

Quality Improvement Learning Collaborative

Session 4: Organizational Culture and Change Management

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Stratis Health

Stratis Health is a nonprofit organization that leads collaboration and innovation in health care quality and safety and serves as a trusted expert in facilitating improvement for people and communities.

The organization has a long history of working with rural providers, Critical Access Hospitals (CAH), and the Flex Program.

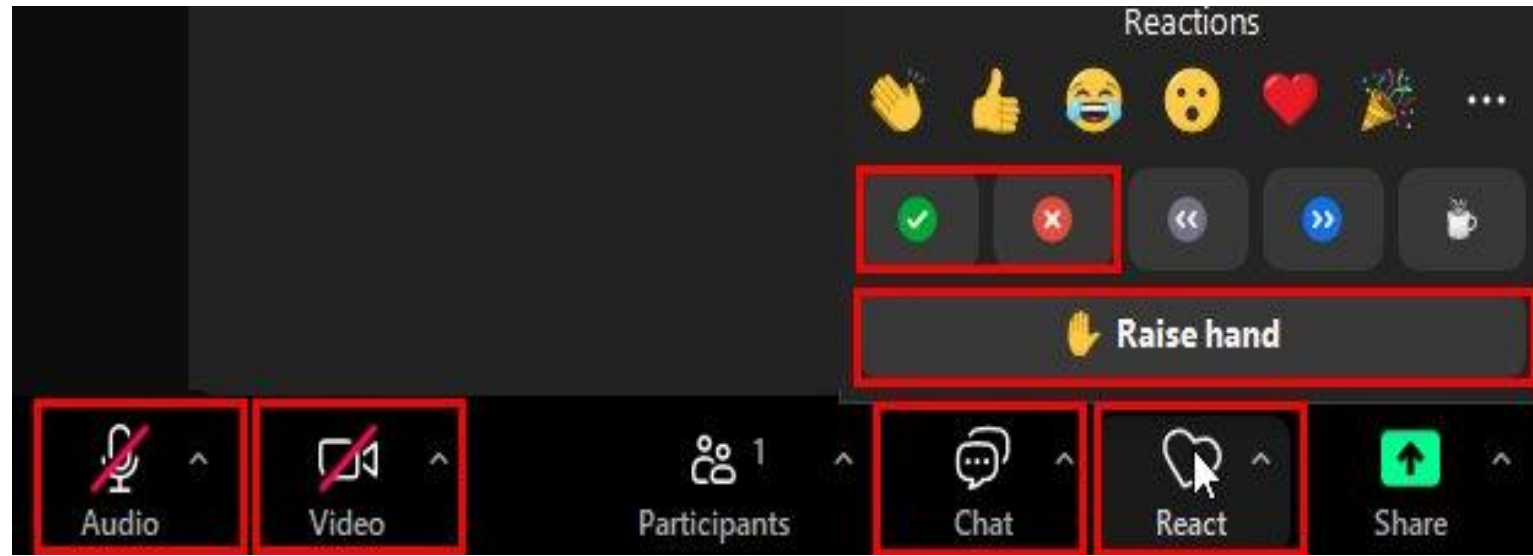


Chat Introductions and Check In

- Name | Title/Role
- Organization
- What is your favorite type of pizza?



Housekeeping



- Video On requested
- Use the chat
- Raise your hand
- Unmute and talk
- Complete polls
- Participate in breakout groups

Timeline and Content

Sessions will be held every other Wednesday from 1– 2 p.m. MT on the following dates:



Learning Collaborative Objectives:

- Apply systems thinking and support quality improvement through organizational culture.
- Plan and manage quality improvement projects.
- Select and practice quality improvement methods and tools.
- Collect, analyze, and illustrate data for quality improvement.



Session 3 Reflection

- Develop/review a project charter and/or work plan for a current QI project
- Create an elevator speech for a current QI project
- Consider a current or recent conflict you are facing can you identify the 'root causes' of the conflict?
- Consider ways to incorporate DESC or PEARLS into challenging conversations

Session 4 Overview

Session 4 Learning Objectives:

- Summarize strategies that foster a culture that supports quality improvement
- Describe change management models that support successful QI efforts and practice using a change management tool

Session 4 Pre-Work



Review Modules

- [Organizational Culture and Change Management Basics](#) (9-minute video)
- [A Culture of Quality](#) (13-minute video)



Review Tools & Resources

- [Force Field Analysis](#)



Review the following report:

- [Building Sustainable Capacity for Quality and Organizational Excellence: Core Elements of CAH Quality Infrastructure](#)

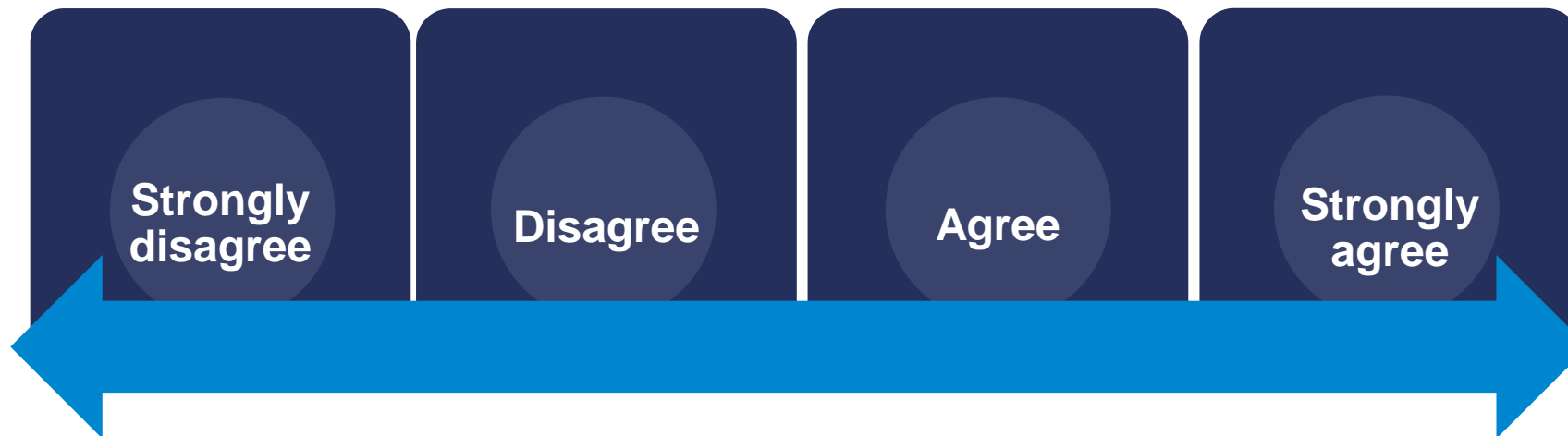
Modules and Resources Available Here:
[Quality Improvement Basics - Stratis Health](#)



Pre-Knowledge Gain Poll

Rate the following statements:

I understand that strong organizational culture drives quality improvement and how change management models can effectively support and sustain QI efforts.



Organizational Culture

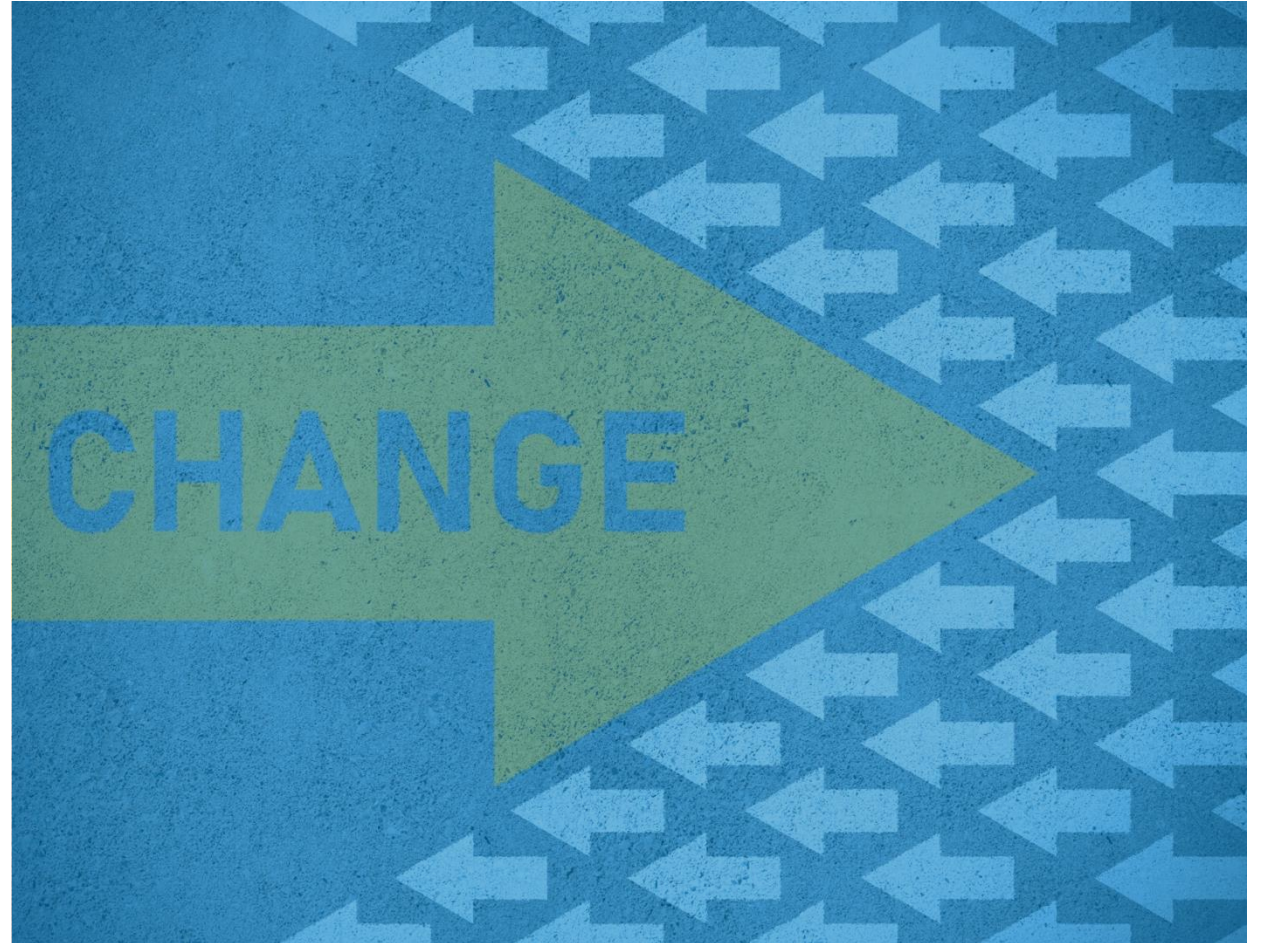
Organizational Culture

- The values and behaviors that contribute to the unique social and psychological environment of an organization
- How we do our work and behave and interact with each other.
- Reflects shared values, patterns of belief and expectations that guide behavior
 - The assumptions of “how we get things done around here”
- Each facility or department will have its own culture

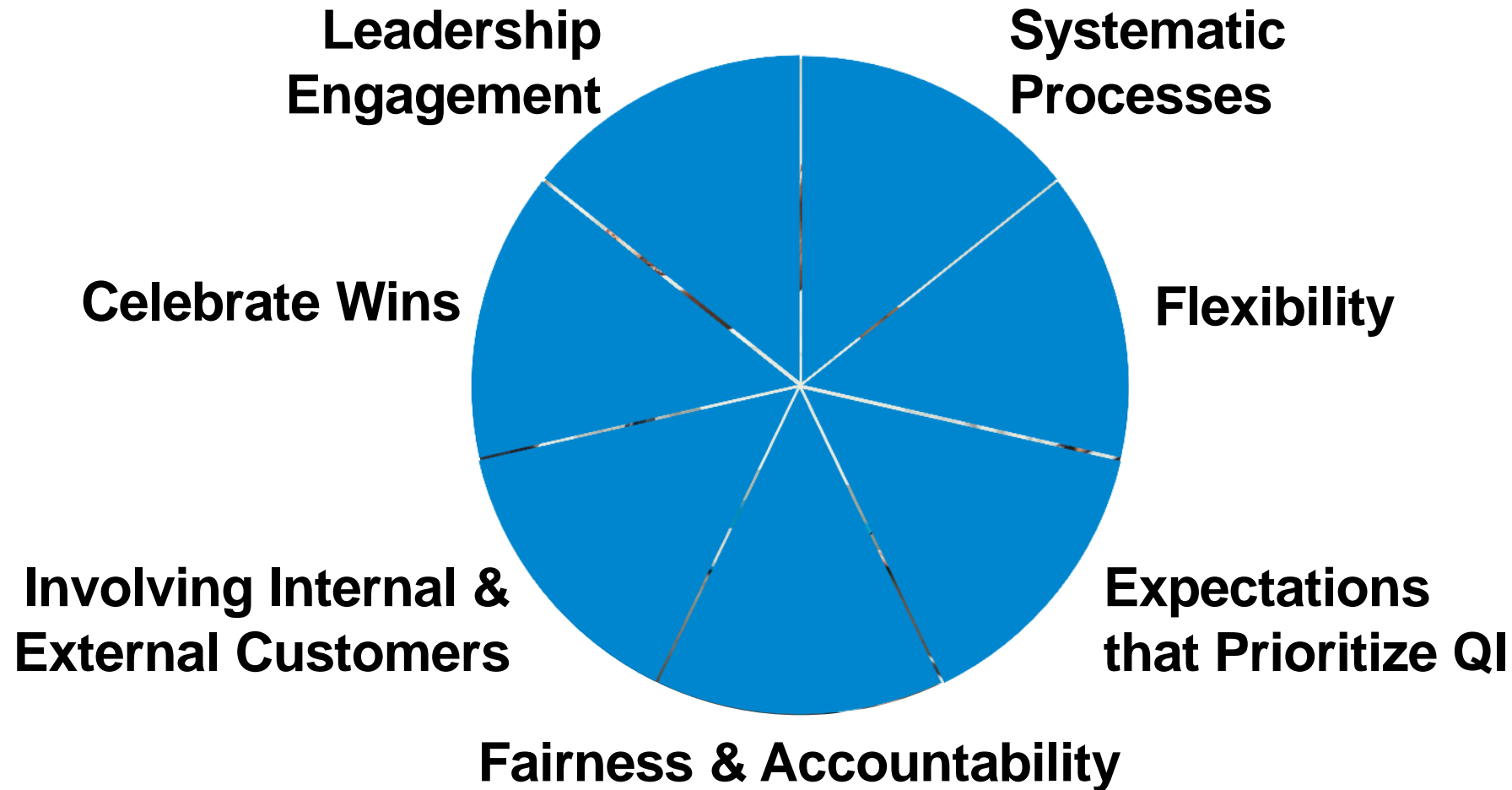
Helmreich, R. L. & Merritt, A.C. (1998). Culture at work in aviation and medicine: National, organizational and professional influences. Aldershot, England: Ashgate

Change vs. Culture

- Change brings both anticipation and opportunity
- Need to assimilate at several levels
- **“Culture eats strategy for breakfast”**



Culture of Quality Success Factors



Reflection/Discussion

Take a minute to think about:

- What you think your organization is doing well?
- Where is there opportunity for improvement?

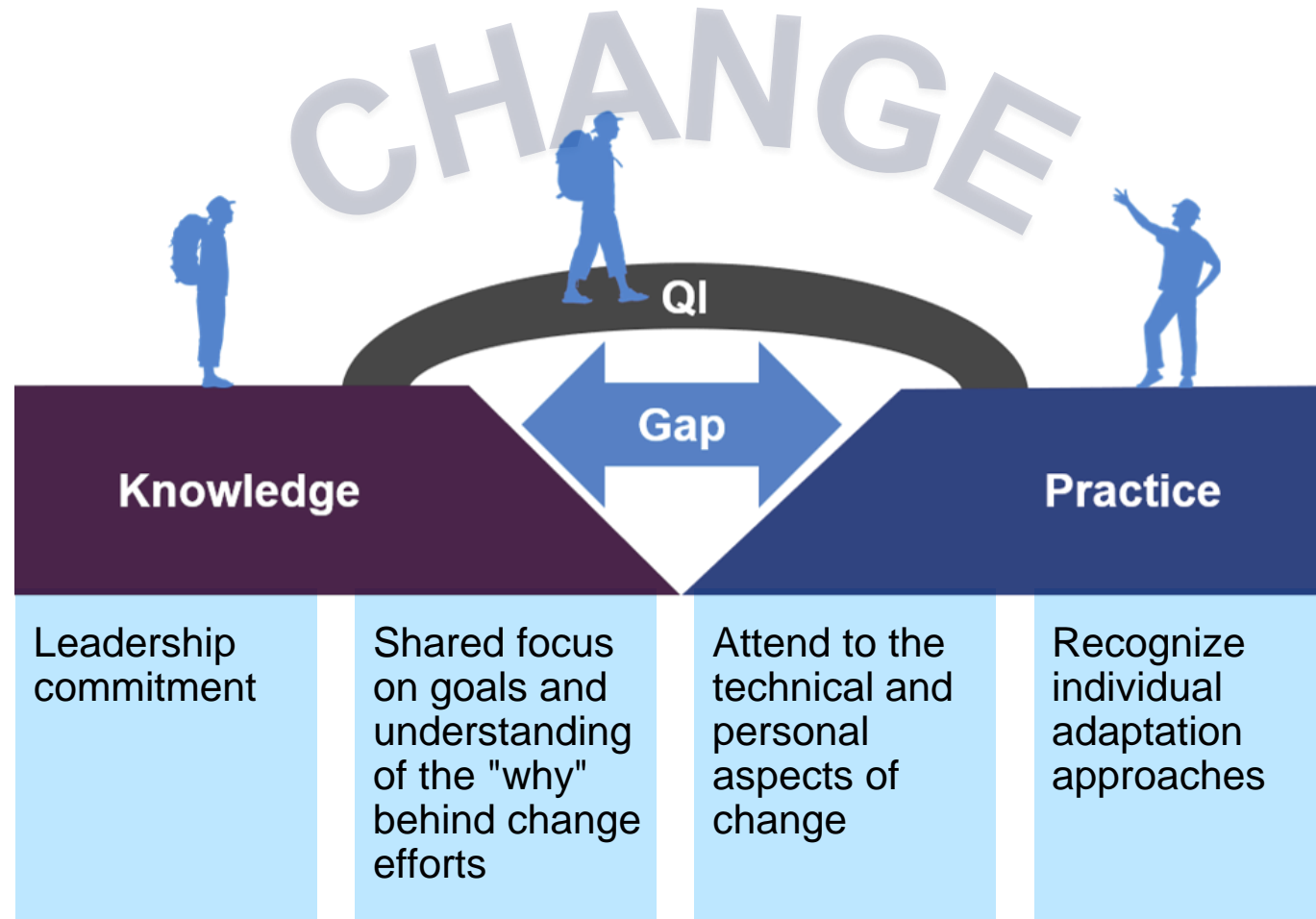


Change Management

Key Change Management Concepts

- Change is all about how we handle the transition (from current-state to future-state)
- Change is affected greatly by organizational culture
- Consider both organizational and individual change (the impact and what both need to navigate transitions successfully)

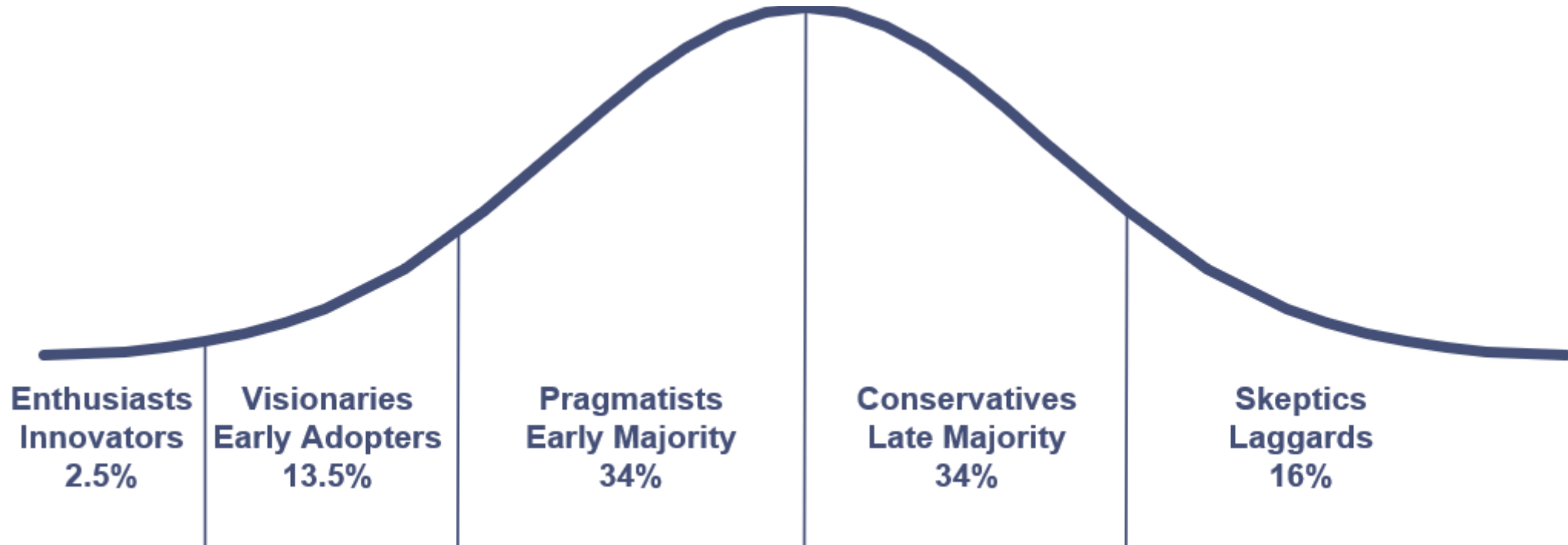
Change Management Success Factors



Assessing Change Readiness

- Staff involvement, feedback and reinforcement are crucial to ownership
- Sometimes the only way to change culture is to change key people
- Individuals in leadership positions need to be on board
- New approaches sink in after success has been proven
- Most alterations in norms and shared values come at the end of the transformation process

Individuals as Adopters of Change



Source: Rogers, Everett M. (1962). *Diffusion of Innovations*

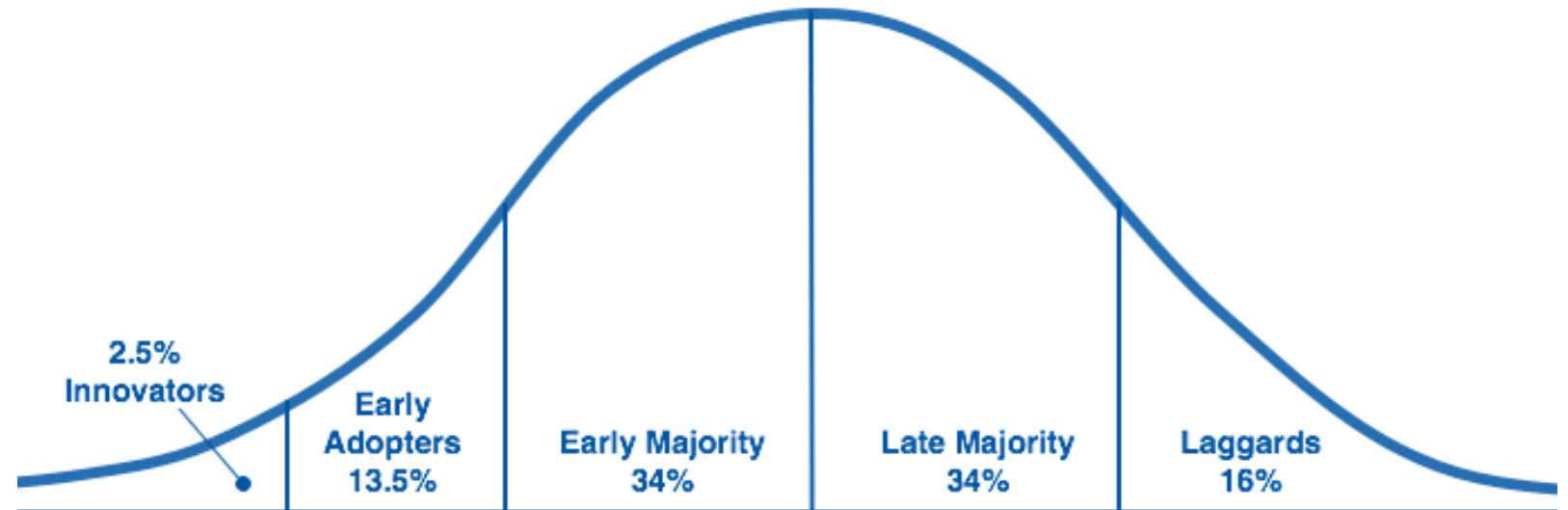
“Faced with the choice between changing one’s mind and proving that there is no need to do so, almost everybody gets busy on the proof.”- John Kenneth Galbraith



Poll

Where do you see yourself on the Adopters of Change bell curve?

Where do you see your organization?

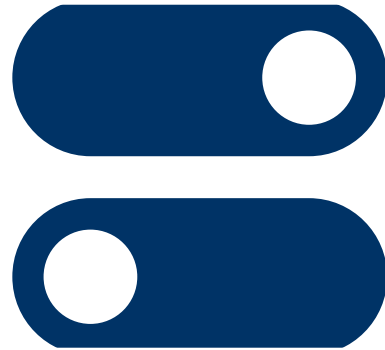


Source: Everett Rogers, Diffusion of innovations model

Models for Change Management



Equilibrium Model:
Phases of Change



Switch Model for
Change



Eight Steps to
Change: The Kotter
Model



Prochaska's
Change
Management Model

Switch Model for Change

Critical components to generate change:

Knowledge

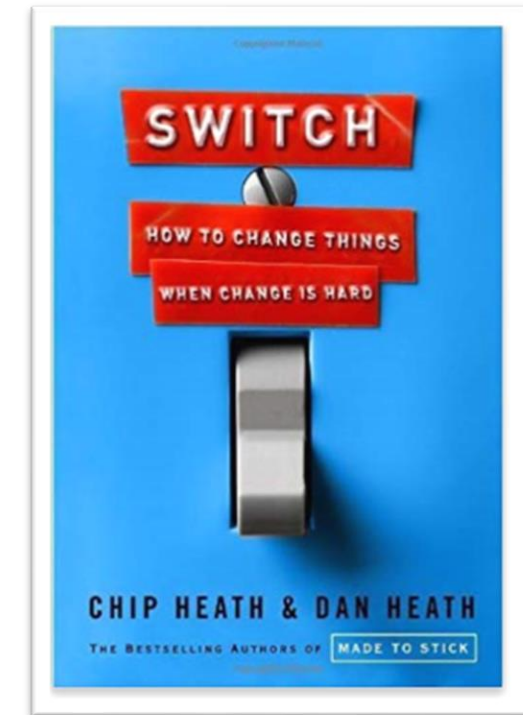
- Data/facts, best practices, models

Feelings

- Stories, connections, meaningful goals

Skills

- Workflow, processes, tools, training



From: <https://heathbrothers.com/books/switch/>

Eight Reasons Why Change Fails

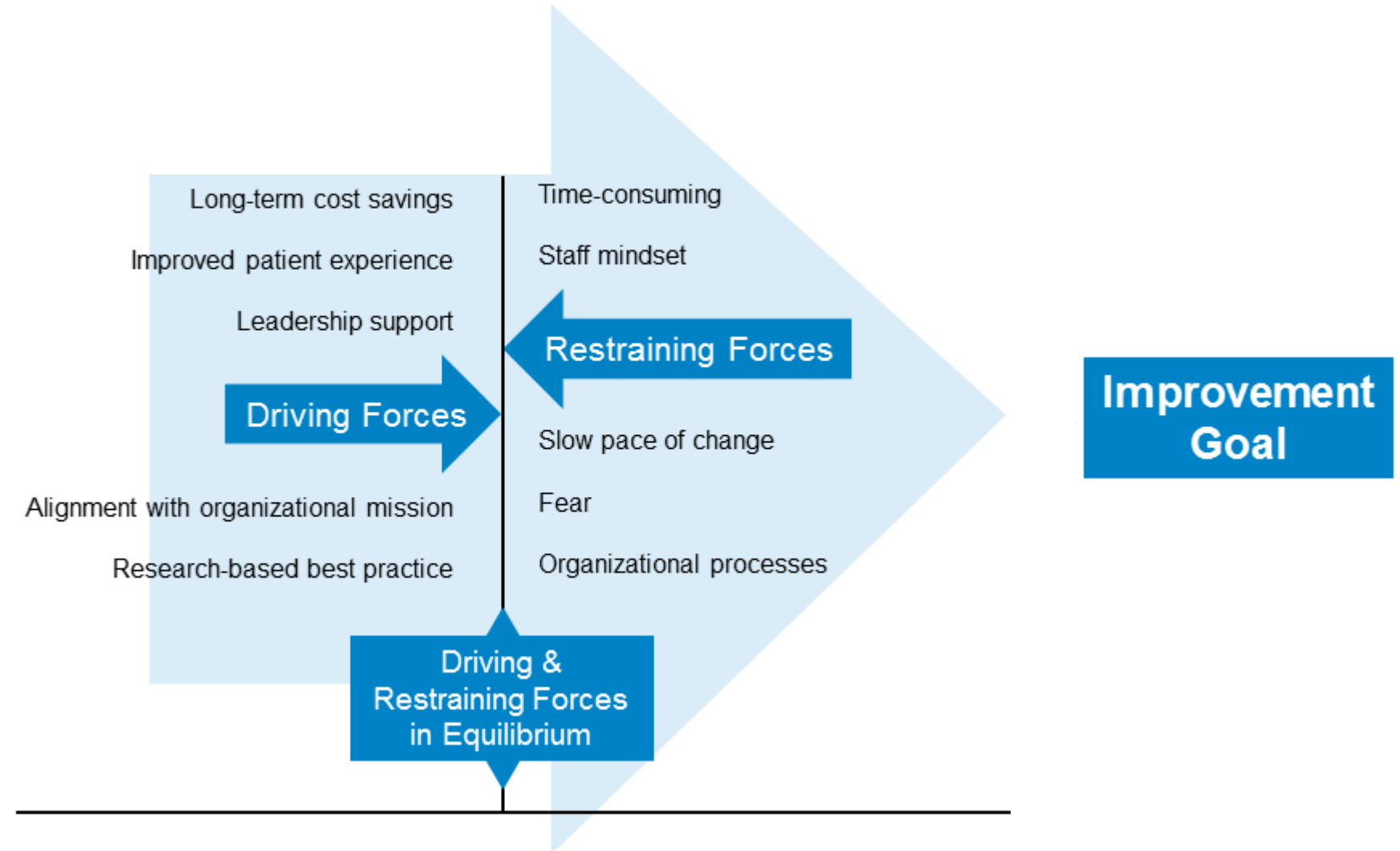
1. Allowing too much complacency
2. Failing to build a substantial coalition
3. Not creating a clear vision
4. Failing to clearly communicate the vision
5. Permitting roadblocks and not addressing them
6. Not planning and getting short-term wins
7. Declaring victory too soon
8. Not anchoring changes in corporate culture

Additional Factors that Influence Change

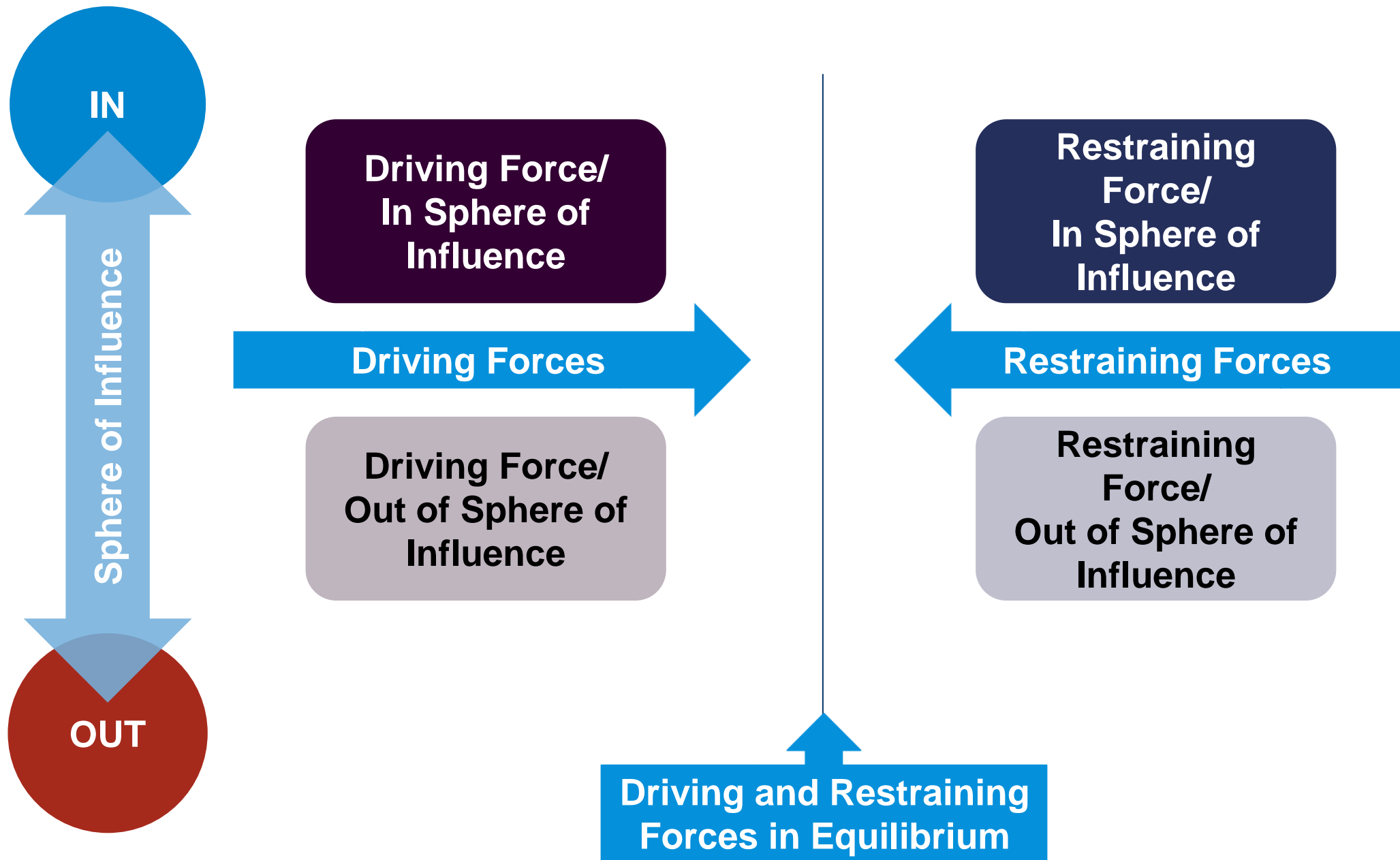
- Available resources
- Attitudes of people
- Mission and/or values
- Traditions
- Regulations
- Desires
- Vested interests
- Personal or group needs
- Time needed
- Institutional policies or norms (culture)
- Patient experience
- Costs/finances
- Present or past practices
- People
- Relationships
- Scheduling and events
- Social or organizational trends
- Pace of change
- Organizational structures and processes

Source: <http://www.extension.iastate.edu/communities/force-field-analysis>

Tool: Force Field Analysis



Lewin, K. (1951). *Field theory in social science*. London: Tavistock Publications Ltd.



Driving & Restraining Forces of Medication Reconciliation

Amplify & Boost

Address &
Problem Solve

Driving Force /
In Sphere of Influence

Restraining Force /
In Sphere of Influence

Driving Force /
Out of Sphere of
Influence

Restraining Force /
Out of Sphere of
Influence

Align & Leverage

Listen &
Acknowledge

Driving & Restraining Forces of Medication Reconciliation

Amplify & Boost

- Standardized protocols for medication reconciliation.
- Staff training and education on best practices.
- Integration of electronic health records (EHR) to streamline the process.
- Collaboration between pharmacists, nurses, and physicians.
- Patient education on medication adherence and reconciliation importance.

Driving Force /
In Sphere of Influence

Driving Force /
Out of Sphere of
Influence

- Patient adherence and willingness to provide accurate medication history.
- Variability in medication documentation across different healthcare settings.
- Limited staffing or high workload affecting thorough reconciliation.
- System-level barriers like EHR interoperability issues.

Align & Leverage

Address & Problem Solve

- Inconsistent documentation practices.
- Lack of clear roles and responsibilities in the reconciliation process.
- Gaps in communication between inpatient and outpatient care teams.
- Time constraints and competing clinical priorities.

Restraining Force /
In Sphere of Influence

Restraining Force /
Out of Sphere of
Influence

- Insurance and reimbursement limitations affecting medication access.
- Vendor-driven limitations in EHR functionality.
- Regulatory and policy constraints that impact workflow.

Listen & Acknowledge

Change Management Takeaways



Understand core concepts – manage resistance and support individuals



Consider known success factors – leadership expectations, communication, and engagement and empowerment of those most impacted by the change(s).



Apply proven models – use a change management framework to help develop your workplan



Leadership actions – lead by example, communicate clearly, monitor and adjust as needed



Application Homework

- Celebrate wins in your organization
- Explore a change management model/tool and consider how to build elements into your QI project(s)

Final Insights: Our Learning Collaborative Journey

Learning Collaborative Objectives:

- Apply systems thinking and support quality improvement through organizational culture.
- Plan and manage quality improvement projects.
- Select and practice quality improvement methods and tools.
- Collect, analyze, and illustrate data for quality improvement.



Reflection & Discussion

- What concept(s) resonated with you?
- How will you apply some of these methods and tools?
- What additional information or tools would help to support your ongoing efforts?

Close-Out Poll

Rate the following statements:



I understand that strong organizational culture drives quality improvement and how change management models can effectively support and sustain QI efforts.

1. The learning objectives for this session were achieved.
 - *Summarize strategies that foster a culture that supports quality improvement*
 - *Describe change management models that support successful QI efforts and practice using a change management tool*
2. This session met or exceeded my expectations.

What Next?

- Post-Assessment (after session 4)
- Office Hours – March 5th
- MHA Summit & Poster Presentation
 - April 2-3 in Helena
- Certificate of Completion
 - ☑ Completed the pre/post assessments
 - ☑ Participated in all four sessions
 - ☑ Participated in Summit and Poster Session

Bonus Content

Additional QI Basics Modules:

- [Change Management Models Part 1](#) (9-minute video)
- [Change Management Models Part 2](#) (12-minute video)

Additional Resources:

- [Using a Change Management Readiness Assessment | Prosci](#)
- [The Prosci ADKAR Model](#)
- [Psychology of Change | IHI](#)
- [Change Readiness Self-Assessment](#)

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To learn more about Stratis Health go to www.stratishealth.org.

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