Lewin’s Planned Change Theory

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In healthcare, implementing change is important for enhancing patient outcomes, improving efficiency, and adapting to evolving clinical practices. This paper discusses a recent significant change in the primary care setting using Lewin's Planned Change Theory which suggests that planned changes occur only by design (McEwen&Willis, 2022). This essay will explore planning, driving forces, restraining forces, change agents, implementation success, and strategies for improvement related to this theory.

The change I will discuss is introducing an electronic health record (EHR) system to improve documentation accuracy, patient data accessibility, and overall workflow efficiency within the primary care clinic. This was planned to align better care coordination among healthcare providers and the potential for increased data security (Aguirre, R., et al., 2019).

The driving forces behind the change would include regulatory compliance, improved care coordination, and enhanced communication among healthcare providers. However, several restraining forces emerged, including initial staff resistance due to workflow concerns, the perceived learning curve associated with new technology, and having data that is incomplete, misleading, or ineffective along with possible financial constraints related to the implementation of cost and training (Aguirre, R., et al., 2019).

The change agent overseeing this initiative would consist of a multidisciplinary team comprising clinical leaders, IT specialists, and administrative staff. They would manage the EHR rollout's planning, implementation, and evaluation phases. While the change followed a structured plan, challenges during implementation necessitated adjustments. In the unfreezing stage individuals that are involved should be informed of the need for change (McEwen&Willis, 2022). This would take place by preparing staff through training sessions, engaging stakeholders through open forums, and addressing concerns about operational impact.

The change process within the theory was separated into three phases: unfreezing, changing, and freezing. The Unfreezing process involved creating awareness and addressing resistance through education and communication (McEwen&Willis, 2022). The change phase focused on implementing the EHR system, including extensive training and support. The freeze phase stabilizes the change by refining workflows and optimizing system functionalities. Strategies such as early stakeholder engagement, comprehensive training programs adjusted to user roles, clear communication, and strong leadership support could have been implemented to enhance the process.

In conclusion, successful implementation of significant changes in primary care settings, like adopting a new EHR system, requires meticulous planning, proactive management of driving and restraining forces, effective leadership, and continuous staff support. When implementing a new HER within a healthcare setting organization is critical meaning that choosing an effective strategy is key to ensuring successful development and reducing delays (Aguirre, R., et al., 2019). Applying Lewin's Planned Change Theory enables healthcare organizations to navigate complexities, mitigate resistance, and achieve sustainable improvements in patient care and operational efficiency.

References:

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