

Change and transition: What is the difference?

In the current climate of cuts the health service is set to undergo a major overhaul, and the school nursing role is likely to be affected. In this first article, Christine McLean looks at the concepts of change and transition during organizational and/or team restructure.



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Individuals who are affected or about to be affected by imminent restructuring and increasingly reduced budgets, normally feel shocked, resentful, anxious, and stressed for a period of time.

Major widespread changes are ever present in the NHS. Government documents such as *Equity and Excellence* (Department of Health (DH), 2010a), *Commissioning for Sustainable Development* (NHS Sustainable Development Unit, 2010) and the *Quality, Innovation, Productivity and Prevention* (QIPP) agenda (2010), all call for practitioners to work differently; building and developing sustainable partnerships to increase productivity, while maintaining a service which has the patient at the centre of all decisions. The discipline of school nursing continues to be recognized as having vast potential in relation to public health practice, having a robust needs assessment and frameworks to deliver is essential (Lancaster, 2007). The challenge of delivering universalism and staged contacts in the *Healthy Child Programme* (DH, 2009) is ever present for school nurses, as is the continued requirement to ensure public health practice is of the highest standard to achieve:

'taking better care of our children's health and development could improve educational attainment, reduce the risks of mental illness, unhealthy lifestyles, road deaths and hospital admissions.' (DH, 2010b)

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The unclear picture of how provider services will be structured, including the possible requirement to work more effectively within new organizations, is a challenge which highlights the need for structured and robust transition and change management for school nursing services.

Change management has been at the forefront of many leadership programmes, as helping people through structural re-organization, moving teams, changing roles and working differently can all be tricky to manage. There are many models of change management, which draw upon a wide range of disciplines such as psychology, sociology, business and social policy (Iles and Sutherland, 2000).

The effectiveness of change management lies in the hands of the people leading it and also in the hands of the people undertaking the change. Often leaders imagine that the necessary hearts and minds change; the transition process is a 'nice to have' or something that will happen purely because change is happening. The psychological re-adjustment to change is of paramount importance in ensuring sustainability of change. For example, a charismatic leader moves an organization or team forward through changing times, and when the leader moves on, old ways of working and old issues can rise again. Often this is due to incomplete psychological readjustment (transition), as well as the obvious structural or procedural issues. Recent studies highlight that return on investment for effective and sustainable change management has been up to £6.50 for every £1 invested (Change First, 2010).

This article will be in two parts, part one will explore the difference between change and transition during organizational or team restructure, and emphasize why both processes need to be handled differently. Part two will offer practical options and tips on how to handle transition as a separate and interrelated function to change, and emphasize that planning transition as well as change is essential to success.

Change and transition: interrelated and important

There is little doubt that 'if we do what we always did we will get what we always got' and the single biggest obstacle to effectively managing organizational change is the people issues that can arise. During change large or small, managers can spend most of their day dealing with people issues for example an increase in sickness

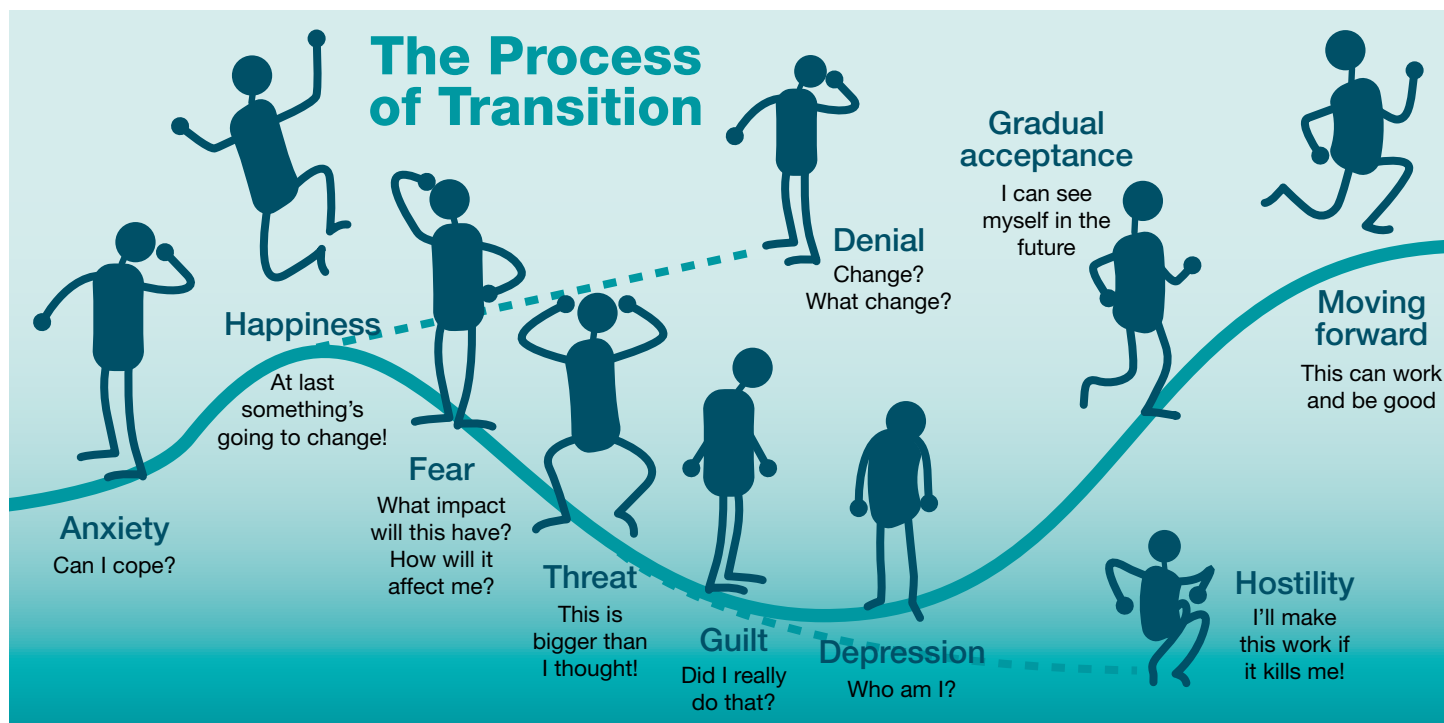


Figure 1. 'Process of transition' redrawn from: Fisher JM (2000: 429)

rates and low staff morale, which is often mistaken for lack of engagement and resistance to the change; however, this is not always the case.

Change is usually situational or physical, for example a new office, new managers coming into post, and mergers of organizations and teams. Whereas transition is the hearts and minds changes that people go through during change; the emotional response and mental adaptation that can help or hinder things moving forward.

Individuals who are affected or about to be affected by imminent restructuring and increasingly reduced budgets, normally feel shocked, resentful, anxious, and stressed for a period of time. This is often due to frustration, partly because the information we require to make decisions is not readily available; many decisions that may affect us are yet to be made, and the time frames for making them are not made clear.

This can result in people becoming less productive or effective in their work, which may be detrimental to maintaining services and gaining commissioners' support.

William Bridges, the founder of the 'theory into transition' (2000) describes three phases of psychological readjustment and reorientation, which he found people undergoing and coming to terms with change go through. The various models of change, Kurt Lewin's model first developed in 1951 (Massarik and Pei-Carpenter, 2002), identifies three stages, he calls these; 'unfreezing' of old ways of working, 'moving' to a new position and 'refreezing' to a new equilibrium. Linking this to Edgar Schein's change model, first developed in 1987, the emotions attached to these three stages mirror the emotions outlined in the above picture; anxiety and disconfirmation of expectations in the unfreezing phase, identifying a new role model and

scanning the environment for new information during the moving phase, and refreezing where a new point of view is created and integrated at a 'concept of self' level. Bekhard and Harris (1987) highlight that understanding where individuals are in terms of transition, is vital to ensuring the capability and readiness of individuals to manage and sustain organizational change.

What is transition?

All transition and change begins with an end, something ceases to make way for the new, or is at least adapted. The next stage is the neutral zone, where neither the old ways are finished nor the new ways completely started. The cycle completes with a new beginning, where new ways are developed and people start to feel a new sense of purpose and a new image of themselves in their role.

John Fisher (2003) developed the transition model further, to encompass some of the emotional perspectives; the types of things people might say or feel at each stage.

The ending

Every change begins with an ending. The ending is a clear signal to people that things are changing and that some, or all, of the 'old ways' will stop. Weick and Quinn (1999) highlight that change occurs regularly in the context of failure of some sort, as feeling that 'someone has not done their job right'. Even though this is often not the case, the context can make a huge difference to people's approach to embracing or resisting change.

People struggle emotionally if there is a lack of clarity about what will be changing and by when. Sometimes there is a lack of clarity from a leaders perspective however to stop the 'rumour mongering' process, which

often fills any information gap, leaders should be as clear as possible that change means different, some of the old ways will stop and as soon as these are known, staff will be informed. It is important at this stage to also give key messages about behaviours expected during the change process. This gives a sense of direction and helps people to start to come to terms with the fact that things are changing (Bridges, 2009).

People need to understand clearly why the change is happening; this will enable them to 'buy' into supporting it psychologically. Research shows that leaders and managers tend to focus up to 90% of their efforts on selling proposed solutions to problems (Change First, 2010). Effective transition requires a clear selling of the problem first, to encourage staff to understand that change is needed and for what reasons, and not just desired.

For example, reorganizing caseloads into a corporate working structure, leaders and managers first need to clearly 'sell' to teams why any previous way of working needs to change; emphasizing first what worked well, and then what didn't work so well about the 'old' way. Helping people to see for themselves that change is needed and why, rather than trying to get them to focus on corporate working per se.

During this stage some people may decide that if they ignore the changes they might never happen, 'carry on as normal', imminent changes are ignored and a change 'blindness' develops. While this blindness is understandable; from a business and professional point of view, during times when teams are required to radically change their thinking on delivery, and devise service frameworks that will deliver what is being asked by the government, this blindness simply cannot be afforded.

Dealing with transition takes more time than to simply develop change plans and redeploy staff accordingly. A transition plan to develop psychological readiness for change may be seen to be a luxury during service re-organization when targets still have to be met. However, without the hearts and minds of the people who are required to undertake the change, any agreement or alteration in working processes or structures will only be surface changes, and will over time, be found to be unsustainable due to lack of engagement or even subtle sabotage. Many organizations, where mergers have been completed years previously, still have teams who work in silos, decision making is convoluted and laboured, and teams duplicate what others have done, or currently do. This reflects an 'everything has changed but nothing is different' scenario.

During the ending phase people are grieving, for example for the loss of:

- Their team members
- Their perspective of potential career progression
- The loss of who they perceived themselves to be connected to their role at work.

People go through the transition curve at different rates, and leaders may have already 'done with' their ending phase, while their staff are just at the brink of starting

theirs; this could inevitably lead to irritation and friction.

It is important to acknowledge that 'old ways' or 'old structures/organization' is what brought the team/organization to where it is now. To denigrate the past totally, alienates people because they connect with how things were, the 'good old days of the old organization' can become rose coloured. Being clear about what was good and equally what is going to change because it did not work and was bad, helps to overcome this. A helpful strategy may also be to help staff feel discomfort with the status quo during this phase of transition, as it helps them to see that moving forward is necessary (Bridges, 2009).

The neutral zone

The neutral zone is somewhere between two places, where the old ways are not finished and the new ways are not yet embedded. During the neutral zone people can feel drained and lacking in energy. The reason the neutral zone needs to be managed effectively in the ever changing landscape of the NHS, is because staff may start to lose focus and become less productive. In the current environment where school nurses must evidence their unique contribution to the health and wellbeing of young people, a continued energy for, and strong focus on meeting the outcomes of government reform is essential.

The strength of the neutral zone is that it brings opportunity for great creativity. Because the old and the new are in a state of flux, chances for new ideas and different ways of thinking can be born. In his latest book, *Managing Transitions* (2009) Bridges says that the road of change may be 'rough and twisty, however, it is passable if prepared for it'

Helping people through the neutral zone is hinged on increasing the dialogue within the organization. Inviting staff to ask questions make suggestions and come up with ideas. Acknowledging honestly that this is a difficult time for people and helping them to see progress by identifying small goals and celebrating their achievement. This not only gives a sense of accomplishment but lays the psychological markers for staff, to show progress and movement through the neutral zone.

This is also a time when leaders need to increasingly role model the expected behaviours of the new organization or team. When people are tired, the old behaviours that were unhelpful in the past, may start to be adopted again. Leaders need to ensure that their own and others behaviour is consistently adjusted and readjusted, to help them do this peer group support can be invaluable at this stage.

The beginning

The true beginning is a time when energy is released by the workforce into a new direction. This is not simply when the new structure is agreed and the offices are moved or the new equipment or manager arrives. These things are the start, the beginning is when psychologically things change for people; for example the beginning is when you automatically ask your new manager for advice, rather

than go to your old manager first for reassurance. When you know where you 'fit' in the new organization or team and you connect to your new identity psychologically.

Bridges (2009) says that people during the beginning phase need the four P's:

- Purpose
- Picture
- Plan
- Part to play.

Not everyone needs all four in equal measure, so when planning for the beginning it is important to cover all four to ensure that each person has what they need to readjust and put the required energy into the new beginning.

Purpose is reiterating the original messages as to why change was required, it is important to adapt the 'why' messages for example communicating that the purpose of a change will impact on something relevant to their role in a practical sense.

The picture of the new beginning is vitally important as it supports the language leaders have used when citing the purpose, Bridges (2009) emphasizes that outlining what the new picture will look and feel like; in other words what people will experience as different is extremely important at this stage.

The plan is spelling out the details of the route to be taken to achieve the priorities. This is not a change management plan but a transition management plan. Change management plans tend to start from the final outcome and then work backwards, step by step, to create the necessary preconditions to achieve the expected end result, a transition plan is much more detailed on a personal level, and starts where people are psychologically and works forward to help them achieve leaving the past behind them.

'A part to play' means being involved with the change process as well as knowing where you fit in the new organization. People can feel left out of the planning process and start to disengage. The benefit of involving team members during transition is this supports increased understanding of the people issues, and will produce more of a focus on problem solving.

Once the new beginning is emerging it is important to symbolize the new identity with a mission statement and vision and values ensuring that the messages are consistent with new policies and procedures as well as organizational priorities. Celebrating the success is often a part of the process which is overlooked; acknowledging that people have undergone changes and are now at a new beginning is very important to complete their transition journey.

Conclusion

Change and transition are intrinsically linked. The management of the two processes is different and in these times of major reform in the NHS, we need to ensure that the psychological readjustment process for people involved in changing teams or ways of working, is managed effectively to ensure that change is sustainable.

A transition plan is more detailed at an individual level

and starts with where people are now in their psychological change journey. It is imperative that transition planning is given separate consideration to change management and that the two plans are effectively linked together. This will ensure that we can achieve the reforms required in school nursing in terms of working effectively in different organizational structures, moving into a visible public health leadership role, which is valued by commissioners, and meeting the challenge of progressive universalism in the context of government reform. **BJSN**

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- Bekhard H, Harris W (1987) *Organisational Transitions: Managing Complex Change*. Addison-Wesley
- Bridges W (2009) *Managing Transitions, Making The Most of Change*. 3rd edn. Nicholas Brealey
- Bridges W (2000) *The Character of Organisations- using personality Type in Organisation Development*. Intercultural Press
- Change First (2010) *The ROI for Change Management: How Change Management makes a Substantial Difference to Project Performance*. www.changefirst.com/blog/2010/10/the-roi-for-change-management-whitepaper-now-available (accessed 22 February 2010)
- Department of Health (2009) *The healthy Child Programme*. The Stationery Office, London
- Department of Health (2010a) *Equity and Excellence: Liberating the NHS*. The Stationery Office, London
- Department of Health (2010b) *Healthy lives, healthy people. Our strategy for public health in England*. The Stationery Office, London
- Fisher JM (2000) Creating the Future? In: Joern W Scheer, ed. *The Person in Society: Challenges to a Constructivist Theory*. Giessen Psychosozial-Verlag, Giessen, Germany: 428–37
- Iles V, Sutherland K (2001) *Managing Change in NHS—Organisational Change A Review for Health Care Managers Professionals and Researchers*. National Coordinating Centre for Service Delivery, London
- Lancaster K (2007) Health needs assessment: a holistic nursing approach. *British Journal of School Nursing* 2(1): 6–9
- Massarik F, Pei-Carpenter M (2002) *Organisation Development and Consulting: Perspectives and Foundations*. Jossey-Bass
- NHS Sustainable Development Unit (2010) *Commissioning For Sustainable Development—A How To Guide For Commissioners*. The Stationery Office, London
- Schein E (2004) *Organisational Culture and Leadership*. Jossey-Bass
- Weick K, Quinn R (1999) Organisational change and development. *Annual Review Of Psychology* 50: 361–86

Key Points

- Change is situational, transition is psychological.
- Managers spend up to 90% of their efforts on selling solutions to problems.
- Without engagement of the hearts and minds of staff, change is not sustainable
- People go through the transition curve at different speeds.