Achieving Equitable Health Outcomes in Nebraska, Session 6:

Having Better Conversations about Change

Key Takeaways:

- We often treat resistance to change as a singular conversation. There are many reasons for change resistance, and the recommended interventions for these are very different.
- All people are ambivalent about change. When change isn't happening, we can look for ambivalence by listening for sustain talk, which Miller and Rollnick define as "the person's own arguments for not changing, for sustaining the status quo."
- A person needs to be aware of the value of change, capable of implementation, and feel supported in operationalizing it to be ready to make a change.
- The value of a change includes its value to the individual, their work, their patients or community, and their team or organization.
- The capability to implement a change requires both knowledge of the change as well as confidence in that knowledge.
- The support required for operationalizing a change includes resources to make change possible in an individual's role as well as resources to support change across the team or organization.

Further Reading:	
Motivational Interviewing for	Miller WR, Rollnick S. Motivational Interviewing: Helping People
Professionals	Change. 3. New York: Guilford Press; 2013.
	Marshall C, Nielsen AS. Motivational Interviewing for Leaders in
	the Helping Professions: Facilitating Change in Organizations.
	New York: Guilford Press; 2020.
Joint Commission National	R3 Report Issue 38: National Patient Safety Goal to Improve
Patient Safety Goal	Health Care Equity. The Joint Commission Website.
	National Patient Safety Goal to Improve Health Care Equity. R3
	Report: Requirement, Rationale, Reference. A complimentary
	publication of The Joint Commission. Issue 38, December 20,
	2022. The Joint Commission Website.
Achieving Equitable Health	Achieving Equitable Health Outcomes in Nebraska Program
Outcomes in Nebraska Program	Homepage. University of Nebraska Medical Center Website.





