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Tactics for successful organizational change in a youth and family services agency

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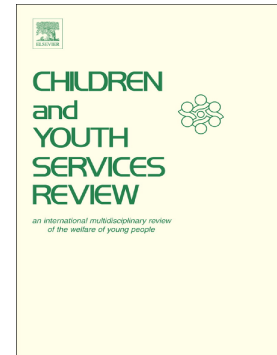
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**TACTICS FOR SUCCESSFUL ORGANIZATIONAL CHANGE
IN A YOUTH AND FAMILY SERVICES AGENCY**

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Abstract

There is a vast body of literature on organizational change, but much of it includes only case studies or surveys with a limited number of variables. Organizational change tactics, key aspects of planned change, are not often studied. One purpose of this study was to add to this literature by assessing the use of a questionnaire regarding the use of organizational change tactics as seen by staff who had experienced an organizational change initiative. This study is particularly notable in that it uses perceptions of staff in assessing the success of the change intervention. A second purpose was to learn about specific tactics which were associated with the success of change processes in a youth and family service agency. Findings showed that eighteen of the tactics were observed and seen as helpful in goal accomplishment. These findings can help change leaders choose appropriate change tactics. This method, including a survey of all levels

of staff regarding generic change tactics, an interview with an executive, and a focus group, shows promise for further study.

KEY WORDS: organizational change, organizational change tactics, human service organizations

1. Introduction

The vast literature on organizational change has become more extensive and complex in recent years, ranging from scholarly articles to books in the popular management press. However, these books are typically based on only authors' experiences as consultants or on profiles of allegedly successful change leaders, with little empirical support, and limited or nonexistent conceptual models. Conversely, the academic literature often focuses on only a limited number of possible variables or on individual case studies. Defining and measuring success are particularly complex and challenging, and perhaps for that reason success is rarely documented adequately. For example, in a study by Parish, et al. (2008), the variables of "implementation success" and "improved performance" were based on only respondent opinion statements on a Likert scale.

Because there is not a commonly agreed upon conceptual framework to guide research, this literature remains fragmented, with few ways to easily connect elements of new knowledge. Parry (2011, cited in Hughes, 2015) offered this summary of the general organizational change literature:

Leadership and organizational change are inextricably intertwined. However, "organizational change" has become an interest for organizational consultants more so than for empirical researchers. There are many more books and articles on practitioner or conceptual scholarship than on theoretical or empirical scholarship. Much of the practitioner work is case study-based, and anecdotal and not rigorous in its conduct.

Also from the general management literature, Burke (2014) noted these "sources of knowledge" (p. 2): books on theory (including journal articles), "trade literature" (including works by experienced practitioners such as Kotter [1996]), and "story books" such as *Who moved my cheese?*. He asserted that "the problem here is that by using popular, actual organization cases as the base from which to derive principles, sooner or later – and today it is much sooner rather than later – the organizations studied and showcased no longer illustrate the principles because things have changed" (pp. 2-3) and that "without independent verification and validation that what these authors recommend actually works under a variety of circumstances, however, leaves me with some concerns and skepticism" (p. 4). By (2007), in a still-relevant critique, noted the weaknesses in approaches to studying organizational change, suggesting exploratory studies to identify critical success factors for change management. Pettigrew, Woodman, and Cameron (2001) discussed some of these issues and made suggestions for advancing research in this area

In the human services field specifically, Glisson (2012) summarized the limitations in this literature, from poor specification of intervention strategies to inadequate outcome measures. The state of this literature regarding HSOs specifically will be addressed in more detail in the Literature section.

As noted below, qualitative case studies often rely mostly upon data gathered from interviews with management staff, with less attention paid to line workers. Quantitative studies are not common, and typically address a limited number of variables such as readiness for change or organizational climate. Research on a key aspect of organizational change, the tactics used by change leaders, is particularly limited. The study reported here examines organizational change tactics used in a human services organization (HSO) serving youth and families. It focuses specifically on staff observations of the use of organizational change tactics that the literature has suggested are important for successful organizational change.

This study had two related objectives. The first was to examine the use and potentials of a survey instrument which enables all staff of an organization to report their observations of an organizational change process they had experienced. This is an important area for study because perceptions of staff are rarely considered when assessing the success of a change intervention. The second study objective was to answer these research questions:

1. What organizational change tactics were observed in three successful organizational change initiatives?
2. To what extent were these tactics seen as factors in the success of these initiatives?

After a review of the literature, the study's research methods and setting will be described. The change processes being studied will be described, followed by results of a survey, interview, and focus group to learn staff's observations of these change processes. The observations of the use of particular change tactics and respondents' assessment of their importance to the success of the change processes will receive particular attention. Conclusions and implications for practice and research will be offered.

2. Background and Literature Review

Schmid (2010, 456) defines organizational change as “the process that occurs in an HSO as a result of external constraints imposed on it or as a result of internal pressures that cause alterations and modifications in the organization's core activity, goals, strategies, structures, and service programs.” More specifically, *planned* organizational change involves leadership and the mobilizing of staff in such “alterations and modifications”, to move the organization to a desired future state, using change processes which involve both human and technical aspects of the organization (French & Bell, 1995).

2.1 Theory

Several theories are commonly used to frame discussions of organizational change (Fernandez and Rainey, 2006; Schmid, 2010); but to date, there has not been a consistent, overarching theory or framework to guide organizational change research. The kinds of change activity being studied here—change tactics used by change leaders—fall within the overall category of *rational adaptive* theories (Fernandez & Rainey, 2006). These theories see managers as change agents who can assess their environments and other conditions and then purposefully drive change within their organizations. Managers can use their human agency to respond to external and internal forces for change. This approach can then serve as a foundation for

discovering effective change strategies and tactics that can be proactively used by administrators and consultants.

Organizational change can also be described based on the distinctions between change *content* and change *process*. Change *content*, according to Anderson and Ackerman-Anderson (2010) looks at “what in the organization needs to change, such as structure, systems, business processes, technology, products, or services” (p. 52). In HSOs, this may include issues such as organizational restructuring, major strategy changes, and implementing evidence-based practices or new outcome measurement systems. Change *process* includes generic strategies, tactics, and methods such as organization development (Burke, 2014). While the HSO literature as a whole addresses both change content and change process, most writing focuses more heavily on the content of change in a particular case, with less attention to change processes such as tactics used by a change leader. Some exceptions will be noted below. Change process, and particularly change tactics, will be the focus here. The literature covered here will include studies which to some extent consider the change process and particularly those which use an explicit change model. Some studies which have data on results of change initiatives will also be mentioned.

2.2 Literature

The focus in this section will be on some major themes and examples in the HSO literature on organizational change, to highlight work that considers organizational change tactics – the focus of the study described here. This brief review will touch upon what has been studied to date and suggest opportunities for advancing knowledge regarding organizational change tactics. Notable case studies will be mentioned, followed by examples of specific organizational change models in HSOs and a summary and critique of this literature.

2.2.1 Case Studies

Ramos (2007), in a study of a child and family service agency, noted the value of consultation and involvement of executive and management staff in change success. In a case study of an organizational redesign, (Ezell et al., 2002) a staff survey revealed perceptions of successful implementation and the solving of some problems, but no changes in staff performance. Haight et al. (2014) studied implementation of The Crossover Youth Practice Model.

There have been several reports on the use of organization development in HSOs. DuBrow, Wocher, and Austin (2004) described the use of organization development in a county HSO. Amodeo et al. (2007) described the use of organization development principles including forming change teams, gathering data, and empowering staff in a change process in a substance abuse treatment agency.

Kerman, Freundlich, and Brenner (2012) described the use of organizational learning principles in a change process in a child welfare agency which used some of the steps described below as change tactics (e.g., communicating a vision, using a planning process, providing resources, and addressing stakeholder concerns). Devine (2010) presented an instrument used to allow staff to assess line workers’ perceptions of how a change process in Canadian provincial government affected nineteen aspects of organizational functioning. Cao, Bunger, Hoffman, and Robertson (2016) noted the importance of not only “programmatically” communication about an organizational change but also “participative” communication to receive input from staff.

Austin (2004) and others described over twenty cases of change in public human service agencies, with many based on the expectations of the Federal welfare reform legislation of 1996. All of these case studies reported successes, mainly with anecdotal evidence or data such as program participation rates. The Austin volume focused mainly on change content, but also included chapters on some change processes. For example, Carnochan and Austin (2004) gathered data from ten county social service directors in California and reported that the directors identified five primary challenges in implementing organizational change in response to welfare reform legislation: organizational culture change, organizational restructuring, community involvement and collaboration, services integration and teamwork, and data-based planning and evaluation.

Other examples of organizational change in HSOs include implementing evidence-based practices (Johnson & Austin, 2008), implementing knowledge management processes (Lee & Austin, 2012), implementing new information systems (Gillingham, 2015; Lyons and Winter, 2010), and change initiated by lower-level staff (Cohen & Hyde, 2014). Whittaker, et al. (2006) described an implementation of evidence-based practice in a nonprofit child mental health agency, noting the importance of logic modeling, partnerships with researchers, and ongoing evaluation.

2.2.2 Organizational Change Models

Several descriptions of change tactics use a “phase model” of recommended steps to take when implementing change. Proehl (2001) developed a set of steps to take to implement planned change. Her model was based largely on the general management literature, including the influential work by Kotter (1996). Lewis, Packard, and Lewis (2012) used the Proehl (2001), Fernandez and Rainey (2006), and Palmer, Dunford, and Akin (2009) models to develop a change model for HSOs. This model includes seven steps: Assess the present; Create a sense of urgency; Clarify the change imperative; Ensure support and address resistance; Develop an action system; Implement the plan for change; and Evaluate, institutionalize, and celebrate. The model gives particular attention to change tactics, an area which is not often explicitly addressed in much of the literature.

Glisson et al. (2013) have provided evidence of the usefulness of the Availability, Responsiveness, and Continuity (ARC) organizational intervention model. ARC involves the use of trained change agents to help change culture, climate, and performance in human service programs. This model notes the critical importance of the organizational context, specifically social, strategic, and technical factors that impact prospects for improving program operations and outcomes.

The Sanctuary Model (Esaki, et al., 2013) for organizational change includes training, skill development through technical assistance and consultation, and the use of tools such as fidelity checklists and manuals. In an area covered in the case presented here, Elwyn, Esaki, and Smith (2016) described the use of the Sanctuary Model to implement trauma-informed care in a treatment facility for delinquents. Leadership by the program director, employee engagement, and team building were seen as key success factors.

The Design Team model, a facilitated, participatory process for identifying and solving agency problems, has been used in child welfare agencies, with one study finding statistically significant improvements in several dimensions of job satisfaction in five counties that used the intervention compared to seven which did not (Claiborne, 2014). In a study of the use of the Design Team intervention in six child welfare agencies, Claiborne, Auerbach, et al. (2015) found

several aspects of organizational climate to be associated with successful change implementation. Lawrence et al. (2016) found significant increases in several dimensions of organizational climate in agencies which successfully implemented Design Team interventions compared to organizations which had unsuccessful implementation.

In a study of the use of the NIRN framework (Fixsen, et al., 2009) for the implementation of a new statewide child welfare practice model in 13 counties, McCrae, et al. (2014) found that staff buy in was consistently high across counties, and was greater for higher level managers, those with longer tenure in the organization, and those in a small county. Use of the Getting to Outcomes framework for the statewide implementation of a new practice model was described by Pipkin (2013). Salveron et al. (2015) studied the implementation of the Signs of Safety practice model using the NIRN framework. Some of the factors that affected implementation corresponded to organizational change tactics in the model discussed below, including a clear implementation plan, monitoring implementation, providing adequate resources, top management commitment, and structures for employee participation.

A particularly rich literature is growing in the area of implementation science (Aarons, Erhart et al. 2015; Aarons, Hurlburt, & Horwitz, 2011; Blasé, van Dyke, & Fixsen, 2013; Fixsen, et al., 2009; Novins, et al., 2013; Proctor, Powell et al. 2013). This literature often focuses only on implementation of evidence-based practices, with less consideration of other aspects of organizational change. For example, Hurlburt et al. (2014) studied the use of the Exploration, Preparation, Implementation, and Sustainment (EPIS) implementation framework to assess the use of the Interagency Collaborative Team model in a county children's service system. Soenen et al. (2014) interviewed staff of a residential treatment program to identify factors relevant to EBP implementation.

2.2.3 Summary and Critique of the Literature

In a content analysis of the published literature on organizational change in HSOs between 2005 and 2011, Packard and Shih (2014) found 39 publications that mentioned organizational change tactics. Of these, 28% were literature reviews, 28% were multiple case studies, and 21% were single case studies. Ten per cent were surveys of multiple organizations, and 10% were surveys of one organization. Fifty eight per cent were qualitative studies, with 16% using quantitative methods and 26% using both methods.

With exceptions including ARC (Glisson, 2012), NIRN (McCrae, et al., 2014; Fixsen, et al., 2009), LOCI (Aarons et al., 2015), the Sanctuary Model (Esaki, 2013), the Design Team model (Claiborne, et al., 2014), Getting to Outcomes (Barbee et al., 2011), and implementation science, much published research in HSOs involves primarily qualitative case studies only, often with weak theory and little specificity on actual change tactics used. Case studies, even when rich in detail, often do not provide specific, generalizable practice guidelines regarding what factors are, in fact, most relevant in implementing successful change.

Another limitation in this research is that in case studies, data are typically gathered primarily from the upper ranks of the organization and occasionally from others who are most involved in the change process. While employee perspectives are often considered in surveys regarding organizational climate or culture, their perspectives are rarely considered when assessing the success of a change initiative. Austin and Vu (2012) have asserted that "the capacity to perceive the organization from multiple perspectives is important because each perspective could lead to a different set of impressions" (131). They specifically noted the importance of employee perceptions of an organization's capacity for change. Hughes (2011), in

a critical analysis of the organizational change literature, particularly noted the importance of “competing perceptions of organizational change outcomes” (457).

A related limitation in research relying upon retrospective assessments by employees at any level is the possibility of perceptual biases or mistaken recollections of those who experienced a change process. The views of what actually happened during a change process may also vary significantly based upon one’s role and involvement in the process. The agency executive who functioned as the change leader may believe that certain activities occurred or were successful more so than would other members of the organization.

Quantitative studies typically address variables such as leadership and change readiness (Lutz, Smith, & Da Silva, 2013), change readiness (Weiner, 2009) or organizational climate (Claiborne, Auerbach, et al., 2015), with less attention to the actual change process. Many studies often do not build upon or connect with earlier research or models. Research on a key aspect of organizational change—the tactics used by change leaders—is particularly limited, yet could be used to inform the strategies that organizations use when implementing change.

The study reported here begins to fill these knowledge gaps by using a structured instrument administered to all levels of staff to let them indicate specific change tactics observed during a change process, and the extent to which these impacted success. While it is, in fact, a single case study, it includes both qualitative and quantitative data from multiple sources within the agency, and assesses tactics which the literature suggests are associated with successful organizational change.

3. Material and Methods

3.1 The Setting

The agency setting is a HSO with 197 staff and an annual budget of over \$12 million. The agency has been in existence for over 40 years and operates fourteen major programs serving at-risk youth and families. Programs include a foster family agency; a family resource center; mental health and recovery programs; school-based services; emergency services; a short-term shelter; group homes; foster homes; and transitional housing for clients including former foster youth, at-risk youth, pregnant and parenting teens, and commercially sexually exploited youth. Arrangements were made with the agency’s Chief Executive Officer (CEO) to attend a managers’ meeting to solicit approval for the study.

The procedures were reviewed at the meeting of the agency’s management staff, and the agency agreed to proceed, beginning with the administration of an on-line survey of the entire agency’s staff. At this meeting, managers identified three significant change processes that had been completed at the agency. Described in more detail below, these were:

- a significant restructuring activity affecting upper and middle management staff
- a shift in client service delivery methods to trauma-informed care
- a “rebranding” process in which the agency changed its name and developed a new marketing plan.

The need for the restructuring was identified by the CEO of the agency, who saw the emerging downturn in the national economy which would probably require cost cutting. Trauma-informed care as a model was becoming increasingly prominent in HSOs, and the CEO and staff

felt that adopting this evidence based practice agency-wide would improve outcomes for clients. The need for rebranding evolved from discussions of the agency's mission and focus, and how to better market the agency's services to the community.

3.2 Methods

Data were gathered using quantitative and qualitative methods, between October 2011 and July 2012. The main data collection tool was a survey using the Organizational Change Tactics Questionnaire (OCTQ). The OCTQ enables respondents (agency staff) to assess an organizational change initiative by reporting whether or not they observed any of 22 change tactics suggested in the literature (listed in Table 3) and indicating the extent to which each tactic was a factor in the success of the change process.

The instrument also includes demographic variables such as the respondent's role, years of experience, and extent of involvement in the change process; and their descriptions of the change goals and assessment of the results of the change initiative. In addition to quantitative data in the survey, open-ended questions enabled respondents to describe the change processes and comment upon the results.

Qualitative methods included an interview with the CEO and a focus group of staff that experienced the change process. The CEO was purposively selected because of his detailed knowledge of all the change processes.

The three change processes noted above were listed on the survey, asking respondents to consider one of these change efforts for their subsequent assessment of change tactics or, if they did not experience one of them, another change process they had experienced. This process was based on methods used by Herold, et al. (2007) and Parish, et al. (2008).

The researchers provided a script for the agency chief executive to use in an e-mail message to all staff, indicating agency support for the survey. The message also included a web link to the online platform used for this study, where respondents could anonymously complete the survey within a 2-week window and a 2-week follow up period.

These research protocols had been reviewed and approved by the Institutional Review Board at the author's university.

Qualitative data analysis was done by sorting data from each source based upon the change initiative being assessed and, most importantly, comments on specific change tactics included in the survey. Focus group notes were shared with participants to make corrections and add detail or elaboration. These data were then assessed across the sources, looking for commonalities and themes. If more than one source mentioned a specific tactic, those comments were assessed regarding the extent to which they did represent the tactic being considered. Quotes below are indicated as being from either a focus group or the open-ended survey questionnaire. Quotes were selected if they provided detail regarding tactics that were noted on the survey. Sources of bulleted summaries are indicated when they are presented.

4. Results

An e-mail message including the link to the survey was sent to all 197 employees. One hundred and twenty nine people (65%) accessed the survey. Of those, 86 (67%) said that they had observed a change initiative. Fifty four respondents (27% of all agency employees and 63% of respondents who had experienced organizational change) answered some questions related to

the change they had experienced. Due to missing data on some of the questions, data on change processes and organizational change tactics could only be compiled for 45 cases. Data on goal achievement regarding the subject of the change effort (Table 2) could only be compiled for 39 cases, due to some respondents not answering both questions. Respondents reported an average of 5.1 years of employment with the organization. Managers and supervisors had a mean of 7.7 years of management experience. Of respondents who indicated their position in the organization, 35% reported holding a management level position (from supervisor to executive management) and 49% were line staff.

Most respondents (40%) chose the restructuring initiative as the change effort they were most familiar with. As indicated in Table 1, smaller percentages focused on trauma-informed care or rebranding for their responses on the questionnaire.

Table 1: Subject of the change effort

	N	%
Restructuring	18	40
Trauma-informed program model	10	22
Rebranding	7	16
Other	10	22
Total	45	100

The goals for the three major change efforts were:

- Restructuring: Streamline management to decrease administrative costs, clarify the management structure and philosophy with respect to management of budgets and staff, increase program integration and accountability, and improve the fiscal bottom line of the agency.
- Trauma-informed care: implement trauma-informed care in all of the agency's programs
- Rebranding: better focus the agency's mission and programming, and make the community aware of these.

The change goals listed by the ten respondents under Other were

- dress code changed, a weekly staff meeting instead of monthly
- shift in staff that depended more on a cohesiveness of the group instead of individuals
- improve relationships with at risk youth and their families
- lots of turnaround of directors at this program
- improve morale and increase self care
- timesheets
- improve services to the clients and morale of the staff
- changed services to partner with schools
- X left and Y became our director
- help the agency toward financial gain and unified the ee's [employees?] working together as a team.

These were included in the total with the other identified change processes since each did represent an organizational change as experienced by an employee, adding to the cumulative observations of change tactics.

Respondents were asked to assess the extent to which the goals of the change initiative were met. As Table 2 shows, goals were seen as fully or mostly achieved by 95% of respondents. According to a content analysis of an open-ended question regarding change results, responses typically showed results reflecting accomplishment of the stated goals.

Table 2: Respondent Ratings of Goal Achievement: Percentages Choosing Each Category (N=39)

Extent of Goal Achievement	All change processes	Restructuring	Trauma-informed care	Rebranding	Other/ Unclear
Goals were fully achieved	13 (33%)	5 (31%)	0 (0%)	5 (71%)	3 (33%)
Goals were mostly achieved	24 (62%)	11 (69%)	5 (71%)	2 (29%)	6 (67%)
Goals were only partly achieved	2 (5%)	0 (0%)	2 (29%)	0 (0%)	0 (0%)
Goals were minimally or not at all achieved	0%	0 (0%)	0 (0%)	0 (0%)	0 (0%)
TOTALS	39	16	7	7	9

As noted above, organizational change can be described based on the distinctions between change *content* and change *process*. Findings presented here will focus first on the change content – one of the three change initiatives listed above – and then on the change process, with an emphasis on the change tactics used. Greater detail will be provided regarding restructuring, which was the process with which most respondents had experiences.

4.1 Change Content

4.1.1 Restructuring

The need for this change was first seen by the CEO of the agency, who saw the emerging downturn in the national economy, leading to the possibility of a decrease in funding; and saw within the agency some inefficiencies at the administrative level and some duplication of duties which, combined with a lack of coordination and integration among the programs within the agency, created conditions requiring significant change. The goals of this change initiative were to streamline management to decrease administrative costs, develop a clear management structure and philosophy with respect to management of budgets and staff, better consolidate programs under divisions to increase integration and accountability, and improve the fiscal bottom line of the agency.

Initially, the need for change was communicated to the Board of Directors and the Executive Leadership Team. The latter included the CEO, Chief Financial Officer (CFO), and Associate Executive Directors (AEDs). The CEO and CFO did an analysis of the fiscal performance of each of the programs over a five year period and shared findings with the Executive Leadership Team, which then developed several options and models for the reorganization of programs into divisions. This included analysis of program services, contracts and budgets to determine what made the most sense programmatically and fiscally. Models included ideas for the number of divisions and what programs fit best under each division. The ideas were brought to the directors of the programs. This was met with some anxiety, as this is where people saw possible impacts upon their jobs. The change was not communicated to lower level line staff until plans were finalized and implementation plans were developed, approximately six months later. When possible, staff changes were made through attrition to try to minimize the impact on individuals. However, some staff did lose their jobs, and some staff were demoted to lower level positions. Salary reductions were implemented for high level (director and above) staff, with the CEO taking the largest percentage reduction.

Key outcomes included major structural changes, elimination of some management positions, and a range of fiscal and service improvements. A very visible result of the restructuring was a new structure with a new leadership team. Nine Center Directors were reduced to three new Division Directors who, along with the heads of the Human Resources, Information Technology, Marketing, and Development Departments, formed the new team. Other results noted in the CEO interview included:

- new job titles, job descriptions, salary scales, supervision lines of authority; and technical changes to the data systems
- improvements in the fiscal bottom line for the agency
- administrative overhead reduced by 2%
- programs that had traditionally operated financial losses either reduced their losses, were breaking even, or were in the black
- programs worked more closely together
- better coordination through weekly Leadership Team meetings to improve integration, coordination and communication within and among the divisions
- new fiscal reports and procedures to track performance

Several survey responses to the open-ended question asking for examples of results corroborated the results noted by the CEO and focus group respondents:

- a more harmonious leadership team
- information is better communicated
- more consistency throughout the agency.
- the agency continued to provide services throughout the financial crisis
- significantly reduced the number of management positions in the agency
- more streamlined way of doing business, more integration of like services among the agency, saved money
- easier access to division directors
- development of a clearer agency structure; more universal job descriptions across programs that enabled us to better define positions

- more equitable salary scale and process for determining wage increases
- stronger Quality Improvement/Quality Assurance system
- development of agency work groups
- shift of management roles and lowered payroll costs strengthening our bottom line
- keeping the agency more stable as it was being hit with funding decreases
- streamlining and financial stability to the overall agency

4.1.2 Trauma-Informed Care

Trauma-informed care in HSOs includes trauma-informed services, which “address the dynamics and impact of complex trauma on youth through a focus on avoiding inadvertently retraumatizing them when providing assistance” (Hummer, Dollard, Robst, & Armstrong, 2010, p. 82). Agency managers received training on this new model and then trained staff at an all-agency meeting. In addition to program staff, Fiscal and Administration staff received mandatory training in two parts: what it is, and how to implement it. A work group with representatives from each program was formed to design implementation in the individual programs. All staff had the opportunity to share concerns with the work group and then bring back information to their programs. There was ongoing discussion at the Program Managers’ meetings regarding implementation. One program received a small grant to obtain training.

Several outcomes were noted by the CEO and focus group respondents. Procedures for working with clients and related paperwork expectations were changed, so that clients were asked questions in a trauma-informed way, and some staff duties and job descriptions were changed. Physical facilities were improved through new room colors, posters, and other materials to create a more therapeutic environment. Trainings were held to ensure proper implementation of the new model. One respondent noted on the OCTQ that “Everyone in our program received trauma informed training”; and another said that this change resulted in “better services to clients”.

4.1.3 Rebranding

The agency had made a strategic decision to better focus its mission and programming, and determined that a formal “rebranding” process would help lock in the changes and make the community aware of them. The agency’s marketing director was in a lead role, but staff were involved through an opportunity to suggest a new name from options provided and to have an advisory vote on the new name and logos. All staff were surveyed for their feedback on what they thought the impact of a name change would be (Positive, Negative, or No Impact). Responses were equally divided among the three potential impacts.

The Board made the final decision. Executive staff shared information and ideas with managers, who then passed information on to their own staffs. The new ‘brand’ was reflected through not only a new agency name but also through new logos, new colors for letterhead, and new templates for Power Point training presentations.

4.2 Change Processes

Change processes – the use of specific organizational change tactics – were assessed through the OCTQ, the CEO interview, and the focus group. The OCTQ scale (Tactic Observed:

Yes, No, Not sure) had a Chronbach's alpha of .887. As shown in Table 3, the percentage of respondents who observed a specific tactic ranged from 71% who observed "The need and desirability for the change were clearly and persuasively communicated by leaders" and "The vision and outcomes for the change were clearly communicated" to 5% who observed "Criticism, threats, or coercion were used to reduce resistance to the change". The latter item is the only tactic which is not desirable. Fernandez and Rainey (2006) included this in their summary as a tactic to avoid. In this study, it was worded without reference to avoiding it partly as a way to assess response set bias. Therefore, a low percentage would suggest a positive non-use of that tactic.

Table 3: Change Tactics Observed and Factors in Success (Means)
(Rank ordered by % who observed a tactic).
(N=45*)

	N and % who observed the tactic	Factor in success **
The need and desirability for the change were clearly and persuasively communicated by leaders	32 (71%)	2.61
The vision and outcomes for the change were clearly communicated	31 (71%)	2.43
Top management showed support and commitment, including a senior individual or group to champion the cause for change	29 (64%)	2.50
The results of the change initiative were institutionalized through formal changes in policies and procedures, new or modified staff roles, permanent funding, etc	26 (62%)	2.50
The urgency for the change was clearly and persuasively stated by leaders	26 (58%)	2.32
There was a clear plan for how the change initiative would be implemented (including schedule, basic strategy, who would be involved, and who would be accountable for planned activities)	24 (55%)	2.16
Staff were made aware of the results of the change initiative	23 (55%)	2.00
Key individuals and groups affected by the change were involved and solicited for their support	23 (52%)	2.48
The organization provided sufficient resources (staff time, necessary funding) for the change effort	23 (52%)	2.13
The change was supported by political overseers (e.g., Board) and external stakeholders	22 (50%)	2.16
The change was comprehensive and integrated, so that relevant subsystems (e.g., HR, finance, programs) were compatible or congruent with the overall change	20 (49%)	2.18
There was widespread participation of staff in the change process	21 (48%)	2.27
The change team was seen as legitimate by most members of the organization	20 (47%)	2.19
Progress on the change process was clearly communicated throughout the organization	18 (41%)	2.24

Change agents gathered information to document the change problem to be addressed and shared this with staff	15 (35%)	2.10
A cross section of employees was selected for a team to guide the change	13 (30%)	2.05
Project activities were revised as appropriate based on new information or changing conditions	13 (30%)	2.05
The change strategy was based on a sound causal theory for how the results would be achieved	12 (28%)	2.05
Potential sources of resistance (individuals or groups) were identified, and strategies for addressing resistance were developed	10 (23%)	1.56
The results of the change effort were evaluated using data (e.g., pre-post data)	8 (19%)	1.88
Monitoring tools were used to track progress	7 (16%)	1.63
Criticism, threats, or coercion were used to reduce resistance to the change	2 (5%)	1.15

*Individual item responses ranged from 41 to 45

** Factor in success Scale: 3=To a Large Extent, 2=To Some Extent, 1=To a Small Extent, 0=Not At All

Other tactics which were observed by at least 50% of respondents included top management showing support and commitment, institutionalizing results of the change, leaders conveying the urgency of the change, having a clear plan for the process, making staff aware of the results, involving key staff and soliciting their support, providing sufficient resources, and the agency's board providing support.

In addition to the use of criticism and threats, least observed tactics included using monitoring tools to track progress, evaluating results, identifying sources of resistance, and basing changes on sound causal theories. The latter may have been low because staff would not be aware of organizational change theory that may have been used.

Staff were also asked, for each tactic, the extent to which that tactic was seen as a factor in the success of the change process. As shown in Table 3, 18 tactics were seen as success factors to at least "some extent". The tactics which were seen as most important, averaging over 2.3 on the 3-point scale, were communicating the need and desirability for the change; showing top management support; institutionalizing changes through new policies or procedures; involving staff and soliciting their support; and communicating the vision, outcomes, and urgency for the change.

The Kruskal-Wallis test was used to assess the relationships between respondents observing each tactic and their views of accomplishment of change goals. Statistically significant relationships ($p < .05$) were found for only two tactics: the change was comprehensive and integrated, and monitoring tools were used to track progress. These findings were puzzling, since these two tactics were among those less frequently observed.

Some of the data from the CEO interview and the staff focus group will be shared here to provide detail augmenting the quantitative survey data just discussed.

The need, desirability, and urgency for the change were clearly and persuasively communicated. For restructuring, two key factors regarding the need to address the problem were presented to the management team and later to staff: the economic downturn and how other

nonprofits and businesses overall were being negatively impacted, and projections of specific program losses and the negative impact on the entire agency's financial performance. Regarding trauma-informed care, a focus group respondent felt the urgency because a work group on it was formed quickly.

The vision and outcomes for the change were clearly communicated. Much of this communication occurred along with the descriptions of need and urgency. One focus group reported that after restructuring implementation "It was clear to me; my supervisor was a champion of it." Regarding trauma-informed care, there was ongoing discussion at Program Manager meetings. One focus group member reported being very clear on the vision, but not as much on the outcomes. Regarding rebranding, staff shared at Program Manager meetings the new logos and colors for letterhead and the rationale for why this would be good for the agency, and program managers were asked to communicate this information to their staffs.

Top management showed support and commitment. To show commitment for restructuring, over a 3-4 month period, the CEO attended staff meetings with all the programs and administrative departments to outline the needed change, the reasons for the change, and the plan for implementation. One thing that brought credibility for the change was that salary reductions were implemented only for high level staff. Regarding trauma-informed care, the Division Directors were supported with funding to attend out-of-town training. Regarding rebranding, staff felt support through the Marketing Director.

The results of the change initiative were institutionalized. As just noted, restructuring changes were fully integrated into policies and procedures in programs and administrative areas. Regarding trauma-informed care, new procedures regarding suicide prevention were developed, and job descriptions were changed. Also as noted above, rebranding was institutionalized through an agency name change, new logos, new colors for letterhead, and new templates for Power Point presentations.

Key individuals and groups affected by the change were involved. Regarding restructuring, the CEO noted that the staff most affected were directors and above, with Center Directors being the most impacted. Each director was talked with on numerous occasions individually and in groups. They were involved to some degree, but the bulk of the planning, development and implementation of the change was led by upper management as described above. Regarding trauma-informed care, work groups were formed after the all-agency training to design implementation. A focus group participant gave an example of effective change at one program site, saying

People were aware and involved. The atmosphere had become bad. A consultant did a staff focus group and interviewed management. She compiled and shared information with the whole group. Managers at staff meetings addressed these issues with staff input; staff were listened to.

Regarding rebranding, the agency involved all levels in the change process, including line staff, managers, senior leaders and the Board of Directors.

The organization provided sufficient resources for the change effort. Focus group respondents noted that for Rebranding and Trauma-informed care, staff coverage was provided for residential staff going to meetings, and time was allotted for the trauma-informed care work group.

The change was supported by political overseers (e.g., Board or CAO/CEO) and external stakeholders. The agency board was trained on the trauma-informed care model and its importance.

The change was comprehensive and integrated. As noted above, the restructuring change was very comprehensive, involving programs and administrative functions including HR, finance, and information systems. Trauma-informed care was implemented throughout the agency. A focus group participant noted that the mandatory training even included staff from fiscal and administrative functions who didn't work with clients, adding that the two parts of the training included "what it is, and how to implement". A focus group respondent noted that room colors were changed and posters added to fit with trauma-informed care principles, and a paperwork procedure was changed to prompt staff to ask questions in a trauma-informed way.

Progress on the change process was clearly communicated throughout the organization. During restructuring, regular updates were provided to management staff and directors, but these were inconsistently communicated to other levels in the agency, depending on the individual manager. Progress on trauma-informed care was communicated at Program Manager meetings, but one focus group reported that if a Division Director was not located on a site, it was difficult for staff to keep informed. A respondent to the survey noted that "We were informed on a monthly basis as to the progress of the change. We were also informed of how we, as direct service staff, would be impacted by the new change."

Change agents gathered information to document the change problem to be addressed and shared this with staff. Regarding trauma-informed care, a focus group respondent noted that they were told that the County (a significant funding source) was moving toward more client-based, welcoming services, and trauma-informed care fitted with that new direction..

A cross section of employees was selected for a team to guide the change. For restructuring, the change team for the most part included executive staff, with other staff sought out for feedback and input. For trauma-informed care, a work group with one representative from each site, including all staff levels, was formed to guide implementation. A focus group member noted that through this group she was able to voice concerns and share information in her program.

Potential sources of resistance were identified and addressed. The CEO noted that during restructuring, this was an especially difficult area, as some of the key leaders in the organization were resistant to the change. The CEO personally spent time meeting with each of these individuals to discuss the changes to go over the reasons why the changes were necessary. He was very clear about his expectations for them as they went through the change process. He also made sure to meet with most of the staff throughout the agency at staff meetings, to ensure that they heard directly from him about the changes that were going to be made and the rationale. Regarding trauma-informed care, a concern regarding handling a youth leaving a group was raised, and a new procedure including co-facilitators was developed and implemented.

Monitoring tools were used to track progress. Survey results showed little awareness of this, but the CEO noted that there were several tools developed. A Performance Based Contract fiscal report was developed specifically designed to track programs' fiscal performance under the new type of contract. A special residential fiscal report was developed to track revenue based on occupancy. This allowed the agency to monitor revenue generated compared to expected revenue based on bed availability. They brought in a Quality Assurance Coordinator, who developed new tools for monitoring and tracking program performance to ensure that the

agency was in compliance with contracts and providing quality services. Work group progress on trauma-informed care was reported at Program Manager meetings, but this information may not have been consistently shared in the programs.

4.3 Limitations

Before discussing these findings, some study limitations should be noted. As a retrospective design, this study has the common limitation of respondents possibly having faulty recall of earlier events. In this study, respondents may have over-stated or distorted tactics reported, or they may not have recalled and reported tactics which actually occurred. Also, qualitative data gathered through interviews with agency managers and a focus group cannot be fully representative of what actually happened. Because of the small sample here, these results must be considered preliminary; and a study in one agency cannot be fully generalizable to other settings.

The numbers of respondents suggests that results should be considered cautiously. It could be that some staff decided to participate because of strong feelings (positive or negative) about the changes, and to that extent results may not be representative.

An inherent challenge in any research where “success” cannot be easily defined is a possible limitation here. This may be especially important regarding assessing the success of change processes. “Successful” was not precisely defined in the survey for respondents; but, as noted above, goals were seen as fully or mostly achieved by 95% of respondents; and qualitative data showed that results observed typically reflected accomplishment of stated goals. It should be also be noted, regarding both assessments of success and observed use of tactics, that this study goes beyond other similar studies, which typically use the perspectives of only agency executives and consultants. In fact, few studies of organizational change present results beyond a qualitative summary of outcomes, often from the perspective of only the agency executive, change leader, or consultant.

Further research could address these limitations by using larger samples and multiple organizations facing the same challenge (e.g., all county agencies in a state implementing the same new program or policy), and using more quantifiable measures of success, such as changes in client outcomes.

5. Discussion

In terms of research methods, these findings go beyond those of many other studies, by including both quantitative and qualitative data on generic change tactics, from the perspectives of those at multiple levels of the organization. Notably, most of the data came from agency employees, whose perspectives are not often included in case studies of organizational change. Ninety five per cent of survey respondents believed that the change goals were fully or mostly achieved, and qualitative data provided support and elaboration regarding goal accomplishment. This attention to specific tactics which the literature has suggested are important suggests opportunities for further research.

Several common themes were seen in the OCTQ and the qualitative data across the three change initiatives examined here. Overall, these findings add new knowledge which supports many of the prescriptions in the literature which to date have rarely been tested empirically. At least 50% of respondents did, in fact, see the use of ten of the specific change tactics. There were

focus group comments with examples of fourteen of the tactics being used. Several of the tactics which were not seen by many respondents were ones which may have been difficult for lower-level staff to observe.

Change leaders generally seemed to be effective in conveying the need, desirability, and urgency for the changes; showing their support through their communications and allocation of resources (mainly staff time) to address them; involving staff and soliciting their support; having a clear plan for the process; institutionalizing results of the change; and making staff aware of the results. Most of these tactics were also seen by respondents as the most important for the success of the change processes. Five of the six most impactful tactics were also the tactics which were most observed. The fact that statistically significant relationships were not found between the more highly observed tactics and assessment of goal accomplishment was puzzling. It seems likely that the small sample size was not adequate to fully explore such relationships. It is also possible that certain combinations of specific tactics are needed to affect goal accomplishment.

Each of these change initiatives originated at the top management level, and most of the implementation plans were also developed by upper management before unveiling the need and the plans to all staff. Probably because of this, it is not surprising that the amount of actual staff participation in the process was not observed as much as other tactics were. Nevertheless, staff did seem to feel that they had opportunities to express concerns and provide input on implementation detailing. Qualitative data noted that in some cases transmitting information from the management levels to the programs could have been more effective, as it relied upon individual Program Managers regularly passing on such information to their programs. This may serve as a reminder to managers that communication requires regular and intensive efforts to keep staff informed; and underscores a point heavily emphasized by Kotter (1996): change leaders cannot “overcommunicate” the need and urgency for change and the activities, progress, and results as they occur. It is easy for change leaders and managers involved in a change process to assume that everyone else knows as much as they do about the process, and to therefore not communicate as much, or to not involve more fully and broadly other staff members in the process.

While the OCTQ shows strong potential as a tool for researchers to learn more about effective organizational change and share these results with practitioners, it can also be used by agency change leaders, with the tactics listed used as a menu of change behaviors that could stimulate a change leader to consider how she or he could use each tactic in the change initiative being planned. It could also be administered after the conclusion of a change initiative to learn employees' views of the change process and the outcomes, with results of the survey fed back to staff as a learning opportunity for further actions on the change effort or to guide future change efforts.

6. Conclusions

Overall, these results are encouraging, and show promise for use of the OCTQ in other settings and with larger samples. Larger scale survey research should provide even stronger evidence than the more common approach of gathering data from only a few managers. Other variables such as readiness or capacity for change, leadership style, and organizational culture could be measured as well, to see the extent to which these variables affect the use of change tactics and the success of the change process.

Thoughtful and learning-oriented practitioners, typically agency administrators needing to change or improve some aspect of their organizations, want to know what “works” in organizational change, and researchers can help by providing valid, relevant, evidence-based knowledge for such practitioners.

Unless a manager has read books or articles on organizational change or completed training or classes on this subject, she or he is likely relying only upon prior experiences with change, adaptation of experiences with related activities such as strategic planning or project management, and/or instinct. The findings here offer agency managers as change leaders a set of specific tactics which they can consciously adapt and apply when they initiate organizational change. If further research supports these findings, organizational change leaders could be even more confident about their prospects for successful organizational change.

To the extent that managers as change leaders can use research to guide their use of change tactics, outcomes of organizational change may be more positive. As new knowledge continues to accumulate, and as practitioners are made aware of relevant findings, greater improvements in organizational functioning should be expected.

References

- Aarons, G., Erhart, M., Farahnak, L., & Hurlburt, M. (2015). Leadership and organizational change for implementation (LOCI): A randomized mixed method pilot study of a leadership and organization development intervention for evidence-based practice implementation. *Implementation Science* 15, 1-12.
- Aarons, G., Hurlburt, M., & Horwitz, S. (2011). Advancing a conceptual model of evidence-based practice implementation in public service sectors. *Administration and Policy in Mental Health and Mental Health Services Research*, 38(1), 4-23.
- Amodeo, M., Ellis, M. A., Hopwood, J., & Derman, L. (2007). A model for organizational change: Using an employee-driven, multilevel intervention in a substance abuse agency. *Families in Society*, 88(2), 223-232.
- Anderson, D. & Ackerman-Anderson L. (2010). *Beyond change management*, 2nd Ed. San Francisco: Pfeiffer: An Imprint of Wiley.
- Austin, M. (Ed.) (2004). *Changing welfare services: Case studies of local welfare reform programs*. Binghamton, NY: The Haworth Press.
- Austin, M., & Vu, C. (2012). Assessment of Organizations. In C. Glisson, Dulmus, C., & Sowers, K. (Ed.), *Social work practice with groups, organizations, and communities*. (pp. 132-158). Hoboken, NJ: John Wiley & Sons, Inc.
- Barbee, A., Christensen, D., Antle, B., Wandersman, A., & Cahn, K. (2011). Successful adoption and implementation of a comprehensive casework practice model in a public child welfare agency: Application of the Getting to Outcomes (GTO) model. *Children and Youth Services Review*, 33(5), 622-633.
- Blasé, K., van Dyke, M., & Fixsen, D. (2013). *Stages of implementation analysis: Where are we?* Retrieved from the National Implementation Research Network website: <http://implementation.fpg.unc.edu/sites/implementation.fpg.unc.edu/files/NIRN-StagesOfImplementationAnalysisWhereAreWe.pdf>
- Burke, W. (2014). *Organization change: Theory and practice*, 4th Ed. Thousand Oaks, CA: Sage Publications.
- By, R. (2007). Ready or not.... *Journal of Change Management*, 7(1), 3-11.

- Cao, Y., Bunger, A., Hoffman, J., & Robertson, H. (2016). Change communication strategies in public child welfare organizations: Engaging the front line, *Human Service Organizations*, 40(1), 37-50.
- Carnochan, S. & Austin, M. (2004). Implementing welfare reform and guiding organizational change, in Austin, M. (Ed.). *Changing welfare services: Case studies of local welfare reform programs*. Binghamton, NY: The Haworth Press, 3-26.
- Claiborne, N., Auerbach, C., Lawrence, C., McGowan, B., & Lawson, H. (2014). Design teams as an organizational intervention to improve job satisfaction and worker turnover in public child welfare. *Journal of Family Strengths*, 14(1), 69-80.
- Claiborne, N., Auerbach, C., Zeitlin, W., & Lawrence, C. (2015). Organizational climate factors of successful and not successful implementations of workforce innovations in voluntary child welfare agencies. *Human Service Organizations: Management, Leadership & Governance*, 39, 69-80.
- Cohen, M. & Hyde, C. (2014). *Empowering workers & clients for organizational change*. Chicago: Lyceum Books.
- Devine, M. (2010). Participation in organizational change processes in human services organizations: The experiences of one group of frontline social workers. *Administration in Social Work*, 34(2), 114-134.
- DuBrow, A., Woche, D., & Austin, M. (2004). Introducing organizational development (OD) practices into a county human service agency. In Austin, M. (Ed.). *Changing welfare services: Case studies of local welfare reform*. Binghamton, NY: The Haworth Press, 297-316.
- Elwyn, L., Esaki, N., & Smith, C. (2016). Importance of leadership and employee engagement in trauma-informed organizational change at a girls' juvenile justice facility. *Human Service Organizations: Management, Leadership & Governance*, 1-13. DOI: 10.1080/23303131.2016.1200506
- Esaki, N., Benamati, J., Yanosy, S., Middleton, J., Hopson, L., Hummer, V., et al. (2013). The sanctuary model: Theoretical framework. *Families in Society*, 94(2), 87-95.
- Ezell, M., Casey, E., Pecora, P., Grossman, C., Friend, R., Vernon, L., and Godfrey, D. (2002). The results of a management redesign. *Administration in Social Work* 26 (4), 61-79.
- Fernandez, S. & Rainey, H. (2006). Managing successful organizational change in the public sector: An agenda for research and practice, On Line version. *Public Administration Review*, 66(2), 1-25.
- Fixsen, D., Blasé, K., Naoom, S., & Wallace, F. (2009). Core implementation components. *Research in Social Work Practice*, 19(5), 531-540.
- French, W., & Bell, C. (1995). *Organization development*, 5th Ed. Upper Saddle River, NJ: Prentice-Hall.
- Gillingham, P. (2015). Electronic information systems and human service organizations: The unanticipated consequences of organizational change. *Human Service Organizations Management, Leadership & Governance*, 39(2), 89-100.
- Glisson, C. (2012). Interventions with organizations. In Glisson, C., Dulmus, C., & Sowers, K. *Social work practice with groups, organizations, and communities*. Hoboken, NJ: John Wiley & Sons, Inc. 159-190.
- Glisson, C., Hemmelgarn, A., Green, P. & Williams, N. (2013). randomized trial of the Availability, Responsiveness and Continuity (ARC) organizational intervention for

- improving youth outcomes in community mental health programs. *Journal of the American Academy of Child & Adolescent Psychiatry* 52(5): 493–500.
- Haight, W., Bidwell, L., Marshall, J., & Khatiwoda, P. (2014). Implementing the Crossover Youth Practice Model in diverse contexts: Child welfare and juvenile justice professionals' experiences of multisystem collaborations. *Children and Youth Services Review*, 39, 91-100.
- Herold, D., Fedor, D., & Caldwell, S. (2007). Beyond change management: A multilevel investigation of contextual and personal influences on employees' commitment to change. *Journal of Applied Psychology*. 92 (4): 942-51.
- Hughes, M. (2011). Do 70 per cent of all organizational change initiatives really fail? *Journal of Change Management*, 11(4), 451-464.
- Hughes, M. (2015). Leading changes: Why transformation explanations fail. *Leadership* 0(0), 1-21.
- Hummer, V., Dollard, N., Robst, J., & Armstrong, M. (2010). Innovations in implementation of trauma-informed care practices in youth residential treatment: A curriculum for organizational change. *Child Welfare*. 89 (2):79-95.
- Hurlburt, M., Aarons, G., Fettes, D., Willging, C., Gunderson, L., & Chaffin, M. (2014). Interagency Collaborative Team model for capacity building to scale-up evidence-based practice. *Children and Youth Services Review*, 39(0), 160-168.
- Johnson, M., & Austin, M. (2008). Evidence-based practice in the social services: Implications for organizational change. *Journal of Evidence-Based Social Work*, 5(1-2), 239-269.
- Kerman, B., Freundlich, M., Lee, J., & Brenner, E. (2012). Learning while doing in the human services: Becoming a learning organization through organizational change. *Administration in Social Work*, 36(3), 234-257.
- Kotter, J. *Leading Change*. 1996. Boston: Harvard Business School Press.
- Lawrence, C., Claiborne, N., Zeitlin, W., & Auerbach, C. (2016). Finish what you start: A study of Design Team change initiatives' impact on agency climate. *Children and Youth Service Review*. 63, 40-46.
- Lee, C., & Austin, M.. (2012). Building Organizational Supports for Knowledge Sharing in County Human Service Organizations: A Cross-Case Analysis of Works-in-Progress. *Journal of Evidence-Based Social Work*, 9(1-2), 3-18.
- Lewis, J., Packard, T., & Lewis, M. (2012). *Management of human service programs (5th ed.)*. Belmont, CA: Thomson-Brooks/Cole.
- Lutz, S., Smith, J., & Da Silva, N. (2013). Leadership Style in Relation to Organizational Change and Organizational Creativity: Perceptions from Nonprofit Organizational Members, *Nonprofit Management and Leadership*, 24(1), 23-42.
- Lyons, P., & Winter, C. (2010). Data management system selection in a family service agency. *Families in Society*, 91(4), 440-446.
- McCrae, J., Scannapieco, M., Leake, R., Potter, C., & Menefee, D. (2014). Who's on board? Child welfare worker reports of buy-in and readiness for organizational change. *Children and Youth Services Review*, 37(0), 28-35.
- Novins, D., Green, A., Legha, R., & Aarons, G. (2013). Dissemination and Implementation of Evidence-Based Practices for Child and Adolescent Mental Health: A Systematic Review. *Journal of the American Academy of Child & Adolescent Psychiatry*, 52(10), 1009-1025.e1018.
- Packard, T & Shih, A. (2014). Organizational change tactics: The evidence base in the literature.

- Journal of Evidence-Based Social Work*. 11(5), 498-510.
- Palmer, I., Dunford, R., & Akin, G. (2009). *Managing Organizational Change: A Multiple Perspectives Approach*. 2nd ed. Boston: McGraw-Hill.
- Parish, J., Cadwallader, S., & Busch, P. (2008). Want to, Need to, Ought to: Employee Commitment to Organizational Change. *Journal of Organizational Change Management* 21 (1): 32-52.
- Parry, K. (2011) Leadership and organization theory. In Bryman A, Collinson D, Grint K, et al. (Eds.) *The SAGE Handbook of Leadership*. London: Sage Publications Ltd.
- Pettigrew, A., Woodman, R., & Cameron, K. (2001). Studying Organizational Change and Development: Challenges for Future Research. *Academy of Management Journal*, 44(4), 697-713.
- Pipkin, S., Sterrett, E., Antle, B., & Christensen, D. (2013). Washington State's adoption of a child welfare practice model: An illustration of the Getting to Outcomes implementation framework. *Children and Youth Services Review*, 35(12), 1923-1932.
- Proctor, E., Powell, B., & McMillen, C. (2013). Implementation strategies: recommendations for specifying and reporting. *Implementation Science* 8(1): 139.
- Proehl, R. (2001). *Organizational change in the human services*. Thousand Oaks, CA: Sage Publications.
- Ramos, C. 2007. Organizational change in a human service agency. *Consulting Psychology Journal: Practice and Research* 59 (1): 41-53.
- Salveron, M. Bromfield, L., Kirka, C., Simmons, J., Murphy, T., & Turnell, A. (2015). Changing the way we do child protection: The implementation of Signs of Safety® within the Western Australia Department for Child Protection and Family Support. *Children and Youth Services Review*, 48, 126-139.
- Schmid, H. (2010). organizational change in human service organizations: Theories, boundaries, strategies, and implementation. In Y. Hasenfeld (ed.), *Human services as complex organizations*, 2d Ed. Thousand Oaks, CA: Sage Publications, 455-479.
- Soenen, B., D'Oosterlinck, F., & Broekaert, E. (2014). Implementing evidence-supported methods in residential care and special education: A process-model. *Children and Youth Services Review*, 36(0), 155-162.
- Weiner, B. (2009). A theory of organizational readiness for change. *Implementation Science*, 19(4), 67-75.
- Whittaker, J., Greene, K., Schubert, D., Blum, R., Cheng, K., Blum, K., Reed, N., Scott, K., Roy, R., & Savas, S. (2006). Integrating evidence-based practice in the child mental health agency: A template for clinical and organizational change. *American Journal of Orthopsychiatry*, 76(2), 194-201.

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Highlights

- Organizational change tactics, essential to planned change, are not often studied.
- A change tactics questionnaire was useful in identifying change process success.
- Several change tactics were seen as being used and helpful in goal accomplishment.
- Communicating the need and expected outcomes of the change were seen as important.
- Top management support and institutionalizing changes made were seen as important.
- The questionnaire shows promise for further study of organizational change tactics.

ACCEPTED MANUSCRIPT