



RESEARCH ARTICLE

Healthcare Leadership: Leading Organizational Change Management for Radiation Oncology Practices

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ABSTRACT

Leading the organizational change process in healthcare requires a clear vision, effective communication, and deep involvement. The team leaders effectively lead the proposed organizational changes that begin from the top executive level, involve organizational layers, engage stakeholders, perform assessments, and adapt the changes as a new norm.

Experienced leaders gathered various decision alternatives from numerous communications with the stakeholders and rapidly implemented the workflow adaptations efficiently in oncology practice organizations. They identified multiple attributes of alternatives for cancer patient management in healthcare institutions without compromising treatment outcomes. Good leaders easily recognize and exclude information bias influences to eliminate impacts on decision-making. Healthcare executive members, leaders, administrators, managers, physicians, physicists, and nurses are reliable sources of information for change management in oncology.

Various business analysis models, such as SWOT analysis, Porter's five forces framework, FMEA, etc., can measure organizational strengths, weaknesses, opportunities, and threats. Conducting detective and preventive actions helps reduce the accepted risks' impacts on radiation oncology practices. An excellent action plan can be used to compare the completed system process to its initial requirements and directly support fostering enhancement efforts by steering actions. Task analysis helps track the follow-up actions to achieve final objectives, and continuous monitoring is considered a valuable feedback tool.

Keywords: Healthcare leadership, Change management, Leader communications, Decision alternatives, Radiation Oncology

Introduction

Most change efforts begin with various reasons, such as some vital organizational individuals looking at their competitive states, market status, potential revenue decline, financial performances, or technological trends of healthcare organizations¹. They quickly communicate novel information internally concerning great opportunities or crises on time. A transformation change program needs employees' extensive cooperation and motivation², and the leaders execute strategies to transform the healthcare organizations into a better landscape to overcome challenges³. The change process involves a series of phases, which usually require considerable time duration, and skipping some steps creates an illusion of speed but never produces desirable results. Leaders use several steps to initiate a change process, such as displaying a sense of urgency, creating a guiding coalition, formulating a strategic vision, creating a volunteer army, enabling action by removing barriers, generating short-term wins, sustaining acceleration, and organization change. Critical mistakes in any of these phases may devastate the efforts of a change process, slowing momentum and negating gains. Most change management projects adopt a more emergent, empowered, and purpose-led approach, but the failure rate for transformation projects remains high⁴; however, the leaders want the change efforts to go faster, encounter less pushback, and produce novel sustainable outcomes⁵. The effectiveness of a significant change in organizations depends on the primary need and the unconscious dynamics of existing organizational behavior.

Leadership is significant in guiding organizations, managing teams, identifying challenges, introducing changes, and maintaining the status quo. Healthcare leaders should have a clear vision, effective communication, and deep process involvement from the first to the last step of the organizational change process. Excellent team leaders effectively lead organizations in a change management process that begins at the top executive level, involves various organizational layers, engages stakeholders,

performs assessments, and adapts changes to the norm. Organizations constantly evolve and adapt to multiple challenges daily, including changes in technology, regulations, the rise of new competitors, changes in laws, economic trends, and many more. Many healthcare businesses today depend on the success of adaptations to changes; otherwise, it could lead to stagnation, worse, or failure. About fifty percent of reported organizational changes were unsuccessful due to various reasons in the change management process. Leaders must ensure the entire organization navigates transitions smoothly during the change process by assessing the potential impact of the changes and preparing the teams accordingly to succeed. The team leaders should ensure everyone in the organization is on the same page, create a safe environment, and engage the team toward a common goal. This article describes practical approaches for healthcare leaders to lead the organizational change for various oncology practices in major cancer centers. The study intended to systematically review the literature on the role of healthcare leadership in leading organizational change processes in cancer treatment practices. A literature search was performed in various electronic platforms such as Google Scholar, PubMed, MEDLINE, and medRxiv from 01/01/2024, and the search strategy used keywords such as healthcare leadership, change management, leader communications, decision alternatives, radiation oncology, etc.

1) HEALTHCARE ORGANIZATION CHANGE INITIATIVE

The radiation oncology section of the primary cancer centers initiated several internal changes during the onset of the COVID-19 pandemic to provide safe medical care to cancer patients, and the situation's impact on cancer care was immediate^{6,7}. Healthcare businesses and services have been under pressure during the pandemic in the last couple of years⁸⁻¹⁰, and the department has instantaneously reviewed short and long-term strategies without wasting time. Many institutions prefer employees to work from home or a remote workplace whenever/ wherever

possible, which has become the norm today¹¹. The department acted fast and consequently implemented numerous changes with no smooth transition, which was challenging for employees, leaders, and associated functions. Implementing a change typically requires several phases, including a preparation phase, formulation of a proper internal communication plan, training programs, and evaluation of the program's success; however, the team leaders and the employees instantly adapted to the work alterations and the novel communication methods in these uncertain periods.

An organizational change can be positive or negative depending on many parameters, and several employees may resist new change initiatives for several reasons. Stakeholder concerns should be addressed before implementing a change in the organization, including a timely definition of goals, leadership quality and alignment, resources identification, agility and approval process, fear and conflicts, resistance to change and lack of commitment, communication efficiency, team alignment with novel strategies, and change management best practices¹². People onboard can use some ideas to discuss and support the upcoming changes, including engaging stakeholders, preparing staff to sustain the innovation, allocating resources effectively, and planning a panel.

2) PRIORITIZE GOALS AND CREATE ACTION PLANS

The top hospital authorities, leaders, and CEOs formulated decisions for a change initiative, which was effective immediately during the pandemic. The department chair, managers, and administrators were good contact points for the updated information to the employees. An organization's mission, vision, values, and strategies can be enormously influential in providing focus and direction, especially during a crisis¹³. These four points guide the leaders forward to adapt to a short-term situation. An effective vision statement is inspirational and forward-looking, which nicely paints a picture of the organization's future. An organization's strategy should include short- and long-term goals and explain how different

actions will achieve those goals. The strategy focused on current actions and outcomes required to move closer to achieving the stated mission.

3) WHAT ARE THE TYPES OF CHANGES, AND WHO WILL BE AFFECTED?

Internal and external changes are the two main change influencers identified in an organization. The internal modifications affected all internal stakeholders, including physicians, managers, administrators, administrative staff, nurses, therapists, physicists, dosimetrists, and residency fellows. The pandemic has changed many treatment practices, including the treatment workflow, workplace, offices, administrative activities, treatment devices, patient data networks, computer networks, etc^{14,15}. Moreover, it is critical to consider the emotional impacts of the stakeholders during the change process when encouraging employees to adopt a novel system that supports the project. Several factors could negatively impact stakeholders' engagement levels, and those should be avoided. The factors include confusion related to the changes, potential impact on employees' jobs, uninformed change, more initial work, frustration due to lack of training for the use of new technology, unawareness of the value of a new system, and many more potentially negatively affecting employees. Excellent communications with stakeholders and consultants are essential¹⁵; the entire team should be fully engaged in this process and include stakeholders in the decision-making process. Regular feedback from the employees should be considered throughout the change process, and several steps can be taken to engage stakeholders in these change processes, such as improved communication, understanding the stakeholder community, prioritizing critical stakeholder needs, aligning objectives, developing partnership plans, providing adequate training, and conducting town hall meetings.

External factors, such as social, political, economic, or technological, may affect organizations' change process. For instance, a new technological development/ software update announcement affects everyone in the radiation oncology department,

including physicians, physicists, dosimetrists, nurses, administrative staff, front desk employees, etc. Some essential steps could help improve employee adoption of these changes, including turning new tech launches into events, keeping new tech on stakeholders' radars, providing ongoing training opportunities, and establishing communication channels.

Consistent communication between the leaders and the employees is crucial for the success of a change initiative in organizations¹⁶. Some organizational changes are well-planned, but others are managed using minor tweaks. Some organizational employees may think a change is negative, annoying, angry, and panicky, and they may have difficulty coming up with organizational changes, which negatively impacts the changes. The leaders should communicate well with stakeholders' questions aiming for a successful change¹⁷. There was frequent, consistent communication from the executive levels through multiple channels, including speaking (multiple town hall meetings), emails, videos, writings, focus group meetings, training, bulletin boards, intranets, and many more channels regarding the changes¹⁴. The healthcare leaders dedicated a significant amount of time to discussing, asking questions, requesting clarifications, and providing input to the employees; moreover, the leaders presented the topic to large groups via overhead transparencies, and employees felt involved in the change process. Active involvement in the process creates an essential commitment during a change process. Clear communication regarding the changes' vision, mission, and objectives is necessary for a reasonable management change effort. The leaders maintained honesty and consistency in providing information, and the organization conducted interactive workshops and forums where employees felt the changes together while learning more. In addition, rewards and recognition were offered for employees with positive accomplishments. Effective communication supports team members in building strong relationships and positively contributes to the overall growth and culture of the organization. The most effective communication

strategies during implementing a change are meeting employees regularly, providing clear instructions, creating an open environment, spending time one-on-one, and being open to feedback; however, these methods are not always possible, especially in a pandemic crisis. Enabled video conferencing to communicate with remote team members in this pandemic crisis and used project management tools to allow managers to plan, organize, and track the progress of the team's activities and tasks in a collaborative space; for example, Microsoft Teams, which offered quick and effective instant communication channels for the team members.

4) CREATE A CHANGE MANAGEMENT PLAN

Collect and update information (Unfreeze): Employees often try to adhere to the status quo since a change may bring uncertainties and difficulties, at least in the short term. According to Lewin's change management model^{18,19}, the first step is to unfreeze the organization by making everyone understand that change is inevitable. Several communication methods can be utilized to announce a change, and a survey would help to understand the status quo of the organization, which would very much support a change process in a way to formulate points, the necessity of a change, convince key stakeholders about the necessary changes and address employee concerns. A change process brings development to the organization, communicates to stakeholders about how the changes benefit the organization, collects stakeholders' feedback, analyzes the stage, implements feedback suggestions, applies improvements, and adjusts until the change delivers positive results. A survey was conducted, including all the employees in the department, recorded concerns, requirements, current status, etc., and tabulated information for analysis. Communicated this information to stakeholders and convinced them that a change is unavoidable due to formulated advantages.

Identify change agents: The department chief, administrator, chief executive officer, chief therapist, chief dosimetrist, or chief physicist can trigger a

change process in the radiation oncology division^{20,21}. Based on Lewin's change management model, this is the experimentation stage, in which employees are on board with the change initiative, and now all you require is to lead the way. The communication function is usually controlled by the leader or any responsible person who can take this role with the aid of a leader. In Radiation oncology, the chief physician or a senior administrator can best communicate the change across the organization.

Set a communication plan (Change): The communication process has three essential elements. First, the stakeholders, those impacted by the change, should be recognized, and then regular face-to-face interactions and email communications should be dedicated to keeping employees updated on progress. Thorough, consistent communication is required, and the communication should explain clearly the change, including reasons, benefits, and change owner's contact information. Communicate with them the advantages of this change, including job easiness, future facilities, better patient support, new technology, implementation, etc. Communication can be performed in different ways, such as emails, notices, meetings, discussions, presentations, etc. Conducting a town hall meeting before a change is an effective way to engage employees, offer opportunities for questions, address their concerns, and answer all questions obtained during the survey. The town hall also holds employees accountable for attending if they want their voices heard and improving individual changes. The change plan addresses different types of uncertainty that may be encountered once a change process is initiated.

Set milestones, evaluate, and course correction (Refreeze): Every moment is accountable until reaching milestones during this change process. The change progress assessment evaluates what works well and where the issue is. If problems persist, a previously assigned communication method can be used to communicate information related to the problems with other group members and stakeholders; they can immediately act to help

resolve issues and establish the status quo. The last stage of Lewin's change management model is refreezing, which transforms the established changes into a new status quo. Leaders can incentivize or reward employees based on the organizational approach to ensure all employees stick to the latest methodologies.

Manage progress and celebrate success (Refreeze): Milestones is the term that describes a method to estimate the required time more accurately to complete a project²², and the current phase of a milestone will not start until the completion of a previous phase. Milestones are highly beneficial because they display the completed significant phases of a project based on the plan. We can deliberately inform the stakeholders about the status of the process if the milestones were reached as planned or if there were any delays. It is always better to supply unhide facts to employees if there is any delay in meeting milestones. When managing projects, transparency gives stakeholders a sense of status and trust in leadership. Project reporting reflects the status of the change process, generates a status report, and shows the overall health of the change process. The status report displays the changes and their impact on the project, then works towards getting back on schedule. Generate more reports to track progress to reach the next milestone and to confirm the correct track. It is essential to acknowledge the efforts of stakeholders in the project and celebrate milestones with them, making them more productive and showing eagerness to achieve common goals. There are many ways to celebrate success within the organization, by providing letters of appreciation, certificates of appreciation, etc.

5) IDENTIFY DECISION ALTERNATIVES

Cancer care uniquely faces challenges between safeguarding vulnerable patient populations from COVID-19 and providing essential treatments promptly so that they do not need to compromise cancer treatment outcomes²³. Patient cancer cure is explicitly connected to the patient's age, performance

status, immunosuppression, socio-demographic, and treatment-related factors. Even in normal circumstances, patients are immune suppressed due to the disease during diagnosis²⁴ and various cancer treatments, including radiation therapy, chemotherapy, immunotherapy, and surgery²⁵. It is imperative to protect all patients (and staff) from the pandemic's spread so that they can continue their treatments and achieve positive results. Leaders quickly adopted basic principles such as safety, avoidance, rescheduling, and shortening to reduce pandemic impacts²⁶. Several practice guidelines recommend optimizing resource usage and maximizing safety in radiation oncology practices²⁷⁻³². The organization rapidly implemented workflow adaptations/ alterations while contemplating major questions to surpass challenges from this healthcare crisis.

In normal circumstances, a change in workflow for cancer diagnosis and treatments is not recommended, and the rules and regulations were

amended to protect the patients, employees, and everyone from the pandemic³³. The cancer center conducted multiple discussion sections to deliberate novel designs and explore possibilities to eliminate/ reduce viral exposures and deliver proper treatments to patients. Workflow alterations directly affect patients' treatment quality; therefore, prior approval from the scientific committee, ethical committee, subject expert association, top management, etc., is required in standard scenarios. It is challenging to adjust patients' treatment regimes in a normal situation, and detailed deliberation is necessary to accommodate the current situation. Several question-answer sections are involved in this decision-making process, including the best ways to prevent exposure and the optimal timings for delivering radiation therapy treatment. How do these changes in clinical decision-making affect the department's future? Many more such questions were deliberated and thoroughly discussed in the cancer center before formulating a decision. The primary phases of deliberation are shown in figure-1.

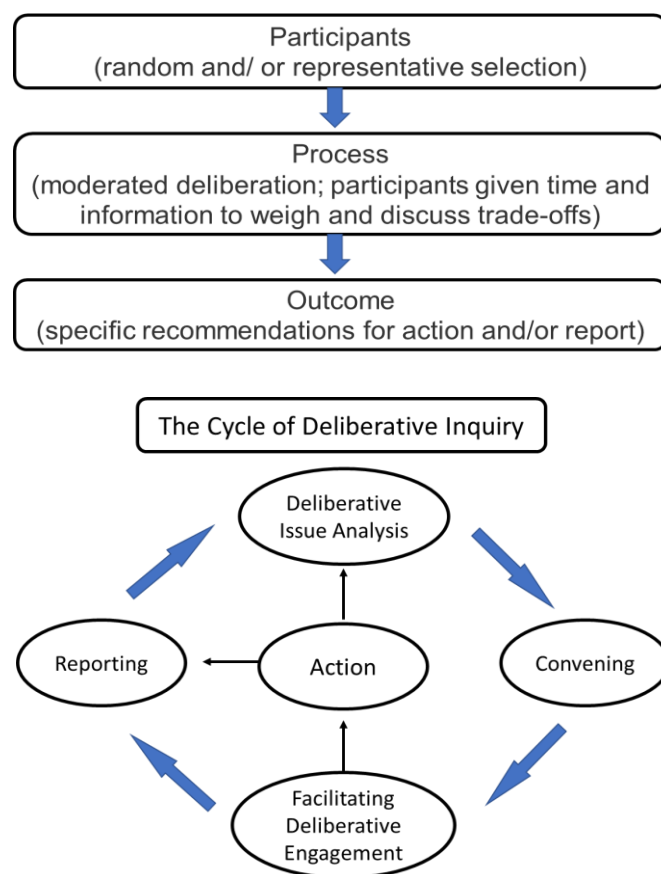


Figure 1. Detailed deliberation is necessary to make changes in the treatment regime of cancer patients and to face the challenges posed by the pandemic situation. The basic steps of the deliberation are provided in Figures 1A and B below.

Alternatives adopted: To prevent potential spread, reduce departmental visits and urge using hypofractionated treatment regimens (considerably reduced number of treatments by increasing radiation dose per day) whenever possible based on the clinical status and increased use of telemedicine^{34,35}. The department ceased elective special procedures and other services, causing decreased revenue while departmental expenses have increased. Assigned additional responsibilities to the existing clinical staff, avoided new appointments, and added new patient treatment facilities to improve the organization's financial status.

6) IDENTIFIED ATTRIBUTES OF ALTERNATIVES

Alternative 1: The essential attributes are patients can reduce treatment visits by adopting hypofractionated treatment option^{36,37}, increase the use of telemedicine instead of a direct physician consultation, treat the Covid positive patients in the evening after all patient treatments, and use the service of one therapist for all Covid positive patient's treatments to reduce spreading. Moreover, physicians suggested treatment delays for some patients based on clinical conditions as an alternative³⁸.

Alternative 2: Cease elective special procedures and other non-essential services (may decrease departmental revenue and increase expenses), measure body temperature for everyone who enters the department to confirm no one has fever, and insists on using masks in the department for safety.

Alternative 3: Assign additional responsibilities to the existing clinical staff, avoid new staff appointments to improve the financial status of the department, add new treatment facilities to the patients to enhance organizational economic status, and instruct each patient to maintain appointment time for treatment, which helps reduce crowd in the department during workhours.

There are two main approaches to ensure essential health services by optimizing the use of the existing healthcare workforce. Task shifting and sharing

methods permit tasks to move from highly qualified healthcare workers to less trained ones. Sharing tasks with an equally qualified employee or highly skilled health worker supports essential departmental functions. These methods efficiently support utilizing available employees in overburdened health systems during the pandemic. Furthermore, these strategies could help protect and maintain the health of the healthcare workforce by decreasing workload and strategically using the workforce. As a new alternative, management suggested suspending new employee recruitment due to the pandemic and financial issues. Assigning additional responsibilities to the existing clinical staff³⁹, avoiding new appointments, and adding new treatment facilities to the patients support improving the department's financial status. Added new alternative attributes such as using face masks in the department, strict measurement of body temperature for everyone who enters the department, sending employees for 14 days mandatory quarantine if they turned positive, and allowing transport of positive patients end of the day after all treatments completed for radiation treatment, etc. could go a long way to fight against the pandemic spread.

7) CAUSAL MAP AND INPUT ANALYSIS

Several uncontrollable influences were identified, such as the local government policies, turning COVID-19-positive staff members, the COVID-19 surge in the local area, and vaccine effectiveness in the future. An example of a casual map is provided in Figure 2. Physicians in the department are the best sources of information; professional associations related to healthcare and oncology are the best⁴⁰. Recent health-related journal publications have also provided readers with essential data⁴¹. Hospital executive members, administrators, managers, physicians, and nurses are reliable sources for additional information related to the situation.

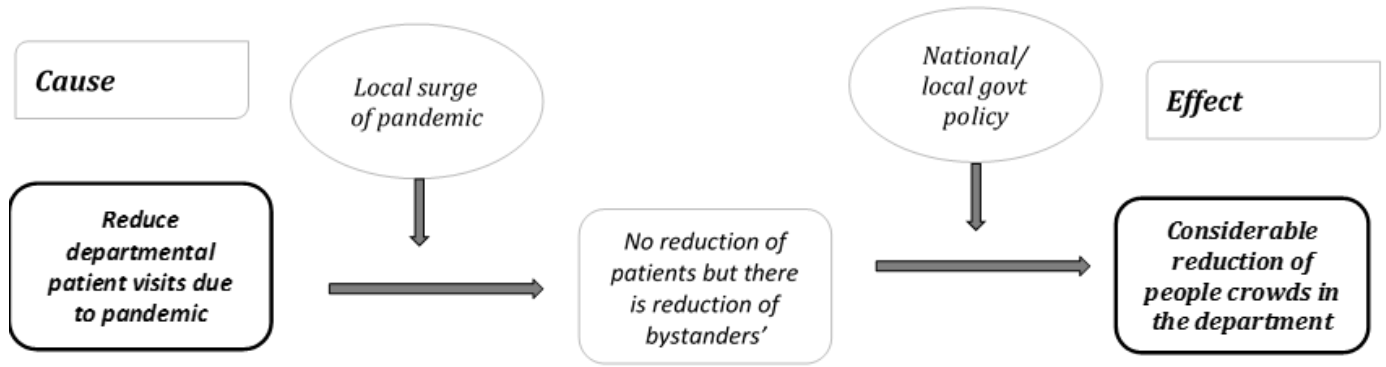


Figure 2: Shows a pictorial representation of Causal Map to display intermediate and final outcomes.

Information bias identification: Information bias from the reports provided by the providers should be identified because the biases influence inputs or reports that might skew an organization's decisions, and addressing these biases is important (Table 1). Common biases that might skew the formulation of decisions are confirmation bias, availability heuristic bias, self-serving bias, anchoring bias, survivorship bias, and conservatism bias. Confirmation bias leads in favor of information that confirms pre-existing beliefs and discards the evidence that doesn't prove those beliefs. Humans have some confirmation bias⁴²; that's how anyone firmly sticks to existing beliefs that determine how much confirmation bias will skew the decisions. In availability bias, one places more excellent value on what comes to their mind

quickly and first. In an actual sense, the likelihood of something happening has nothing to do with how quickly they can recall it, which is irrational. Self-serving bias is one to blame external forces when something terrible happens and simultaneously take credit when something good happens. The anchoring bias forces us to depend too much on the first information we receive. Be careful when someone gives a relatively high price and then offers a lower price as a concession. Survivorship bias is focused too much on what exactly remains standing instead of considering that you cannot see. Conservatism bias tends to depend on prior evidence compared to new evidence. This bias could mean our tendency to revise our beliefs insufficiently in the face of new evidence.

Table 1: Information bias from the reports provided by the providers should be identified. Biases influence inputs or reports that might skew an organization's decisions, and addressing these biases is significant.

Data Input and Source	Possible Type and Cause of Bias	Plan for Addressing Bias
COVID-19 status report from Physicians/ nurses	In the instance of confirmation bias, each of these people would search for scientific papers and evidence that supports their theories, rather than thoroughly examining the situation.	Try to get computerized automatic or independent reporting from other research groups.
Executives/ administrators/ managers	The same confirmation bias can play a significant role	We can adopt the same solution method above to avoid this confirmation bias.
PubMed/ Journals	Many research articles make conclusions from a small sample size or extrapolate their results. This may not reflect accuracy for many reasons, such as temporal variation and statistical uncertainty. The overconfidence bias also pays over-optimism about the situation.	There is no plan for addressing this bias.

8) EVALUATE RISKS AND CONSIDER OPTIONS

Decision-related alternatives 1: To control the spread of the pandemic, the department decided to make surgical face masks mandatory for all employees, check body temperature for all, including patients, when entering the department, and provide instructions to maintain and regulate the visiting time. The outcome of this decision is to avoid people crowding in the department during work hours, which internally reduces the spread of the pandemic. This decision was highly effective, and there was no one chance of COVID-19 in the department employees or patients.

Decision-related alternatives 2: Based on the organizational decision, assign additional responsibilities to the existing clinical staff and avoid new staff appointments to improve the department's financial status. The outcome of this decision was not that pleasant for employees; however, indeed, this decision helped organizational financial improvement.

Departmental decisions to prevent potential spread by reducing patient departmental visits, urge the use of hypo-fractionated treatment regimens, and increase telemedicine usage⁴³. The organization ceased elective special procedures and other services, decreasing revenue and possibly growing expenses. Another decision was assigning additional responsibilities to the existing clinical staff, avoiding new appointments, and adding new patient treatment facilities to improve the department's financial status. The outcomes of these decisions created a sharp decline in visitor numbers, leading to a reduction in covid positive cases. Other outcomes are reduced patient treatment visits by adopting hypo-fractionated treatment options, increased telemedicine instead of a direct physician consultation, everyday measured body temperature for everyone who enters the department, and made surgical masks mandatory for everyone who enters the department. These precautions sharply decline the possibility of pandemic spread and achieve objectives.

Risk analysis is a process that supports identifying and managing potential issues that could undermine

key healthcare projects. It is required to determine threats and estimate the likelihood of materialization to perform a risk analysis⁴⁴. Several threats may arise from various sources, including human (illness, death, etc), operational, reputational, procedural, project, financial, technical, natural, political, or structural. An appropriate analysis helps estimate these threats' relevance and develop appropriate solutions. Considering the organizational systems, processes, and structures during risk analysis is essential. The team leaders can always ask for input from employees in the organization and appropriate analysis methods, such as a SWOT analysis⁴⁵, Porter's five forces framework, Failure Mode and Effects Analysis (FMEA)^{46,47}, etc, can be used to determine organizational threats. A simple formula can calculate the associated risks based on the likelihood of occurrence and its possible impacts.

The value of the risk = Probability of the event X Cost of the event.

Business experiments, preventive action, and detective action are several ways to reduce its impact by accepting this risk.

Organizations regularly face several threats, including turning staff members into COVID-19-positive, the COVID-19 surge in the local area, the vaccine's effectiveness in the future, local government policies, future financial crises due to reduced clinic visits, additional responsibilities to the experienced clinical staff may cause a burden for them to leave the hospital⁴⁸, and the patients may not always maintain appointment time, creating a crowded environment in the department. Suppose there is an AA% chance of incidents happening within the next year, which may cause or cost some \$BB; the risk is calculated as:

So, the risk value increases as $(AA/100) \times \$BB = \ZZ (risk value)

9) FOLLOW-UP PLAN

The first part of creating an action plan is identifying specific tasks or performance metrics. Assign each metric to concerned employees and determine

when they should do them, then decide when and how to do a follow-up based on the results. Metrics can be subjective or objective based on the collected data. A simple follow-through plan (table 2) consists of the staff's responsibilities related to performance metrics; moreover, the plan includes a data analysis system and maintains accountability. Action plans for follow-ups significantly improve communication, enhance workflow efficiency, and utilize resources efficiently; furthermore, they help to formulate a structured approach to task prioritization and

deadline setting. Task analysis enables tracking and monitoring the progress of the follow-up action plan and achieving the ultimate objective; this method works as a valuable feedback tool and offers tangible proof of results achieved. An effective follow-up action plan consists of setting up clear expectations, open communication, flexibility, and adaptability. Action plans can be employed across various situations, such as evaluating projects, fostering personal growth, and overseeing team performance.

Table 2: The table shows a simple follow-through plan comprising staff responsibilities related to performance metrics; furthermore, the plan includes a system for data analysis and maintaining accountability.

Performance metrics	Input, output, or outcome	Who is responsible?	Who analyzes and reports?	Who is accountable?
People crowd reduction rates in the organization	Outcome	Front desk staff/ physicians/ manager	Research staff/ physicists/administrators/ physicians	"A and B" are accountable for departmental crowd-reporting
Patient visit reduction rate	Outcome	Physicians/ nurses/ front desk staff/ therapists	Same as above	"C and D" accountable for checking and reporting patient visits
Utilization of telemedicine rates	Output	Physician/ IT staff/ nurses/ front desk staff/ manager	Physician/ administrator	"E and F" accountable for reporting telemedicine usage by patients
Pandemic spread rate	Outcome	All	Administrator/ manager/ senior executives	"G and H" accountable for finding and reporting positive cases from the department

The follow-up action plan is crucial in comparing the completed system to initial requirements, incorporating acquired insights and supporting ongoing enhancement efforts by steering actions. Accountability is the acceptance of the success that is positive or failure that is negative to achieve the objectives. Feedback, follow-up, and accountability are the three pillars of the change management process.

Conclusion

Leading a successful healthcare organizational change requires a clear vision, effective communication, entire organizational involvement, change agents, employee support, team accountability, reinforcement/ measurement, and learning and development. Leaders recall basic guiding principles

in a change process to systematically navigate the treacherous shoals of transformation. The basic principles can be lead with the culture, start at the top, involve every layer, make the rational and emotional case together, act the way into new thinking, engage, lead outside the lines, leverage formal and informal solutions, and assess and adapt. Leaders executing the change strategies in healthcare institutions require several phases in typical scenarios; however, the team instantly adapted to the new communication methods and work changes in this pandemic. The strategy focused on essential actions and outcomes; excellent communication with stakeholders is critical. The organization conducted multiple discussion sessions to deliberate designs to explore reducing pandemic spreads while delivering appropriate treatments to patients. The institution identified various decision alternatives from numerous communications with employees, and the organization rapidly implemented workflow adaptations while contemplating major questions to overcome the pandemic crisis. Leaders identified multiple attributes of alternatives for cancer patient management without severely compromising treatment outcomes and institutional financial status.

It is essential to identify information bias from the available reports since they might influence an organization's change plan decisions. Healthcare executive members, leaders, administrators, managers, physicians, and nurses are reliable sources for updated information related to the healthcare situation. A sharp decline in people crowding into the institution was noticed as an immediate outcome of current decisions, which immediately reduced the pandemic spread. Reducing patient treatment visits in the department by adopting telemedicine and hypo-fractionated treatment options, body temperature measurement for everyone who enters the department, and mandatory surgical mask usage helped sharply decline the pandemic's spread. Multiple leadership tools for risk analysis, including a SWOT analysis, FMEA, etc., can be used to identify strengths,

weaknesses, opportunities, and threats. There are many ways to reduce the impact on institutions by accepting the risks, such as business experiments, preventive actions, and detective actions. An excellent action plan is necessary to compare the completed system process to initial requirements; moreover, it helps incorporate acquired insights and foster ongoing enhancement efforts by steering actions. Tasks analysis helps progress tracking of the follow-up actions and achieving ultimate objectives. This monitoring method considered a valuable feedback tool since it offers tangible proof of results achieved.

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None

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