

Factors Associated With Nurses' Readiness for Change

Thesis

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Degree in Nursing Administration*

By

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Thanks to Allah who have lightened my path to accomplish this work,

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Dedications

*I would like to dedicate this thesis
to*

***My Parents
and my Husband***

*for their love, care, support and
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to accomplish this work*

List of Contents

	<i>Page</i>	<i>Title</i>
▪ Introduction.....	1	
▪ Aim of the Study.....	8	
▪ Review of Literature.....	9	
<u>Readiness for change:</u>		
• Consept of readiness for change.....	10	
• Process of change.....	16	
• Change tool and technique.....	19	
- Change self efficacy	20	
- Personal valence.....	36	
- Discrepancy	41	
- Management support.....	44	
-Organizational valence	46	
• Lewin three change theory.....	58	
Unfreezing phase	59	
Moving (changing) phase.....	60	
Refreezing phase.....	61	
• Stages of change.....	63	
• Process of Change Management in Nursing.....	65	
• Change strategies.....	72	
• Barriers of change.....	74	
• Overcoming barriers to organizational change	78	
• Factors that enhance successful organizational change.....	81	

• Principles of Organizational Change Management	87
• Tips for Effective Change Management.....	89
• Role of nurse manager toward change.....	91
▪ Subjects and Methods	94
▪ Results	103
▪ Discussion	132
▪ Conclusion	149
▪ Recommendations	150
▪ Summary	153
▪ References	158
▪ Appendices	188
▪ Protocol	...
▪ Arabic Summary	...

List of Tables

<i>No.</i>	<i>Table Title</i>	<i>Page</i>
TABLE IN RESULTS		
1	Socio demographic characteristic of the study subject	104
2	Job characteristics of staff nurse and head nurses.	105
3	Responses of staff nurses and head nurses regarding change self-efficacy factor.	106
4	Responses of staff nurses and head nurses regarding discrepancy factors	108
5	Responses of staff nurses and head nurses regarding personal valence factor	111
6	Responses of staff nurses and head nurses regarding organizational valence factor	114
7	Responses of staff nurses and head nurses regarding management support factors	117
8	Responses of staff nurses and head nurses regarding the total readiness for change factors	120
9	Scores of staff nurses and head nurses responses regarding the total readiness for change factors	121
10	Correlation between factors affecting nurses' readiness for change among staff nurses	123
11	Correlation between factors affecting nurses' readiness for change among head nurses	124

<i>No.</i>	<i>Table Title</i>	<i>Page</i>
12	Relation between total factors affecting nurses' readiness for change and socio demographic characteristics of staff nurses (n=225)	125
13	Relation between total factors affecting nurses' readiness for change and socio demographic characteristics of head nurses (n=35)	127
14	Correlation between factors affecting nurses' readiness for change and socio demographic characteristics among staff nurses (n=225)	128
15	Correlation between factors affecting nurses' readiness for change and socio demographic characteristics among head nurses	129
16	Best fitting multiple liner regression model for the score of nurses' readiness for change factors among staff nurses	130
17	Best fitting multiple liner regression model for the score of nurses' readiness for change factors among head nurses	131

List of Figures

<i>No.</i>	<i>Figures Title</i>	<i>Page</i>
FIGURE IN REVIEW		
1	Change tool and technique.	38
2	Lewin's change process.	59
3	Driving and restraining forces.	62
4	Trans theoretical Model of Individual Change	63
FIGURE IN RESULTS		
1	Comparison between staff nurses and head nurses responses regarding the total readiness for change.	122

Abstract

Background Readiness for change is a comprehensive attitude that is influenced simultaneously. The process of readiness for change consists of an appraisal phase and a planning phase. **This study aimed to:** identifying the factors associated with nurses' readiness for change. **Design:** A descriptive design was used. **Subject and methods:** the study was carried out at Ain Shams Hospital affiliated to Ain Shams University using a descriptive design on 260 nurses (35 head nurses & 225 staff nurses). **Tools of data collection:** One tool was used for data collection namely factors associated with nurses' readiness for change. **Results:** Shows that slightly more than half (51.6%) of staff nurses, and slightly less than two thirds (65.7%) of head nurses had moderate response. There is a highly statistically significant relation between total factors affecting nurses' readiness for change and social status between nurses, but there is no statistically significant relation between total factors affecting nurses' readiness for change and socio-demographic characteristics of head nurses. **Conclusion:** it is concluded that head nurses, and staff nurses had moderate responses regarding total change factors. **Recommendations** Hospital administrator and nurse managers should provide organizational support through educational and training opportunities in theories of change as well as need for technical skills and through financial support and flexible work arrangements.

Keywords: readiness for change, nurses.

Introduction

The increasing pace of global economic and technological development makes change an inevitable feature of organizational life .Of great importance, the health care system is particularly susceptible to a growing need for change, with new medical technology constantly being introduced, an increasingly demanding customer/patient, shortages of key professionals, a greater regulatory burden, new types of competition, growing financial pressures, and changes in the fundamental science underlying the practice of medicine (*Draper et al., 2012*).

Change is defined by shifting from one stage to another or it is concerned with break down existing structures and create new one (*PMI, 2013*).Organizational change is defined as a way to impart new attitude and behaviors in the nurses that will help them to do their tasks more effectively, efficiently and to overcome their fears against change. Also it is considered as a deliberately planned change in an organization's formal structure, systems, processes, or product-market domain intended to improve the attainment of one or more organizational objectives (*PMI, 2013*).

Moreover, organizational change causes individuals to experience a reaction process from strong positive attitudes to strong negative attitudes. 'So, organizational change

theories would suggest that, the role of individuals in these organizations is key to successful organizational change, and critical to changes in individual behavior to support organizational change is the readiness of the individual for change. In this respect, nurses are considered the largest deliverer of health care; they are considered a pivotal in hospital efforts for success of this change and improve quality of patient care, (*Julita Rafaei 2012; Madsen et al., 2010*).

Organizational change is defined as a way to impart new attitude and behaviors in the employees that will help them to do their tasks more effectively, efficiently and also to overcome their fears against change. In this respect, most of the current researches on change builds on the classic theories developed by *Kurt Lewin, (1951)* identified three phases for any planned change (unfreezing, movement, and refreezing).

Unfreezing occurs when the change agent convinces members of group to change or when guilt, anxiety, or concern can be elicited. Thus, people become aware of a need to change. The second phase is movement; the change agent identifies plans and implements appropriate strategies for change. The last phase is refreezing; the change agent assists in stabilizing the system change so it becomes

integrated into the status (*Siddiqui 2013; Marquis & Huston, 2011*).

Moreover, change have three areas in organization such as changing people, technology, and structure. At the same time change may be reactive or proactive. Reactive change is an adaptive response to an unanticipated problems & opportunities; while planned or proactive change refers to managing anticipated problems & opportunities. Furthermore, change may be classified as developmental, transitional, and transformational (*Robbins 2009; Kinicki Williams et al 2012*).

Success of change depends on change agent, individuals affected by change, determination of what should be changed, the kind of change and evaluation of change. A major factor to be considered by managers when changing an organization is the people who will be affected by change. According to the researchers organizations change act through their members and successful change will persist over the long term only when individuals alter their job behaviors in appropriate ways. They also argue that, many change efforts fail because change leaders often underestimate the central role of individuals play in the change process (*Porras Robertson, 2011*).

Walinga (2008) emphasized that all change, whether organizational, individual, externally, or internally initiated, depends on the individual's resolve or willingness to change. This means that lack of readiness for change can block needed progress toward achieving organizational goals. **Jones et al., (2011)** defined individual readiness for change as willingness to be open to change cognitively and emotionally. Also it is considered as the cognitive precursor to the behaviors of either resistance to or support for change effort (**Jones et al., (2011)**).

Individual readiness for change reflects the concept of unfreezing proposed by Lewin and is critical for successful change implementation. The unfreezing step in the organizational change context includes the process by which organizational members' attitudes about a change initiative are altered in a way that they perceive the change as necessary and likely to be successful. In this respect, when individuals become ready for a change initiative, this indicates that the unfreezing step has been successful (**Walinga, 2008**).

Oreg, (2008, 2013) identified the dimension for resistance to change: (discrepancy) some people feel excited when they encounter change, others experience stress and anxiety. Short-term focus is about whether individuals focus on the short-term hassles that are part of

most changes or whether they focus on the potential long-term benefits of change. Finally, cognitive rigidity involves a tendency to tenaciously hold on to ones views. Together, the four dimensions capture a variety of sources that ultimately predispose individuals to resist and avoid changes (*Oreg 2008, 2013*).

As regards contextual factors, it refers to workplace characteristics that influence readiness for change and focused on management support. This concept was originated from magnet hospital characteristics. These hospitals shared a number of characteristics, including high levels of collaboration and communication between nurses and physicians as well as nurse participation in decision making. The management support environment may make this contribution by influencing the willingness of registered nurses to accept change (*Pettigrew, 2011*).

In relation to organizational factors, it refers to job characteristics and attributes that empower employees with the skills, attitudes and opportunities to manage change .These organizational factors will increase work-related self-efficacy and readiness for organizational change. In this respect, organizational factors focused on structural empowerment and emotional climate.