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Kurt Lewin's Change Theory

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Kurt Lewin's Change Theory

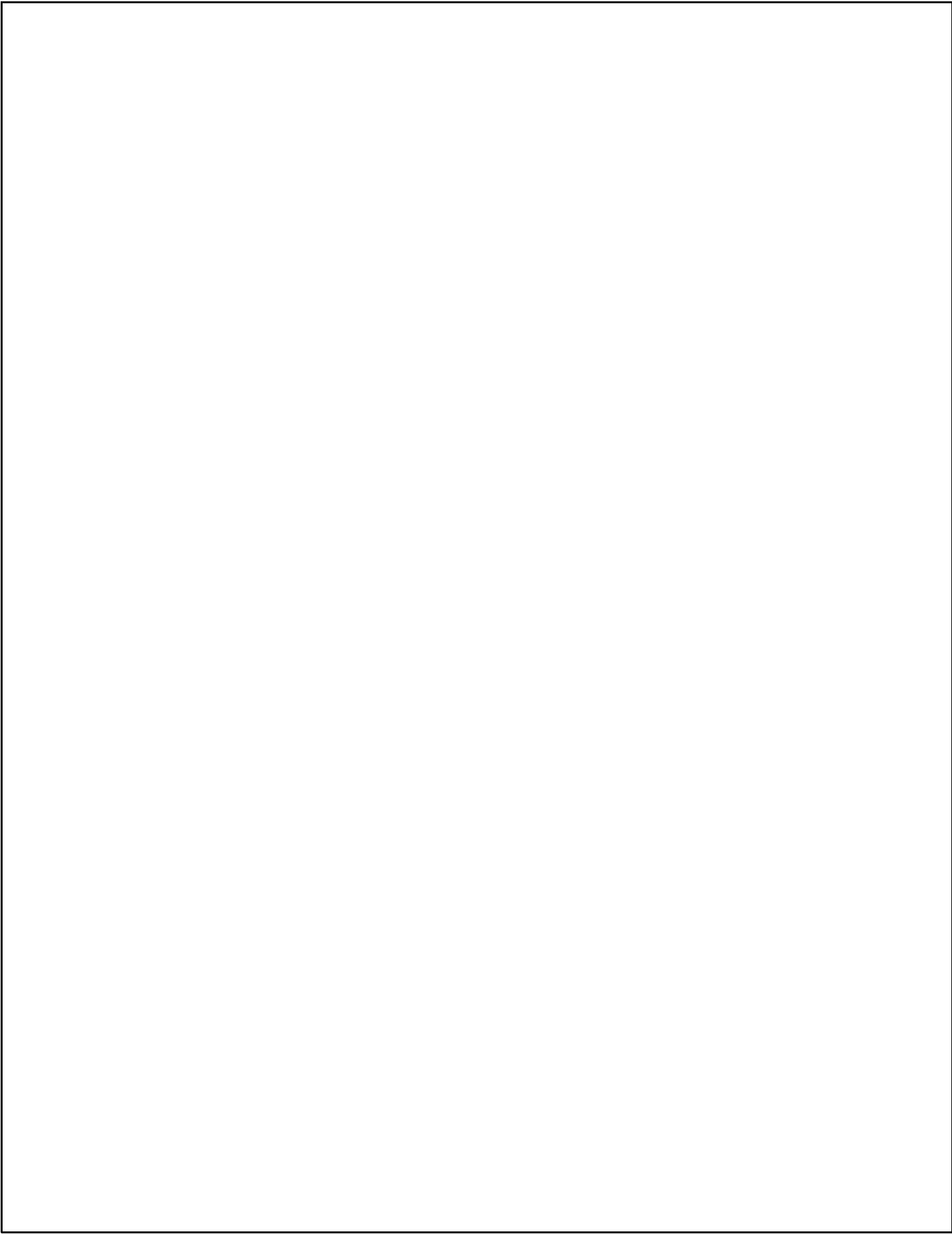
Technological advancements and computer assisted devices are increasingly causing untold challenges to many nurses. This makes it difficult to implement a change in practice (such as Bar-coded medication to reduce medication error) within such an environment because it can produce anxiety. This, in the end, leads to resistance to change practice.

Several scholars have attempted to document how and why changes occur but for the purpose of this paper, the focus will be on Kurt Lewin. Kurt (1951) came up with three stages (unfreezing stage, moving stage and refreezing stage) in which the process of change must follow before change becomes part of the organization. As seen from the above scenario, the nurses may become reluctant to adapt to the new change (Bar-coded medication) because of the difficulties that comes with using such devices.

By following the change theory developed by Kurt Lewin, the first step before introducing change (the Bar-code medication) from the perspective of an advanced practice nurse leader, involves identifying the change focus. The key elements at this stage include communicating with stakeholders such as managers, administration and frontline nurses. According to Bozak, 2003), the lines of communication should remain open and honest. Unfreezing stage is where the restraining forces are wielded out. For instance, the restraining forces may be unwillingness of the nurses to use computerized devices.

The second step, as proposed by Lewin, is *moving stage* which shows actual change (planning and implementation). Implementation of bar code will require collaborative efforts from different teams such as IT and pharmacy. At this stage, there is a need to train the nurses.

The last step is the refreezing stage. Here there is a need to ensure there is ongoing support of nurses and other stakeholders to ensure the change is complete and all users are comfortable.



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