Review Article

Leader of Change in Healthcare Organizations

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The organizational innovations to which the healthcare companies are called to perform require professionals who have a managerial role to take care of introducing new organizational solutions but also to take on the relational and motivational environment with the professionals who will undergo organizational change. These professionals, change agents, must possess leadership and management traits.

Organizational change requires the ability of those who implement it to transform their behavior from a previous method to a new practice and then make it stable after the requested change. The aforementioned passage often creates resistance that the leadership and management are called upon to manage. These hostilities are all the more structured in public health services where the high complexity, the huge size of the organizations and the regulations harden the system that tends to maintain the status quo

even if recognized as dysfunctional and unproductive. In this context, the professional change agent must possess both managerial characteristics that are required to manage processes to govern a complex system of people and technologies.

It must also put in place elements of leadership such as the management of relations between people that constitute the processes of influence, indoctrination and motivation that aim to obtain expected behaviors reducing the use of sanctioning power. Last but not least, the leader who deals with change must take into account the organizational culture which is the set of practices, relations, formalized rules and even more, those not written which constitute the identity of a group. The leader who drives organizational change must enjoy wide autonomy, must possess a clear mandate from the strategic management, must carefully analyze the context variables in order to identify and move positive energies, and limit the resistances by managing the negativity.

Keywords: Change; Resistance; Leadership; Management; Culture

INTRODUCTION

hange in the social, demographic and epidemiological conditions we are witnessing have led health organizations to devise, design and apply innovative and unpublished responses to the aforementioned phenomena. Health institutions are called upon to change their organization to respond effectively to the new and pressing demands that current population characteristics require. The design of such changes must stimulate those involved in management to create the basis for facilitating the modification of the most appropriate operational processes. Those who are recognized as having a managerial role and who possess leadership traits must take care of introducing new organizational solutions but also of taking on the relational and motivational environment with the professionals who will undergo organizational change. In international literature, personal traits of the person acting as change agent also emerge, such as intelligence, proactive style and charisma. Other suggestions come from the model of transformational leadership characterized by the ability to stimulate, inspire and motivate collaborators. It would be positively correlated in modifying the organizational culture and consequently also the outcomes for patients treated. The definitions of organizational change, also understood as the development of the organization. The first expresses a modification of the mechanical procedures of work while the social area refers to the way in which the people involved in the process of change, will change their relationships in the organization.

Quaglino, identifies transformation as a set of deliberately and oriented actions aimed at a goal of change in the organization. In summary, it could be imagined as a transition from a status "A" to a state "B" in a unit of time. More recently, it has been interpreted as a modification of behaviors, making them more consistent with the tasks to be performed and that has given rise to new and desired behaviors. Lussier describes five stages of mutation: definition, identification of resistances, planning, promotion and control (evaluation) of change. Otherwise to the in deformability of the conditions, the systemic approach stands out, which consists of three aspects, namely input, transformation and output, which, albeit in its

simplicity, emphasizes how small or large a modification can trigger a cascading effect on the whole organization. As regards the resistance to change, Kotter and Schlesinger, suggest some strategies to govern organizational change with particular attention to how to deal with possible resistance. They report six phases, of which the first relates to communication and information aspects of change designed with the aim of reducing any resentment, ill feeling and false news, through the creation of a climate of trust. The second step is represented by involvement through the drive for participation by the actors involved, sharing intentions and objectives and delegating some phases of the project. The third phase is that of support that takes place through the active listening of the own collaborators that during the transformation process, could manifest problems, dissatisfactions and frustrations. In the fourth step, negotiation is described which can also be understood as a moment of participation, cooperation but also of shared choice of objectives to be achieved. The fifth phase is represented by the manipulation and co-optation to be used as formal power if the resistances are strong and structured.

The last step concerns the coercion that also in this case refers to the power of the hierarchical position. To act with caution and in case of important changes that meet strong resistance but those are characterized by urgency in obtaining the results. The action of the middle manager and the other managerial figures, above all in the ambit of the public administrations, will necessarily have to take into account the slowness and rigidity that sometimes reside in the public bodies. The ability to carefully observe the internal and external contextual characteristics to identify any resistance to change also emerges as essential. As suggested by Rebora, an element of strong resistance emerges, namely the organizational inertia that tends to maintain the status quo even if it is inefficient and represents a powerful force of resistance. It therefore becomes fundamental to feed the drive for change, making use of levers that can move the system. About the management or leadership with regard to the premises exposed, it is necessary to clarify what the concept of management and leadership is and how these two functions can modify, influence and move the change. Although in literature there are some differences between the distinctive characteristics of management and leadership, as stated by Saggin &

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Rotondi, it is possible to argue that the first deals with logical activities and tools to indicate and implement productive activities through the trappings of the organization. The manager takes on the task of managing processes to govern a complex system of people and technologies. He deals with planning, contributes to the formulation of the budget, to the assignment of tasks to staff, to control and to search for solutions to problems, taking charge of planning and making explicit objectives, values and goals. The goals in to enable the company and its members to grow and develop by measuring and evaluating their performance.

By leadership, we mean all those typical characteristics of relationship between people that constitute the processes of influence, indoctrination and motivation that aim to obtain expected behaviors reducing the use of sanctioning power. The leader deals with processes aimed at adapting organizations to the circumstances and scenarios of change, aligning people with the vision of the company, pushing them to work towards the achievement of pre-established objectives, facing the obstacles that could arise. Leadership is also defined as the action of having followed and at the same time achieving results. The aforesaid role possesses intense relational connotations that have the purpose to mobilize the members of a determined group. The leader's success does not depend specifically on rank, privileges, titles but includes a high content of responsibility and thanks to the visibility of the function; it is an example for the whole team. In working practice, those who hold managerial positions, possess traits attributable to leadership but also managerial and must both be acted to manage complex situations. For these reasons it is difficult to imagine that the two characteristics can remain distinct without points of contact. Mintzberg notes that in daily practice, based on the various situations that may arise, based on the characteristics of the context and the contingent needs, there is a tendency to balance the characteristics of the management with those of leadership. Some very recent reflections not only confirm the integration of the two roles, but also highlight leadership as one of the essential skills that the manager must possess.

The exercise that becomes necessary for a balanced management activity is to push the behaviors towards the integration of managerial and leadership management constituting a single element. A philosophical current that would tend to the fulfillment of the aspects mentioned above and which could be adapted to the new scenarios of healthcare organizations characterized by professionals with a wide sphere of professional autonomy, is the transformational leadership style.

It is characterized by the behavior considered symbolic of the leader and where the communication, the reference to the values, the activation of the motivation in the collaborators, plays a primary role, considering trust an individual and collective push force. This mode of leadership is summarized in four key points.

- The first concerns individual consideration through personalized communication actions; the second is referred to the stimulation to pour energy into all the members of the team.
- The third aspect refers to the motivation, giving the work a challenging
 meaning for the future and finally, reference is made to the idealization
 that is realized with the example shown by the leader by implementing
 identification and trust mechanisms.

The key figure of movement towards organizational restructuring can also be referred to as the "role of change". A further aspect to be carefully considered so as to represent the first and fundamental phase of the change, concerns the context analysis. Organizational culture is the set of practices, relationships, formalized rules and even more, unwritten ones that constitute the identity of a group. Often the culture of a company emerges clearly only when transformation processes are triggered. The leader of change, must have a lot of consideration, must carefully observe it, with care, through interviews, conferences, moments of listening. If the observation of the culture of a team were carried out superficially, it could trigger some erroneous ways of change that would invalidate the whole subsequent modification process. What distinctive features should the change agent leader is provided with? He must possess both leadership and management characteristics, he must rigorously and carefully analyze the organizational context and it would be desirable that, through motivational

leadership, he can trigger the movement of professionals towards set goals where results tend to be influenced precisely by the style of manager.

DISCUSSION

The new social, demographic and epidemiological scenarios but also the impact of recent technologies, health expectations and the containment of public spending have led health organizations to renew their organizational methods. In current scenarios, there is a need to review organizational mechanisms and clinical/assistance activities in an attempt to respond effectively to the needs of citizens. The tension towards the homogenization of care behaviors, the push towards a better adherence to health paths but also the enhancement of the professionals' skills in a frame characterized by defined economic constraints becomes necessary. The contribution that the leader / manager must push towards the achievement of the required objectives is realized through context analysis, the drive for change and the management of resistance.

No less important, there are the needs of staff both in terms of empowerment and the support of technical and relational skills. In the aforementioned scenario, the change agent must put in place both distinctive characteristics of leadership and management. With respect to the field of action, the leader will have to carefully consider the context in which the change develops and the inevitable resistance that it generates.

The detailed analysis of the environment represents the first and fundamental action that the manager must consider before approaching the modification of the status. In recent years, in the international arena, some leadership and management models have been superimposed, such as the collaborative one which is characterized by a logic based on control and one based on participation, involvement and multidisciplinary. Likewise, transformational leadership also emphasizes the relationship with collaborators by acting on their motivations. The model described by Lussier could be the one most suited to health systems. With regard to organizational change, the contribution proposed by Lussier is very interesting, in which some distinctive aspects of reorganization are indicated, such as the definition, identification of resistances, planning, promotion and control of change.

Nevertheless, it should be remembered that health institutions are complex systems in which not all processes can be traced back to the theory of linear cause / effect. Whether internal or external to the system, a series of responses are generated which are arranged ideally according to a circularity due to innumerable variables involved. In public areas, the task becomes even more complex because, as described by Rebora, they are characterized by organizational inertia and the transformation process could be completed slowly.

The person who is designated to deal with these changes will therefore need to possess leadership characteristics, that is, he must arouse interest, movement, motivation, energy and obtain follow-up. At the same time there is a need for managerial conduct that deals with the achievement of objectives, measurements of performance of training and regulatory aspects. The most recent theories see the two roles as complementary and intersected one to the other so much that they could also be considered interfunctional.

In work organizations, it is necessary to pursue the achievement of objectives previously indicated by the general management, but the leadership qualities become necessary to share, interject with employees the methods of achieving the objectives set.

The management enriched with leadership skills can make employees love their business to the point of making it fun, where people are really engaged in what they do.

CONCLUSION

In recent years, in the socio-health field, frequent organizational changes have been observed to try to respond effectively to the new clinical assistance needs of citizens.

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From the literature and from the experiences of some realities, the need emerges that the age ten of change possesses characteristics of leadership and management, that knows how to read the micro-context of action and is able to identify, manage and if possible overcome the resistances that inevitably they are created.

The leader, who, together with other professional figures, must lead organizational change in my opinion, must enjoy wide autonomy, must possess a clear mandate from the strategic management, must carefully analyze the context variables so as to identify and set in motion the positive energies, and to limit resistances by managing negativity.

Clarity, integrity and consistency of intent in achieving the objectives are also necessary. In organizations, human capital, contributing considerably to determining their success for this reason it is necessary to pay attention to people's needs and act on empowerment. The aforementioned arguments represent the key points of the success of the change leader who is required to be familiar with the use of management tools and at the same time, he must also be able to involve and engage professionals also thanks to his own behavior which must set an example to their employees.

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