Agents of Change: Exploring Challenges of Implementing Change in Healthcare

A Case Study at Region Skåne

by

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Abstract

This study aims to identify the main challenges faced by change agents in implementing change and understand how the change agents' role is affected by these challenges in a healthcare setting, specifically exploring the case of implementing the 'Competence and Employment Model' in Region Skåne. The study employs a qualitative case study methodology to delve into the experiences of various change agents involved in the change process at Region Skåne. Despite playing an important role in facilitating and driving this change initiative, the change agents in this study encounter numerous challenges that limit their abilities to fulfill their responsibilities of implementing the change. These challenges are identified as 1) facilitating change in a complex environment and structure, 2) unleashing agency and ownership, as well as 3) handling and mitigating resistance. The findings suggest that while change agents are critical to the change process, their ability to facilitate change is impaired by these challenges. This study contributes to the broader understanding of change management in healthcare by exploring emphasizing the nuanced roles and challenges of change agents, thereby suggesting areas for enhancing their effectiveness in future organizational change.

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1. Introduction

Over the years, the healthcare sector has encountered numerous change stimuli, pointing out the need for organizational change (Milella et al., 2021). For example, all 53 countries of the WHO European Region are facing challenges with the healthcare workforce, such as personnel shortages, insufficient recruitment and retention, and poor access to professional development (WHO, 2022). The International Council of Nurses (2021) projects that there will be 13 million nurses needed worldwide in order to bridge the nursing shortage gap by 2030.

In Sveriges Kommuner och Regioner's (2022) report on welfare's competence supply, the aging population of Sweden and the increasing competition for labor is leading to a higher demand for healthcare services. Therefore, the shortage of nurses imposes an immense challenge (Socialstyrelsen, 2023). According to the head of the Employer Policy Department, Bodil Umegård (2023), recruiting more healthcare staff will be an important part of addressing the shortage, however, municipalities and regions must primarily change their working methods. In order to reduce the need for more hires, Umegård (2023) believes that the greatest potential lies in making better use of and developing existing employees. This study examines the healthcare organization in Region Skåne who is attempting to do exactly this by implementing the new 'Competence and Employment Model'. The model aims to create better development opportunities for healthcare staff, specifically nurses.

As healthcare organizations navigate evolving environments, the role of 'change agents' becomes indispensable (Freed, 1998; Ogunlayi & Britton, 2017;. Alagoz et. al., 2018; Pomare et. al, 2019). These individuals are responsible for guiding and facilitating organizational transformation. Given the complexity of healthcare changes, which are affected by political factors, diverse stakeholder perspectives, and resource constraints, a deep understanding of the role of change agents is essential (Eccles et al., 2005; Dobers & Söderholm, 2009; Lunenburg, 2010; Chreim et al., 2012). Therefore, this study revolves around agents' experiences when implementing the new 'Competence and Employment Model' in Region Skåne.

1.1 Problem Formulation

The accelerating rate of change in healthcare highlights the need for effectively managing change and the complexity that comes with it (Al-Abri, 2007; Milella et al., 2021). The global workforce issues in healthcare threatens healthcare organizations' ability to address complex challenges such as an increasing demand for healthcare services (International Council of Nurses, 2021; WHO, 2022). The

need for change is therefore absolutely essential, and it is not undertaken for the organization's own gain but for the welfare and safety of the patients.

When addressing complexity and change, a large extent of previous research emphasizes the role of change agents, that is, individuals who are responsible for facilitating the change in various ways (e.g Armenakis & Harris, 2009; Caluwé & Vermaak, 2012; Gerwing, 2016; Lidman & Strandberg, 2023). However, there is limited research on the specific roles and responsibilities of change agents, as well as the challenges they face in fulfilling their role. Addressing this knowledge gap is particularly relevant and important in the healthcare sector, where the need for effectively managing change and complexity is crucial (Al-Abri, 2007). Examining the role of change agents in implementing change within the healthcare sector, and identifying the challenges that prevent them from reaching their full potential, could enhance the effectiveness of organizations in managing change.

1.2 Research Purpose

The purpose of this study is to examine the role of change agents in facilitating organizational change within the healthcare sector, with a specific focus on the Region Skåne's implementation of the 'Competence and Employment Model'. By exploring the real-world experiences and perspectives of these change agents, the research purpose of this study is to identify the main challenges faced by change agents in implementing change and understand how the change agents' role is affected by these challenges. This study aims to contribute to a nuanced understanding of the multifaceted nature of organizational change and the role of change agents. By illuminating the main challenges in implementing a change initiative, the aim is to contribute to the broader understanding and knowledge surrounding effective change agency.

1.3 Research Questions

To reach the purpose of the study, the study will address the following questions:
- What are the main challenges faced by change agents in implementing change?
  - How are the change agents' role affected by these challenges?

1.4 Demarcations

This study aims to identify the main challenges faced by change agents in implementing change and understand how the change agents' role is affected by these challenges. However, it does not focus explicitly on the process of organizational change itself but rather examines the roles of change agents

within this process. Our study does not go into depth about change agents roles in interaction with other change agents, or how the roles potentially complement each other. Instead, this research focuses on individual change agents, examining their personal experiences in facilitating and driving change at Region Skåne. We will look into the roles and responsibilities they are part of, and what challenges them in their role as a change agent.

Furthermore, this study focuses on perspectives from individuals at various hierarchical levels within Region Skåne regarding their implementation of change. This means that the study is not limited to examining the experiences and challenges faced by, for example, managers as change agents. Instead, it includes change agents from different hierarchical positions, providing a diverse range of perspectives. This is due to the fact that we wish to understand the challenges they encounter without being confined to a single viewpoint.

Lastly, this study mostly focuses on the challenges that can impact the implementation at Region Skåne negatively. It does not provide detailed findings on the opportunities available to change agents or strategies for overcoming these challenges. Therefore, this study offers few proposals for how change agents might navigate or prevent challenges that could negatively affect their roles and hinder the implementation of change.

1.5 Outline of the Thesis

Chapter 2 - This chapter presents a literature review, presenting central ideas, perspectives and concepts. The chapter is divided in two parts; first, Organizational Change gives an overview of what the concept entails as well as the impact of Change Leadership and Change Agency. Secondly, Dynamics in Organizational Change describes some of the considerations, challenges and opportunities that become relevant when organizations manage change. The chapter concludes with summarizing the reviewed literature as well as identifying research gaps in the literature.

Chapter 3 - This chapter describes the methodology chosen for this study. The research approach and design is presented as well as the research context, followed by the methods used for data collection and analysis. Lastly, the quality of this paper, referring to its trustworthiness, limitations and ethical considerations, are presented.

Chapter 4 - This chapter presents and analyzes the findings of the empirical data collected. The findings are presented in two main themes; Change Agents' Understanding and Commitment, and Disruptions in Agency.

Chapter 5 - This chapter discusses the findings with background of the previous research presented in chapter two. The discussion is presented in the three main themes; Complex Environment and Structure, Unleashing Agency and Ownership, and Handling and Mitigating Resistance. Under each theme, the findings of this study are revisited and related to the concepts in the literature review.

Chapter 6 - This chapter provides a concluding discussion on this study's main contributions, as well as suggestions for future research on the subject of change agents.

2. Literature Review

In this chapter, we aim to provide a comprehensive overview of relevant literature in the field of change agents' role in organizational change. The literature review aims to delve into change management concepts to enhance understanding of the potential hurdles and solutions available to change agents. The chapter begins with an examination of current research on organizational change. We will also explore change leadership, with a particular focus on the role of change agents. Additionally, we will describe some highlighted dynamics of organizational change, including the structure of change processes, how organizations prepare for change and manage resistance to change. The chapter will conclude with summarizing key aspects from the literature review and identifying gaps in existing research.

2.1 Organizational Change

The term organizational change can describe both reactive and proactive adjustments within an organization but in many cases, it might be somewhere in the middle; even if a change effort is planned proactively, it does not appear from anywhere (Cummings & Worley, 2014). Instead, the context of the situation brings forth the necessity of the change, such as changes in the social and competitive environment, as well as internal organizational characteristics and changes. Other authors highlight the fact that change is often reactive in the way that the pressure to change derives from complex organizational environments, but that organizations adapt to its environments in order to be proactive (Druckman, Singer, Van, 1997; Lewis, 2011). Change could, for example, be triggered by factors such as legal requirements, customer needs, technologies, financial resources, and alterations in competence supply (Lewis, 2011). The change investigated in this study represents a notable mix of reactive and proactive adjustments, as it is derived from a current state of crisis regarding a shortage of healthcare workforce. However, it does not only serve a purpose to solve the current situation, as it is also a measure taken to create more beneficial conditions for the future and ensure a sustainable competence supply of healthcare professionals.

Weick and Quinn (1999) provides a comprehensive view on two types of change; episodic and continuous. While episodic change describes distinct, planned and isolated efforts with identifiable characteristics and parameters, continuous change is described as ongoing, constantly evolving efforts. Cummings and Worley (2014) describe that when an organization needs to solve a current situation, 'planned change' occurs. Similarly, Weick and Quinn (1999) states that episodic change occurs due to triggering events that disrupt the status quo. The authors Stouten et al (2018) present a similar idea of planned change as intentional actions designed to transition an organization from its

current condition to a preferred future state. On the contrary, Lewis (2011) states that change is an ongoing part of organizations, rather than something that occurs in between the normal states of stability. Similarly, Weick and Quinn (1999) suggest that effective organizational change requires recognizing the ongoing nature of change and adapting interventions accordingly. Given this background, this study is primarily interested in the concept of planned change, as the 'Competence and Employment Model' that is central for this study is a planned, episodic, regulated and structured change effort.

2.1.1 Change Leadership

A range of studies argues that leaders significantly affect the success of the change process in organizations (e.g Kotter, 1995; Higgs & Rowland, 2011; Gill, 2020). One perspective is that leadership is the core of change, no matter if it is managers in positions of authority or anyone from the staff who is in a leading position for the change (Rousseau & ten Have, 2022). In terms of change leadership, previous studies that explore the concept, agree that the role of effective change leaders is to engage and empower others in the organization when it comes to the change (Higgs & Rowland, 2011; Rousseau & ten Have, 2022).

Aspects that are highlighted in the field of change leadership are the importance of aligning the team or the organization towards one vision, and creating a strategy that will reach this vision (Gill, 2020). Gill (2020) emphasizes that employees can adapt to change and major strategic shifts as long as the vision and mission are clear. Kotter (1995) suggests that constantly explaining the vision and strategy will enhance individuals' and teams' behavior toward change. Another aspect of leadership in a change process is empowerment (Gill, 2020). It is about making people able to do what needs to be done in the change process, both practically and psychologically. The author means that leaders in change processes should give individuals the knowledge, skills, opportunity, freedom, self-confidence, and resources they need. Furthermore, Gill (2020) emphasizes that empowerment is specifically important in change processes as it explicitly involves people to be a part of it. A result of this is that employees who get encouraged to be involved in the change are more likely to feel inclined to support the change, instead of being forced to (Gill, 2020). In this way, multiple levels of the organization need to be involved in order to engage and potentially educate parts of the organization or unit in any skills necessary for the change (Higgs & Rowland, 2011; Rousseau & ten Have, 2022). Therefore, it is beneficial for change leaders to be located within every part of the company and not only addressed to the ones withholding a traditional management role, according to Rousseau and ten Have (2022). Rousseau and ten Have (2022) as well as Higgs and Rowland (2011) advocate for organizations to

move away from top-down leadership styles and embrace a more inclusive, facilitative approach that engages employees toward change and adapts to the complex realities of organizational dynamics.

However, moving away from top-down leadership, and embracing the employees' inclusiveness in leading the change creates several new challenges and demands on organizations, such as the need for greater flexibility in management structures (Bordia et al., 2004). Bordia et al. (2004) explains that while inclusive decision-making can lead to more committed and satisfied employees, it can also slow down the process. Therefore, Bordia et al. (2004) stress that organizations must find the right balance between involving employees in leading the change while maintaining operational efficiency to avoid decision-making paralysis (Bordia et al., 2004). In this way, the role of 'change agents' in organizations becomes crucial in this context as they could facilitate the implementation of these inclusive strategies effectively (Armenikis & Harris, 2009; Gerwing, 2016).

2.1.2 Change Agency

A common concept in research on leadership in organizational change is change agency. Starting off with the term 'agency', Katz and Miller (2024) define it as the ability of all employees, regardless of their identity, role, level, or tenure, to have the power, influence, and voice to make decisions that affect their jobs and contribute to the improvement of the organization. The authors also emphasize that in today's fast-paced work environment, employees must be able to respond quickly to change, share knowledge, and seize opportunities, which requires full access to their creativity and problem-solving skills (Katz & Miller, 2024). In contrast to the concept 'empowerment', agency is described as inherent. It does not need to be given but rather should be facilitated by removing barriers and enabling employees to exercise their existing capabilities and decision-making power (Katz & Miller, 2024). When organizational members have agency, they are seen as active participants in change, capable of identifying problems and proposing solutions that align with the mission and values of the organization (Katz & Miller, 2024).

Previous research on change agency has often been centered around the individuals driving change, referred to as 'change agents'. Common for these studies is that a change agent is generally defined as a person who has the skill and power to stimulate, facilitate, and coordinate the change effort (Armenakis & Harris; 2009; Lunenburg, 2010; Lidman & Strandberg, 2023). In planned organizational change, change agents help to ensure that changes are deeply embedded and sustainable (Armenakis & Harris, 2009; Gerwing, 2016; Lidman & Strandberg, 2023). Moreover, Weick and Quinn (1999) states that change agents in episodic change are seen as drivers of change, while change agents in continuous change guide and redirect change. Caluwé and Vermaak (2012) argues that the change agents' presence and competence is just as impactful, if not more, as any

intervention plan. Nonetheless, there are diverse perspectives on which types of individuals qualify as change agents and what kind of roles they take on to facilitate change.

The definition of who can be considered a change agent has evolved in research over time, starting with the 'change master' as a charismatic hero of radical change, and expecting the manager and specialist to take on the responsibility as change catalysts (Kanter, 1984; Devanna & Tichy, 1986; Conger & Kanungo, 1988; Bass, 1990). By, Burnes and Oswick (2011) describe that traditionally, change management has been undertaken by managers and consultants, while employees and subordinates are positioned as the recipients of change. On the other hand, change management can also be framed as an everyday practice distributed among the members of the organization (By, Burnes & Oswick, 2011). Rousseau and ten Have (2022) also state that all can serve as change agents, meaning trusted and supportive leaders who create a psychologically safe environment. This argument is strengthened by Gerwing (2016), whose research identifies change agents as someone driving organizational change, playing a pivotal role in facilitating, initiating, implementing, and directing change within a company.

Wolbring et al. (2021) differentiate between three roles of change agents; role models, decision-makers, and/or knowledge mediators. Further on, the authors state that the role of the change agent depends on their level in the organization. Actors at a higher level can take charge over processes that require decision-making power, while change agents at a lower level often are the ones with direct contact to the change recipients, making this interaction their main responsibility (Wolbring et al., 2021). Similarly, Gerwing (2016) states that in fulfilling their responsibility, change agents can wear many hats. They serve as visionaries, setting the direction for change, and as advocates, promoting the benefits of transformation. As facilitators, they guide the change process, while as team builders, they foster collaboration among stakeholders. They also act as conflict resolvers, problem solvers, and strategic thinkers, ensuring that change initiatives address challenges effectively (Gerwing, 2016).

Caluwé and Vermaak (2012) formulated a model consisting of five change agent roles illustrated in different colors, each characterized by various intentions and focus. While the yellow and green role are both facilitators, the yellow role is an individual with a certain powerbase as resource, while the green role's only resource is communicating and interacting with people as more of a coach. The blue and red roles are experts, with the difference that the blue role focuses on hard aspects of the change such as results, and the red on soft aspects such as the procedure and atmosphere. Lastly, the white role is someone who spontaneously facilitates change by appealing to the inner direction of other people, removing barriers and creating solutions for change 'on the go' (Caluwé & Vermaak, 2012).

Other authors have described the change agents' role as mediating between the organization's leadership and its employees. By being mediators, change agents ensure that the transition is smooth and that all parties are aligned with the new direction and vision that comes with the organizational change (Armenakis & Harris, 2009). Rouleau and Balogun (2008) do not discuss change agents implicitly, but state that middle managers can be meaningful in organizational change by being mediators, instead of "passive linking pins, transmitting senior manager instructions unquestioningly down the organization" (p. 2). The middle managers both have the ability to shape top management's strategic thinking but also spread the top management plans onto the organization. In this way, they connect the operational core with upper management (Rouleau & Balogun, 2008). A similar concept to mediators is one about translators, researched by Boch Waldorff and Madsen (2022) among others. Boch Waldorff and Madsen (2022) do not refer to change agents, but rather describe translators as individuals who are given the task to make a new idea fit in their local context. Translators in organizational change interpret, adapt and communicate new ideas across multiple layers of the organization, ensuring that they are understood, accepted, and implemented effectively (Boch Waldorff & Madsen, 2022).

Building on the foundational concept that change agents are pivotal in carrying out organizational transformations, this study explores how their role is affected by challenges in implementing change. This paper takes on the perspective that anyone in an organization can be counted as a change agent, no matter if it is the change initiator, project leader, manager or recipient. The key aspect is that they actively facilitate change in some capacity.

2.2 Dynamics in Organizational Change

This section reviews the extensive research that has examined the effectiveness of organizational change efforts over the years. Specifically, we will examine structural considerations, ways to prepare for change, and managing resistance to change. Through this reflective analysis, we aim to provide a nuanced understanding of what previous research has identified as dimensions that could influence change initiatives.

2.2.1 Structural Considerations in Change

When it comes to structural approaches, a top-down approach is described as a traditional approach to structure organizational change (Heyden et al., 2017). The authors stress that a top-down approach is focused on top management within organizations as being the main actor driving change and are, thereby, often attributed with unique responsibilities in relation to organizational change. These responsibilities could be leading 'turnarounds' to overlooking the contributions of middle managers

that also have a part of the organizational change happening (Heyden et al., 2017). In contrast to this, bottom-up initiatives could lead to a more effective organization-wide change. This is because of the fact that it includes middle managers to drive the change forward from the organization's core (Heyden et al., 2017). However, a bottom-up approach could overlook top management's roles in navigating competing priorities, managing multiple stakeholders and reconciling contradictory demands of change, which could be beneficial aspects for change initiatives to succeed (Knight & Paroutis, 2016; Friesl & Kwon, 2016; Heyden et al., 2017). Both top-down and bottom-up approaches in organizational change underscore that change depends on the interaction between change initiation and execution roles, and these roles aren't exclusive to either top management or middle managers (Heyden et al., 2017). Yet, organizational change research often shows stereotypical assumptions, such as the belief that top management initiates change while middle managers execute it (Kotter, 1995; Heyden et al., 2017). Bolman and Deal (2021) concludes that limited, top-down thinking almost always fails. Instead they argue that change initiatives should be more employee-driven and comprehensive to stand a better chance. In this way, blending top-down and bottom-up approaches are shown to foster change processes and improvements in healthcare. Challenging these assumptions could, therefore, enrich the understanding of change dynamics as top-down approaches should acknowledge the potential for middle managers as change initiators, while bottom-up perspectives should recognize the possible role of top management as change executors.

Another aspect of what previous research emphasizes is an advantageous structure in terms of organizational change, is to have structured collaborative learning events and peer support mechanisms, including peer review visits (Fountain, 2006; Ford, J.D., Ford, L.W & D'Amelio, 2008; Ogunlayi & Britton, 2017). During these situations, the employees are able to exchange ideas and experiences, support and maintain engagement regarding the change process, as well as facilitate problem-solving (Ogunlayi & Britton, 2017). Bolman and Deal (2021) emphasizes how employees' understanding and attitude towards the change benefits from occasions that entails training and psychological support. They argue how change agents can play a vital role in promoting and guiding the change, but are often overlooked in the training loop (Bolman & Deal, 2021).

In terms of structuring an organizational change process, there are diverse perspectives on the linearity of organizational change, with some authors arguing that a linear process of stages can guide change, while others describe it as a dynamic, unordered process. While the top-down and bottom-up perspectives mentioned above outline the actual structure within an organization, linear and non-linear models provide descriptive frameworks for how change processes should occur. Distinguished models like those from Lewin (1947) and Kotter (1996), view organizational change as a series of steps. Lewin (1947) outlines a three-phase process of 1) unfreezing, 2) changing, and 3) refreezing. He

suggests that change involves preparing the organization to accept new ways of working, implementing the changes, and then maintaining these changes into the organizational culture. Similarly, Kotter's 8-Steps for 'Leading Change' builds upon the idea that each step logically follows from the last to ensure a thorough and effective change process. The steps are 1) create a sense of urgency, 2) build a guiding coalition, 3) form a strategic vision, 4) communicate the vision, 5) enable action by removing barriers, 6) generate short-term wins, 7) sustain acceleration, and 8) institute change (Kotter, 1996).

On the other hand, Lewis (2011) argues that linear frameworks such as the ones presented above oversimplifies the complexity of change by assuming that change "merely needs to be plunked down into ongoing activity in an organization - like placing a rock in a stream" (p. 33). He also states that changing circumstances tend to demand changing tactics, responses, and strategies, making it difficult to follow a linear process. This perspective is shared by Weick and Quinn (1999) as well as Graetz and Smith (2010), who argue that organizational change is inherently more complex and less predictable. The authors specifically criticize the linear and rational models for their oversimplification and inability to capture the ongoing interplay between change and continuity that defines organizations. They advocate for a multi-philosophy approach that embraces the complexities of change, including ambiguities, contradictions, and tensions. This perspective recognizes that change and continuity are not only interconnected but are also essential for the growth and survival of organizations Graetz and Smith (2010). The authors, along with Lewis (2011), emphasizes the need for approaches to change that are both more adaptable and dynamic, reflecting the reality that organizations operate in environments that are constantly evolving and are impacted by a multitude of unpredictable factors.

2.2.2 Preparing for Change

To implement organizational change, employees' readiness for the change is an important and a dominant factor (Armenakis et al., 1993). Change readiness is described as "beliefs, attitudes, and intentions regarding the extent to which changes are needed and the organization's capacity to successfully undertake those changes" (Armenakis et al., 1993, p. 681). Readiness is similar to Lewin's (1951) concept of 'unfreezing' and concerns employees' attitudes, beliefs and intentions regarding the change. Another aspect of preparing and getting ready for change is instilling a sense of urgency throughout the organization, meaning, understanding the immediate need for action and attention (Kotter, 1996). It is shown that employees' attitudes and behaviors are affected by organizational change, where their relationships with supervisors and peers are factors that could contribute to their readiness for change (Sikh, 2011). Furthermore, employees' readiness and support

toward the change is also proven to be increased by proactive attempts from change agents in the organization that are influencing their beliefs, attitudes, and behavior for the change initiative (Armenakis et al., 1993). Creating a work environment that encourages employees to develop their skills, efforts, experiences, and abilities is also shown to be important as it leads to employees embracing a positive attitude and behavior toward organizational change (Bareil et al., 2010). This could for example include a good relationship between the employees and the supervisors and peers as it can facilitate knowledge across individuals, teams, and the rest of the organization (Sikh, 2011). Therefore, the behaviors displayed by supervisors and peers are critical for fostering a positive attitude toward organizational change, as well as it will lead to improvement, innovation, and job satisfaction (Sikh, 2011).

However, influencing employee´s attitudes towards change is not just about preparing the logistics, it is also about fostering an environment where change can be embraced at a psychological level (Choi, 2011; Hiatt & Creasey, 2012). For employees to be ready for change, it is important that they are accepting and understanding of why the change is necessary (Choi, 2011). This is essential as it will set the way the employees are approaching the change, hopefully as a positive challenge rather than a threat (Choi, 2011). According to Hiatt and Creasey (2012), employees should have a 'can do' attitude towards the change rather than 'not my job' for the change to be able to be implemented. Creating a commitment among the employees in all levels of the organization that are facing a change is important as it leads to an active support of the change (Choi, 2011). In this way, the employees will have a sense of duty to support organizational change amongst the change recipients (Choi, 2011). Essentially, this could lead to the employees themselves feeling inclined to to drive the change initiative and process forward, mitigating resistance and building a culture where new ideas and approaches are valued (Choi, 2011).

To make employees involved and committed to the change, Harvey and Broyles (2010) emphasize the importance of creating and feeling ownership of the change. Wilhelm et al. (2024) states that when employees feel a sense of ownership within their organization, they experience positive emotions that fulfill their need for belonging. According to the authors, this connection enhances the employees motivation to perform beyond their formal responsibilities and duties. Ownership leads to a protective and prideful behavior among the employees that makes them voluntarily engage in actions that improve organizational outcomes (Wilhelm el al., 2024). Similarly, research from Harvey and Broyles (2010) show that ownership comes from participating in the change, taking an active role in the change process. Consequently, if the employees don´t experience feelings of ownership, the chances of them resisting the change increases (Elizondo-Montemayor et al., 2008; Harvey & Broyles, 2010).

In order to instill a sense of ownership of the change, it is not enough to know *what* change is to come, employees need to be involved in *how* the change will come about (Harvey & Broyles, 2010). If they are not involved in either, they will be free of any responsibility of the outcome and the chances of even sabotaging the change implementation could increase (Harvey & Broyles, 2010). The authors emphasize that only informing the employees about the *what* and *how*, instead of involving them in both, will take away the opportunity for the employees to be a part of developing the change. This leads to feeling a lack of ownership of the change (Harvey & Broyles, 2010). Involving the employees instead in the process of *how* the change could be demonstrated could increase the chances that the employees develop a 'can do' attitude towards the change instead of a 'not my job' attitude, as Hiatt and Creasey (2012) emphasizes. However, to create ownership among the employees towards the change it is important to accept imperfection in implementing the change (Harvey & Broyles, 2010). To create ownership among employees during a change process, they must be involved and delegated responsibilities. However, researchers note that this can lead to some imperfections in implementation (Harvey & Broyles, 2010). Despite this, it is important to give employees the opportunity to take responsibility and influence how the change is designed. This approach ultimately fosters stronger employee engagement (Harvey & Broyles, 2010).

2.2.3 Resistance to Change

Building on the concept of readiness for change, addressing resistance can become crucial if employees are not prepared for the change (Armenakis et al., 1993; Bareil et al., 2010). Employees often resist change, presenting a significant barrier to transformation. Therefore, managers and change agents must recognize and plan for this resistance, creating strategies to mitigate its impact (Gerwing, 2016).

Research on resistance to change focuses on various degrees of resistance. It can be portrayed as everything from reluctance and skepticism to outright opposition (Warrick, 2023). Though the concepts are similar, different words are used to describe the degrees of resistant behavior (Oreg et al., 2011). Research by the authors Caruth et al. (1985) focuses on the methods by which employees react to change, using the terms 'direct attacks', 'indirect attacks' and 'passive behavior'. Coetsee (1999) describes these resistive reactions by the terms 'active resistance', 'passive resistance' and 'aggressive resistance'. The author states that passive resistance is a subtle form of reaction, a weak form of opposition to change. According to Bapuuroh (2017), it is therefore hard to recognize and take action towards. Moreover, the author explains that passive resistance is characterized by an unwillingness to change behavior or follow through with a change initiative. Change resistors may agree verbally but fail to implement it by "procrastinating or dragging one's feet, and standing by and allowing change to

fail" (Bapuuroh, 2017, p. 1813). On the contrary, active resistance is characterized by more overt behavior, such as appealing to fear, manipulating, sabotaging, falsifying or distorting facts, undermining, arguing, and ridiculing (Petrini & Hultman, 1995). Protesting, participating in strikes, and personal withdrawal are also behaviors of active resistance (Coetsee, 1999). Lastly, aggressive resistance includes actions such as blocking, violently striking and boycotting and destructing (Coetsee, 1999).

When resistance does occur, it is often addressed as a challenge but can be reframed as a valuable tool for organizational change. According to Fountain (2006), resistance signals active engagement and presents an opportunity to delve into underlying concerns, facilitating meaningful dialogue that can direct an organization toward its objectives. Ford, J.D., Ford, L.W, and D'Amelio (2008) further expand on this idea, critiquing the traditional view of resistance as merely disruptive. The authors suggest that resistance often arises from the actions and communications of change agents themselves, highlighting that it can serve as a critical feedback tool that reveals areas needing improvement. This perspective indicates that by understanding and valuing the feedback inherent in resistance, organizations can enhance decision-making and deepen commitment to the change process (Ford, J.D., Ford, L.W & D'Amelio, 2008). The authors suggest that by viewing resistance as a constructive feedback mechanism, organizations can significantly improve the effectiveness and implementation of change.

Furthermore, Ford, J.D., Ford, L.W and D'Amelio (2008) advocates that resistance should be embraced and used as a 'guide' to energize change efforts, thereby transforming potential obstacles into tools for progress. Reflecting on these insights, it becomes clear that managing resistance effectively requires a thoughtful approach that acknowledges its dual role as both a challenge and a resource. Embracing resistance not only addresses its immediate causes but also enriches the change process, creating a more adaptive and collaborative environment. This reflective understanding can empower organizations to navigate change more successfully, ensuring that resistance contributes positively to organizational goals (Fountain, 2006; Ford, J.D., Ford, L.W, & D'Amelio, 2008). Similarly, Warrick (2023) states that if resistance is managed effectively through leadership, communication, and conflict resolution, resistance can be turned into a constructive 'force' leading to better outcomes.

2.3 Summary of the Literature and Identified Gaps

The literature review presents what previous research and case studies has examined in terms of the role of change agents in organizational change. It highlights how planned and unplanned changes

distinctly affect the effectiveness of change agents. Emphasizing a broad definition of change agents, being anyone facilitating change, from leaders to receivers as it presents how their roles vary based on hierarchical position, from strategic to supportive tasks (Caluwé & Vermaak, 2012; Gerwing, 2016; Rousseau & ten Have, 2022). The research focuses on how attitudes, behaviors, and contextual factors influence these roles, emphasizing the need for change agents to adeptly navigate organizational structures and psychological climates to foster a supportive environment for change (Armenakis et al., 1993; Bareil et al., 2010). Additionally, the literature review advocates for viewing resistance more of a valuable tool than an obstacle for refining and energizing change efforts through effective management and strategic communication (Fountain, 2006; Ford, J.D., Ford, L.W, and D'Amelio, 2008).

However, despite extensive discussions on the dynamics of organizational change and the role of change agents, we have identified three large gaps in the existing literature, which we wish to explore further in this study. First, there is a lack of clarity about which individuals that qualify as change agents. The literature varies, ranging from charismatic leaders to any member of the organization. Second, there is also ambiguity about the skills and attributes that make an effective change agent, with some studies emphasizing technical skills and formal power, while others focus on soft skills like communication and empathy. Third, the literature often discusses the challenges change agents face in a general sense but lacks depth in exploring what specific obstacles they face and when. Consequently, there is a need for more in-depth research on the challenges change agents face and the obstacles they must overcome while implementing change. This includes exploring what change agents require in terms of, for example, organizational structure, resources and support to strengthen their roles and effectively address the identified challenges.

3. Method

This chapter will give an overview of the research methodology that this study has taken. The chapter will present this study's research approach and the design of the studyFurthermore, there will be a presentation of the research context as well as how the data was collected and analyzed. There will also be a reflection upon the research quality and what limitations that this study has in terms of exploring the role of change agents and the main challenges they face in organizational change.

3.1 Research Approach

In order to effectively research the main challenges faced by change agents in implementing change and how the change agents' role is affected by these challenges, this study took an inductive approach. Therefore, we first observed a certain phenomenon, being change agents, in order to later arrive at conclusions. This study is mainly characterized by an inductive approach, as this study does not serve a purpose to verify or refute a hypothesis formulated from known facts (Sekaran & Bougie, 2016).

Furthermore, this research has taken on an explorative approach, which is suitable when there is limited information about the researched situation (Sekaran & Bougie, 2016). Therefore, change agents' role in implementing an organizational change in the healthcare sector has been explored without any assumptions. This indicates an exploratory and inductive nature of the study (Sekaran & Bougie, 2016). This means that we as researchers had a broad entry point into the study and then narrowed down the focus area during the course of the research. The direction of the study was, thereby, simultaneously adjusted based on the results of data that we collected. Thus, the purpose of exploratory studies is to gain a better understanding of the phenomena of interest (Sekaran & Bougie, 2016). In the case of this study, the interest lays is the main challenges that change agents face in implementing change and how their role as change agents is affected by these challenges.

3.2 Research Design

This is a qualitative study, where the data is information gathered primarily through interviews. The focus in qualitative research is to analyze data through the meanings by interpreting content within a conceptual framework (Sekaran & Bougie, 2016). By exploring the informant's perspectives, we were able to gather data that reflected on their personal experiences in terms of exploring their role as change agents and identify the main challenges they face in implementing change. Interviews, being a common method of qualitative research, gave us the possibility to collect more in-depth data as we as

researchers captured nuances of the informants' perspectives, which resulted in a more comprehensive understanding of the research topic (Sekaran & Bougie, 2016; Bryman & Nilsson, 2018).

3.2.1 Case Study

This research is designed as a case study, which is recognized as a powerful approach to collect and analyze empirical evidence, especially when it comes to investigating a phenomena within its real-life context (Yin, 2018). By focusing on a single case; the implementation of the 'Competence and Employment Model' in Region Skåne, this method allowed for an in-depth examination of the experiences of involved change agents, providing valuable insights into challenges encountered by them and how these affect their role as change agents.

Case studies are particularly advantageous for exploring complex phenomena where different perspectives need to be integrated to understand underlying dynamics effectively (Yin, 2018). This approach is also emphasized by Eisenhardt and Graebner (2007), who highlight the case study-method's capacity for rich, contextual, and nuanced understanding of the studied phenomena. This aligns with this study's purpose, to identify the main challenges faced by change agents in implementing change and understand how the change agents' role is affected by these challenges, thereby enhancing our understanding of broader organizational issues.

Furthermore, the methodology of conducting a case study supports the investigation of 'how' questions, (Yin, 2018) which are central to this study, being; "What are the main challenges faced by change agents in implementing change?" and "How are the change agents' role affected by these challenges?". By employing a case study approach, we aimed to provide a comprehensive understanding of the change process, drawing from real-life examples and focusing on the experiences and perspectives of change agents within the healthcare context.

Case studies are especially useful in providing rich qualitative data, allowing researchers to explore the studied phenomenon within its natural context (Sekaran & Bougie, 2016; Yin, 2018). Therefore, by applying a case study approach, the aim is to provide a thorough examination of the complexities involved in the change process.

3.3 Research Context

The organization of this case study is Region Skåne, is a public organization in southern Sweden, responsible for healthcare, public transportation, regional development, and culture. The Regional Council is the highest decision-making body in Region Skåne, consisting of elected representatives

from various political parties. The Regional Council is responsible for setting the overall policies and budget for the region (IP1, interview, 17 April 2024).

In 2017, a proposal was initiated to implement a structured education and development program for nurses known as the 'Competence and Employment Model'. This initiative originated from a Swedish hospital unit in Region Skåne to address the ongoing challenge of maintaining a skilled nursing workforce, focusing on both retaining existing staff and attracting new talent. Recognizing the potential broader benefits, Region Skåne adopted the program and aims to implement it across all hospitals before 2025 (IP1, interview, 17 April 2024).

The 'Competence and Employment Model' outlines a progressive career path for nurses, divided into five phases: learning, independent, advanced, specialist, and expert. Each phase is designed with specific learning objectives and competency requirements, grounded in evidence-based nursing practices that integrate both theoretical knowledge and practical skills. This structured approach aims to foster continuous professional development and career advancement for nurses within the region (Region Skåne, n.d - a). In the learning phase, new nurses receive an introduction to the profession, while in the independent phase, they develop the ability to handle more complex care needs. The advanced phase focuses on in-depth knowledge and leadership within nursing. The specialist phase is for those with further specialization and a higher level of education, and the expert phase is aimed at those with profound expertise and leadership responsibilities (Region Skåne, n.d - a). The program also includes continuous competency assessments and targets clinical competence, educational competence, as well as research and development. Participants are involved in educational development works and research initiatives, and there is a clear progression in learning objectives from basic to highly advanced competence (Region Skåne, n.d - a).

Furthermore, to guide and support the groups working with the change of implementing the 'Competence and Employment Model', the region has detailed frameworks about their change management approach (Region Skåne, n.d - b). The region has developed a general model to guide and support management through significant changes in healthcare service, emphasizing the importance of structured change management. The model is designed to enhance the skills and confidence of managers in leading these changes. It is based on Kotter's eight steps to accelerate change. Each of these steps comes with a set of recommended actions and checklists to guide the change process (Region Skåne, n.d - b).

3.4 Data Collection

The data collected from this case study was obtained from both primary and secondary data sources (Sekaran & Bougie, 2016). The primary data was first handedly collected, from interviews with change agents that have been a part of implementing the 'Competence and Employment Model' in Region Skåne. The interviews constitute the main part of this study's findings, with exception for the background information about the change initiative, which comes from the secondary data. . The secondary data is information gathered from electronic documents from Region Skåne, that will enhance the understanding of the case being studied. .

3.4.1 Sampling

In terms of selecting a portion of a larger population for the purpose of conducting a study, this study used a small sample of participants. Given the in-depth nature of qualitative studies and case studies, it is not as do-able to conduct a study with a large sample of individuals and organizations (Sekaran & Bougie, 2016).

In order to find a suitable company to perform this case study on, we formulated sample criterias, referring to the set of requirements used to determine the sample in research. Sampling design decisions are important aspects of research design (Sekaran & Bougie, 2016). For this study, there were fairly few sample criterias. Since the phenomenon of interest is change agents in healthcare based in Sweden, it was a requirement from our side that the studied case was a Swedish healthcare organization that had recently undergone or was undergoing organizational change. We decided that the case had to be a large enough organization to get access to as many change agents needed in order to reach saturation, which is emphasized by Sekaran and Bougie (2016).

To connect with a healthcare organization that recently experienced change, we reached out to multiple healthcare organizations in Sweden. We contacted large healthcare organizations since we assumed that they frequently undergo continuous change processes in various sections of the organization and could give us access to as many change agents as needed. We used our personal and professional networks, scouted for change managers on LinkedIn and contacted healthcare organizations that, based on our understanding, could be interesting subjects of research. Lastly, we got in contact with a manager at Region Skåne who initiated the change process that is explored in this study. Therefore, the methodology for choosing the case study organization for this study is convenience sampling (Sekaran & Bougie, 2016).

This study uses non-probability sampling to select interview participants. This means that the findings from the study can not be generalized to the population, since there is no probability attached to the

participants chosen as sample subjects. Rather, it is a question of purposive sampling, more specifically, judgment sampling (Sekaran & Bougie, 2016). The judgment sampling design is used when a limited number or category of people have the information that is sought. The researchers may therefore select experts that are conveniently available to them instead of selecting the sample based on representativeness and generalizability (Sekaran & Bougie, 2016). As this study aims to explore change agents' experiences, we needed to obtain information from a specific target group, namely people who possess expert knowledge by virtue of having played a key role in Region Skåne's change process. To gain access to these experts, we started by conducting a pilot interview with the lead of the change process. At the time for this interview, we took the opportunity to ask about who in the organization that played a central role in the change process. Using the snowball effect, we were referred by the participants onto more potential participants matching our sample criterias (Sekaran & Bougie, 2016).

Table 1: Interview Participants

PARTICIPANT	TITLE / ROLE	RELATION TO THE CHANGE
Interviewee 1	Strategic Advisor, Associate Professor	Initiator of the Competence and Employment Model to SUS and to Region Skåne.
Interviewee 2	Area Manager, Competence Development Area (HR)	Area manager for the Competence Development Sector where this project is based.
Interviewee 3	Project Leader	Project Leader for the 'Competence and Employment Model'.
Interviewee 4	Head of Operations	One of the change initiators and therefore a part of implementing the change process. Today, no direct responsibility in the change process.
Interviewee 5	Area Manager	Manager over Unit Managers who are implementing the change directly with the nurses.
Interviewee 6	Unit Manager	One of the change initiators. Today, a sub-project leader of the change process.
Interviewee 7	Unit Manager	Had the responsibility to implement the model in the team and to build the steps according to the 'Competence and Employment Model' for the team.
Interviewee 8	Nurse	A part of the 'Competence and Employment Model', level 3 (Advanced Nurse). Additionally, being the head supervisor among the nurses in the unit and therefore an assessor of the model.
Interviewee 9	Nurse	A part of the 'Competence and Employment Model', level 3 (Advanced Nurse).

3.4.2 Conducting Interviews

This study includes a qualitative approach with interviews as our primary source of data. As mentioned in the previous section, we initiated our study by having a pilot interview with the initiator of the change process. This allowed us to gain deeper insights into the situation at hand, providing a first-hand perspective on the challenges and objectives of the change process (Sekaran & Bougie, 2016). This first conversation played a crucial role in guiding our following research steps and providing information about the 'Competence and Employment Model'. This not only enriched our understanding but also helped us formulate targeted interview questions for the ones involved in this case study.

Our interview approach aligns with Bryman and Nilsson's (2018) description of semi-structured interviews. This method not only encouraged detailed and elaborate responses from participants, but it also gave us an in-depth analysis as we were able to find new perspectives in the interviews along the way. This was also possible due to the format of semi-structured interviews, allowing follow-up questions to the interviewees (Bryman & Nilsson, 2018). However, we made sure to maintain consistency in how we presented the set questions to each participant, ensuring uniformity in their experience, as advised by Bryman and Nilsson (2018). Overall, this method allowed us to have a more flexible way of interviewing and enabled a more relaxed interview climate with the participants while still having a structure.We believe this also contributed to the participants answering more freely and openly, giving us more in-depth answers from the interviewees.

3.4.3 Electronic Documents

This study's secondary data was collected from digital documents provided to us by Region Skåne. The secondary sources we have collected are digital documents and presentations from the company, describing the 'Competence and Employment Model' and the set strategies to implement it. These documents helped us early on in the research process as they gave us an understanding of the change before conducting the interviews. Sekaran and Bougie (2016) emphasize how this could be a beneficial way to conduct more meaningful interviews and focus on more relevant aspects of the studied phenomenon. Therefore, we collected secondary and primary sources simultaneously as primary data from interviews also could lead us to search or ask for relevant information provided by Region Skåne.

3.5 Data Analysis

This case study has thematically analyzed the collected material from interviews. Thematic analysis is a common method in qualitative research (Bryman & Nilsson, 2018) as it is a beneficial method for

identifying, analyzing, and reporting patterns within the collected (Braun & Clarke, 2006; Terry et al., 2017). The themes capture relevant and important findings in the data concerning the study's research questions and are, therefore, representing some level of patterned response or meaning within the data (Braun & Clarke, 2006). The process of thematic analysis is not necessarily linear, instead, it involves moving back and forth between different phases of analysis to develop a rich, detailed, and complex view of the data (Terry et al., 2017). In this case study, the analysis was conducted alongside data collection, allowing for the exploration of new perspectives and the clarification of any vague or ambiguous questions. An example is that we thoroughly read the material multiple times to gain a comprehensive understanding of the data simultaneously as we conducted the interviews. According to Braun and Clarke (2006), it is important to thoroughly understand the material collected since it enables us to identify and organize potential themes.

The analysis was executed both on a descriptive level and a more in-depth level, aiming to identify patterns that could clarify the interviews. More specifically, we performed a 'color coding' approach that enabled us to categorize the data to find various themes linked to our research questions. This approach is beneficial for identifying different themes and significant insights from the analysis of the qualitative data (Braun & Clarke, 2006). Visually distinguishing and categorizing information in different colors is crucial for developing a deeper understanding of the data and in constructing a coherent analysis (Ryan & Bernard, 2003; Braun & Clarke, 2006). Therefore, we have reviewed the transcriptions repeatedly, which according to Ryan and Bernard (2003), is important in order to identify themes.

The process of mapping out the study's established themes and subthemes, included reviewing the initial themes identified. During this stage, themes that were not supported by sufficient data were eliminated and we broke down some themes as well as combined some themes we found supported the same pattern. Braun and Clarke (2006) emphasize how researchers should define and refine the essence of what each theme is about to determine what aspect of the data each theme captures. Therefore, through several readings of the transcription, we identified key terms and responses from interviews that we felt enhanced our understanding of the role of change agents and the main challenges they face in organizational change. This resulted in themes and subthemes ultimately being established. The findings were then reviewed in the context of previous studies and theoretical frameworks within the field of change management to gain a well-rounded understanding. Lastly, we translated all the data under each subtheme from Swedish to English using a combination of AI-tools, translating websites and our own knowledge, as the findings are presented in English.

3.6 Research Quality

This section will focus on evaluating the quality of this study. We begin by describing how our research methods align with trustworthiness measures. The section also contains a discussion about the limitations and reflexivity of the study. Lastly, we will examine the ethical considerations identified in this qualitative research. This section aims to maintain full transparency, highlighting both weaknesses and strengths to give the reader a comprehensive understanding of the study's quality.

3.6.1 Trustworthiness

To address the trustworthiness of this study, we focus on the four criterias credibility, transferability, dependability, and confirmability (Lincoln & Guba, 1985). To enhance credibility, we employed research triangulation by being two researchers collecting and analyzing data. This approach reduces bias and allows for more robust cross-checking (Stahl & King, 2020). We also used peer debriefing, seeking feedback from peers and our supervisor to critically assess our methods and findings. This process not only promoted credibility but also dependability, by providing an external perspective to confirm our interpretations (Yin, 2018). Additionally, peer reviewing encouraged us as researchers to carefully distinguish between facts and interpretations, which Stahl and King (2020) means strengthens the consistency of the results. Regarding this study's confirmability, we maintained detailed documentation of raw data transcripts and coding decisions in order to ensure that the findings are aligned with the respondents' answers. Throughout the analysis process, we constantly went back to the raw data to ensure that the analysis was supported by it (Lincoln & Guba, 1985). However, the transferability of our findings is limited since this is a case study focusing on a specific context with a small group of participants (Yin, 2018). Although our study aims to offer insights into similar initiatives as the studied case, the unique context and limited scope mean the results may not apply to broader situations. Our intent is to offer a deep understanding of the change initiative in this case, while recognizing that it may not be generalizable to all change processes.

3.6.2 Limitations

A potential limitation of this case study is according to Yin (2018) that we as researchers chose a case to explore which we already had a standpoint and idea of before exploring the case. However, Yin (2018) describes this as a risk that could easily occur since researchers must first understand the case they will delve into. Nevertheless, such biases can be mitigated by welcoming and integrating findings that contradict initial assumptions when reporting results (Eisenhardt & Graebner, 2007; Yin, 2018).

Furthermore, this study employs a non-probability sampling strategy using convenience and judgment sampling methods, which introduces limitations. Firstly, in this design there is no probability attached to the participants, which makes them not able to represent the broader population, limiting the generalizability of the findings (Sekaran & Bougie, 2016). Participants were selected based on their direct involvement in the healthcare change process, making this approach suitable for gaining detailed insights from a specific group with relevant expertise. However, the reliance on a small, chosen sample may restrict the diversity of perspectives and could introduce selection bias, where the sample reflects the subjective choice of the researcher rather than the variability in the population (Sekaran & Bougie, 2016). These limitations suggest that while the study can provide valuable understanding in the subject, the findings should be interpreted with caution, recognizing that they may not be applicable to other contexts or broader populations.

Translating the data from Swedish, which is the language that the interviews were conducted in, to English, comes with a risk of mistranslation. To mitigate this risk, we used a combination of AI tools, translating websites and our own knowledge to ensure the accuracy of the interviewees' stories after translation.

Lastly, the timeframe of our study is important to consider, as organizational contexts evolve over time. While our interviews captured a snapshot of the organization's dynamics at a specific moment, these dynamics may have shifted since then, affecting the relevance and applicability of our findings. Despite these limitations, our study aims to offer valuable insights into the complexities of organizational change processes, highlighting role of change agents and the main challenges they face in organizational change to contribute to the knowledge in this field.

3.6.3 Ethical considerations

Ethical conduct is crucial in research and should guide every stage of the process, from data collection to publication (Sekaran & Bougie, 2016). We prioritized ethical considerations by providing participants with an information letter outlining the study's topic, terms of participation, and confidentiality practices before conducting interviews. This approach helps participants feel comfortable and aware of their role. During interviews, we allowed participants to review the information letter, ask questions, and confirm their participation. To avoid bias, we did not disclose specific research purposes, only the general topic and research questions. This approach aligns with Sekaran and Bougie's (2016) advice on the level of transparency researchers should maintain. Additionally, we followed the authors advice on avoiding leading questions or any that could cause harm to participants.

Our semi-structured interview format allows participants to share as much or as little as they wish. To uphold ethical standards in reporting, we were committed to representing the data accurately without biases. This includes acknowledging the study's limitations, as discussed in 3.4.2, to avoid misleading readers (Sekaran & Bougie, 2016). Transparency and respect for confidentiality remain at the core of our approach.

4. Findings and Analysis

In the following section, the findings of this study are divided into two main themes. The main themes "Change Agents' Understanding and Commitment" as well as "Disruptions in Agency" capture the essential experiences identified from interviewing nine change agents with various roles and positions.

4.1 Change Agents' Understanding and Commitment

The first theme that the interviewees of this study frequently highlight is the significance of ensuring that those involved in implementing the change, change agents, fully understand and commit to the change. One part is ensuring that key people throughout the organization understand the purpose and goal of the change as well as the path to achieving it. The other part is that they not only *understand* the change but also *commit* to driving and implementing it. In general, the interviewees seem to believe that the two parts are connected one-way; you can understand a change without committing to it, but you cannot commit to a change without understanding it.

4.1.1 Understanding the Change

The interviewees express how understanding the change is the foundation for being able to implement it effectively throughout the organization. On one hand, interviewees highlight the need to understand the vision and purpose of the change initiative, meaning, what it is and what it wishes to achieve. On the other hand, they also emphasize the importance of understanding the urgency of the change, that is, the immediate need for action and attention. According to an initiator of the change, IP1, there is a high sense of urgency among the individuals who have been involved and participative in the change.

> *"The first step is to ensure that there is a need and that this change is urgent, and it can be said that everyone working at the hospital who now has the opportunity to participate in this thinks that it is extremely urgent. It is incredibly valuable for a nurse to see that they can demand and receive training, they can take on increased responsibility and obtain new positions to achieve a different salary structure, so I believe many think it is very urgent."*
>
> - IP1

Similarly, the unit manager IP6 expresses a clear understanding of the importance of implementing the 'Competence and Employment Model', even if it can be challenging at times. When we ask how their unit has been able to implement the change, IP6 says;

"It is that we have been very driven and convinced that this is the path we must take. There has been no other option. This is what we need to work on."

- IP6

While the initiators of the change, such as IP6 and IP1, understand the reasons for the change and urgency of implementing it, it is crucial that this is communicated to other managers responsible for the change in Region Skåne as well. Several interviewees highlight that the individuals responsible for driving the change should be fully informed about the vision and purpose of the change initiative, as well as the consequences of not achieving the desired result. Essentially, understanding the urgency that this change initiative entails. This ensures that all managers are aligned and committed to the change, and prioritizes to drive it forward.

"But it's not possible to work through unit managers if they're not on board, if they don't understand, you have to explain what will happen if we do not act"

- IP4

"It's crucial that managers grasp this concept, possessing the knowledge, desire, and ambition to implement the change effectively. Without this understanding, the process becomes challenging."

- IP2

"So for me, it was very important to receive as much explanation as possible about what I got to be a part of through the large project back then. It was crucial for me to be able to grasp it, process it, and incorporate it into the operations I was responsible for."

- IP3

These experiences indicate that if managers understand the change and its urgency, they are more likely to take an active role in the change process and in that way driving it forward. Furthermore, the interviewed managers show a clear understanding of the reasons for the change and its critical importance. They emphasize that the change will benefit both the nurses, in terms of their professional development, and patient care, while also addressing the long-term issue of nursing shortages in Region Skåne. The two interviewed nurses reveal the same understanding of the change and its importance. One example of this is demonstrated below.

"The concept and idea are all very positive and that is what we, as nurses, have requested: to have even more opportunities for career paths, skills enhancement, and various gradings depending on where one is at."

- IP9

These examples demonstrate that the message regarding the change was effectively communicated and understood by change agents in varying levels within the organization. Moreover, it appears that the message was comprehensible, likely due to the strong demand for this change expressed by the interviewed nurse, IP9.

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Overall, the interviewees present a cohesive understanding of the change's purposes and benefits, demonstrating a clear commitment to improving the professional lives of nurses and the quality of patient care through structured career development opportunities. The responses from interviewees emphasize that this shared vision among the leaders and participants of the initiative is critical for its implementation. They collectively stress the importance for all involved, particularly managers and change agents, to be fully informed about the purpose, vision, and urgency.

4.1.2 Commitment to the Change

Interviewees of this study share the opinion that a widely spread commitment towards the change throughout the organization will facilitate the implementation of it. According to the interviewees, ensuring that managers and employees commit to the change is beneficial both in order to reduce resistance and to ensure that a favorable perception of the change is promoted. Commitment to the change is therefore discussed as embracing the change initiative with positivity and actively advocating for it by spreading an understanding of the change's vision, purpose, and urgency.

Several interviewees emphasized the importance of ensuring that people throughout the organization embrace the change with positivity. Though they state that the willingness to change should come from all parts of the organization, many of them specifically highlight managers' positive attitudes toward the change.

"I can tell, now that I've broadened my scope and am working with even more people, that the managers who have previously worked with education issues and who have an interest and see the benefit in their employees increasing their skills, find it easier to understand this and make something good out of it."

\- IP3

"I think it's very important that the management teams are well aware and willing to get this started, and that is because HR is also very important in the work."

\- IP2

Willingness and motivation to embrace change appear to have a connection to understanding of the change and its necessity. This is also shown to create a positive attitude among the change agents, driving them to promote the change initiative further. These elements are crucial for demonstrating a commitment to the change process. In situations where hesitance and doubt are noted, some interviewees emphasize the importance of managers displaying a positive attitude and engagement in the change initiative, as highlighted by IP1.

"That is why managers must take the lead by actively participating in the change to make things happen. [IP8] has been very active and proactive in developing everything for the model and has been very positive from the start. Without her, [her department] would not have been the first to implement this model in the region"
- IP1

Shifting focus to nurses, they express that better and more defined possibilities to professionally develop is something that they and their colleagues have been requesting for a long time, so the idea of this change is welcomed, appreciated and, therefore, easier to commit to.

"For our part, I think it felt like... You received a bit of recognition, especially when you had been in the department for a long time, it becomes a bit clearer who is new. (...) You have a development opportunity in a different way. Because it is clear and obvious what is available."
- IP8

"Everyone is positive towards the idea and the concept and that's what we as nurses have requested, to have even more opportunities for career paths, skill development, and various gradations depending on where one stands. (...) I generally feel that the group it concerns are very positive about wanting to drive it forward and have missed this kind of change for a long time and have requested it."
- IP9

As the findings above show, the change agents interviewed demonstrate a clear commitment to following through with the change initiative. They also express the importance of getting others to commit to it, which requires communicative efforts to get others on board, a task best suited for the people who already are.

One way of advocating for the change is to spread the message about the change through frequently organized events and gatherings. In these forums, the change agents effectively share information about the change, including the reasons behind the initiative, the vision, and importance.

"We work with spreading the information more formally in various training days and workshops."

"(...) it [nurses' responsibility] often involves holding workshops, for example, or small meetings when the opportunity arises where people gather to have lectures or similar, and some practical things too that one can gather people for. So there are many learning opportunities one tries to create, or for spreading information so that it spreads to the rest of the department."
- IP9

Advocating the change frequently during workshops and training days is explained by change agents as something that could benefit the employees' commitment towards the change. This seems to be helpful in change agents' attempts to promote and guide the change.

However, interviewees express that the methods for implementing the 'Competence and Employment Model' often could change along the way, as well as vary across different units at Region Skåne. Therefore, they emphasized that regular communication and ongoing explanation of the change are particularly crucial when initial strategies and plans are frequently adjusted.

"They struggle when there are too many changes too often. Something that is very important is that you have the people you want to bring along from the beginning and that they are involved regularly. Very regularly, it doesn't need to happen so much but it should happen often, that is having meetings, i.e., communication. (...) I receive a lot of information about changes, and a lot happens, but I must regularly disseminate this so that the whole group is on board, and that's also a challenge because they don't have time for it. Sometimes it's difficult to meet with them so that they can be on the journey so that it doesn't become like 'now we've changed this too'. 'Oh'. So that they don't become completely baffled."
- IP3

This illustrates how IP3 as a change agent needs to remain committed and ensure that those receiving the new changes remain engaged throughout the process. There is a risk that individuals might not only lose their understanding of the changes, but also their commitment, if the changes are too frequently changed and not communicated.

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The interviewees in this study unanimously emphasize the importance of widespread organizational commitment to effectively implement the 'Competence and Employment Model'. They highlight that positive attitudes, especially from managers, are crucial for reducing resistance and fostering favorable perceptions of change. This positive attitude is mirrored by nurses, who see the change as fulfilling their long-standing demands for better career development opportunities. Moreover, actively

spreading the message about the change through formal and informal communications, like workshops and regular meetings, is seen as essential by the change agents for ensuring that the change is well understood and integrated into daily practices. This comprehensive approach to communication helps keep the initiative alive and relevant, making its implementation more successful.

4.2 Disruptions in Agency

The second theme of the interviewed change agents' practice of facilitating change is centered around the experienced disruptions in agency. The empirical data discussed in this section will focus on the various problems that affect the change agents' ability to act with autonomy, authority and effectiveness. As we have interviewed change agents from various organizational levels, they possess different amounts of authority and governance. However, every change agent interviewed points out a few obstacles standing in the way of their ability to facilitate change, limiting their room for action. These can be summarized into three subthemes; the hierarchical implementation structure, resource constraints, and resistance to change.

4.2.1 Hierarchical Implementation Structure

When speaking to the various change agents, it becomes clear that their sense of limited agency is partially attributed to their role within the change management hierarchy. They experience their role as somewhat of a middle hand, passing on the message and responsibility onto the next person in line.

In a public organization like Region Skåne, the top decision makers are politicians, creating a notably clear hierarchy. IP2 tells us that when the change initiative 'Competence and Employment Model' was decided on by the regional director, it was forwarded to the so called program office, responsible for the education and development program 'Competence and Employment Model'. The program office was responsible for meeting the hospital management teams to spread the message, describing the goals and purpose of the change initiative. Moreover, the program office discusses with each unit and hospital what they need in terms of resources to implement the model.

"I would say they (program office) have very close dialogue with each organization, moving from one hospital to another and meeting with these contacts or the recipient organization. And they say, what are your conditions here? How are you going to work?"

\- IP2

At some hospitals, there are 'Competence and Employment Model' project leaders responsible for implementing the change in every operation. IP3, who is a project leader at one of the hospitals, describes the start of their role like this;

"This ['Competence and Employment Model'] was decided somewhere else, and we were given a finished, or half-finished, product that we were supposed to implement into the operation. (...) I was quite alone in the beginning, but now we are quite a few, so the role has become more stable, that role clearer today. We have differing opinions about whether we work on implementation and change or if we simply work on producing a product. Sometimes I see it as though I'm producing a product that the managers, in turn, should implement. So I'm just a catalyst or an aid in their implementation."
- IP3

"I would have liked a bit more support from senior managers, I think, who maybe highlighted this and put a bit more pressure on everyone. 'This is what we're going to do,' just like they do with production."
- IP3

The examples illustrate the hierarchical dynamics of implementing change, where responsibility is delegated to the next change agent in line, partially relieving higher-level change agents of their responsibilities. From the interviews, it seems as if the higher-level change agents are leaving their responsibilities of implementing the change to the project leader. The following example shows how the project leader in turn is passing it forward to the hospital management to implement in their departments. Consequently, IP7 describes a feeling of being left with the responsibility without guidance and steering from change agents with a higher hierarchical position.

"We also had a project manager, and she is still at the hospital, but now works more with the nurses and has left us specialists. Initially, it was very structured, but now I don't feel it's as controlled because I don't hear much anymore since we no longer have a project manager together. Now we are waiting, which is very unfortunate because it's a very good program. 'Must everyone participate?' Why can't we just work with those who are involved? It's a difficulty."
- IP7

After the project leaders, or equivalent role, pass on the implementation onto the head of operations and area managers, of which we have interviewed IP4 and IP5, they continue the chain down to unit managers.

"I pushed quite hard within my area, particularly concerning surgery and anesthesia, to get the unit managers to understand that we must do this, otherwise we won't remain competitive. (...) Then, once

they [unit manager] were on board, they worked through their employees. It wasn't me who did it. I work through my subordinate managers."

- IP4

The unit manager IP6 agrees with IP4 that it becomes the unit managers' responsibility to drive the change in each unit of the various departments. One example of this responsibility, they say is;

"I am currently in a meeting with the other unit managers within the operational area, where we together must have a structure for competency assessments. We will designate which nurses are to conduct these competency assessments. How should we practically implement this?"

- IP6

This example from IP6 illustrates how unit managers are adjusting the 'Competence and Employment Model' to make its implementation practical within their units, given that each unit may have different characteristics.

Lastly, the two interviewed nurses are delegated some responsibility to implement the change. They describe that their main role in the implementation is communicating and interacting with fellow nurses, who work close to the core operations. IP9 describes one of their responsibilities as follows;

"It's based on the fact that we receive different missions from above, that she delegates and distributes according to these different phases that we are divided into. We have our various job descriptions where it says, among other things, that one should pass on the information to colleagues and coworkers. That is supposed to be said as inspiring in the work we are to do. So it's more that I am closest to reaching out to the remaining employees and my colleagues then and working very much on the unit clinically with the changes we want to make (...) so it's more that I work a lot on inspiring and involving the remaining colleagues"

- IP9

Furthermore, IP9 emphasizes that the involvement of employees is key to creating a sense of responsibility throughout the organization. IP9 also stresses that this is an effective way to instill the motivation in employees on all levels to follow through the implementation of the change.

"I believe that the more people you involve, from top leaders down to every individual employee, the easier it is to implement such changes and for everyone to feel they have a role. Otherwise, I think interest can easily wane, and one might feel left out altogether. Personally, working mostly at the level where I educate and inspire the nursing assistants I work with, I honestly feel that the more people have a purpose, the easier it is to carry out various changes. I would say it's important for everyone to feel some form of purpose in what they do."

The area manager IP5 agrees with IP9's idea of employee involvement in the change process. They argue for employee involvement at all levels to ensure effective implementation and sustained engagement.

"I believe that for change to be successful, it needs to originate from the staff who find it enjoyable and want to drive it forward. I think there's a greater likelihood of it not fully succeeding if it's mandated from higher levels and pushed through, whereas most successful changes stem from the employees who find it enjoyable to drive forward. So, I actually believe this approach is more successful."
- IP5

The interviewees IP9 and IP5 emphasize that allowing everyone within the organization to participate in the change process makes them enjoy the journey, feel a sense of purpose, and motivates them to implement the change. This raises the question of whether widespread participation across all organizational levels might bring challenges if the change agents at the lower levels are disconnected from top management's direction and vision and lack guidance from their managers.

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In the hierarchical implementation dynamics of the 'Competence and Employment Model' within Region Skåne, change agents feel like intermediaries in a top-down command structure. Decisions start at the top with politicians and cascade down through managerial levels to the ground staff. At the operational level, project leaders and managers are crucial for the actual implementation, facilitating the process but often feeling disconnected from decision-making power. This process reaches down to unit managers and finally to nurses who are directly involved in day-to-day implementation and are encouraged to inspire their peers.

4.2.2 Resource constraints

Another aspect of the experienced disruption in agency is the resource constraints of the healthcare sector. All participants have expressed the limited resources as a challenge, impairing their ability to implement the 'Competence and Employment Model'. The resources that the interviewed change agents' experience a shortage of are personnel, time and financial means.

The 'Competence and Employment Model' is a change initiative designed to address personnel shortages. By offering nurses opportunities for growth and development, the model aims to encourage them to remain in their professions and unit. However, one major obstacle to implement the model,

identified by the interviewees, is the shortage of nurses. That is, the issue that the model aims to address is also what hinders its effectiveness. The model is dependent on the employees being able to set some time aside during the week for their professional development, for example by attending courses and doing research. If there is a lack of personnel, the possibility of leaving the patients becomes impossible.

"(...) this model requires you to have a slightly higher staffing than what we are used to today. I'm not saying it's too high, absolutely not, but it's higher than what we're used to. In order for us to be able to work with the tasks that are intended based on the model, for our nurses to be able to work with the implementation of other things, the development of certain aspects or research or other things, this requires that they have some administrative time that is not available in operations today."
- IP3

"The biggest challenge is that we don't have enough nurses to be able to free up the time and also to be able to get a structure for the assessment. That's what I can say is the absolute biggest thing."
-IP7

Similar to IP3 and IP7, three other interviewees expressed that the limited personnel is an issue. These interviewees even state that it is, in fact, impossible for the model to be implemented as planned. They are somewhat stuck in a paradoxical situation where the very problem the model seeks to solve is also impeding its successful execution.

"We can continue as it is today, but then we don't work according to the model ['Competence and Employment Model']*, because it's about being able to move up the ladder with the help of distribution. Again, that's the resource we lack."*
-IP8

"With the personnel situation, it is an impossible equation at the moment. So we have done a few, but it is a fraction of the staff group that has had to undergo an assessment. (...) We had hoped that we could have gone further. But it has not been practically possible."
-IP9

"It's not possible. It cannot be solved. If you only have a certain number of heads and percentages in your business to get around the clinical, it's almost like you can't get around anymore and that's when you come to this with other solutions. For example, you have to work overtime or someone has to work double shifts, or offer someone a plus for something such as salary."
-IP3

This suggests that some interviewees are pessimistic about the feasibility of implementing the change, particularly when resource limitations restrict their discretion. Moreover, many of the interviewees are experiencing the lack of time as another challenge. For example, IP1 does not perceive there to be enough time to follow the development steps of the 'Competence and Employment Model'.

"Another challenge is having time to develop, if we are very short on staff and overcrowding, we don't have the opportunity to send so many people on training, (...) we need everyone in healthcare."
-IP1

Other interviewees expressed a challenge being the amount of resources it took to develop the model and the various levels in the 'Competence and Employment Model'.

"Yes, but the general situation, the situation in health and medical care with everything that needs to be done. So it is this aspect of time that needs to be prioritized. It is quite extensive work. You really need to do it thoroughly. It is not possible to take any shortcuts if you say so, but this is about looking at the whole transparent organization, the business."
-IP2

"Approximately eight hours a month can be dedicated solely to staying current in order to pass on this knowledge and thus ensure the quality of nursing care, making sure it's evidence-based. (...) However, our challenge has been understaffing, preventing us from allocating these hours to our own work. We end up using all our time for direct patient care, often having to forego these dedicated hours. Currently, we're striving to carve out this time so nurses can consistently work based on these specialized profiles and mission descriptions we've outlined."
-IP7

During the interviews, the participants express that the limited resources are something that has always been a problem in the healthcare sector, and something that they have little power of controlling. They are dependent on politicians or private investors and not having to worry about the resources seems like something they can not count on happening any time soon. Two participants is stressing the following when explaining the financial status of Region Skåne and the healthcare sector overall;

"There are huge budget restrictions as it stands right now. (...) The economy is definitely a challenge, because with new positions in this model, there's a higher wage cost."
- IP5

"That it's absolutely a challenge and we don't have the funds for it. Instead, we really need to consider what should we do? In what way can we provide long-term salary growth and long-term skills development? That can be seen as the challenge."

- IP2

One of the unit managers explains that the lack of resources has resulted in the stagnation of the 'Competence and Employment Model'. Regarding the current status of the change process and whether any efforts are planned to advance the change, IP8 states the following;

"No, that's what's missing. That's what we're waiting for. Because not all hospitals have joined this, and now the money is gone. So we're waiting a bit for it to come from the regional level. Because we have the ability to make assessments, but when you make a new assessment as you move up in the model, you should receive higher pay, and that money isn't available."

- IP8

This indicates that the implementation of the 'Competence and Employment Model' is perceived as almost impossible to continue. The interviewed change agents express that this is something none of them are able to change, since the budget is a matter of politics and regional decision-making processes.

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To summarize, the 'Competence and Employment Model' is struggling to achieve its goals due to significant resource constraints, specifically in personnel, time and financial means. With insufficient staffing, nurses cannot spare time for development activities without affecting patient care. Furthermore, financial limitations and the intense demands of healthcare work compound these challenges, restricting the model's ability to foster professional growth and retention effectively.

4.2.3 Resistance to Change

Several of the change agents interviewed have experienced resistance to change. The resistance seems to be apparent throughout the organization, both from the managers who are responsible for implementing it, as well as the change recipients, nurses. In terms of managerial resistance to the change initiative, the interviewees described that resistance from managers is specifically described as failing to comply with and prioritize the change initiative.

"There has been some resistance from certain unit managers. They haven't really driven it in their unit as they should. That's how it is with all changes - there are always some who are a bit resistant."

- IP8

"I think everything was quite expected, especially this resistance when you bring something new that requires effort, a shift, so to speak."

- IP7

"There are departments that have chosen to… not think they had the time. Not thinking that it was so important to do this right now."

- IP4

These examples illustrate a lack of willingness to embrace and actively support the change. In fact, IP3 states that they have never experienced a unit manager who was positive about the change from the beginning. Instead, they have all been skeptical at first.

"When I come to present it, they think... They have been involved in so many changes within healthcare that they feel 'this is just something made up' and 'how are we going to... now we also have to do this and why should we do it? It never gets better anyway'. So that's the attitude they have when I come with the product, or with the project."

- IP3

Skepticism towards the change is expressed by the interviewee as a result of the organization undergoing numerous changes, which have not always simplified tasks or resolved the challenges faced by nurses, despite that being the intended goal of the change.

Several interviewees state that resistance does not only exist among managers, but also among nurses. Even if these interviewees perceive nurses as generally positive to the theoretical idea of the change initiative, there has been discontent about the practical implications of it. One example of this issue is highlighted in the following quotation, where a participant discusses the problem of nurses being forced to temporarily hand off the operational activities of their units to other employees, in order to prioritize the developmental activities that come with the 'Competence and Employment Model'.

"That is, they create nothing themselves, they do not manage their unit on their own but others come from outside because they do not have time. It's not that they always want to, some do not want to, but there are many who do want to, even though they don't have the time for it."

-IP3

To address this, interviewees express the importance of minimizing the discontent and ensuring a positive attitude among change recipients. IP4 mentions that change recipients who are tasked with more responsibilities, such as evaluating colleagues, could in some cases be reluctant to change.

"Some understand early on that this is good, while others need a bit more time. It's like that with all change processes. But there was also some suspicion about this. But if one is perhaps really accustomed to being involved in evaluating each other and evaluating oneself, in this way that is somewhat included in the model, they might be less suspicious."

- IP4

Similarly, IP9 describes a reluctance and fear of change among nurses. They mention that one main challenge is being motivated towards the change despite limited practical possibilities in implementing the 'Competence and Employment Model'.

"It's a challenge to reach out and inspire, as there are always some people in a workplace who are afraid of change. In that case, it's the fear of something new and making changes, but if we had all the resources we needed, I believe there would be few negative thoughts about it in my department. (...) But then there are so many external factors all the time that one can't control much, which clearly affects things. Sometimes you can't help but wonder, will it ever change?"

- IP9

This illustrates that both IP4 and IP9 worry that the additional responsibilities in combination with limited possibilities to exercise them, could make the nurses more hesitant towards the change. IP9 indicates a lack of motivation, questioning the feasibility of the change. Essentially, leading to nurses' passiveness in not facilitating the change or driving it forward.

Furthermore, IP8 has gotten the impression that some nurses had some negative experiences regarding the practical process of being assigned a level of the 'Competence and Employment Model', leading to these nurses being assessed to a lower level than their real competence.

"The negative thing I've heard is about those who might have fallen through the cracks in the implementation process. The few colleagues, like the example I mentioned before, who did not have training for supervisors, for instance (...) Then you might have worked here for fifteen years, but you don't have the formal education, so you end up at a lower level."

-IP8

Additionally, IP8 explains that some nurses have concerns about the model relying heavily on what are termed 'assessments' in the model to place the nurses in the right competence level, which has led to some unease.

"What we have discussed is that when these tools were formulated, they were defined specifically as 'assessments'. Many have reacted to this, myself included. It's really supposed to be feedback in lifelong learning, that's the idea. But the very word 'assessment' has such a negative connotation,

suggesting a chance of failing, and what then? 'Do I lose my job?', someone joked, but there was some seriousness to it."

- IP8

This example illustrates how a negative, reluctant attitude can easily emerge during the change process if there is any uncertainty or ambiguity regarding the change. It shows how quickly confusion and uncertainty can arise when there is a lack of clarity in the implementation of the change.

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Several change agents interviewed have encountered resistance to organizational change, both from managers responsible for implementation and from nurses, the recipients of the change. Managers often fail to prioritize or actively drive the change within their units, and many initially respond with skepticism. On the employee side, while nurses might conceptually agree with the changes, practical challenges lead to discontent. This situation highlights the need for clear communication, adequate resourcing, and more inclusive involvement in change initiatives to mitigate resistance and foster a more positive reception among all stakeholders.

4.3 Summary of Findings

Our study reveals a deeper understanding among interviewees regarding the purposes and benefits of the 'Competence and Employment Model', aimed at enhancing nurse retention, maintaining high-quality care, patient security and workforce constraints through career development opportunities. This vision is shared among the interviewed change agents and is expressed to be essential for understanding the importance of implementing the change. The findings show that to do so, it requires a strong organizational commitment, especially from change agents as they play a pivotal role in mitigating resistance and promoting a positive attitude and behavior towards the change.

Furtheron, the findings show that both formal and informal communication from the change agents during organizational change, are critical in ensuring the change is well understood and integrated into daily operations. This keeps the initiative relevant and engaging through broad support at various levels of the organization. However, the findings reveal that the implementation of the change model faces challenges due to a hierarchical, top-down structure that restricts the participation of nurses and unit managers in decision-making. Although the initiative started with a bottom-up approach, the findings reveal a conflict between the need for top-down direction and bottom-up involvement to effectively adapt and implement the change across all hospital units in Region Skåne.

When facing the challenges presented in chapter 4, resistance from managers and nurses, is expressed as a practical challenge that the change agent´s meet when implementing the change. In these cases, the findings underscores the importance of clear communication, positive attitude and behavior towards the change and the importance of inclusive participation. Furthermore, the model faces significant resource constraints, including financial, time, and personnel shortages, which complicate its implementation and effectiveness. These limitations create a problem where the lack of resources necessary for development activities also impedes the change model's ability to improve professional growth and retention for Region Skåne.

5. Discussion

In the beginning of this paper, we asked the questions "What are the main challenges faced by change agents in implementing change?" and "How are the change agents' role affected by these challenges?". Interviews with nine individuals of various organizational levels and positions, all involved in facilitating the change process, resulted in deep and rich descriptions of the change agents' reality. This part of the paper will discuss the findings presented in chapter four and the available knowledge presented in chapter two. By doing this, we aim to fulfill the research purpose of identifying the main challenges faced by change agents in implementing change and understand how the change agents' role is affected by these challenges.

Similarly to a general definition of change agents' provided by the literature on organizational change (Armenakis & Harris, 2009; Lunenburg, 2010; Lidman & Strandberg, 2023), the interviewees of this study describe their responsibility as stimulating, facilitating, and coordinating change. However, some of the literature on the topic emphasizes that the change agent is a qualified position, carried by an eligible person; trusted and supportive leaders (Rousseau & ten Have, 2022) or skilled and powerful individuals (Lunenburg, 2010). In the case of this study, being a change agent is not a formal title or a qualified position. Instead, it is characterized by having the responsibility to drive or facilitate the change. Being a change agent is in this study shown to be a demanding and complex responsibility, and it is therefore not surprising that they encounter challenges in fulfilling their role. The three main challenges identified are 1) facilitating change in a complex environment and structure, 2) unleashing agency and ownership, as well as 3) handling and mitigating resistance.

5.1 Complex Environment and Structure

As mentioned, healthcare organizations are characterized by complex conditions due to evolving structures (Pomare et. al, 2019), shortage of licensed personnel (Socialstyrelsen, 2023), issues of resources as well as influential political and stakeholder views (Dobers & Söderholm, 2009; Chreim et al., 2012). Some authors state that the complexity of change underscores the need for non-linear models that embrace and allow for ambiguities and contradictions (Weick & Quinn, 1999; Graetz & Smith, 2010; Lewis, 2011). They argue that the oversimplified, linear models of change are not adaptable enough for constantly evolving organizations, facing unpredictable factors and requiring a large amount of flexibility (Graetz & Smith, 2010; Lewis, 2011). However, the change management at Region Skåne is guided by the linear model by Kotter (1996), starting from creating urgency, to forming a coalition, creating and communicating a vision and so on. According to the interviewees of this study, reality is however shown to be rather complex; chaotic and non-linear.

One aspect of the complexity of this change process is that it is non-linear and continuously changing. As a unit manager of this study points out, the implementation process has stalled due to a combination of resource constraints and the requirement for several hospitals in Region Skåne to adhere to the same linear process. At the time of this study, the ongoing work of implementing the model had been put on pause in some parts of Region Skåne as regional decisions were expected regarding budgets and the continued change process. Despite the implementation being paused, the organization does not freeze. Instead, it can be assumed that changes are still ongoing; employees leave or are hired, managers take on new roles, and departments undergo reorganization. These shifts may necessitate revisiting earlier steps in the process, such as step four in Kotter's (1996) model, 'communicate the vision'. Practically speaking, this would mean that change agents must sometimes go back in the linear model and reintroduce the vision to new nurses and managers. Therefore, it might be more effective to view change as a continuous process and to structure change management accordingly. Thus, the implementation of the 'Competence and Employment Model' is a complex process that demands flexible approaches and a dynamic change process, which permits customizing where needed, revising, retracing steps, pausing, and accelerating. This raises the question of whether using a linear model as guidance for the change process might be counterproductive and potentially causing change agents to struggle with accommodating the complexity.

The second complex aspect is the fact that this change initiative relies on that there are individuals who will tailor it to fit various contexts. The change is a planned, episodic effort, meaning that it holds certain parameters and characteristics (Weick & Quinn, 1999; Cummings & Worley, 2014). The complexity, however, lies in the fact that it is also large-scale, meaning that these planned parameters should be implemented in the entire organization of Region Skåne, affecting thousands of employees and involving hundreds of change agents. The various units within Region Skåne differ significantly in mission, staff numbers and composition. When implementing the model in the various hospitals and units, the interviewed change agents reveal that managers must consider the unique circumstances of each hospital and tailor the action plan accordingly.

The complexity and large-scale nature of the change effort described in this study puts a need on change agents to not only drive, but to guide and redirect the change according to the varying settings and circumstances. This is what Weick and Quinn (1999) describes to be the role of change agents in continuous change. As mentioned, the 'Competence and Employment Model' is an episodic change effort, however, it might be beneficial being structured more as a continuous change due to its complexity. Accordingly, Weick and Quinn (1999) highlight that effective organizational change requires recognizing the ongoing nature of change and adapting interventions accordingly.

Lastly, the resource constraints affecting the organization complicated this change process. Resource issues are one of the main challenges mentioned by the change agents in this study, which limits their ability to implement the change. Some interviewees even describe the implementation of the change as impossible and unrealistic due to the shortage of resources. The findings show that many of the interviewees perceive this barrier as an external circumstance which they have no power of, since it can only be changed by politicians or private investors. Furthermore, some note that the resource shortage has plagued the healthcare industry for as long as they can recall, highlighting their perception of this challenge as beyond their control or influence. The change agents' feeling of their hands being tied significantly impacts their ability to fulfill their role as change agents, that is, to facilitate change.

5.2 Unleashing Agency and Ownership

Agency, referring to the ability of organizational members to have the power, influence and voice to make their own decisions, is facilitated by removing barriers and enabling employees (Katz & Miller, 2024). When organizational members have agency, they are seen as complete and active participants in the change (Katz & Miller, 2024). Empowerment is a cornerstone in involving members throughout the organization, leading to a higher encouragement to be a part of the change (Gill, 2020). Assigning the responsibility to lead and drive change in multiple organizational levels will also engage a larger part of the organization (Higgs & Rowland, 2011; Rousseau & ten Have, 2022). Heyden et al. (2017) emphasizes the importance of employee-driven ideas in initiating effective organizational changes, especially given their close position to the core operational challenges of the organization. Bolman and Deal's (2021) also suggest that change efforts driven by employees are more inclusive. According to the authors, by integrating both top-down and bottom-up approaches and thereby adopting a 'hybrid' structure, organizations can more effectively foster meaningful change (Heyden et al., 2017; Bolman and Deal, 2021).

In the case of this study, the foundation for the 'Competence and Employment Model' was created after employees in one hospital expressed their concerns and a need for change (see section 3.3). After a few years, the management took decisive action to implement it across the region. Thus, initially inspired by a bottom-up approach, where employees in a lower level of the organization had long advocated for this change amid a crisis in healthcare staffing, the implementation of the change eventually transitioned to a top-down implementation structure. This combination and integration of top-down and bottom-up involvement in change aligns with the ideas of Heyden et al. (2017) and Bolman and Deal (2021) about how change is most effectively structured.

However, while the change process design is effective in some aspects, it appears to place change agents in a certain role, where their agency, thus ability to facilitate change, is not fully realized. According to the literature reviewed, the roles that change agents can take on varies from powerful, strategic, decision-making roles (Caluwé & Vermaak, 2012; Gerwing, 2016; Wolbring et al., 2021) to roles with more emphasis on communicating, mediating and translating (Rouleau & Balogun, 2008; Armenakis & Harris, 2009; Caluwé & Vermaak, 2012; Boch Waldorff & Madsen, 2022).

As described in the findings, the change agents interviewed for this study generally experience their responsibility as being handed something, and passing it on by spreading the message. This focus on the change agent's communicative abilities resembles the notion of change agents as mediators (Rouleau & Balogun, 2008; Armenakis & Harris, 2009; Wolbring et al., 2021), facilitators (Caluwé & Vermaak, 2012), or advocates (Gerwing, 2016). Some change agents express that they, after getting handed the responsibility of implementing the 'Competence and Employment Model' and before passing it on, are given the authority and empowerment to tailor the model to the specific needs of their department or unit. In this way, the concept of change agents as 'translators' (Boch Waldorff & Madsen, 2022) is similar to some interviewees' descriptions of their responsibility. These interviewees interpret directives they receive, customize these directives to suit the specific needs of their departments or units, and then effectively communicate these adapted directives throughout their respective areas of responsibility.

Allowing the flexibility to adopt various roles based on the situation can be valuable to enhance the effectiveness of a change agent, as the impact of a given role depends on the context (Nikolaou et al., 2007; Gerwing, 2016). However, the traits associated with the roles 'decision-maker' (Wolbring et al., 2021), 'strategic thinker' (Gerwing, 2016), 'yellow role' or 'blue role' (Caluwé & Vermaak, 2012) do not feature as prominently in this study's findings. While there are some interviewees in this study with power and mandate due to their hierarchical stand, it seems to be limited to the very top. The majority of the change agents' perceive their role as rather constrained to mediating and translating, while their room to influence deeper strategic decisions and organizational directions seems limited. That is, drawing from the findings of this study, there appears to be a limited flexibility to adopt different roles throughout the organizational levels.

Even though not all change agents' in Region Skåne have a hierarchical position with formal decision-making and strategic-making power, it is important that they have some room of action over the change. Harvey and Broyles (2010) state that change agents should not only be aware and understand what the change will entail, but actively being involved in how it will come about. This is what the authors describe as taking ownership of the change, which can be fostered throughout organizations by empowering employees in all levels to participate and take an active role in the

change process (Harvey & Broyles, 2010). In fact, having a sense of ownership can contribute to a positive attitude and prideful behavior among organizational members, making them engage in actions that improve organizational outcomes (Wilhelm et al., 2024). For example, involving unit managers at Region Skåne in creating assessment materials made it difficult for them to disclaim responsibility, thereby increasing their motivation due to a heightened sense of ownership. Another example of this is the nurses that have the responsibility of evaluating and assessing their colleagues to the levels of the 'Competence and Employment Model'.

In order to have ownership of the change, change agents need to be a part of developing the change (Harvey & Broyles, 2010). Since the 'Competence and Employment Model' is a large-scale change that is designed on a regional level, the change agents in this study are shown to have limited influence over it. Instilling a sense of ownership can be done by not only being informed *what* the change is about, but also being involved in *how* to implement it (Harvey & Broyles, 2010). In this case, the change agents' involvement in the *how* seems to be limited. For instance, the project leader was merely informed about the essence of the change and how to implement it, but the opportunity to be involved in developing the change was missing. To foster a greater sense of ownership of the change, the project leader should have been given the opportunity to be more actively involved in its development. As noted in the findings, there was some skepticism among nurses about the intimidating word 'assessment' in the 'Competence and Employment Model'. This is a clear example of a situation where the nurses' involvement in designing the change could have had a positive impact and mitigated negative attitudes. Accordingly, Gill (2020) states that involving more change agents in the process can empower them to support the change voluntarily rather than feeling compelled to do so. However, Harvey and Broyles (2010) means that involving a wider range of employees in the process of developing the change, could lead to imperfection in implementing it. Despite these potential imperfections, the findings of this study highlight the importance of involving change agents in the development process. This involvement is crucial not only for tailoring the change to fit their specific units but also for increasing commitment and a sense of ownership towards the change among a wider range of employees in the organization

5.3 Handling and Mitigating Resistance

If there is a lacking sense of ownership throughout the organization, there is an increasing risk of negative or reluctant attitudes towards the change (Elizondo-Montemayor et al., 2008). This detachment can lead them to view the change as 'not my job', reducing their motivation and commitment (Harvey & Broyles, 2010). In the case of this study, it is highlighted as a substantial challenge that some managers have deprioritized the change initiative in their departments, and some

nurses have been hesitant to the idea of changing. This kind of resistant behavior, characterized by reluctance, procrastination, and failure to follow through, is what some authors classify as passive resistance (Caruth et al., 1985; Coetsee, 1999; Bapuuroh, 2017).

In fact, none of the interviewees describe any outright opposition or discontent with the idea of the change initiative. Instead, our findings show that the interviewees' general experience is that the change initiators, project leaders, managers and nurses are all onboard regarding the purpose and vision of the 'Competence and Employment Model'. It has been requested for some time throughout the organization, and has a harmless purpose, aiming for an improved situation for everyone. Nurses will have better opportunities to grow and develop within the organization, and managers will experience less difficulty in retaining staff.

Gill (2020) and Kotter (1995) states that communicating the vision and mission of a change initiative is important to make employees adapt to change. However, in the light of our findings, we state that it might not be enough to ensure a basic understanding of the change throughout the organization. Change agents also need to have a sense of urgency, meaning, understanding the importance and immediacy of the change, requiring swift attention and action (Kotter, 2008). Thus, there seems to be an understanding of the change throughout the organization, but the interviewed change agents struggle to ensure a wide-spread commitment and engagement, possibly due to a lacking sense of urgency.

According to Kotter (1996), creating a sense of urgency is the first step to achieve a successful change. Lewin (1951) states that an important part of the 'unfreezing' concept in his model is to get individuals mentally prepared for the change. Organizational members' readiness for change is, according to Armenakis et al. (1993), an efficient way to be proactive towards resistant behaviors. To increase readiness, organizations can make efforts to influence positive beliefs, attitudes and behaviors towards the change (Armenakis et al., 1993) and foster good relationships between employees and their supervisors and peers (Sikh, 2011). The urgency of change in healthcare lies in the immediate need of handling the increasing demands on services, and significant nurse shortages (The International Council of Nurses, 2021; WHO, 2022). The change agents interviewed express a similar reason for the urgency of the 'Competence and Employment Model'. The change is described as essential to maintain high-quality care, patient security and sustainability in the face of evolving healthcare environments and workforce constraints. According to the interviewees, the change agents who are aware of the urgency of implementing the change, are better at advocating the change and driving the change forward while remaining resilient.

Building on the need for understanding of the urgency with the change, it is equally important to consider the role of motivation. Motivation fuels the commitment necessary to adopt new practices and adapt to new roles, enabling a more wholehearted engagement with the change initiatives (Choi, 2011; Wilhelm et al., 2024). Our findings underscore that the various challenges of implementing the 'Competence and Employment Model' may lead change agents to feel that the change is unachievable. The situation is concerning since a change agent's lack of belief in the change's feasibility can spread negativity among the change recipients, making it challenging to motivate others to commit to the change initiative. If the change agents themselves are not motivated or lack capacity to motivate others, their effectiveness as change agents is drastically reduced. Bapurooh (2017) highlights this problem and explains that without effectively motivating individuals to embrace the change, there is a significant risk that the implementation will fail. Similarly, Gerwing (2016) states that resistance can be a barrier for organizations trying to achieve change. Resistant behavior does not only hamper the implementation process but can also undermine the potential benefits of the change (Harvey & Broyles, 2010; Hiatt & Creasey, 2012). This is particularly true in a structured top-down approach, where the enthusiasm and proactive involvement of each individual can significantly influence the overall success of the implementation (Bordia et al., 2004).

The notion of resistance as a blocking for change in a top-down implementation structure is highly applicable to the experiences of the change agents interviewed for this study. As mentioned, the implementation of the 'Competence and Employment Model' relies on the change agent's capability to execute it at the subsequent level. That is, when handing over the responsibility to implement the change to the next person in the hierarchical structure, the implementation's effectiveness relies on that person being engaged and committed to the change. Resistance in any level will therefore result in a complete halt in the flow.

Nevertheless, when resistance does occur, change agents can use it as a feedback tool instead of letting it halt the flow. In this way, resistance could be used to indicate areas of improvement (Ford, J.D., Ford, L.W, and D'Amelio, 2008), as well as providing ways for them to reflect and revise the change process (Van de Ven and Sun, 2011). However, carrying out feedback processes requires resources that are currently lacking in Region Skåne, and being flexible enough to adjust the change after the feedback received requires a structure allowing for complexity and bottom-up communication (Graetz & Smith, 2010; Lewis, 2011; Hayden et. al, 2017). With the background of these conditions, the change agents' ability to use resistance as a feedback tool could be an issue.

One opportunity suggested given the findings of this study is to use the workshops, meetings, and education days that are currently used to implement the 'Competence and Employment Model'. Today, they use these events to promote the vision of the change and clarify how change agents in

managerial positions believe it should be executed. We suggest that these forums should also serve as feedback opportunities. These sessions would provide a possibility for change agents to listen to employees' perspectives on the change, understanding what aspects are effective and not. This feedback would not only be essential for refining and improving the implementation process, but also for involving employees in the change and inviting them to take ownership.

5.4 Summary of Discussion

The discussion addresses the main challenges faced by change agents during a change process and how these challenges affect their roles. Interviews with nine individuals involved in facilitating change highlighted several key issues.

Firstly, healthcare organizations are complex environments with evolving structures, resource constraints, and political influences, making the change process non-linear and ambiguous. The complexity of the change process necessitates flexibility and continuous adaptation rather than a strictly linear approach. Additionally, resource issues such as budget constraints and staffing shortages further complicate the change process, limiting the ability of change agents to implement changes effectively. Secondly, effective change requires that organizational members have agency, meaning they need the power and influence to make decisions. Initially, the change model was driven by employee input, but it later shifted to a top-down implementation, reducing the influence of change agents. Many change agents felt their roles were confined to communication and mediation rather than strategic decision-making. For successful change, it is crucial that change agents have ownership and are involved in the development process to foster commitment and engagement. Lastly, handling and mitigating resistance is a significant challenge. A lack of ownership and understanding of the change can lead to passive resistance, where employees deprioritize or are hesitant towards the change.

To summarize, communicating the vision and urgency of the change is essential to foster commitment. Motivating change agents and ensuring they believe in the feasibility of the change is critical to avoid spreading negativity. Resistance can be used as feedback to improve the change process, but this requires resources and a flexible structure that allows for bottom-up communication.

6. Conclusion

This chapter aims to answer the two research questions "What are the main challenges faced by change agents in implementing change?" and "How are the change agents' role affected by these challenges?". Given the interconnected nature of the two research questions, they will be addressed together. Moreover, this chapter will discuss the practical implications of our main findings and provide suggestions for future research.

6.1 Main Findings

This case study shines a spotlight on the pivotal yet constrained role of change agents within the healthcare sector, specifically through the implementation of the 'Competence and Employment Model' at Region Skåne. Our exploration reveals that the traditional linear models of change management fail to capture the dynamic and often chaotic realities of organizational transformation in healthcare. The rigid application of these models clashes with the complex, non-linear nature of real-world change processes, underscoring the urgent need for more adaptive and flexible approaches.

The change agents in this study, despite their critical role in facilitating organizational change, often find themselves hampered by hierarchical structures and limited resources. The transition from a bottom-up to a top-down implementation strategy exposed significant gaps. While theoretically sound, this hybrid approach frequently left change agents feeling marginalized and disconnected from the very change they were meant to champion. The study underscores the necessity for change agents to be deeply involved in both the planning and execution stages to foster a sense of ownership and drive meaningful engagement.

Moreover, the challenges of managing resistance, fostering ownership, and motivating staff are deeply interwoven with the overall effectiveness of change initiatives. Resistance, often perceived as a barrier, can be transformed into a constructive force if approached with the right strategies. The involvement of change agents in continuous dialogue and feedback mechanisms is crucial for navigating resistance and refining the change process. Empowering change agents with the flexibility to adapt strategies as needed can lead to a more resilient and responsive organization.

6.2 Practical Implications

This study provides an insight to the challenges faced by change agents, creating a need for action: break free from linear change models and hierarchical excluding structures in order to embrace more

dynamic and inclusive conditions for change. By doing so, organizations can unlock the full potential of change agents, ensuring that these vital actors are not just facilitators but true drivers of change. This study indicates that the change agents' role is affected by the challenges they counter in the way that their agency and ability to facilitate change and overcome hurdles is limited. If the actions mentioned above are not taken, the change agents in Region Skåne's role will be constrained to translating and mitigating the change. Furthermore, it will remain limited in terms of taking ownership, empowering others to do the same, and mitigating resistance in a way that secures meeting the intended goal of the change initiative. The future implementation of the change studied requires a shift towards more inclusive, adaptable strategies that empower change agents at every level. Taking these insights into account will not only navigate the complexity of organizational change but also pave the way for a more resilient and adaptable organization.

This case study not only enriches academic understanding of change management but also offers practical insights for healthcare organizations aiming to navigate the complex nature of organizational change. Embracing these insights can lead to a more resilient, responsive, and ultimately successful approach to managing change.

6.3 Future Research Suggestions

This study has delved into the challenges that change agents face when fulfilling their role in implementing organizational change, however, it does not provide any in-depth findings on how change agents navigate through these challenges. We therefore suggest that this is an interesting addition to our findings for future research to explore. As mentioned, challenges of change agents in this study include complexity, agency and ownership, as well as resistance. Understanding what strategies and tools that change agents can use to overcome or mitigate these challenges is both relevant and practically useful for organizations that would like to unleash the full potential of change agents. Moreover, it is clear in this study that the change agents do not operate alone, but as it is a large organization with many individuals responsible for the change, the agents are part of a larger network or hierarchy of change agents. This study, however, only briefly discusses the relations between change agents at Region Skåne. It would therefore be a valuable addition for future research to delve more deeply into the networks and interactions of change agents and how they can use each other's roles and abilities to overcome challenges.

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9. Appendix

9.1 Appendix 1 - Interview guide (Swedish)

- Börja med att tacka deltagaren för deras tid och för att de deltar i studien.
- Informera om att vi kommer att anteckna under intervjun och att den spelas in i syfte att transkribera intervjun efteråt.
- Visa informationsbrevet och be om deltagarens samtycke igen.
- Få ett OK från intervjupersonen om att bli inspelad.

Intervjufrågor

Bakgrund
- Kan du beskriva din nuvarande position och dina ansvarsområden?
- Hur länge har du haft din nuvarande position?

- Vill du berätta om din roll i arbetet med kompetens och tjänstemodellen? (Vi kan bakgrunden)
  - Vad upplever du är anledningarna till denna förändring?
  - Vad är din roll och dina ansvarsområden i denna förändring?
  - Vem/vilken roll arbetar du närmast med under denna förändring?
  - Tog du del av specifika strategier och själva planeringen av förändringsprocessen?
    - Isåfall, hur såg det ut?

- Var i förändringsprocessen befinner ni er nu? Vad är det ni arbetar med just nu?
  - Vad fungerar/fungerar inte?
    - Vad har ni sett för tidiga fördelar? Hur ser personalomsättningen ut nu?
  - Vad är nästa steg i förändringsprocessen?

Huvudfokus:
- Vilka utmaningar ser du att ni står inför i dagsläget när det gäller implementeringen av modellen?
    - Förväntade ni er dessa utmaningar eller inte?
    - Utgår ni från de strategier och planering som ni hade från början?
    - **Hur ser din roll ut i att hantera dessa utmaningar? Hur har ni arbetat?**
- Några identifierade hot för att modellen ska lyckas implementeras lokalt/regionalt.

- Om du tittar tillbaka på förändringsprocessen fram till idag, hur har du upplevt den?
  - Vad har fungerat väl / inte väl?
  - Vilka strategier skulle du säga fungerade/inte fungerade, om ni hade några?
  - Vad överraskade dig mest?
  - Finns det några kritiska händelser under förändringen som du vill dela med oss?
  - När du ser tillbaka, vad skulle du ha ändrat i hur du hanterade denna förändringsprocess?
  - Som förändringsledare, vad skulle du rekommendera/inte rekommendera till andra i en liknande position?

Avslutning
- Finns det något du skulle vilja tillägga? Något vi glömt fråga som du tror är viktigt för studiens innehåll?
- Tack för att du deltog!

9.2 Appendix 1 - Translated Interview Guide (English)

Introduction:
- Begin by thanking the participant for their time and for participating in the study.
- Inform them that we will take notes during the interview and that it will be recorded for the purpose of transcribing it afterwards.
- Show the information letter and ask for the participant's consent again.
- Obtain an OK from the interviewee to be recorded.

<div align="center">Interview questions</div>

Background:
- Can you describe your current position and your responsibilities?
- How long have you held your current position?
- Would you like to tell us about your role in working with the competency and service model? (We know the background)
  - What do you perceive as the reasons for this change?
  - What is your role and responsibilities in this change?
  - Who/which role do you work closest with during this change?
  - Did you participate in specific strategies and the planning of the change process?
    - If so, what did that look like?
- Where are you now in the change process? What are you currently working on?
  - What is working/not working?
    - What early benefits have you seen? What is the staff turnover like now?
  - What are the next steps in the change process?

Main Focus:
- What challenges do you see facing the implementation of the model currently?
  - Did you expect these challenges or not?
  - Are you still following the strategies and planning that you initially had?
  - What does your role look like in managing these challenges? How have you worked?
- Any identified threats for the model to be successfully implemented locally/regionally?
- Looking back on the change process to date, how have you experienced it?
  - What has worked well/not well?
  - Which strategies would you say worked/did not work, if you had any?
  - What surprised you the most?
  - Are there any critical incidents during the change that you would like to share with us?
- Looking back, what would you have changed in how you managed this change process?

- As a change leader, what would you recommend/not recommend to others in a similar position?

Finishing:
- Is there anything you would like to add? Anything we forgot to ask that you think is important for the content of the study?
- Thank you for participating!