

**Type:** Research Paper

**Subject:** Change Theory and Models

**Subject area:** Nursing

**Education Level:** PhD Program

**Length:** 5 pages

**Referencing style:** APA

**Preferred English:** US English

**School:** Chamberlain University

**Spacing Option:** Double

**Title:** Conceptual Frameworks and change models.

**Instructions:** Reflect upon your selected practice problem and select one of the organizational or behavioral change models which were used in healthcare for many years up until the early 2000s. Due to the changing nature of our healthcare environment and the growing complexity of our patients, these older models and theories lost their ability to provide a successful framework in healthcare and are not currently used for translation science and nursing clinical practice change projects. Select one model or theory from the readings or lesson this week. Provide a description of the components in the organizational or behavioral change models or theory. Does the model or theory contain a component for appraising the evidence? Does the model or theory contain a component for networking with the stakeholders during the design phase and continuing through the sustaining phase of the project? Does the model contain components for identifying barriers and addressing barriers to implementation? The organizational and behavioral models and theories were very popular and successful in healthcare for years. Taking a historical look at the theories that served as the foundation for today's translation science theories which provide a robust framework for translating evidence into healthcare practice today. The old individual behavioral theories were very successful in years past with smoking cessation and other behavior changes with each individual patient. These are still used successfully at the individual patient level today! The organizational change theories were replaced in the early 2000s with the translation science theories for practice change at the organizational and systems level, where doctorate of nursing practice scholars will lead change. Compare and contrast differences and similarities in change models, conceptual frameworks, and translation models.

**TRANSFORMATIONAL LEADERSHIP MODEL**

Student's Name

Institution Affiliation

Course

Instructor

Due Date

## **Introduction**

The practice problem, obesity, portends a grave public health risk to the community served by the healthcare provider under discussion. For there to be a concrete change in the way the healthcare institution, and the community in general handles obesity, there needs to be a complete transformation in the way that the nursing personnel process and deploy interventions for patients.

### **Transformational theory in nursing**

One of the essential points to note with the transformational model, especially with nursing practice, is that it does not improve systems and individuals, making them better, or more efficient. The ultimate goal is to dismantle what has been the status quo and inaugurate new systems and means of operation that are different and better. The main idea then is to identify existing and emerging information, technologies, and evidence, and use these to formulate new ways that are a radical break from what has been in operation, and, primarily, not been as good in resolving the issues that exist (Masood and Afsar 2017).

For the transformational change model to work, transformational leadership is necessary. The nursing or other clinical department leader needs to inspire the people they lead to aim for new modes of service delivery that are backed by evidence and new technologies but those they fully understand. This understanding can only occur if the people expected to implement the change have been fully involved in the process, and as a result, feel that they own the process.

### **Appraising the evidence**

As (Michaud et al., 2017) show, there is a direct economic and social benefit when obesity levels are brought down. This is even better when the means are tailored for specific

communities and individuals. This is a new form of evidence that is unlikely to be covered by existing methods of controlling obesity. The transformational model of change can check such new evidence and methods, and coopt them into the new way of doing things. Due to the focus on leadership and members' participation, it is possible to carry out radical changes involving new evidence without seriously jeopardizing the new change.

### **Stakeholder involvement**

The transformational model of change appreciates the critical role played by stakeholders in the change process. While the nursing department will be vital in driving the change, other aspects are equally influential and instrumental in achieving the new way of doing things. Through the transformational model, change is not only for a specific process being made better. It involves the interrogation of other methods associated with the process under review and establishing how they need to change to accommodate the new way of doing things. As described above, transformational changes need all the people expected to play a decisive role in achieving it (Jacobs et al., 2017).

### **Identifying barriers to change**

As with other forms of change models, resistance, and barriers to change are inevitable, even with the transformational change model. To counter this, the model has a few methods of identifying the barriers and proactively dealing with them. For instance, resistance from employees can be effectively curbed by involving them in the process. Charges of lack of funds amidst a global pandemic can easily be countered by showing the enormous benefits that will

accrue to both the community and the healthcare provider, should the change be supported (Robbins and Davidhizar 2020).

## References

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