## The 8 step process for leading change essay sample

Business, Management



Step 1: Establishing a Sense of Urgency: Help others see the need for change and they will be convinced of the importance of acting immediately.

Step 2: Creating the Guiding Coalition: Assemble a group with enough power to lead the change effort, and encourage the group to work as a team.

Step 3: Developing a Change Vision: Create a vision to help direct the change effort, and develop strategies for achieving that vision.

Step 4: Communicating the Vision for Buy-in: Make sure as many as possible understand and accept the vision and the strategy.

Step 5: Empowering Broad-based Action: Remove obstacles to change, change systems or structures that seriously undermine the vision, and encourage risk-taking and non traditional ideas, activities, and actions.

Step 6: Generating Short-term Wins: Plan for achievements that can easily be made visible, follow-through with those achievements and recognize and reward employees who were involved.

Step 7: Never Letting Up: Use increased credibility to change systems, structures, and policies that don't fit the vision, also hire, promote, and develop employees who can implement the vision, and finally reinvigorate the process with new projects, themes, and change agents.

Step 8: Incorporating Changes into the Culture: Articulate the connections between the new behaviours and organizational success, and develop the means to ensure leadership development and succession.

(Kotterinternational. com)

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## FISHER MODEL

John M. Fisher has also written a change Model: Fisher's Process of Transition model explains how people respond to change. Fishers change theory is based on previous works by Elisabeth Kubler-Ross who identified five stages of grief. Fisher identified eight stages that people follow through a change process. Anxiety and Denial

Happiness

Fear

Threat

Guilt and Disillusionment

Depression and Hostility

**Gradual Acceptance** 

Moving Forward

Fisher believes timing is extremely important when managing change. He believes if you attempt to force change through before the majority of people are ready, then the change is not likely to be as effective in the long term. Fisher acknowledges people generally react badly to change initially. They are anxious and in shock. They follow this by expressing a level of happiness or relief about the situation, glad that something is happening at last. Then fear sets in. If there is a healthy amount of two way communication at the happiness stage, then the degree of fear may be reduced, but it always present.

Fisher believes people will resist change, afraid of what lies ahead and how it might affect them in a bad way. Fisher believes that this resistance to

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change is a perfectly normal reaction and people should not be deterred by it. 1. 4Change management is an important aspect of management that tries to ensure that a business responds to the environment in which it operates. (Jim Riley – Business Strategy 2012) Change is an inevitable part of business. Effective Change Management is important for service provision. Diane Lauer-Organisation specialist acknowledges possible implications of either effective or ineffective change management: IF change is EFFECTIVELY managed:

Employees have a solid understanding of why change is happening.

Employees engage in both the solution and the change. Training is used to build knowledge and skills after employees have made the personal decision to support the change. Resistance is identified and dealt with early in the process. Senior leaders demonstrate their own commitment and the organization's commitment to the change. Change is supported.

A coalition of support among senior leaders and managers creates momentum throughout the organization. Probability of meeting project objectives is increased.

If change is NOT Managed effectively:

Productivity declines as people become more consumed with the change being introduced. Passive resistance grows.

Active resistance emerges and sabotages the change.

Employees become disinterested in the current state and the future state.

People are left to wonder why the change is happening.

Employees revert back to the 'old ways' to avoid implementing the 'new

ways'. Changes are not fully implemented.

Changes are cancelled due to lack of support.

Many types of risk are created – risk to the project, to the organization, to the employees involved and to the individuals supporting the change.

2. Be able to facilitate a shared understanding of the need for change in health and social care settings. 2. 1My occupancy levels have been very low over the last 3 years. My home registration is for 20 care of the elderly beds over the age of 65. Over the last 12 months I have been asked to go and assess service users who after meeting them I could confirm I would be able to meet their needs but due to a diagnosis of Dementia (early Stage) I have been unable to offer them a place at my home. In January 2012 I decided to seek a variation with CSSIW for 10 of my beds to be registered as EMI. I had a meeting with my directors and explained that we would benefit financially with the variation as it should increase occupancy levels.

I had a meeting with care staff and explained that the variation would benefit them greatly as when the occupancy levels are up they would receive more incentives financially, also that more cosmetic work would be able to be carried out to the home that would benefit staff and service users. This is how I promoted the benefits of changing our registration. 2. 2During the change process of obtaining an EMI variation there were many challenges:

Anxiety – A number of staff expressed feeling of anxiety about their ability to meet the needs of new service users with Dementia. Stress & Resources – I personally experience stress throughout the process, there were a number of

occasions that I needed to improve my knowledge on providing care for service users with dementia.

Also there were a lot of cosmetic changes that were required and it was very stressful trying to secure the funding and resources for the improvements.

Fear – My service users had a small feeling of fear, it was fear of the unexpected. During a service user meeting we discussed that we would only supply services to people with early stage dementia and that if an individual's needs become too challenging then we would withdraw our service. My current service users had a fear they would be living with people who were very confused and displaying challenging behavior. My staff had a small feeling of fear; my staff were concerned about the same issue as the service users.

During a staff meeting I explained the same and it relived every ones fear. 2. 3As stated in 2. 2, I held many staff and service user meetings before, during and after the proposed variation change. This was very powerful in keeping every one informed about the variations progress and has help ensure the change was successful. 2. 4Before I submitted the variation application I held a staff meeting, we discussed the changes that would be required to obtain variation. We agreed all staff would require accredited dementia and mental health training. All Staff would require update challenging behavior training.

In addition I informed staff that there would be a fenced garden erected and the staff room, laundry and staff toilet would require key pad locks. I also contacted all family members individually to discuss the proposed change in variation and gauge their personal feelings. I sought advice from CPN`S in relation to making changes to my admission process. Their input was very helpful.

- 3. Be able to develop an approved change management plan in health and social care settings.
- 3. 1 Applying for variation was quite a risky decision. My proposal was to not segregate the two service user groups and that by creating more individual living rooms both service user groups would live together on an integrated basis. The possible negative impact with this proposal is that the residential service users may become distress by behaviours displayed by the service users with dementia. Another possible negative effect could be that the service users with dementia may not receive appropriate care as my staff, although fully trainee in Dementia care, are new to this service user group and may not be able to fully meet individuals needs. Another possible impact on my existing service users is the fenced garden, all gates on the fenced garden are required to be locked at all time and a number of current service users like to go out and walk around the building. These locked gates may impact on their ability to do this.

The financial cost of works required

- 3. 2 Please see Evidence 1 attached.
- 3. 3 Please see Evidence 2 & 3 attached.
- 3. 4 Please see Evidence 4 attached.

4. Be able to gain support for a proposed change in health and social care settings. 4. II always ensure my own actions serve as appositive role model, for example we had a glass greenhouse in the garden which the service users loved. To get the variation it was noted by CSSIW that the glass green house would need to be changed for a plastic one. Although I was reluctant to do this as the green house was great the way it was and I knew it would have a financial outlay and the service users would not be happy about the change in position I accepted that the change needed to happen and happily explained to service users and staff the reasons why. 4. 2I met a gentle man called Mr T during the proposed variation process.

Mr T was hired by me to deliver Accredited Dementia training. After meeting Mr T I realised that he had a vast knowledge of EMI care and would be helpful to help me promote the vision for change. Since our initial meeting I have since hired Mr T to carry out a number of training courses for my staff as he has a great way of interacting with my staff and getting them to take note. 4. 3Following "Kotters" model of change is my strategy to address resistance to change. A. Do change management right the first time – effective change management can eliminate many of causes of resistance before it occurs B. Expect it – do not be surprised by resistance, expect it and plan for it C. Address it formally – incorporate resistance management planning in all phases of your change management strategy and plan development D. Identify the root causes – make sure that you aren't simply responding to the symptom, but really addressing what is causing the

resistance E. Engage correct support – senior carers, assistant managers 4.

4Please see attached evidence 2 & 3.

- 5. Be able to implement approved change management plans in health and social care setting. 5. 1See Evidence attached 5.
- 5. 2As evident in evidence 5, I, assistant manager and senior carers all had a role in the variation process. To support myself I had monthly meeting with my director. To support my assistant manager and senior care assistants we had regular meeting to assess how the changes were affecting the general running of the home. 5. 3I initially submitted my variation form in February 2012, I was contacted by CSSIW and informed there was information missing so I retracted the application, changed it and then resubmitted it in August 2012 once works had been completed. Please see Evidence 6. 5. 4My strategies for ensuring the quality of our service was to ensure communication was upheld with all staff and service users, this way I could monitor any negative or positive effects from the changes taking place.

I maintained this communication by holding regular meeting and making myself more visible throughout the day. 6. Be able to evaluate the change management process in health & social care settings. 6. 1My system to monitor the effectiveness of my change management plan (Proposed variation) was communication. I ensured I held regular meeting with service users, staff, relatives and visitors to ensure everything I had planned was working and having minimal resistance or negative effects. 6. 2I reviewed the proposed variation with the directors, staff and service users many times prior, during and after the process during meetings if there were any

identified improvements or changes required I would act. 6. 3I am currently evaluating the change for my service users and staff since receiving my registration variation, again this is being done with meetings and having a higher presence around the home, quietly monitoring the effects.