[J Perinat Neonatal Nurs.](https://www.ncbi.nlm.nih.gov/pubmed/20147828) 2010 Jan-Mar;24(1):32-42. doi: 10.1097/JPN.0b013e3181c94a24.

**Effective implementation strategies and tactics for leading change on maternity units.**

[Bingham D](https://www.ncbi.nlm.nih.gov/pubmed/?term=Bingham%20D%5BAuthor%5D&cauthor=true&cauthor_uid=20147828)1, [Main EK](https://www.ncbi.nlm.nih.gov/pubmed/?term=Main%20EK%5BAuthor%5D&cauthor=true&cauthor_uid=20147828).

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**Abstract**

Change implementation within organizations is a complex and dynamic process that is not always successful. Tailoring the implementation strategies and tactics to address the identified barriers to change is one method that has been shown to be effective. Examples of 3 broad types of interrelated strategies used by frontline leaders when implementing quality improvement (QI) projects are (1) discourse (communication), (2) education (formal and informal), and (3) data (audit). Examples of common barriers to implementation are leaders' and clinicians' knowledge, attitudes, and practices, the QI topic characteristics, and the implementation climate. External pressures from national organizations such as the National Quality Forum, the Leapfrog Group, and The Joint Commission likely facilitate change. Knowledgeable, tenacious, and creative frontline physician and nurse leaders may have the greatest impact on QI implementation effectiveness because they are the individuals who decide how the strategies and tactics will be tailored.

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