

# **Investing in the People Side of Informatics: A Recipe for Successful Change Management**

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# Evolving healthcare IT trends create a compelling case for change

## Healthcare IT trends

### Empowered consumers

- Pre-disposition for knowledge
- Service expectations (e.g. wait times)

### Healthcare delivery

- Primary care reform
- Regionalization

### Healthcare resources

- Human resource shortages
- Increased workload
- High turnover

### Treatment options

- Evidence base practice
- Chronic disease management

Healthcare IT trends drive clinical informatics innovations and implementations  
Outcomes of clinical technology include improved:  
Patient Safety, Productivity, Privacy

# The use of technology in health care has only just begun

Canadian hospitals have yet to take full advantage of the latest computerized systems. In 2005, Canada Health Infoway reported...

- Only 36% of hospitals use electronic records
- Only 25% of Canadian hospitals have been able to afford electronic order entry for pharmaceuticals
- Only 15% of hospitals currently have electronic systems for managing diagnostic images
- Many organizations remain challenged by redundant systems and have yet to implement the highly integrated systems that form building blocks of the EHR
- About one half of hospitals are planning to install/upgrade their patient registration, pharmacy, nurse scheduling and imaging applications over the next few years

# While technology is the enabler, people are the critical success factor

- Most of the barriers to change are people related - people stop change
- The implementation of state of the art, technologies will fail without a concentrated investment in the people side of change
- Surveys consistently report that 3 out of 4 change programs fail to fulfil their promise
- “Doing it right the first time not only improves outcomes but can dramatically reduce costs” (Porter, 2004)



# Why do change programs and technology implementations fail to achieve their promise?

## Top Barriers

**Competing resources**

**Functional boundaries**

**Change skills**

**Middle management**

**Communication**

## Top Success Factors

**Ensuring top sponsorship**

**Treating people fairly**

**Involving employees**

**Giving quality communications**

**Providing sufficient training**

# Recipe for Change Management



- **1 Part – Dedicated, visible clinical and executive leadership and organizational accountability**
- **1 Part - Clear, compelling change vision**
- **1 Part – Comprehensive, all inclusive change plan**
- **1 Part – Communication and commitment building**
- **1 Part - Support for the people**

## Ingredient 1: Dedicated and Visible Clinical and Executive Leadership and Organizational Accountability

For a clinical informatics innovation to be implemented successfully:

- Leadership must be visible, committed and effective
- The organization needs to “own” the project
- Clinical leaders need to desire the change
- Ideally project leadership should be fully seconded to the project and temporarily removed from competing responsibilities
- Efforts to develop project leadership should occur at all organizational levels

*“Often management takes the easier course of trying to bypass clinical leadership or offering tokenistic inclusion - without fully engaging clinical leaders in the change process, failure is certain (Callaly & Arya, 2005)”*



## Ingredient 2: Clear, compelling change vision

A project vision is a coherent and powerful statement of what the “future state” can and should be.

A clinical informatics project vision should:

- Help stakeholders to understand why the change is needed
- Be written in “clinical” language
- Be excellence-centered and inspiring
- Be evidenced-based and achievable
  
- Tie all communications back to the vision to give stakeholders a clear understanding of how their new roles and behaviours will help the organization to achieve this vision
- Ensure that multiple clinician stakeholders are involved in vision creation and acquiring supporting evidence





## Ingredient 3: Comprehensive, all inclusive change plan

A well organized, extensively planned project with sound project coordination is critical for success!

- Planning should:
  - Be led by the clinician leaders to foster commitment, ownership and buy in
  - Focus simultaneously on the hard and the soft aspects
  - Keep the organizations culture in mind
  - Leverage collective experience – apply lessons learned from other projects
- Plan for:
  - Challenges – Expect that things will go wrong
  - Pilot projects
  - Expectations – Technology is not a panacea
  - Post project support



## Ingredient 4: Commitment building - Understand stakeholders and communicate, communicate, communicate!

- Showcase success but do not oversell - keep communications open and honest
- Use targeted messages for each stakeholder group – what MDs need to hear is different than what RNs need
- When providing stakeholders with evidence for change – choose examples wisely
- Choose communications vehicles based on the focus and importance of message
- Speak in clinical terms not technical jargon
- Determine an effective frequency for communication
- Ensure the feedback and concerns of clinicians is handled a timely and visible manner



I'd have thought "how to switch it on" would be somewhere in the opening section



**Resistance is to be expected and is ultimately overcome by making the attractors to change strong enough to overcome it**

**“What’s in it for me if I do”**

- Increased ability to provide quality care
- Greater flexibility in the daily work
- Potential for more autonomy and advancement
- Reduced workload in the long term
- Increased opportunities for professional development
- Potential to develop new skills

**“What’s in it for me if I don’t”**

- Less work “now”
- Avoid feelings of self doubt and fear
- Avoid situation of increased accountability with no rewards



## Ingredient 5: Support for the People

Your job is not to make people feel comfortable during change – it is to help them succeed despite their discomfort

- **Targeted Training and Support Programs**
  - Do just in time training
- **Effective Workload and Resource Planning and Management**
  - Workflow processes always need to be redesigned
  - Policies and procedures and workflow changes need to be communicated and ownership is key
  - Second resources to the project, where possible and ensure regular responsibilities are managed
- **Measurement and Continuous Quality Improvement**
  - Set and monitor goals and communicate to the status to end users
  - Get a baseline before you start



# Additional Cooking Tips

- **Have Confidence and Courage**
- Significant behavioural change always requires an extensive commitment building effort
- Involving staff in every step of the way helps them to gain insight into the benefits that can lead to successful conclusion, bringing about effective and lasting change
- Beware! The paper world does not duplicate well into the technical world and expectations need to be managed
- Use rewards and incentives to reinforce change but not to drive it
- Understand, embrace and don't underestimate politics



# The nurse as a change agent

- Nurses deal with change on a moment to moment basis
- Nurses have a strong involvement with and understanding of other professionals
- Nurses tend to understand the politics of the organization
- Nurses have strong negotiation and mediation skills
- Nurses have the “do what it takes attitude” required



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