



NATIONAL  
RURAL HEALTH  
RESOURCE CENTER

# Leading Through Change



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# The Center's Purpose

The National Rural Health Resource Center (The Center) is a nonprofit organization dedicated to sustaining and improving health care in rural communities. As the nation's leading technical assistance and knowledge center in rural health, The Center focuses on five core areas:

- Transition to Value and Population Health
- Collaboration and Partnership
- Performance Improvement
- Health Information Technology
- Workforce



# It's in the Title...

U.S. Department of Health & Human Services



## Small Rural Hospitals Transition Project

Fact Sheet | August 2019

### **The SRHT Project assists hospitals to:**

- Improve financial and quality performance
- Prepare for new payment and care delivery models
- Prepare hospitals for population health management



# Any Changes Happening Here?

Implement leader  
rounding

Increase  
medication  
barcode scanning  
rate

Implement  
telehealth

Implement new  
EHR

Grow swing bed  
program

Expand specialty  
services

Revised  
discharge  
planning  
processes

Increase  
employees' sense  
of ownership in  
HCAHPS scores



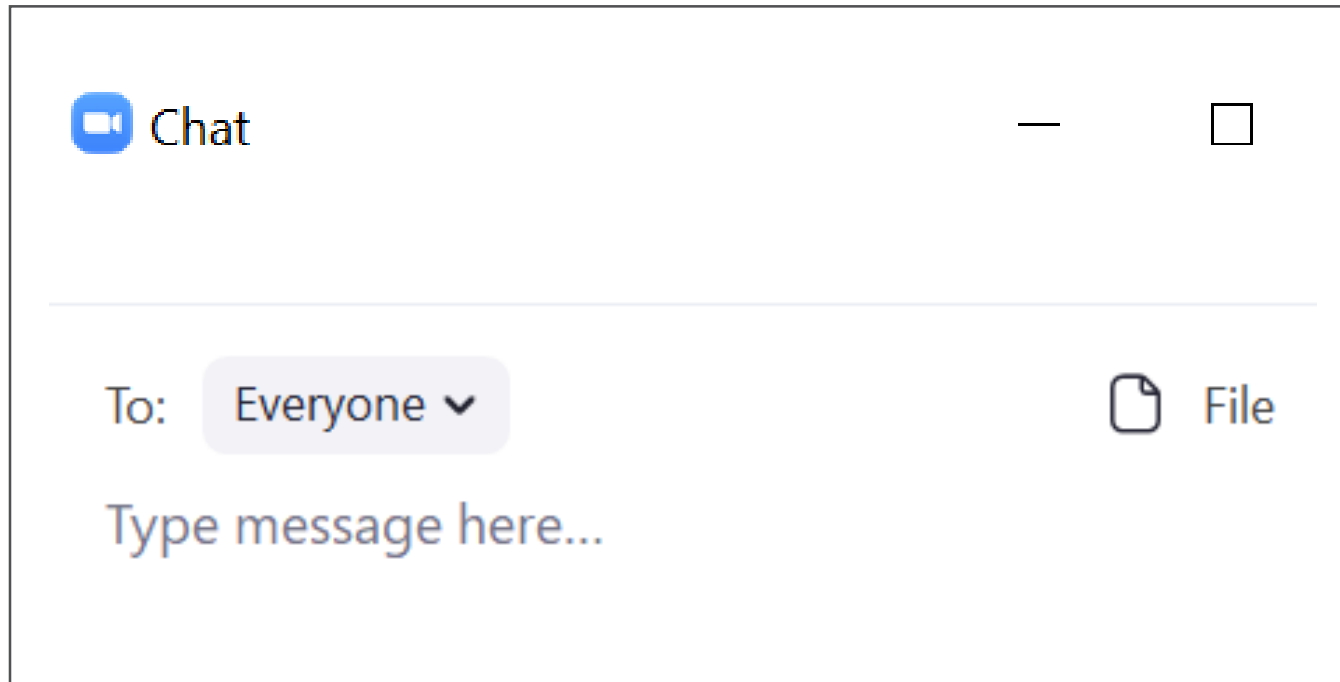
# Questions We'll Answer

- Why do people react differently to change?
- How can we help others navigate the change process?
- How can we manage our own emotions during the change process?
- Should we check out the *Leading Through Change* podcast?



# In the Chat Box...

Name a change that you are currently part of or will be part of in the near future.



A screenshot of a chat box interface. At the top left is a blue speech bubble icon with a white camera icon inside, followed by the word "Chat". To the right of "Chat" is a horizontal line and a small square box. Below this is a horizontal line. Under the line, on the left, is the text "To:" followed by a light blue rounded rectangle containing the word "Everyone" and a downward arrow. On the right, there is a document icon followed by the word "File". Below these elements is the text "Type message here..." in a light blue font.



# Rider vs Elephant



Rider: Rational

Elephant: Emotional



# Recent Research on Emotion

## Clinical Decision Making

Providers' clinical decisions are influenced by their own emotions, particularly anxiety, stress, fear, and denial (*Kozlowski et al.*)

## Behavioral Economics

When we're feeling sad, we'll pay higher prices than when we're feeling disgusted (*Lerner et al.*)

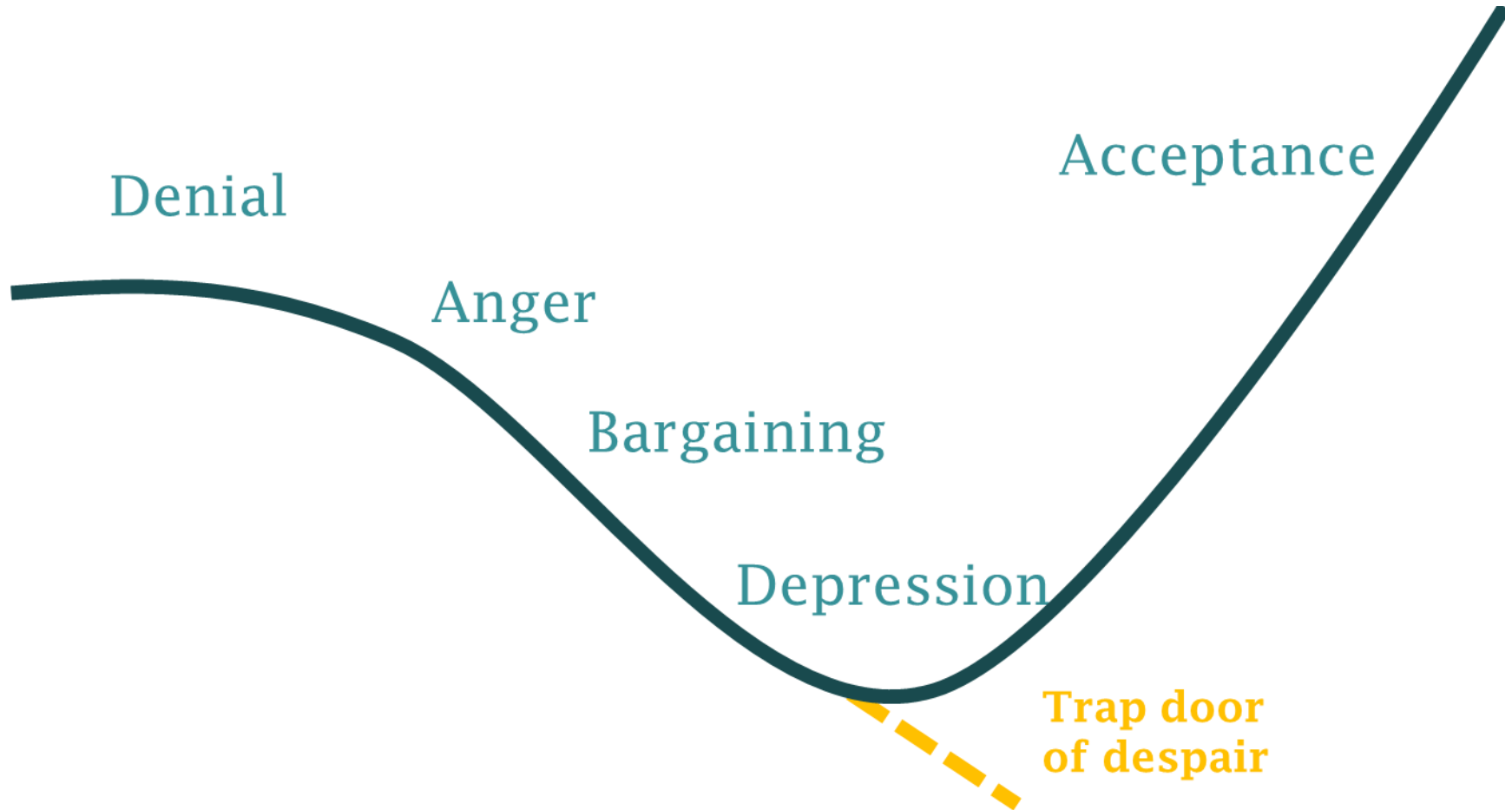
## Emotional Contagion

Nurses implementing a Shared Governance initiative "caught" emotions from their colleagues, influencing perceptions of the intended change (*Bartunek et al.*)



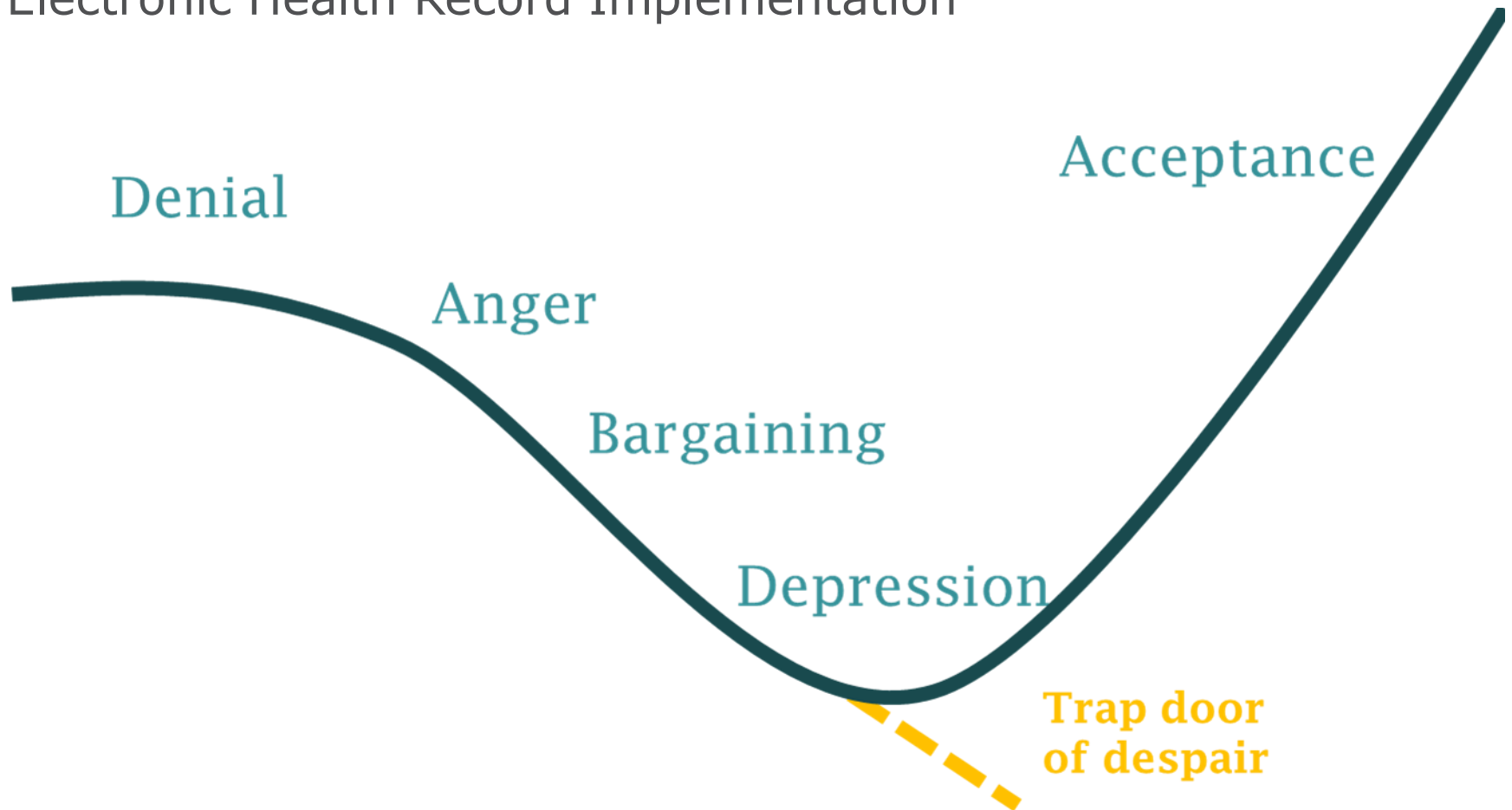


# Change Curve



# The Journey Through Grief

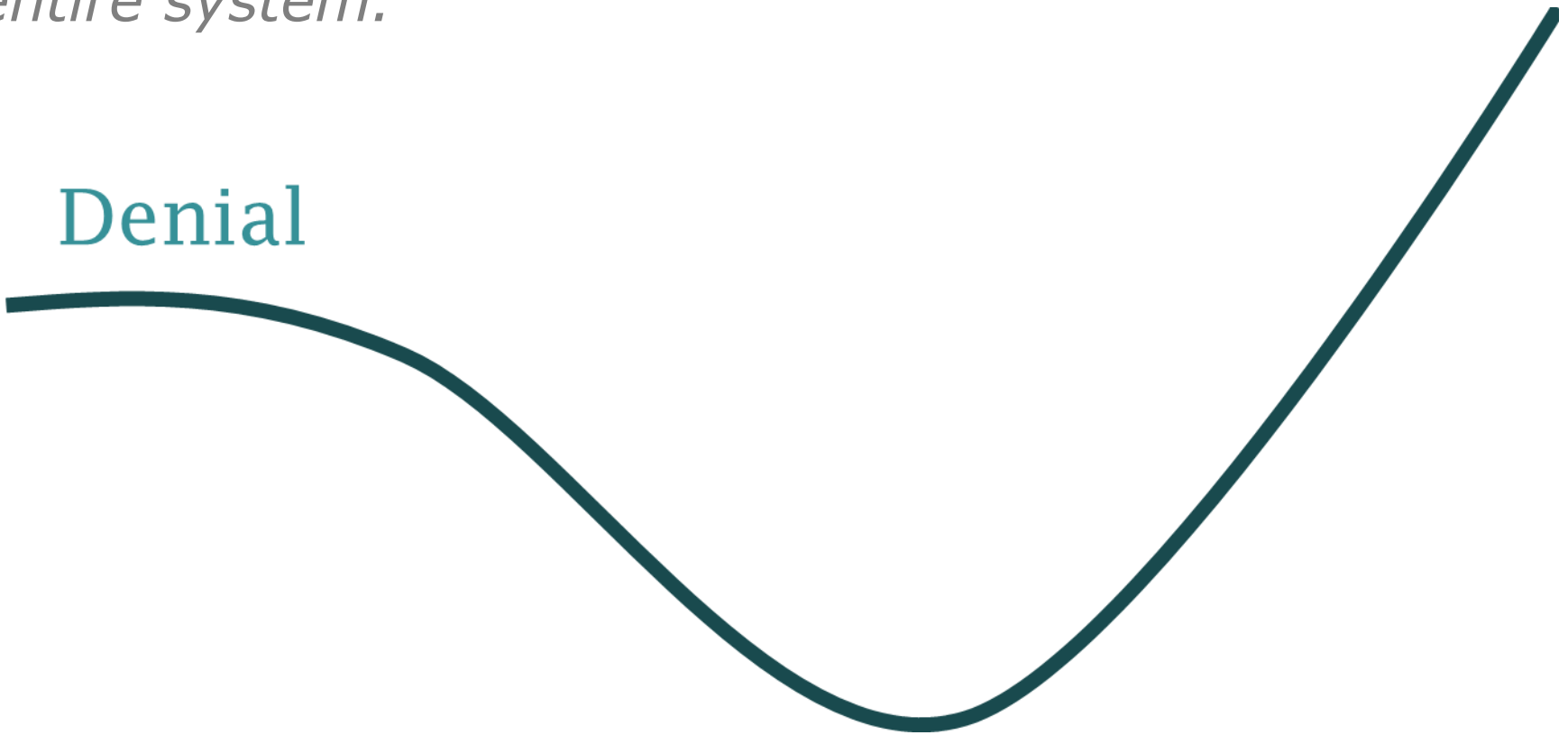
The Journey Through Grief: Insights from a Qualitative Study of Electronic Health Record Implementation



# Change Curve - Denial

*"It's probably been one of the most unsettling things I've seen for physicians throughout our entire system."*

Denial



# Change Curve - Anger

*"By the time you've actually done all that, your patient encounter is halfway over."*



# Change Curve - Bargaining

*"Why do we need a cover letter? Isn't it enough if I add a progress note?"*



# Change Curve - Depression

*"The first two weeks, I could have quit medicine."*



Depression

Trap door  
of despair

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# Change Curve - Acceptance

*"I have all I need at my fingertips. I think it's a great system."*

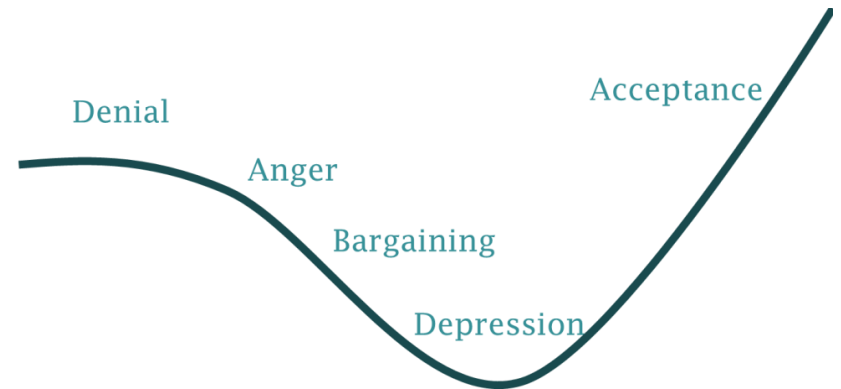
Acceptance



# Poll Question #1

For the current or upcoming change that you identified earlier, think about either the person who is or might have the hardest time with this change.

Which stage are they in (or: where are they most likely to get stuck?)





# Why do people react differently to change?



Differences in  
circumstances



Differences in personal  
characteristics



# Difference in Circumstances

- Input during the change process
- Understanding
- Nature of the change: Less stress if perceived as
  - Minor
  - Additive
  - Initiated by the person him/herself
- Impact of the change



# Areas of Impact

## **Technical: Resources & knowledge**

Does the organization have the technical resources I need? Do I know enough?

## **Political: Power & influence**

How much power will I have to affect my environment?

## **Cultural: Values, norms, mindsets**

What's important to me? How are things normally done around here?



## Poll Question #2

For the person you had in mind during the last question, which of these areas is (or will be) the biggest source of concern for them?

**Technical:** Resources & knowledge

**Political:** Power & influence

**Cultural:** Values, norms, mindsets



# Differences in Personal Characteristics



- Experience with the topic
- Openness to experience
- Comfort with ambiguity
- Anxiety

**CAUTION: FUNDAMENTAL ATTRIBUTION ERROR**



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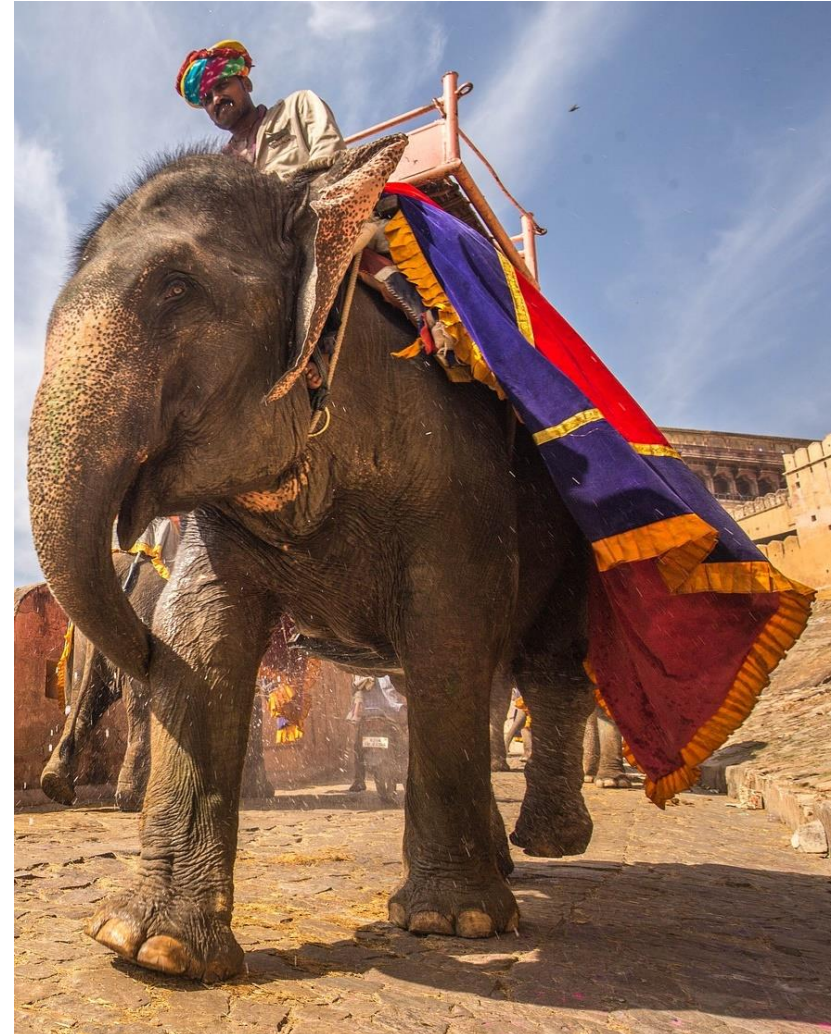
# Appeal to the Rider and Elephant

## **Riders without elephants**

Understanding without motivation

## **Elephants without riders**

Passion without direction





# Denial

- Manage expectations (“the party’s over”)
- Make the case for quality
- Communicate the vision

“It’s never going to happen.”



Denial

Anger

Bargaining

Depression

Acceptance

Scheck McAlearney et al., 2015



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# Anger

- Acknowledge difficulties and affirm support
- Communicate the vision
- Form a coalition or find a champion

“This is going to make my job so much harder!”



Scheck McAlearney et al., 2015



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# Bargaining

- Listen to and implement suggestions
- Acknowledge competing priorities

“If you had given us more notice, we could have made it work.”



Scheck McAlearney et al., 2015



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# Depression

- Allow time to adapt
- Reiterate support

“I don’t see how this is ever going to work.”



Scheck McAlearney et al., 2015



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# Acceptance

- Reaffirm positive statements
- Continue to ask for input

“This will make a major difference for our patients.”



Scheck McAlearney et al., 2015



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# Addressing T, P, and C

Area of Impact	Strategies
<b>Technical: Resources &amp; knowledge</b> Does the organization have the technical resources I need? Do I know enough?	Provide education Ensure/assure that time will be allotted to learn Listen to requests for resources Be patient
<b>Political: Power &amp; influence</b> How much power will I have to affect my environment?	Honest discussions about roles, responsibilities, accountability Identify ways that he/she will continue to bring value and influence
<b>Cultural: Values, norms, mindsets</b> What's important to me? How are things normally done around here?	Tie to existing values of the organization and the individual Clarify the misalignment between the current state and the environment



# Addressing Personal Characteristics

Less experience

- Time to absorb and adapt
- Direct support

Less comfort with ambiguity, higher anxiety

- Defined plan
- Clear end vision
- Frequent check-ins



# Don't Forget

- You may be farther along than they are
- Fundamental attribution error





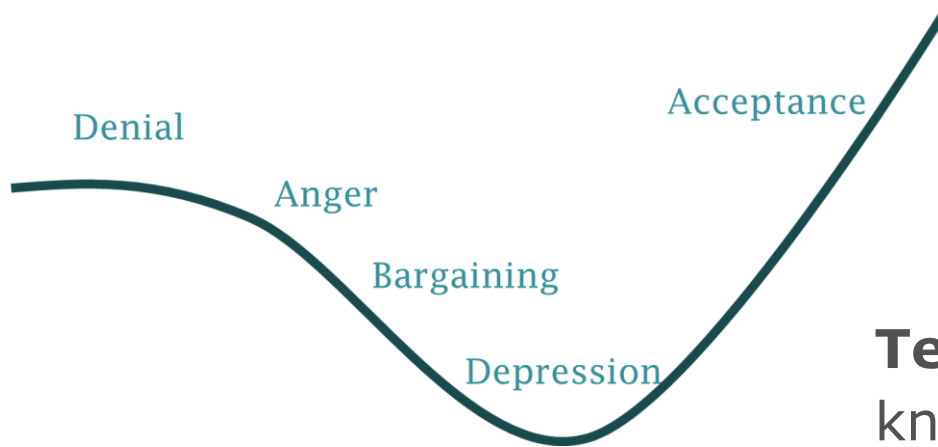
# Manage Your Own Elephant



- Pause
- Acknowledge feelings
- Avoid judgment



# Where Are You Stuck?



**Technical:** Resources & knowledge

**Political:** Power & influence

**Cultural:** Values, norms, mindsets





# It's All About the Elephants!



# Managing from the Middle: Leading Through Change



# Helpful Resources

## Books

Susan David, *Emotional Agility: Get Unstuck, Embrace Change, and Thrive in Work and Life*

Chip & Dan Heath, *Switch*

Daniel Kahneman, *Thinking, Fast and Slow*

John Kotter, *Our Iceberg is Melting*

## Podcast

[Managing from the Middle: Leading Through Change](#)

Hidden Brain, March 12, 2018: Daniel Kahneman: On Misery, Memory, and Our Understanding of the Mind

## Blog Post

Marshall Goldsmith: Learn to Respond, Not React!

## Ruralcenter.org Website



# References

- Bartunek, J., Rousseau, D., Rudolph, J., & DePalma, J. (2006). On the receiving end: Sensemaking, emotion, and assessments of an organizational change initiated by others. *Journal of Applied Behavioral Science*, 42:2.
- Bridges, W. (2003). *Managing Transitions: Making the Most of Change*. Philadelphia: DaCapo Press.
- Kozlowksi, D., Hutchinson, M., Hurley, J., Rowley, J., & Sutherland, J. (2017). The role of emotion in clinical decision making: An integrative literature review. *BMC Medical Education*, 17:255.
- Kubler-Ross, E. (1969). *On Death and Dying*. New York: MacMillan.
- Lerner, J., Small, D., & Loewenstein, G. (2004). Heart strings and purse strings: Carryover effects of emotions on economic decisions. *Psychological Science*, 15:5.
- Scheck McAlearney, A., Hefner, J., Sieck, C., & Huerta, T. (2015). The Journey Through Grief: Insights from a Qualitative Study of Electronic Health Record Implementation. *Health Services Research*, 50:2.
- Tichy, N. (1982). Managing change strategically: The technical, political, and cultural keys. *Organizational Dynamics*, 11(2), 59-80.



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Get to know us better:

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