Developing a Kotter Eight-Step Model to Facilitate Organizational Adoption of a Mental Health Management Innovation for Children and Adolescents

Christina Smith, Trey Constable
Carlow University
3333 Fifth Avenue
Pittsburgh, PA 15213
United States
csmith4361@live.carlow.edu,
taconstable@live.carlow.edu

Samra Halchak, Shataya White
Carlow University
3333 Fifth Avenue
Pittsburgh, PA 15213
United States
sjhalchak@live.carlow.edu,
sbwhite@live.carlow.edu

Abstract. *Pittsburgh Mercy, one of the largest community health and social service providers in Southwestern Pennsylvania, has experienced year-over-year growth in both admissions and readmissions among children and adolescents. Contributing factors include rising mental health diagnoses, the effects of COVID-19 and the post-pandemic period, limited access to outpatient mental health services, and crisis overload in hospitals. These challenges are further compounded by psychological factors, neurological development, and environmental influences. Recognizing the interplay of these factors is critical for developing targeted interventions that support healthy emotional development in the targeted population.*

Guided by John Kotter's 8-Step Change Model, this initiative proposes the development, implementation and organizational adoption of a Mental Health Coping Toolkit within Pittsburgh Mercy Behavioral Health—a subdivision of Pittsburgh Mercy—specifically within its partial hospitalization program. The goal is to empower patients, particularly children and adolescents, to take a more active role in managing their mental health symptoms. This initiative represents a strategic shift, not easy to accept in the organization, from a solely clinician-driven model to an integrated care approach, where patients are equipped with developmentally appropriate, evidence-based coping strategies that complement therapeutic interventions. The intent is to ensure that all youth leaving the program possess practical tools to reduce emotional crises, thereby decreasing both admission and readmission rates. The long-term goal, for which Kotter's approach is employed, is to institutionalize the toolkit as a permanent component of patient care in the healthcare organization.

The Mental Health Coping Toolkit would be personalized for individual patients and would include a variety of practical, digital, and gamified components—such as sensory tools, journaling exercises, grounding techniques, mood and habit tracking aids, and QR codes linking to mental health resources. It would also feature step-by-step guidance for clinician integration, parental support elements, and portable, sustainable packaging.

Keywords. Mental health, mental health coping toolkit, Pittsburgh Mercy Behavioral Health, John Kotter's 8-Step Change Model, organizational change, partial hospitalization program

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