



## Change management and its impact on related factors: an empirical investigation and perspectives of Saudi Arabian Primary Healthcare Centers (PHC'S)

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### ABSTRACT

Present study aimed to look into the impacts of changing the management in PHC's. Study took place in the Kingdom of Saudi Arabia. Theoretical framework has been developed after a literature review. Five (5) constructs were considered and four hypotheses were postulated. Next after, a survey questionnaire was developed and distributed among the targeted respondents. Total (176) valid responses were obtained out of 200 distributed surveys. Collected data were analyzed through SPSS, and conducted all the necessary tests. Findings of the study shows all the relationship among the considered constructs are positive. Practical implication of this study is also important for the practitioners.

**Keywords:** *Change management, Health services, Primary health care, Social networks*

### INTRODUCTION

Saudi Arabia is making a major healthcare transformation motivated by Vision 2030 goals and ambitions. Vision 2030 has stressed on providing accessible, affordable, and high-quality care to all the population<sup>1</sup>. However, some barriers may prevent the provision of accessible healthcare, especially at Primary Healthcare Centres (PHCs). Several factors have been reported to be associated with access to primary healthcare in Saudi Arabia, especially the organizational factors and the factors that relate to both the patients and the healthcare professionals<sup>2</sup>. Primary health care (PHC) is an approach to making essential health care accessible and utilized. The technical factors in a system are simple to modify compared to human factors. In some instances, systems analysts and developers ignore or minimize

human factors and place primary importance on the technical dimensions of the organization. This may result in misalignment, and change management will succumb to controversies and issues and thus fail to realize its goals and objectives<sup>3</sup>.

However, many researchers<sup>3-5</sup> concluded that there are certain barriers to successful change management of accessibility to healthcare may include lack of political will on the part of the leadership, legal obstacles, limited, or weak coordination among the actors involved in the transformation and change process, lack of financial resources required to support successful program implementation, uncertainty about information for readiness with respect to decision-making, lack of clarity about who is responsible for action, conflicting objectives

among the stakeholders and interest groups, and finally, failure in collective decision-making.

Currently, Saudi Arabia follows the national health-care model, in which provision of health services is primarily the responsibility of the government, and patients enjoy treatment and health services free of charge. Although there are some private hospitals and primary health-care centers, the private sector's role is nominal by comparison to the government sector. Therefore, under the able leadership of the young Deputy Crown Prince Muhammad Bin Salman, the government has envisioned a national transformation plan referred to as Vision 2030<sup>6</sup>.

This research seeks to identify factors which comes through the change management and affect the healthcare in perspectives of financial, organizational, and cultural/social.

### ***Problem Statement***

Change management in PHCs is a major concern for the Saudi transformation plan in healthcare. Change management in Saudi PHCs is a process underway in order to enhance the accessibility to PHC as per the pillars of Vision 2030. Despite their best efforts, various Saudi Arabian studies have highlighted issues with access to healthcare at Primary Healthcare Centers, including a shortage of buildings, infrastructure, and manpower<sup>7,2</sup>. Longer wait times and fewer opportunities for one care between doctors and patients are further outcomes of PHCs being too crowded to handle demand<sup>8</sup>. Problems with delayed findings and radiation testing, as well as a shortage of technology and medical instruments, have resulted from the rising demand for healthcare<sup>9</sup>.

The previous studies in the Saudi context did not focus on that change management could be the reason<sup>10</sup>. Studies such as<sup>11,12</sup> focused mainly on the healthcare status in Saudi Arabia without exploring the detailed factors affecting, especially at PHCs. The main research problem is based on the framework which implies that the extent to which a population 'gains change management also depends on financial, organizational, and social or cultural barriers that limit the utilization of services<sup>13</sup>.

Based on this discussion the following research questions has been raised:

- Is there any impact on organization while changing management?
- Is there any impact on organizational finance while changing the management?
- Is there any impact on social/culture while changing management?
- Is there any impact on the overall performance of the organization while changing the management?

### ***Significance of the Study***

Healthcare accessibility is more likely to be implemented successfully when healthcare administrators have a chance to shape the reform, a sense of confidence in their ability to implement the reform, and a clear understanding of the reform's worth and, most importantly, its positive impact on patients. Alterations to healthcare systems are unavoidable, but there are more and less efficient methods to implement these adjustments. The findings of this study could have the potential to far-reaching consequences for PHCs in Riyadh city, particularly with regard to the organizational, financial, and social aspects of healthcare reforms with the goal of gaining the support of healthcare administrators.

## **LITERATURE REVIEW**

This part overviews the theoretical part of the study by presenting the concepts of change management, healthcare change management, primary healthcare, healthcare access and the factors affecting it, and the role of Vision 2030 in enhancing access to healthcare. Also, the section presents the previous studies that tackled the issue of the current study with the aim of linking this research to the literature of access to healthcare.

### ***Change Management***

A key objective of change management is to help individuals adjust to new circumstances in a way that promotes their long-term satisfaction<sup>14</sup>. In business, the term "change management" refers to a set of practices and strategies designed to encourage and facilitate behavioral, mental, and/or procedural shifts among employees to better accomplish strategic goals<sup>15</sup>. Managing change is a methodical, systematic strategy that helps healthcare companies implement smooth

process transformations<sup>16</sup>. Organizational change management in healthcare settings necessitates the participation of both top-level executives and key stakeholders<sup>17</sup>. When people, systems, groups, and technology are unable to adapt quickly enough to meet the evolving demands of an organization, change is necessary. This essay delves into the value of change management and lays forth five essential measures for directing transformation in today's healthcare system<sup>18</sup>.

With the use of change management, healthcare organizations may implement policy changes with minimum pushback from their workforce. The ability to successfully direct staff to targeted goals requires that healthcare executives construct focused, organized change management programs. As changes in care are made, whether large or little, a good plan alleviates the stress, uncertainty, and worry felt by the care teams<sup>19</sup>.

### ***Change Management In Healthcare***

Healthcare change management is the use of general change management principles in the medical field. Examples of healthcare organizational transformation include the introduction of electronic health records and a new system for scheduling doctor's appointments<sup>20</sup>.

Managing change involves engaging into the complexities of the transition. Making ensuring the change is beneficial and timely involves assessing, planning, and executing operations, tactics, and strategies<sup>21</sup>. Managing change is an involved, ever-evolving, and difficult task. The best answers always include a mix of technical and human-centered approaches<sup>14</sup>. It has been said that the key to successful transition is to "unfreeze" old habits while simultaneously "re-freezing" the new ones<sup>15</sup>. Alteration might be regular or unpredictable. Alterations that can be foreseen may be better prepared for, whereas sudden shifts might be more challenging to deal with. Because of the quick pace of healthcare reform, its outcomes are less likely to be foreseeable<sup>18</sup>.

Change is the one thing that is certain to occur in healthcare institutions. Due to factors such as population aging, shifting illness patterns, and medical research breakthroughs, healthcare

systems and their personnel must adapt rapidly to meet the needs of patients and the public<sup>19</sup>. Changing cultural norms and beliefs need adjustments in organizational structures to meet new standards in areas such as healthcare access, quality of care, and patient participation in treatment decisions<sup>20</sup>. There has been a rise in the importance of CPE among healthcare workers as a means of ensuring that their competencies are up to date with industry standards and that they have the information and skills necessary to remain knowledgeable about emerging research findings<sup>21</sup>.

Political reforms and policy efforts are related to organizational changes that impact healthcare workers. A new logic of managerialism, that work should be structured and controlled by managers to meet organizational objectives of cost-effective and efficient health care, has emerged with the rise of New Public Management (NPM), which has challenged the old professional supremacy<sup>16</sup>. Professionals in the healthcare industry are under growing pressure to keep detailed records, handle more administrative duties, and take part in management-driven quality improvement projects<sup>17</sup>. There have also been shifts in response to the evidence-based movement that has arisen in the aftermath of NPM with the goal of establishing a firmer scientific basis for professional practice.

As a general rule, transitions may be difficult since they go against the demand for constancy that all people have<sup>20</sup>. Employees' psychological unease about how an organization's restructuring may impact their professional and personal lives has been linked to this kind of uncertainty<sup>18</sup>. Reductions in organizational commitment, lost productivity, stress at work, emotional exhaustion, mental health problems, change fatigue, poor self-rated health, adverse sleep patterns, sick days, hospitalizations, and prescriptions for stress-related medications are just some of the measurable negative outcomes associated with high rates of organizational change<sup>15</sup>. Leaders in the healthcare sector must devise robust, efficient change management strategies if their institutions are to grow and adapt in tandem with the sector. If leaders are able to successfully execute their plans, they may streamline their organizational processes and ensure that their critical care functions do not become obsolete over time<sup>14</sup>.

### **Primary Healthcare**

Primary health care, which represents the first point of contact between society and the health system, provides all the basic needs of the nationally declared preventive services with a package of therapeutic and diagnostic services<sup>22</sup>. Primary healthcare aims to improve access to health services through optimal coverage, comprehensive and equitable geographical distribution, expanding the provision of e-health services and digital solutions, improving the quality of health services, focusing on the patients' satisfaction by applying and following the best evidence-based international standards, and establishing and enabling care systems.

Primary healthcare in Saudi Arabia forms the basis of care coverage and needs to be evaluated in terms of performance, challenges, and future opportunities to serve the population<sup>23</sup>. Despite the significant improvements that have been made in the Saudi healthcare services sector during the past decades, the Kingdom of Saudi Arabia faces serious challenges in the primary healthcare system. These challenges include increased demand from rapid population growth, high cost of health care services, inequality of access, concerns about the quality and safety of care, the growing burden of chronic diseases, the electronic health system, and poor cooperation and coordination among other sectors of care<sup>11</sup>.

The government has developed and implemented a number of initiatives that include the strategic plan of the Ministry of Health to effectively confront these challenges. These initiatives aim to explore the challenges facing the Saudi healthcare system with a primary focus on primary healthcare services, in addition to integrating basic preventive and curative healthcare services. The Ministry of Health provides primary health care services through a network of health care centers, hospitals, and primary health care facilities, to improve the access of residents in remote areas to health services and a referral system also provides curative care to all members of the community from the level of general practitioners and the family.

### **Impact Of Change Management**

Access to healthcare is reported to be determined by many organizational, administrative, financial, technical, and human factors<sup>22, 23</sup>,

concluded that the service cost, the availability of highly qualified healthcare professionals, the availability of recent medical devices, medical labs, and recent medical technologies determine the access quality to healthcare. On the other hand, the top management support, the proper organizational structure, the clarity of job roles and responsibilities, the teamwork orientation, multiple communication channels, and proper compensation systems highly affect the quality of the medical services offered to the patients and their access to care<sup>24, 25</sup>.

Social and economic factors also highly access to care<sup>26</sup>. Social determinants of health are the economic and social conditions under which individuals live and that determine their health. They are 'social risk conditions', rather than individual risk factors that may either increase or decrease the risk of developing a disease, for example, cardiovascular disease or type 2 diabetes.

Social determinants of health are linked to lack of opportunities, and lack of resources, to protect, improve and maintain health, as arising from differences in these factors among individuals; unfair inequalities in health and many studies indicate that social determinants of health account between 30 and 55% of health outcomes, so they may be more important than health care or lifestyle choices in influencing health<sup>27</sup>. For example, the risk of developing some diseases may increase such as heart disease, diabetes, and obesity, as a result of malnutrition, and the inability of these people to provide healthy foods, as well as the life expectancy of these people may be lower compared to those who are able to provide their own healthy food<sup>22</sup>.

Where the focus is on the relationship between health and individuals' access to health services, and accurate diagnosis of various health problems, this determinant includes many issues such as access to health care, primary care, health insurance coverage, and increased health education<sup>28</sup>.

## **METHOD**

### **Hypotheses development**

#### **Change management and organizational impact**

Change management is basically the process of implementing the plan, and controlling changes

within an organization to improve its performance and adapt to the evolving the atmosphere. Several strategies, tools and techniques are involved to make sure that changes are well effectively accomplished where the organization can achieve their desired goals. Impact of change the management on an organization can be significant, affecting its processes, culture, people and systems.

According to <sup>29</sup>, change management involves the use of various models and frameworks to guide the change process, such as Lewin's Change Management Model, Kotter's 8-Step Model, and ADKAR Model. These models help organizations to identify the need for change, create a vision, develop strategies, implement the change, and sustain the change. The successful implementation of change management requires the involvement and commitment of all stakeholders, including leaders, employees, customers, and suppliers.

The impact of change management on an organization can be positive or negative, depending on how it is implemented. Positive impacts include increased productivity, improved quality, enhanced customer satisfaction, and a more engaged workforce <sup>30, 31</sup>. Change management can also help organizations to stay competitive in a rapidly changing environment by adapting to new technologies, markets, and customer needs <sup>32</sup>.

On the other hand, negative impacts of change management can include resistance from employees, communication breakdowns, and failure to achieve the desired outcomes <sup>29</sup>. This can result in decreased morale, increased turnover, and decreased organizational effectiveness. To minimize the negative impacts of change management, organizations can adopt a proactive approach by involving employees in the change process, providing training and support, and communicating the reasons for the change and its benefits <sup>30, 8</sup>. This can help to build trust and create a sense of ownership among employees, reducing resistance and increasing buy-in.

In conclusion, to test the relationship between these two constructs the following hypothesis has been developed.

**H<sub>1</sub>:** *There is a positive and a significant relationship between the change management on organization.*

#### ***Change management and its impact on finance***

Change management can have a significant impact on organizational finance <sup>33</sup>. Implementing change initiatives often involves significant investments, enough capital and resources, and maybe require changes to budgeting the processes and finance systems. This further impact of change on organizational finance can be both positive and negative, depending on the nature of the change and how it is implemented <sup>30</sup>.

One of the potential benefits of change management is the opportunity to reduce costs and increase efficiency <sup>32</sup>. For example, implementing process improvements, automation, or outsourcing can lead to cost savings and improved productivity <sup>32</sup>. Additionally, changes in product or service offerings can lead to increased revenue and profitability, such as expanding into new markets or introducing new products or services <sup>32</sup>.

However, change management can also have negative impacts on organizational finance. Poorly planned or executed change initiatives can lead to cost overruns, delays, and operational disruptions, all of which can have financial consequences. Resistance to change from employees or stakeholders can also delay or derail change initiatives, further adding to costs and risks <sup>29</sup>

To mitigate the financial risks associated with change management, organizations should adopt a rigorous and strategic approach to change management. This includes conducting a thorough analysis of the costs, benefits, and risks associated with proposed changes, developing a realistic budget and timeline, and engaging key stakeholders in the planning and execution process <sup>30</sup>. Effective communication and engagement with employees and stakeholders are also critical for successful change management. Providing clear and transparent information about the rationale for change, its expected benefits and impacts, and the role and expectations of employees and stakeholders can help build buy-in and reduce resistance to change <sup>29, 1</sup>.

In conclusion, change management can have a significant impact on organizational finance, both positive and negative. Implementing change initiatives can lead to cost savings and increased revenue, but poorly planned or executed changes can lead to cost overruns, delays, and operational disruptions. Organizations should adopt a rigorous and strategic approach to change management, engaging key stakeholders and communicating effectively to mitigate risks and maximize benefits. In conclusion the study then hypothesized the relationship between these two constructs and developed the following hypothesis.

**H<sub>2</sub>:** *There is a positive and significant relationship between the change management and its impact on financial aspect of the organization.*

### ***Change management and its impact on socio/cultural***

Change management can have a several impacts on social and cultural aspects of an organization. Implementing change initiatives often involves changes to the way people interact, communicate and work with each other's<sup>23</sup>. These could change the organization's identity, culture, norms, and values, as well as its link with suppliers, co-partners, and customers and other stakeholders, too<sup>22</sup>.

There are several positive aspects of change management but one benefit is the opportunity to develop and create a positive & inclusive specific culture. For instance, implementing diversity and inclusion initiatives, employee engagement, and the development of leadership programs can improve employee confidence, re-consideration, and satisfaction<sup>30</sup>. Additionally, changes in organizational structure or processes can foster collaboration, communication, and knowledge sharing, leading to a more cohesive and innovative workforce<sup>32</sup>.

Both the aspects are here of the change management, positive and negative; change start-up that are not well communicated can cause to anxiety and confusion, and this may create resistance among the service providers, further it could be a reason to damage the organization's cultural values<sup>29</sup>. Changes that are perceived as unfair or unjust, such as layoffs or restructuring, can lead to resentment and mistrust among

employees and stakeholders, further undermining the organization's social and cultural fabric.

To mitigate the social and cultural risks associated with change management, organizations should adopt a people-focused approach to change management. This includes involving employees in the planning and execution process, providing training and support, and communicating clearly and transparently about the rationale, benefits, and expected impacts of the change<sup>30</sup>.

Based on the following discussion and literature review the following hypothesis is developed.

**H<sub>3</sub>:** *There is a positive and significant relationship between the change management and socio/culture.*

### ***Change management and its impact on overall performance of the organization***

Change management can have a significant impact on the overall performance of an organization<sup>15</sup>. Implementing change initiatives often involves changes to organizational structure, processes, systems, and people. These changes can have a ripple effect on the organization's performance, affecting its ability to meet strategic objectives, deliver products and services, and compete in the marketplace<sup>20</sup>.

One of the potential benefits of change management is the opportunity to improve organizational performance. For example, implementing process improvements, automation, or outsourcing can lead to cost savings, increased efficiency, and improved productivity<sup>30</sup>. Additionally, changes in product or service offerings can lead to increased revenue and profitability, such as expanding into new markets or introducing new products or services<sup>32</sup>.

However, change management can also have negative impacts on organizational performance. Poorly planned or executed change initiatives can lead to cost overruns, delays, and operational disruptions, all of which can have a negative impact on performance<sup>29</sup>. Resistance to change from employees or stakeholders can also delay or derail change initiatives, further undermining performance. To mitigate the performance risks associated with change management,

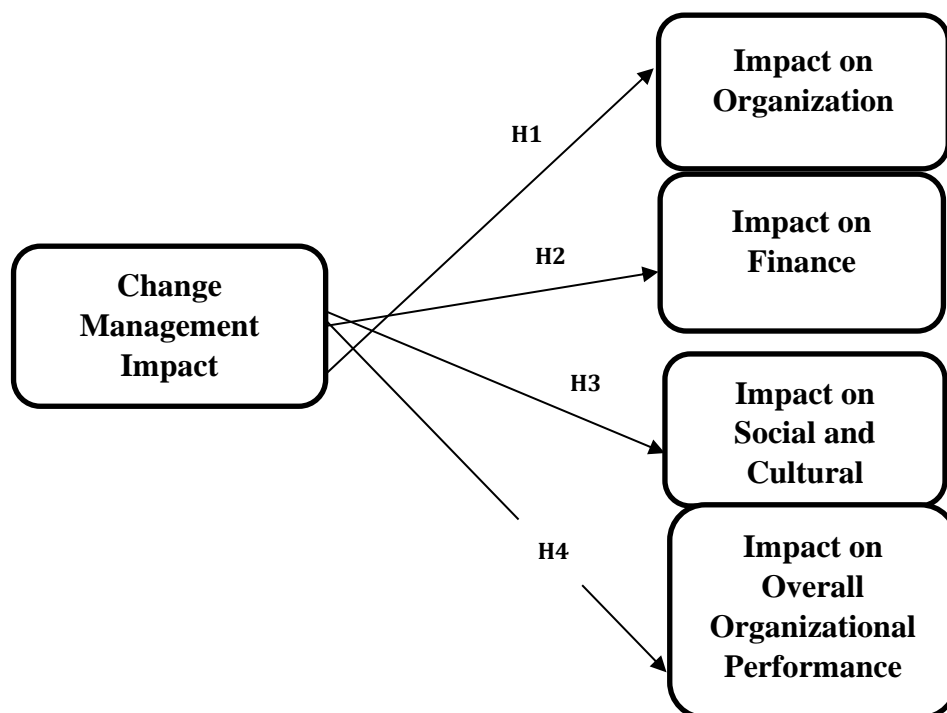
organizations should adopt a strategic and integrated approach to change management. This includes conducting a thorough analysis of the costs, benefits, and risks associated with proposed changes, developing a realistic plan, and engaging key stakeholders in the planning and execution process<sup>30</sup>.

Effective communication and engagement with employees and stakeholders are also critical for successful change management. Providing clear and transparent information about the rationale for change, its expected benefits and impacts, and

the role and expectations of employees and stakeholders can help build buy-in and reduce resistance to change<sup>29</sup>.

In conclusion, change management can have a significant impact on the overall performance of an organization, both positive and negative and thus the following hypothesis has been developed.

**H4:** *There is a positive and significant relationship between change management and the overall performance of the organization.*



**FIGURE 2.1:** Research Framework

#### ***Procedure and data collection process***

Data collection process took place in Saudi Arabia Riyadh region. Researcher has chosen randomly Nineteen (19) PHC's situated in different region of Riyadh Saudi Arabia. Riyadh is the capital city of Saudi Arabia. The selected PHC's are run by the government, however, there are plenty of other private PHC's as well. Choosing the public PHC's were convenient and easy to access to the respondents, in private due to several restrictions were avoided to access. The target audience were the staff of PHC's. They were holding different positions such as

director of the section, general physician, female and male nurses, other administrative staff. Upon approval of the respondents, they questionnaire has been handed over and briefed about how to fill it.

#### ***Data analysis process***

##### ***Measurements***

Respondents as previously discussed were the staff of PHC's. Thus, randomly surveys were distributed among the respondents. One day was spared for visiting one PHC. Hence, 19 days were

taking to obtain the data from the respondents. Two hundred (200) surveys questionnaires were distributed among the targeted respondents where (176) valid responses were obtained. The remaining were discarded incomplete and false information. According to the previous studies such as Hair et al <sup>34</sup> to have at least (5) five times the high numbers of the total constructs and variables. Thus, the counted items were  $24 \times 5 = 120$ . Whereas, the collected valid data was counted as 176 responses and thus considered for further analysis.

Five point Likert scale used as, (1) = strongly disagree and (5) =strongly agree.

### **Descriptive analysis**

Below table represents the descriptive analysis of the targeted respondents. Table further included with the frequencies of genders, nationality, age, single-married status, education, and position etc. Among 176, male respondents were counted as 109 and 67 among were counted as female respondents. Total 96 respondents were counted as local Saudi's, whereas 80 of them were having other nationalities. Similarly, age group, marital status and other demographics are mentioned in the table below.

**TABLE 1: Respondents Demographics**

| Demographics            | Options..                | Frequency = 176 | %age. |
|-------------------------|--------------------------|-----------------|-------|
| <b>Gender</b>           | Male                     | 109.00          | 61.93 |
|                         | Female                   | 67.00           | 38.06 |
| <b>Nationality/Race</b> | Saudi Nationals          | 96.00           | 54.54 |
|                         | Other Nationalities      | 80.00           | 45.45 |
| <b>Age</b>              | Up to 20 Years           | 0.00            | 00.00 |
|                         | 30-21                    | 48.00           | 27.27 |
|                         | 40-31                    | 111.00          | 63.06 |
|                         | 50-41                    | 16.00           | 09.09 |
|                         | 50 & above               | 1.00            | 0.568 |
| <b>Marital Status</b>   | Married                  | 135.00          | 76.70 |
|                         | Non-Married              | 41.00           | 23.29 |
| <b>Education</b>        | Diploma/Certificate/etc. | 13.00           | 07.38 |
|                         | Undergraduate            | 137.00          | 77.84 |
|                         | Graduate                 | 110.00          | 62.50 |
|                         | PhD                      | 2.00            | 01.13 |
| <b>Position</b>         | Manager/Director         | 19              | 10.79 |
|                         | Office Assistant         | 28              | 15.90 |
|                         | Physician                | 19              | 10.79 |
|                         | Head/Nurse               | 43              | 24.43 |
|                         | Nurse                    | 67              | 38.06 |

### **Validity checking**

Validity among the construct items can be checked through Cronbach alpha and Composite reliability (CR) tests and procedure. However, present study relies on the past studies

recommendations run the program of Cronbach alpha test using SPSS version 23. The minimum and acceptable range should be more or equal to 0.70 and is considered as acceptable Vinzi et al., <sup>35</sup>.

**TABLE 2: Cronbach's Alpha Values Results**

| Constructs                     | Cronbach Alpha Values |
|--------------------------------|-----------------------|
| Change Management Impact (CMI) | 0.931                 |
| Organizational Impact (OI)     | 0.857                 |
| Financial Impact (FI)          | .0891                 |



|                                     |       |
|-------------------------------------|-------|
| Social/Cultural Impact (SCI)        | 0.933 |
| Overall Organizational Impact (OOI) | 0.901 |

**Standard deviation and mean value**

Table set below shows all the values of standard deviation, mean values and mean level. For instance, the mean value of (CMI) is calculated 4.161, whereas, standard deviation (SD) recorded as 0.712, and thus considered as middle to the mean level. Further, (OI) mean calculated as 4.631 and SD value as 0.779 and considered as middle to the mean level. Similarly, (FI) values of mean were recorded 4.778, and value for

standard deviation SD reflected as 0.733, also included in the middle to the mean level. Mean value of (SCI) 4.770, whereas SD value were counted as 0.719 and also considered as middle to the mean level. Similarly, mean value of (OOI) was recorded as 4.009 and SD were calculated as 0.709 and considered as middle to the mean level. However, all the values can be seen in the table below.

**TABLE 3:** Analysis of Means and Standard Deviation

| Constructs                          | Mean  | Standard Deviation | Mean Level |
|-------------------------------------|-------|--------------------|------------|
| Change Management Impact (CMI)      | 4.161 | 0.712              | Middle     |
| Organizational Impact (OI)          | 4.631 | 0.779              | Middle     |
| Financial Impact (FI)               | 4.778 | 0.733              | Middle     |
| Social/Cultural Impact (SCI)        | 4.770 | 0.719              | Middle     |
| Overall Organizational Impact (OOI) | 4.009 | 0.709              | Middle     |

**Hypotheses, correlation test**

Pearson test is conventionally used in the social sciences to test the correlation of considered constructs. SPSS version 22 was utilized to conduct the Pearson test for the considered constructs that includes; change management

impact, impact on organization, financial impact, social/cultural impact and overall organizational impact. However, the rule of thumb suggestions is that all the values 0.01 are considered as significant at two tailed.

**Table 4:** Hypotheses Correlation Test

| Correlation of Variables |                     |                          |                       |                  |                       |                               |
|--------------------------|---------------------|--------------------------|-----------------------|------------------|-----------------------|-------------------------------|
|                          |                     | Change Management Impact | Organizational Impact | Financial Impact | Socio/Cultural Impact | Overall Organizational Impact |
| Change Management Impact | Pearson Correlation | .625**                   | .322**                | .324**           | .677**                | .402**                        |
|                          | Sig. (2-tailed)     |                          | .000                  | .000             | .000                  | .000                          |
|                          | N                   | 176                      | 176                   | 176              | 176                   | 176                           |
| Organizational Impact    | Pearson Correlation | .301**                   | .410**                | .323**           | .367**                | .388**                        |
|                          | Sig. (2-tailed)     | .000                     |                       | .000             | .000                  | .000                          |
|                          | N                   | 176                      | 176                   | 176              | 176                   | 176                           |
| Financial Impact         | Pearson Correlation | .477**                   | .410**                | .677**           | .587**                | .313**                        |
|                          | Sig. (2-tailed)     | .000                     | .000                  |                  | .000                  | .000                          |
|                          | N                   | 176                      | 176                   | 176              | 176                   | 176                           |
|                          | Pearson Correlation | .536**                   | .532**                | .587**           | .456**                | .327**                        |

|                                      |                     |        |        |        |        |        |
|--------------------------------------|---------------------|--------|--------|--------|--------|--------|
| <b>Social/Cultural Impact</b>        | Sig. (2-tailed)     | .000   | .000   | .000   |        | .000   |
|                                      | N                   | 176    | 176    | 176    | 176    | 176    |
| <b>Overall Organizational Impact</b> | Pearson Correlation | .572** | .589** | .535** | .932** | .598** |
|                                      | Sig. (2-tailed)     | .000   | .000   | .000   | .000   |        |
|                                      | N                   | 176    | 176    | 176    | 176    | 176    |

\*\*\*Correlations are significant at 0.01 level (2-tailed)

### RESULTS

Table below contains the values and hypotheses results. For instance, H<sub>1</sub> connects (CM) and (OI) are significant at (0.000) and calculated the t-value with 8.702, thus the link found positive. Similarly, second hypothesis that links of (CM) and (FI) were also found significant at (0.000), whereas, the t-value 9.783, and considered as

positive link. Furthermore, the connection between (CM) and (SCI) is also found significant at (0.000), and t-value calculated as 6.886, also considered as positive and significant relationship. Similarly, the link between (CM) and (OOI) is also found significant at (0.000), and t-value is calculated as 9.132, hence including this all the values are showing the positive relationship among the constructs.

**TABLE 5:** Hypotheses Results

|    | Constructs  | t-value | Significant | Result   |
|----|---|---------|-------------|----------|
| H1 | Change Management → Organizational Impact         | 8.702   | 0.000       | Positive |
| H2 | Change Management → Financial Impact              | 9.783   | 0.000       | Positive |
| H3 | Change Management → Socio/Cultural Impact         | 6.886   | 0.000       | Positive |
| H4 | Change Management → Overall organizational Impact | 9.132   | 0.000       | Positive |

### DISCUSSION

Present study conducted in the capital city Riyadh of Saudi Arabia. Literature review was made based on the problem stated. After critical literature review the study gap was found and changed it to the theoretical framework<sup>36</sup>. Theoretical framework is consisted of five (5) constructs and thus total four (4) hypotheses were developed. Data were collected from the (PHC's) situated in Riyadh different regions<sup>36, 37</sup>. Respondents were included the manager/director of the PHC's, physician, office assistants, head-nurses and regular nurses. Total two hundred (200) survey questionnaires were distributed, while putting the data into the data set, it was noticed that some questionnaire contains the wrong and insufficient information thus some of them were discarded. So the valid and usable questionnaire were counted as one hundred and seventy-six (176). For analysis purpose, the study then utilized the SPSS application in order to do the data statistics. The descriptive analysis was conducted to know the frequency and percentage of the respondents. To check the validity among

the considered constructs and items, the Cronbach alpha test was conducted. Next after, the test of standard deviation and mean value was calculated. Next test was correlation test among the considered hypotheses. Hypotheses were tested and found positive, for instance, H<sub>1</sub> that makes link change management and organizational impact, was found positive. Similarly, H<sub>2</sub> that links change management with financial impact also found positive. H<sub>3</sub> links with change management and social/cultural impact also found positive relationship. Additionally, H<sub>4</sub> which links change management and impact on overall organizational performance also found positive. Thus, all the four assumed study hypotheses are found positive and having significant relationship with each other.

### CONCLUSION

Contemporary study is basically contributing in theory and also in practice. Theoretically, it is providing findings that can help in adding a

literature. Whereas, practically the model shows impact on position to position effects. However, the study overall impact could be positive and also could be negative.

### **Study Limitations And Future Directions**

Studies are always with flaws. Likewise, other studies, present study also has some clear and visible limitations. Firstly, future studies should consider Hospitals rather targeting PHC's. Secondly, future studies should consider other variables and links. Thirdly, study took place in Saudi Arabia and data collection process took place domestically, future studies can be conducted in other Gulf countries. Fifthly, future studies can have considered other new variable that may change the dynamics of the study.

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