REVIEW ARTICLE

Navigating Strategic Change Process in Healthcare Organizations During Unexpected Crisis

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ABSTRACT

The Radiation Oncology (RO) clinical department is a significant healthcare facility in university hospitals dedicated to treating cancer patients using radiation. Radiation oncology has undergone significant workflow changes, patient appointments, patient scheduling, treatment flow, medical care, and many more to continuously treat cancer patients safely in healthcare facilities during the pandemic crisis. The present study examined the decision-making, change initiatives, implementation process, and post-transition review of these changes in the department of a major university hospital.

In contrast to the usual change initiatives, the executive level made all the crucial decisions with the support of a network of teams and then passed them on to the lower-level employees for quick implementation in the crisis. formulated quickly implemented the formulated decisions, sending the essential communications through various electronic methods. The department performed well in this change initiative/ process, allowing patients to continue radiation treatments by taking the necessary steps to tackle the crisis effectively. The department revenue was reduced over the period, and no employee lost their job due to the effective involvement of the management from the beginning of the crisis. Many employees were allowed to work from home, implemented telehealth programs for patient consultations, and provided patients with specific appointment times for radiation treatments. These steps considerably reduced department traffic to control viral spread issues successfully.

Introduction

Hospitals and healthcare systems are confronting unprecedented financial and tremendous clinical pressures due to the pandemic coronavirus disease 2019 (COVID-19)[1]. The event created significant disruptions in the community, primarily related to the healthcare delivery systems. Several challenges in healthcare have been identified, including delivery system transformation, costs and transparency, data and analytics, consumer experience, payment system, healthcare policy, privacy/security issues, inter-operability/consumer data access, and many more[2]. According to the United States Centers for Disease Control and Prevention (CDC), patients with any cancer are known to be at an increased risk in case of viral infections like influenza, COVID-19, etc., due to their continuous immunosuppressed state[3]. Radiation oncology (RO) clinics enhanced safety protocols, social distancing, masks for patients/staff, increased sterilization, face shields, screening for COVID-19 exposures, and established no-visitor policies in the clinics to tackle problems related to the pandemic effectively[4]. In addition, the department was also running with many other COVID-related issues like shortage of PPE kits, postponing treatments, and treatment interruptions; however, telemedicine/ e-health remains effective at some point[5].

A re-arrangement or a department change process is necessary to effectively maintain the departmental normal function and tackle pandemic issues in healthcare organizations[6]. Some of the change initiatives and risk mitigation strategies specifically for RO in pandemic crises are provided in an earlier publication[7]. Several changes were imposed in the RO department, including treatment delays, schedule alterations, or rescheduling appointments, were used to tackle these issues and implemented enhancements for staff/ patient safety against viral exposures[8,9]. The clinical department has undergone several significant changes to continuously treat cancer patients safely in healthcare organizations during the COVID-19 pandemic. The present study aims to examine the change initiatives and implementation process and analyze the effectiveness of these changes in an RO department of a major university hospital.

Material and Methods

University hospitals are tertiary healthcare organizations that aim to serve patients and communities by integrating outstanding patient care, education, research, and community partnerships[10]. This retrospective study involves no patients, so institutional review board approval is not required. The RO of the hospital is a significant healthcare facility intended to treat cancer patients; however, the department has undergone several significant changes during the COVID-19 pandemic crisis to tackle various related detrimental issues successfully[11] without disturbing cancer patient treatments.

Implementing a change or a change process usually requires several phases[12], including decision-making, a preparation phase, formulation of an internal communication plan, implementation, training programs, and evaluation of the program's success; however, they cannot respond as quickly as they would in a routine

emergency in this crisis. All healthcare-related businesses operate under pressure as the pandemic crisis spreads; the organization formulated a network of teams with senior experienced members who could handle the issues immediately and execute decisions in chaotic conditions. Several factors could affect the levels of stakeholder engagement and negatively impact the implementation of a new system. The factors include confusion about changes, uninformed changes, worry about more initial work, frustration due to the lack of training, unawareness of the new system, etc., creating implementation problems. Excellent communication with stakeholders is a must in organizational change during a crisis.

Proper communication between the leaders and the employees is essential for the success of the organizational change process. Some administrative changes are well-planned, but others are managed using minor tweaks depending on the situation. A small percentage of employees in the organization may think a change initiative is an annoyance; they may have difficulty coming up with the organizational changes, negatively impacting the changes. According to the Harvard Business Review[13], about 70% of corporate change projects fail due to the lack of proper communication between leadership and employees with the right message to the right people at the right time. The leaders must communicate effectively and answer the following questions for a successful change initiative. a) why is this change necessary, and why is it now? b) what is the full extent of the needed change? c) if we do this, what result should we expect? d) How do we know we have made the expected improvement? e)

what is the link between this change and the previous strategies?, and many more. Before the decision-making process, the leaders collected necessary information from the departments and invited staff feedback to smoothen the procedure. The decision-making authorities considered the organizational, financial, clinical, and management perspectives to decide on a change. Authority, power, and leadership are the three essential elements of management in which the authority has the right to make decisions and give orders or directions to others for the betterment of an organization. Power is the individual ability to do something necessary to perform in a specific manner[14]. Leadership is usually referred to as an act of leading a group or an organization, and it is a process of influence used to maximize the efforts of team members to achieve specific goals[15].

Results

Team leaders and employees must instantly adapt to novel working and communication methods in a crisis. If there is an unexpected crisis, the leaders immediately initiate responses; however, they cannot respond as quickly as they would in a routine emergency in this crisis. The actions differed several times even after numerous discussions since this is not just a temporary move, e.g., work from remote places. Several other adjustments were also adopted, such as introducing new tools, technology, software-related changes, communication tools, direct collaborations in the ongoing practices, and many more, which can be beneficial even after the crisis. The executives at the highest level of organizations could not formulate decisions immediately to respond to the current crisis;

they needed to gather information from the employees to move forward effectively with decisions. Leaders set clear organizational priorities, mobilize employees to face the crisis, and encourage implementing solutions quickly to tackle crisis-related problems when they arise[16]. The senior executives are responsible for rapidly forming an architecture of decision-making network teams to support accountability, quick decisions, and implementation. The department has continuously reviewed its short- and long-term strategies without wasting time. The change initiative decisions originate from the top hospital authorities, CEOs[17], heads of the department, and leaders; they have the ultimate power to formulate decisions in an organization[18]. The department managers and administrators are good contact points to know the latest decisions, clarifications, solutions, etc. The decision-making process should be immediate, and there should not be a time delay in the decision-making process during a crisis. Institutions decided that some employees could work from home or a remote workplace whenever/wherever possible[19], which has become the new norm even after this period. The department must act instantly and implement numerous changes with no smooth transition, which are highly challenging for employees/ leaders and occasionally negatively affect department functioning. A change initiative implementation in the RO influences workflow, workplace, offices, administrative activities, treatment type/ devices, patient data network, computer networks, and many more. It is crucial to consider the emotional impacts on the stakeholders during a change while

encouraging employees to adapt to a new system that supports the project. The work team members should be fully involved in the process and feel they are part of the decision-making process; moreover, the valuable feedback from the members should be considered fully throughout the consultation initiatives.

The steps to improve employee adaptation to changes:

The organization has taken several steps to engage stakeholders and enhance employee adaptation to a change process.

A) ENGAGE STAKEHOLDERS: Proper communication with the stakeholders is necessary before a change; extensively communicate with them the advantages of the change, including job ease, future facilities, better patient support, newer technology, implementation, etc. Communication can be in different ways, such as emails, notices, meetings, discussions, presentations, etc. Understanding the stakeholder community is particularly important before going for an organizational change. All employees are not equally relevant to a given change; therefore, prioritizing the needs of critical stakeholders is necessary. Spending excessive time trying to influence powerless staff is just a waste of time, so it is essential to prioritize the needs of identified stakeholders. Once key stakeholders have been identified, arrange an initial exploratory conversation about the incoming changes and engage with them using various meetings. The final goal is to directly explain the change initiatives in detail and speak to the change objectives and process. Developing a change plan with a

close partnership with stakeholders goes beyond hours or days but requires input before formulating a change project. Appropriate training is mandatory for stakeholders to respond correctly during a change. Holding town hall meetings encourages employees in healthcare organizations to attend conferences and offers opportunities for questions to create excellent results. It also helps employees to be accountable for following, making their voices heard, making individual changes, etc. can be accomplished.

B) CREATE A CHANGE MANAGEMENT PLAN: Employees usually adhere to the status quo since a change is uncertain. According to Lewin's change management model[20], the first step is to unfreeze the company. In this process, everyone understands that a change is inevitable, and several different communication methods are utilized to announce a change. Formulate points to determine why the change must happen, convince the key stakeholders about the necessary changes, and correctly address any concerns or complaints the employees might have. In the change process, develop an organization improvement process, communicate with stakeholders about how the changes benefit the organization, ask stakeholders for feedback, analyze suggestions, apply improvements in mall scale, measure results, and adjust until the change delivers positive results.

Excellent leaders gather most of the information from the department about the patient treatment flow before initiating a change process in the RO department. What will happen if this flow is interrupted? How does this update change the work of the employees? Who was affected more? Workload?, and many more. Then, ask for interviews with the stakeholders to find potential areas of improvement/ change. An extensive survey should gather maximum information by including all employees and recording concerns, requirements, current situation, etc. Tabulate and examine this information before taking a decision process, then communicate this information with the stakeholders to convince them of the advantages of a change.

C) IDENTIFY CHANGE AGENTS: The department chair, administrator, chief executive officers, chief therapist, chief dosimetrist, and chief physicist can initiate a change in the RO department. Based on Lewin's change management model, employees are on board with the change initiative, and the leader leads the way. The communication function is usually controlled by the leader or any person who can responsibly take this role well with the aid of a leader. The chief physician, chief physicist, or administrative director of the department can best perform this communication function to communicate to employees about the change process across the organization.

D) SET A COMMUNICATION PLAN: Proper communication with the stakeholders is a must before initiating a change, and three basic steps can be used to begin a change process in the department. Recognize the stakeholders first, then identify the employees affected by the change, dedicate regular face-to-face interactions and email communications to keep employees updated on progress, and finally, communications should clearly explain the change process (state the reasons for a change, present the benefits of the change,

and include contact information of the leaders). Effective communication supports team members in building strong relationships and positively contributes to the overall growth and culture of the organization. A regular meeting with employees helps improve communication and collaboration; unclear communication results in delayed projects, so ensure the communication includes detailed instructions for every task or project. Create an open environment to ensure the team members feel comfortable communicating, arrange one-on-one meetings with each team member to express their performance/struggle and betterments (spend time for one-on-one), and receive feedback from the members (open to feedback) in two-way communications.

The change initiatives in the RO affected the work of almost all employees in the department, including physicians, managers/ administrators, administrative staff, nurses, therapists, physicists, dosimetrists, and residency fellows. The top hospital authorities, leaders, and CEOs made the final decision quickly about the changes during this crisis in contrast to a usual change initiative. A department manager or administrator was a good contact point for all employees to get information about the changes and implementation procedure. The decision-making process was immediate, and there was no delay in implementation during this critical period. The employees and team leaders instantly adapted to the new communication methods, changing situations, and working conditions. Implementing a change in a normal situation requires several phases, including a preparation phase, a proper

internal communication plan, training programs, and an evaluation phase of the program's success. An organization's mission, vision, values, and strategies can enormously influence a crisis, providing focus and direction while making decisions. Many historical examples show how past leaders successfully navigated turbulent waters and brought them back on track to achieve the organization's vision. Regarding long-term vision, the leaders think like owners and use values to guide formulating decisions; moreover, other factors such as creativity, empathy, humility, adaptability, and employee needs are all important and should be addressed appropriately.

Discussion

Several points need to be addressed while implementing a change in healthcare organizations (e.g. financial, clinical, organizational), and the change can be either positive or negative based on many affecting factors[21]. The quality of the implementation process directly affects the definition of goals, leadership quality, alignment, time, identification of resources, agility, approval process, fear/ conflicts, employee resistance, communication efficiency, team alignment with new strategies, change management practices, and many more[22]. Good communication with employees is mandatory to implement changes and achieve organizational objectives successfully. The employee's extra efforts for this should be rewarded, and the leaders should ensure appropriate support and incentives to facilitate the implementation process effectively. Continuous engagement

with employees is necessary, and leaders must understand that employee resistance is human nature, which needs to be superseded to prepare for sustained innovation. Executive leaders created a panel of experienced groups/ teams and encouraged them to engage continuously with employees, discussed the pros and cons of change initiatives, and then planned steps to make a change a reality. Leaders used technological tools to improve internal communication with employees[23], and they facilitated video conferencing to communicate with employees remotely during the crisis. The department used project management tools to support the managers in planning, organizing, tracking, and progressing various tasks in a visual, collaborative space. The institution used Microsoft Teams, which offered the team members quick and effective instant communication channels[24].

There was consistent communication from the executive levels through multiple channels, including speaking (numerous town hall meetings), emails, videos, writings, focus group meetings, training, bulletin boards, and intranets, which explained more and more about the changes to the lower-level employees in the hierarchy. Communications related to the crisis were performed with the employees as quickly as possible when the information was available; however, the communications were held until they were optimistic about the decisions, the goals, and the progress. The leaders dedicated a significant amount of time to discussing, asking questions, requesting clarifications, and providing inputs to the employees; moreover, they presented the changes to large groups via overhead transparency, and

employees felt involved in the changes. Active employee involvement in the projects created essential commitments during a change process, especially in a crisis. Reinstating organizational mission, vision, and objectives is necessary to support reasonable management change efforts, and they must understand how these changes affect them individually in their jobs[25]. Leaders cared about communication as this was an honest discussion between leadership and employees. Frequent communications related to the reasons for change initiatives are necessary to understand the context, the purpose, and the current need. Leaders maintained honest communication and did not provide incorrect information, stumble, or back-peddle while answering. The organization conducted interactive workshops and forums where employees felt the changes together and learned more; moreover, the organization publicized rewards/recognition for positive approaches and accomplishments in the changes and change management. Most of the employees in the organization responded well to these changes, and the change during the COVID-19 pandemic crisis became a big success.

During this change process, every moment was accountable until it reached a milestone. The teams continuously evaluated the change progress and frequently reported to the CEO. If issues persist, appropriately communicate these to other groups and proper vendors to take appropriate action. In that case, they can immediately start working on resolving problems and establish the status quo to avoid delay or disruption. The last stage of Lewin's change management model is refreezing[26], which supports transforming the

selected changes into a new status quo. To ensure all employees are sticking with the latest methodologies, the leadership rewarded certain employees based on performance and incentivized them in some cases.

PROBLEMS ADDRESSED DURING THIS CHANGE:

Based on the "BCG matrix analysis[27]," the RO department was a "Cash cow" until the start of the pandemic crisis. Cash cows are the most profitable department in the hospital and were milked to generate as much cash as possible. Radiation treatments and cancer care uniquely face challenges between safeguarding the vulnerable patient population from COVID-19 and providing essential treatments promptly so that they do not compromise cancer treatment outcomes. Patient cancer cure is directly connected to the patient's age, performance status, immunosuppression, socio-demographic, and treatment-related factors[28]. The department rapidly implemented workflow adaptations/ alterations while contemplating major questions during this crisis. Questions such as What is the best way to prevent viral exposures? What is the optimal timing for delivering radiation therapy? How do these changes in clinical decision-making affect the department's future? and many more. The department discussed these questions thoroughly and formulated decisions that were implemented immediately to overcome a crisis. To reduce the spread of the coronavirus, discourage departmental visits to patients, urge the use of hypo-fractionated treatment regimens (considerably reduced number of radiation treatments by increasing radiation dose per day), and expand telemedicine facilities for consultation

purposes. Due to these applied adaptations, the department did not always maintain adequate staffing levels in the healthcare facility; instead, it received suitable support from the remote staff. The department reported increasing expenses with a revenue reduction that threatened financial viability. The department ceased elective procedures and other services, causing decreased revenue, while departmental expenses and costs have increased due to additional facility orders. The department tried to overcome the financial crisis by adapting adequate alterations and maintaining its position in the healthcare market by taking complex measures such as assigning additional responsibilities to the existing staff, ceasing new appointments, adding new treatment facilities to the patients, and many more. The organization's mission statement explains why an organization exists in terms of its function and how it impacts the external community[29]. The leaders can independently adjust the organization's mission and vision by demonstrating curiosity, creativity, and adaptability during a crisis. Many organizations use mission statements to show a shift of current focus and get back on track to the longer term[30].

Conclusion

The Radiation Oncology of the university hospitals has undergone significant organizational changes during the COVID-19 pandemic crisis to continue cancer patient treatments in the department. Most decisions were formulated at the hospital executive level with the support of network teams and then passed on to the lower-level medical employees for implementation. Due to the

high pandemic emergencies, the change process was quickly implemented, and employees received information through telephone, emails, and other electronic communication methods. Many changes happened quickly, and it was difficult to predict the outcome of these changes immediately since the pandemic was ongoing. The department responded well to the change initiatives, continued radiation treatments, and took all necessary steps to supersede pandemic-related issues effectively. The department revenue was reduced, and no employee lost their job due to the effective intervention of the management team from the beginning of this crisis. Many employees worked remotely, telehealth programs were implemented for patient consultations, and specific appointment times for patient radiation treatments in the department were provided. These steps considerably reduced department traffic to tackle pandemic issues successfully and provide radiation treatments to cancer patients.

Conflict of Interest:

None

Statistical analysis:

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Data availability statement:

Data generated and analyzed during this study is included in this article.

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