*TIME TO TALK ABOUT CHANGE:

INVESTIGATING EFFECTIVE COMMUNICATION OF NURSING INITIATIVES & PRACTICE CHANGES AT THE BC CANCER AGENCY (BCCA)

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PROJECT TEAM:

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PRESENTATION OUTLINE

1. Background to the Project
2. Goals of the Project
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The BCCA Provincial Nursing Practice Committee (NPC) realized that their policies, suggestions & recommendations are sometimes incompletely adopted by nurses in direct care.

The NPC identified the Communications environment as one possible reason for the lack of translation by the nurses of newly-announced changes into implementation of the new procedures.

The committee wanted to understand the Communications environment faced by the nurses & other factors that might prevent nurses from acting upon new procedures, & to identify strategies to address the issue(s).
1. Investigate current Communications practices at the BCCA with a focus on the NPC.

2. Discover & summarize the evidence-based principles for communicating changes in nursing practice to nurses. Draw upon published literature & interviews with experts.

3. Develop a survey to understand nurses’ needs vis a vis communication & change.

4. Produce a report summarizing these findings & recommendations.
Provincial Nursing Practice Committee (NPC)

- Purpose: to develop & communicate a broad spectrum of evidence-informed practice to all BCCA nurses in order to improve quality of care & health outcomes.
  - The NPC membership includes staff nurse representatives from each of the six BCCA Centres.

Challenges to Change Faced by the NPC

- Geographical: The scope of any change reaches across & applies to multiple BCCA sites across BC.
- Intra-Agency: They need to connect & coordinate with various working groups across the agency.
- Systemic: Follow-up surveys from recent practice changes indicate that nurses feel that they face many systemic barriers that hinder uptake of new nursing practices & procedures.
- Survey Fatigue: It’s a challenge to get nurses’ attention to find out more details of the systemic & Communications-related challenges. It is suspected that nurses experience “survey fatigue”, as there are many committees seeking their opinion at the moment & some of the surveys ask overlapping questions.
- Profile of the NPC: The NPC serves, supports & listens directly to nurses, but it is unclear if their messages & mission are clear to the staff nurses: there are many committees within the BCCA & busy nurses may not keep track of them all.

Communication Methods & Environment:

- The NPC uses many tools are used to communicate change. These include emails, posters, small group meetings, & all-staff meetings. The tools are currently chosen by the lead staff member heading up the announcement of the practice change.
- The communications environment is cluttered: nurses receive many announcements from numerous sources from inside & outside the BCCA each day.
- There is no one-stop-shop for nurses who have questions about practice procedures once the new procedures have been launched.

Basic Information With Which We Started
OVERVIEW OF THE RESEARCH APPROACH

TEAM ACTIONS (CYCLICAL)

1. Clarify our biases & goals.
2. Create a timeline for deliverables.
3. Begin work on individual projects.
4. Discuss findings & clarify project goals.
5. Synthesize leadership theory, change theory, & Communications theory.
6. Adapt deliverables to new findings.
7. Research current survey design & apply it to development of draft survey.
8. Produce report for BCCA.

INDIVIDUAL WORK

Zoe Evans:
Conduct a literature search of CINAHL, PUBMED & Google Scholar databases. Summarize the findings & make recommendations.

Elizabeth Effa:
Find & interview key figures involved with BCCA Communications, consult an outside expert if possible, summarize the findings & make recommendations.
Areas of Investigation: Our Questions about BCCA

- How can Communications theory & principles help the BCCA address the aforementioned challenges?
- How do nurses find out about changes to practice & procedures at the BCCA?
- What format do messages from the NPC currently take & how effective are these tools—do the nurses act upon the messages?
- To what additional tools & platforms does the NPC have access?
- What is the volume of email that nurses currently receive? Is it overwhelming?
- Are nurses aware that the NPC is a nursing committee that involves staff nurses?
- What communications resources are accessible to the NPC within the BCCA? What external sources of information could they draw upon to create a communications plan?
- Do nurses feel empowered in their working environments?
- Do nurses feel connected to practice changes they are asked to implement?
- Do nurses feel supported by the leaders within their environment?
- How do nurses prefer to hear about upcoming practice changes?
METHODOLOGY: A systematic literature search of CINAHL, PUBMED & Google Scholar was carried out using these terms: “practice change” “effective” “nursing” “internal communications” & “best practice”. A total of 31 papers were found. 9 were used.

RESULTS: The following themes were found to relate to best practices for change communication among & to nurses.

1. Engaging bedside nurses early in the practice change process helps support & bring changes into fruition (Lusardi, 2012).
2. Lewin’s Change Theory: 3 phases of change—unfreezing, moving & freezing (Grant et al., 2010.)
3. Transformational Leadership at all levels (Grant et al., 2010).
4. Focus Groups of nurses to conduct SWOT analysis (Grant et al., 2010).
5. Structural Empowerment—unit based hospital committees, celebrating successes (Grant et al., 2010).
6. Empowering nurses: Grant et al. (2010) argue that if nurses perpetually feel powerless within their organizations, they are at risk of responding passively to change.
7. Nursing Champions are integral to the diffusion of best practice (Ploeg et al., 2010). Nurse Champions are “change agents”, & hold informal leadership roles that demonstrate best practice in action (Ploeg et al., 2010).
METHODS & APPROACH

Methodology: qualitative studies & informally-structured interviews were held with a communications manager, a project manager & an internal Communications specialist in the corporate sector. These results were transcribed & summarized before they were analyzed to determine key points. Insights from these interviews prompted further research & investigation into other areas such as survey design & internal communications tools & plans.

SELECT FINDINGS

- There are several models of communication, but the principles are dynamic in that they are not prescriptive methods but rather guides to “best practices” that must be adapted to the site.
- Communications need to be concise, consistent, timely & seek to elicit awareness, develop an attitude, & cause an action from their audience (T.H., 2014).
- Communication tools (email, posters, brochures etc.) are best selected after an audience survey or focus group is conducted (T.H., 2014).
- The tool must be what the audience wants to receive; otherwise, they might miss the message.
- Messages need to be action-orientated: describe the action that nurses are to do as a result of the announcement (e.g. use a new medication).
- Terms need to be plain-language or written with the audience’s environment in mind.
- In short, sound Communications practices are necessary to elicit change from nurses.
THE SURVEY: ASK THE AUDIENCE

Rationale: A communications plan must meet the needs of the audience; the tool must be one that effectively conveys the message, getting the nurses’ attention & causing them to act. We do not know which tools nurses prefer. Hence the survey.

Goals:
- To measure nurses’ & perceptions of current communications practices, tools & environment surrounding change.
- To discover how nurses want to hear about practice changes.
- To determine which tools nurses would like managers to use when communicating with them about practice changes.
- To discover if the NPC needs to be aware of other challenges when communicating nurses.

Methodology of Development:
1. Established a list of questions & categorized them into subsections.
2. Created survey questions for each subsection.
3. Used current survey methodology to ensure:
   1. The survey was easy to read.
   2. Visual cues (e.g. progress bar) were included for ease of reading & to reduce user frustration (Lauer et al., 2013).
   3. An appropriate mix of open & closed questions was used. For questions ranking importance, frequency or other values scales, the five-point Likert scale was used in order to ensure statistical viability (Siegle, 2010).
4. The BCCA will need to test the survey with 6-10 nurses to ensure the validity of the questions.
1. Information needs to be concise, consistent, timely, & appropriate, & the tool must be suited to the job.

2. Communications can only patch part of the gap between awareness of a change to nursing practice procedures & the adoption of that procedure by the nurses; the rest is often a management or leadership challenge.

3. Thus, while we provided the BCCA with an analysis of specific communications tools & platforms, we could not easily recommend one tool, as we do not know what would be best for the nurses at the BCCA without conducting our survey.

4. We also recommend that researchers & the BCCA investigate the impact of:
   1. Leadership Styles ➔ What types of leaders are within the BCCA nursing group? Who are they & how can they help support the NPC’s change initiatives?
   2. “The System” ➔ What systemic challenges prevent nurses from implementing new nursing practice procedures?

5. We suggest using the following theories to guide the committee’s next steps:
   1. Change Theory (Grant et al., 2010).
   2. Nurse Champions (Ploeg et al., 2010).
TWO (OF SEVERAL) SPECIFIC RECOMMENDATIONS

• Communications from the NPC would be increasingly effective if they followed a consistent format. We suggest that a formalized communications plan be created & followed by the NPC for each change.

• E.g. Emails should have information presented in a logical sequence that does not change from announcement to announcement. Extra information should be accessible via links to the intranet or another source where detailed guidelines, background information, & rationale(s) for the change are available.

• When the BCCA is preparing to implement a practice change, it is a good time to re-evaluate other areas such as leadership at all levels. Therefore we suggest that the Committee look beyond the communications tools & evaluate the whole nursing environment for strengths, weaknesses, opportunities & threats that face the NPC when they wish to improve nursing practice. This evaluation can be done through a survey &/or through focus groups.
SELECT REFERENCES

Fluid Surveys University: http://fluidsurveys.com/university/. (This excellent webpage puts survey design, implementation, & analysis into layman’s terms.).


