the time of crises (Burnes, 1996; 2004), *emergent approach* has been introduced.

Lastly, the change characterised by *scale* is divided into four diverse characteristics: fine-tuning, incremental adjustment, modular transformation, and corporate transformation (Todnem, 2005).

V. CHANGE MODELS

In order to put change theories in practice, a number of change models were developed. Here are some of the foremost widely used models:

1- Lewin's Force Field Model (1951)

Very simple and basic model: unfreeze-change-refreeze. Though simple however but putting this model in practice is far from easy as this model needs the organisation to remove old behaviour, structures, processes and way of life (Todnem, 2005).

2- Bullock and Batten's Planned Change Model (1985)

A model that divides the process into four phases namely exploration, planning, action and integration.

3- Nadler and Tushman's Congruence Model (1997)

In order for the change to achieve success, the four components of the organisation have to be compelled to be strengthened, namely: the work (daily activities), the people (skills of people working in the organisation), the formal organisation (structures and policies of the organisation) and the informal organisation (unwritten activities like values and norms) (Paul, 2015).

4- Bridges' Managing-the-Transition Model (1991)

This model no longer focuses on the planned change but on the transition and the emotions associated with it. The transition process has three phases, namely: ending, neutral, and beginning (Paul, 2015).

5- Carnell's Change Management Model (1990)

Managers have to be compelled certain skills or competencies (will be discussed later) in order to create an atmosphere where risk-taking, creativity and higher overall performance can be carried out or implemented (Carnall, 2007).

6- Senge et al. Systematic Model (1999)

This model has four key guidelines, namely: initiating (start small), sustaining (grow steadily), redesigning (do not plan the whole case ahead) and rethinking change (expect challenges) (Senge et al., 1999).

7- Stacey and Shaw's Complex-Responsive-Processes Model (2001)

In this model, the authors did not try to answer the traditional query of how to manage and manipulate change. But instead, they specialised on the participation of managers in the change initiative (Stacey, 2001).

8- Kotter's Eight-Step-Model (1990)

Kotter came up with eight key steps for making change happen. These are: establishing a sense of urgency, forming a powerful guiding group of individuals, creating a vision, communicating this vision, empowering others to act on the vision, advertising short-term visible improvements, rewarding individuals who work towards the defined vision and eventually ensuring that the change is confined by ensuring everyone's understanding that the new method and behavior lead to success (Kotter, 1995).

9- Kubler-Ross's the five stage model –the change curve (1969)

Like the Bridges model, it helps assist employees to cope with change (Leybourne, 2011).

10- ADKAR Model

The ADKAR model is a framework for understanding change at an individual level. It is composed of five elements: Awareness of the need for change, Desire to support and participate in the change, Knowledge of how to change, Ability to implement required skills and behaviors, and Reinforcement to sustain the change (Hiatt, 2006).

11- Burke-Litwin Model of Change (1992)

This model summarises the primary variables that need to be considered in any attempt to predict and explain the total behaviour output of the organisation, the most important interactions between these variables, and how they affect change (Burk and Litwin, 1992).

VI. THE PERFORMANCE IMPROVEMENT AND CHANGE MANAGEMENT

Not all change is improvement ... but all improvement is change. (Donald Berwick)

Oxford Learners Dictionaries defines:

➤ **Performance noun**, the act or process of performing a task, an action, etc.

While **Improvement** is defined as a thing that makes something better or is better than something else.

Performance improvement is defined as measuring the output of a particular business process or procedure, then modifying the process or procedure to increase the output, increase efficiency, or increase the effectiveness of the process or procedure (Wikipedia, 2019).

Performance measurement can be defined as the process of quantifying the efficiency and effectiveness of action. To be

able to measure the performance, we need to quantify the efficiency and effectiveness of action. Whereas, Effectiveness refers to the extent to which customer requirements are met, while Efficiency is a measure of how economically the firm's resources are utilised when providing a given level of customer satisfaction (Neely, Gregory and Platts, 1995).

In health care, performance improvement is defined as an approach to the continuous study and improvement of the processes of providing healthcare services to meet the needs of patients and others (RN, 2005)

By definition, performance improvement means modifying the process or the procedure. Modify is defined by oxford dictionary as make partial or minor changes to (something).

In conclusion, to improve the performance, change has to be introduced and it has to be managed very well to impact on the performance of the employee (Al Jaradat et al., 2013) which is additionally true in health sector (Thompson, 2010).

VII. ROLE OF LEADERS AND MANAGERS IN CHANGE MANAGEMENT

Primarily, are leaders and managers having similar responsibilities at any given organisation or they are different?!

Abraham Zaleznik, with his landmark article published in the Harvard Business Review in 1977 was one of the earliest scientists that tackle this issue. Zaleznik argues that both leaders and managers make a valuable contribution to an organization and that each one's contribution is different (Zaleznik, 1977). Whereas leaders advocate change and new approaches, managers advocate stability and the status quo (Lunenburg, 2011).

More recently John Kotter in his book "A Force for Change: How Leadership Differs from Management (1990)" summarises the roles and responsibilities of managers and leaders as follows:

Managers are involved in three main duties: (1) Planning and Budgeting (2) Organizing and Staffing and (3) Controlling and Problem Solving

Leaders are involved in: (1) Developing a vision for the organization (2) Aligning people with that vision through communication and (3) Motivating people to action through empowerment and through basic need fulfilment

Bennis (2007) summarised the roles of managers and leaders as follows: "Managers do things right, while leaders do the right things".

When it comes to change management, leaders and managers have totally different functions and roles but not a competing role rather they are complementing each other. Enormous researches have tried to explore the different roles of the managers and leaders in change management, briefly some of these roles will be discussed.

Caldwell (2003) challenges the classical image of the managers as being rigid or inflexible and lack openness! Rather, he states that managers work hard to change the vision of leaders into agendas and actions.

Ionescu (2014) and Prosci ADKAR –model of change explain *the role of managers* in more details, as follows:

1. COMMUNICATOR ABOUT THE CHANGE

Building the awareness of the employee is corner stone in successful change; the immediate managers are best individuals to inform their employees concerning how the change will affect them and WIFIM? (What is within the change for me?!).

2. ADVOCATE FOR THE CHANGE

Employee will look to their managers and if they see them resisting the change, they will do the same. However, if the managers are actively supporting the change, their employee will follow.

3. COACH FOR EMPLOYEES

The managers should help and support their employee throughout the process of change especially when the change impacts or influences their employee's day to day work.

4. LIAISON TO THE PROJECT TEAM

The managers work closely with the project team to provide them with their employee feedback and concerns during the implementation phase of the project.

5. RESISTANCE MANAGER

One of the biggest obstacles to change is resistance and to manage it the change management team need to identify what resistance looks like, where it is coming from and the source of that resistance, resistant managers are the place to answer these questions.

The role of leaders in change management:

The keys to successful change according to an American Management Association survey (American Management Association, 1994) are first and foremost leadership.

Roger Gill in his article "Change management — or change leadership?" (2003) "proposes an integrative model of leadership for change, the model comprises vision, values, strategy, empowerment, and motivation and inspiration. The brief account for the details of this model which reflects the role of leaders in change management and what make them really effective leaders, are as follows:

VISION

Oxford English dictionary defines vision as "something seen vividly in the imagination, involving insight, foresight and wisdom"

The change starts with leaders making a meaningful and inspiring vision that makes the managers and employee believe in the desired future and create a sense of urgency and importance to change (Kotter, 1995).

VALUES

Oxford English dictionary defines values as "Principles or standards of behaviour; one's judgment of what is important in life"

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Effective leaders should identify and promote shared values (Gill, 2003).

STRATEGY

Without strategies for change, vision is a dream (Gill, 2003).

Strategic plans are 'road maps' of a changing terrain in which a compass (vision) is needed (Covey, 1992).

Leaders need to create a guiding coalition and getting it to work collectively as an effective team (Kotter, 1995a).

EMPOWERMENT

Empowerment literally is giving people power.

For successful change, leaders should empower their managers and employees for action, as an example, encouraging risk taking, new concepts and innovative activities (Kotter, 1995).

MOTIVATION AND INSPIRATION

Gill (2003) states that "Motivation and Inspiration arise from alignment of organisational goals with individuals' needs, wants, values, interests and aspirations and from the use of positive and appealing language" which could be a corner stone competency of an effective leaders.

Prosci ADKAR –Model of Change explains the role of leaders, as follows:

1. PARTICIPATE VISIBLY THROUGHOUT THE PROJECT

Leader cannot disappear once they have attended the kick-off meeting for a project. Their continuing presence is mandatory to build and maintain the enthusiasm for a change.

2. COMMUNICATE SUPPORT AND PROMOTE THE CHANGE

The leaders are best individuals in the organization to communicate the rationale for change and the risk of not changing.

3. BUILD A COALITION OF SPONSORSHIP

The leaders have to mobilize different key business leaders and stakeholders so they can advocate for the change in the part of the organization.

VIII. IMPACT OF CHANGE MANAGEMENT ON PATIENT CARE

Why change is important in health care?

Over centuries, management of diseases keeps changing. But for last 100 years, there are amazing development and innovation so the old ways of diagnosis and treatment become a history. At present, we cannot imagine ourselves undergoing a surgery without general anaesthesia and we expect from our physician the best and very safe care.

While some changes in health practice are obvious and easily followed, many are not!

Results of studies in the USA and the Netherlands recommend that concerning 30–40% of patients do not receive care according to present scientific proof, and

about 20–25% of care provided is not required or is doubtlessly dangerous (Grol and Grimshaw, 2003). Thus, leaders and managers of health care organisations need to keep their clinical guidelines up-to-date and this cannot be done without steady change. Moreover, in this era of rapidly advancing technology and the need to introduce new computer based technology like electronic filing system, the change is very challenging and more complex so leaders and managers need to learn and find out how to manage the change and support their staffs during the process of change.

How important to manage the change in health care?

EWAN B. FERLIE and STEPHEN M. SHORTELL in their article, "Improving the Quality of Health Care in the United Kingdom and the United States: A Framework for Change (2001)", stress the internationally acknowledged need to change the approaches health care are provided due to the fact of raising cost, reports of gross medical errors, and efforts to improve result.

They propose that unless policy makers implement a more comprehensive, multilevel approach to change, the efforts to improve health care delivery will likely fail.

EWAN B. FERLIE and STEPHEN M. SHORTELL (2001) suggest four levels of change: the individual, the group or team, the overall organization, and the larger system or environment in which individual organizations are embedded. They additionally contend that except the process of change is not done well, the efforts for quality-improvement will not work.

The leaders' role in this multilevel approach to deal with the change and improvement of quality clinical services provided to the patients is to determine a vision for quality improvement, provide a supportive environment with the necessary resources, and demand on accountability for results. While managers need to figure out how to oversee and manage small teams, resolve conflict and decide how to address the difficult challenges of changing how medicine is practiced (Ferlie and Shortell, 2001).

N T Moulding, C A Silagy, D P Weller in their article "A framework for effective management of change in clinical practice: dissemination and implementation of clinical practice guidelines that was published in Quality in Health Care (1999)", contend that systematic reviews of the evidence recommend that clinical practice guidelines are most in all likelihood to be adopted in practice when certain strategies are accompanied. They proposed a conceptual framework for guideline dissemination and implementation where they have identified nine key theoretical concepts which are most pertinent to the accomplishment of clinical practice guideline adaptation by health care practitioners.

N T Moulding, C A Silagy, D P Weller consider presence of "change agents" is a must for success. The change agents should assess the practitioners' phase of readiness to change. The specific nature of boundaries to change should

likewise be assessed as part of figuring out the applicable change strategies (Moulding et al, 1999).

They conclude by not solely focusing on the significance of following the change management models in adopting the change in clinical guidelines yet to think of it as essential for achievement.

Example of how change management can impact patient care:

Kuhlman, et al. (2019) in their article, “Clinical Transformation Through Change Management Case Study: Chest Pain in the Emergency Department” that is published by the LANCET 2019, a good illustration has been provided that applying appropriate change management methodology can lead to outstanding clinical outcomes.

Kuhlman, et al. (2019) depicted their experience of building up a clinical transformation department to help in getting the complex algorithm for clinical condition to be executed effectively.

They design a flow chart for adult patients reporting with chest pain in the emergency room (ER), the flow chart design is beyond this paper's scope. What is interesting about this, however, are the lessons they have learned for effective clinical conversion through change management. This comprised of the following: Select strategic topics, Get active physicians together, Write a consensus algorithm with freedom to deviate, Identify barriers and remove obstacles, Communicate vision, Mandatory pilot and transparent feedback, Phased system implementation and Sustain by “hard wiring” EMR (Kuhlman et al., 2019). Their conclusion is that in order to alter the behavior of health care professionals, it is necessary to follow the methodology of change management.

IX. CONCLUSION

Deep knowledge of theories and models of change management is vital skills for today's company and healthcare industry leaders and executives as it will dramatically enhance efficiency and provide a secure and efficient environment for patients and their families.

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