

Research Article

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Workforce's Motivation and Attitude Towards Organizational Transformation At King Faisal Specialist Hospital & Research Center, Sa, Riyadh

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Abstract

Background: As part of Saudi Arabia's Vision 2030 and its plans to maintain a robust regulatory function of the healthcare system, King Faisal Specialist Hospital & Research Center (KFSH&RC) has become an independent, private, not-for-profit foundation that reflects the transformation strategy and plans of the Kingdom's Vision 2030. Previous research has focused more on change processes and implementations than on employees' feelings, perceptions, and attitudes toward this change.

Aim: This research aims to explore and critically analyze the motivation and attitude of the employees towards the organizational transformation at KFSH&RC in Riyadh.

Methods: A cross-sectional study was constructed using demographic variation and a multifactor scale of motivation at work concerning the respondent's opinion of organizational transformation effectiveness.

Result: A total of 200 participants in this study, of which 18% have a marked satisfaction level of work motivation, 43% have a moderate satisfaction rate, 23% are natural, and 15% are dissatisfied. Respondent opinion of organizational transformation effectiveness was positively related to nationality and work organization.

Conclusion: In summary, we found that the organizational transformation in question was positively related to many studied factors that describe the workforce and influence its performance through their efforts and decisions, to the extent that the employee feels or grows more responsible for their job, and this positively impacts their motivation at work.

Keywords: Organizational transformation, Change, Healthcare, Motivation, Attitude.

1. Introduction

The transformed organization acquires an assortment of skills and an increased capacity to serve its customers or clients in new and different ways. (Lyons et al., 2018) summarized the Delphi panel that suggested the success of organizations is composed of ten critical elements: active and person-centered job placement; clear and consistent goals; strong internal and external communications; a culture that values inclusion; investment in professional development; performance measurement; reallocation and restructuring of resources; a holistic approach; diverse community partnerships; and customer engagement [1]. Moreover, added three elements that help maintain a constant organizational transformation process, which they concluded as leveraging day support, offering clear and consistent messaging to all stakeholders, and delivering best practices in job development. Given the above, all workforces must push

beyond efficiency and effectiveness improvements to transform an organization. Radical change requires new ways of thinking that alter taken-for-granted and often hidden organizational rules that limit how people think about change. The benefits of a transformation seem clear and compelling [2]. However, they observe that many workforces struggle to find a path to change or even feel lost in the middle of the transitional period. A transformation takes place when a vision is used to suggest radical, creative, and coherent changes to all an organization's strategies. Transformations result when a revitalizing vision is used to guide the search for answers to these same questions in a future context that causes radical changes in an organization's strategy and abandons an orientation rooted in the present. Approach projecting today's thinking into the future to imagine what it would be like in the future. As a result, a transformation requires development and integration. Change must lead to

growth, like being able to serve a wider range of customers or clients in new ways and becoming more flexible and adaptable. These are all parts of being able to deal with environmental challenges and take advantage of opportunities [3].

King Faisal Specialist Hospital and Research Center (KFSH&RC) has become an independent, private, not-for-profit institution aiming to build a world-leading healthcare model. Concurrently with the Health Sector Transformation Program, the national center for performance measurement and the Centre of Spending Efficiency, working practices are reconstructed across the entire organization, including the research center, academia, IT, finance, administration, human resources, and clinical quality, to offer high safety standards and patient experience. The critical element of establishing the transformation was to have a corporate transformation office, known as a CTO, that directs the legal and financial due diligence. Legal due diligence conveys all legal implications and considerations related to transferring assets, employees, and contracts. On the other hand, financial due diligence consists of a high-stander accounting framework and practices, as well as fixed asset valuation and impairment testing. Subsequently, the operational transformation took place by changing the back and front office functions and frontline staff, guaranteeing efficiency, productivity, and protection against health risks (KFSH&RC, 2021).

Furthermore, a study done in Malaysia in 2020 concluded that a positive relationship and a strong connection developed between transformational leadership and employee behavior, thus enhancing trust and confidence with the reduction of disenchantment even in complex and stressful situations, such as during the transformation process. So, it's important to keep a close eye on employee attitudes and motivation during and after the transformational period. Employee assessment is one of the most delicate issues; for that matter, Ferreira constructed a multi-factor scale of motivation at work containing 28 items from theoretical research rated on a 5-point Likert scale. The questionnaire comprises four subdivisions that measure employee motivation by workplace organization, work performance, power and achievement, and involvement. The questionnaire comprises four subdivisions that measure employee motivation by workplace organization, work performance, power and achievement, and involvement. Ferreira et al. (2005) found that the questionnaire had good validity, reliability, and internal consistency based on Cronbach's Alpha of 0.70.

11. Rational

As part of Vision 2030 and its programs, KFSH&RC has become an independent, private, not-for-profit foundation that reflects the transformation plan of the Kingdom's Vision 2030. The transformation program is in line with the organization's strategic vision, which is to be the best and most innovative healthcare provider in the world. As a senior employee in the physical rehabilitation department at KFSH&RC, I was impacted by all these changes that took place around me. My role is to maintain a calm behavior and attitude toward the physical and mental well-being of the patients and the workforce. This stimulated my interest in further studying the effectiveness of

organizational transformation on employee motivation and attitude at the KFSH&RC. Currently, a number of existing studies have sought to address the impact of organizational transformation on employee behavior and attitude, and these have tended to focus on the role that the medical administration of a healthcare organization plays in planning, decision-making, and healthcare strategy development in developed countries. But so far, no research has been published that explores the impact of organizational transformation on hospital employee motivation and attitude in Saudi.

2. Aim of the Study

This research aims to explore and critically analyze the attitude and motivation of the employees regarding the organizational transformation at KFSH&RC in Riyadh.

3. Objectives

- To explore and critically analyze the employees' attitude and motivation toward organizational transformation.
- To explore and analyze the factors predictive of a range of native attitudes towards organizational transformation.
- To explore the impact of organizational transformation on KFSH&RC-R workforce's motivation.

3. Research Design and Instrumentation

3.1 Methodological Orientation

3.2 Research Design

This research used a descriptive cross-sectional design to explore and critically analyze the motivation and attitude of the employees towards the organizational transformation at KFSH&RC in Riyadh.

3.3 Research Population

King Faisal Specialist Hospital & Research Center workforce in Riyadh.

3.4 Sample Size

The sample size was detected through a sample size calculator of a 95% confidence level for population size = 12,000 with a margin error of 5% = 373.

3.5 Data Collection Tool

Appendix 1

An online survey of a Modified Multi-Factor Scale of Work Motivation. The structured questionnaire was initially developed in Spanish and then translated into Arabic.

3.6 Research Variables

The dependent variable is the respondent's opinion of organizational transformation effectiveness. The Independent Variables are the socio-demographic variables such as age, gender, nationality, education, occupation, job duration, income, and the multi-factor work motivation scale.

3.7 Data Analysis

The collected data was analyzed through a statistical program for social sciences (SPSS) version 24. Variables were analyzed through a t-test, and categorical variables were through a chi-

square test. If the p-value < **0.05** should be considered for significance. The multi-factor motivation scale was analyzed using convergent, divergent, and predictive validity.

3.8 Ethical Consideration

All information and data are confidential and used solely for this research purposes. Also, it was approved in November 2022, by King Saud University, Scientific Research Ethics Committee, and by the Research Ethics Committee at King Faisal Specialist Hospital & Research Center.

4. Result

4.1 Demographic Results

Table (1) represent the demographic variables of the samples, which show that most participants were between the age of 20-30 years 39.5% followed by 31-40, 41-50, and 51-60 with 33%, 21%, and 6.5 consequently. According to gender, most of the participants were female, 64.5%. According to nationality, most of the participants were Saudi, 79.5%. In the report on education and occupations, the majority of the participant had a bachelor's degree, 62%, and were working in the nursing department, 30.5%. A significant part of the participants had a monthly income of 11,000 - 20,000 SAR 48.5%. Most of the participants have work experience of more than 10, years 44.5%

Label		Frequency	Percent
Age	20 - 30	79	39.5
	31 - 40	66	33.0
	41 - 50	42	21.0
	51 - 60	13	6.5
Gender	Female	129	64.5
	Male	71	35.5
Nationality	Saudi	159	79.5
	Non-Saudi	41	20.5
Education	Primary / Preparatory	1	.5
	High school	9	4.5
	Diploma	19	9.5
	Bachelor Degree	124	62.0
	Higher Professional Degree	47	23.5
Occupation	Ambulatory Care Services	12	6.0
	Administration	44	22.0
	Clinical Services; PT, SLP, RT, laboratory, radiology, paramedics ...	59	29.5
	HITA	4	2.0
	Nursing	61	30.5
	Pharmacy	9	4.5
	Physician; MD, MBBS, BDS	11	5.5
Monthly Income	Less than 5000 SAR	6	3.0
	5,000 - 10,000 SAR	51	25.5
	11,000 - 20,000 SAR	97	48.5
	21,000 - 30,000 SAR	36	18.0
	Greater than 30,000 SAR	10	5.0
Years of experience			
	Less than 5 years	60	30.0
	5 - 10 years	51	25.5
	More than 10 years	89	44.5
Organizational Transformation Effectiveness	Yes	148	74.0
	No	52	26.0

Table 1: Demographic variation.

According to the skewness and kurtosis Table values present in Table (2) for the 4 subscales for a validity study, the factorial analysis method is used to study the validity of the questionnaire;

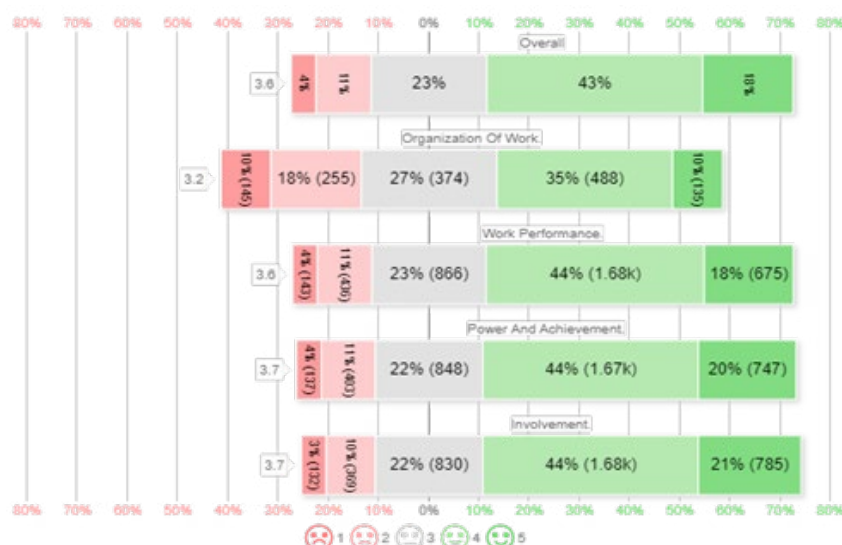
we obtain values close to zero, which can be associated with a normal distribution.

	N	Mean	Std. Deviation	Skewness	Kurtosis
Work Performance	200	22.0650	4.01890	-.312	-.372
work Organization	200	24.0050	2.93565	.077	.186
Power and Achievement	200	27.0400	3.28823	-.324	.118
Involvement	200	25.7500	2.90512	-.037	-.354

Table 2: Descriptive statistics of the four subscales of the questionnaire.

Graph (1) shows that the multifactorial scale of motivation at work of more than 18% of the participants was strongly satisfied,

43% were satisfied, 23% were neither satisfied nor unsatisfied “natural,” 11% unsatisfied, and 4% strongly unsatisfied.



Graph 1: Multifactor Scale of Motivation at Work

We use the chi-squared test to test the association between organization transformation effectiveness and demographic variables at a significant level. The results in table (3) show that the value of chi-square = 5.5776, and the p-value = 0.123 > 0.05.

We conclude that there is no association between organization transformation effectiveness and age at the significant level $\alpha \leq 0.05$.

		Organizational Transformation Effective		Total
		Yes	No	
Age	20 - 30	62	17	79
	31 - 40	43	23	66
	41 - 50	31	11	42
	51 - 60	12	1	13
Total		148	52	200
Chi-Square test = 5.5776		Anova = .124	P-value = 0.123	

Table 3: Association between organization transformation effectiveness and age.

The results in a table (4) show that the value of chi-square = .732, and the p-value = 0.404 > 0.05. We conclude that there is no

association between organization transformation effectiveness and gender at the significant level $\alpha \leq 0.05$.

		Organizational Transformation Effective		Total
		Yes	No	
Gender	Female	98	31	129
	Male	50	21	71
Total		148	52	200
Chi-Square test =.732		T-test = -.836	P-value= 0.404	

Table 4: Association between organization transformation effectiveness and gender.

The results in a table (5) show that the value of chi-square =14.880, and the p=value = 0.000 <0.05. We conclude that there is a significant association between organization transformation effectiveness and nationality at the significant level $\alpha \leq 0.05$.

		Organizational Transformation Effective		Total
		Yes	No	
Nationality	Saudi	108	51	159
	Non-Saudi	40	1	41
Total		148	52	200
chi-square =14.880		T-test = 6.671	p=value = 0.000	

Table 5: Association between organization transformation effectiveness and gender.

The results in a table (6) show that the value of chi-square =5.226, and the p=value = .265 >0.05. We conclude that there is no association between organization transformation effectiveness and education at the significant level $\alpha \leq 0.05$.

		Organizational Transformation Effective		Total
		Yes	No	
Education	Primary / Preparatory	1	0	1
	High school	5	4	9
	Diploma	17	2	19
	Bachelor Degree	93	31	124
	Higher Professional Degree	32	15	47
Total		148	52	200
chi-square =5.226		ANOVA=.268	p=value = .265	

Table 6: Association between organization transformation effectiveness and education.

The results in table (7) show that the value of chi-square =1.75, and the p=value = .941 >0.05. We conclude that there is no association between organization transformation effectiveness and occupation at the significant level $\alpha \leq 0.05$.

		Organizational Transformation Effective		Total
		Yes	No	
Occupation	Administration	30	14	44
	Ambulatory Care Services	9	3	12
	Clinical Services; PT, SLP, RT, laboratory, radiology, paramedics ...	44	15	59
	HITA	3	1	4
	Nursing	48	13	61
	Pharmacy	6	3	9
	Physician; MD, MBBS, BDS	8	3	11
Total		148	52	200
chi-square =1.750		ANOVA=.944	p=value = .941	

Table 7: Association between organization transformation effectiveness and occupation.

The results in table (8) show that the value of chi-square =8.867, association between organization transformation effectiveness and the p= value = .065 >0.05. We conclude that there is no association between organization transformation effectiveness and monthly income at the significant level $\alpha \leq 0.05$.

		Organizational Transformation Effective		Total
		Yes	No	
Monthly Income	Less than 5000 SAR	6	0	6
	5,000 - 10,000 SAR	42	9	51
	11,000 - 20,000 SAR	72	25	97
	21,000 - 30,000 SAR	23	13	36
	Greater than 30,000 SAR	5	5	10
Total		148	52	200
chi-square =8.867		ANOVA=.064		p= value = .065

Table 8: Association between organization transformation effectiveness and monthly income.

The results in table (9) show that the value of chi-square =3.959, association between organization transformation effectiveness and the p= value = .065 >0.05. We conclude that there is no association between organization transformation effectiveness and experience at the significant level $\alpha \leq 0.05$.

		Organizational Transformation Effective		Total
		Yes	No	
Years of experience	Less than 5 years	50	10	60
	5 - 10 years	35	16	51
	More than 10 years	63	26	89
Total		148	52	200
chi-square =3.959		ANOVA=.140		p= value = .138

Table 9: Association between organization transformation effectiveness and experience.

To test the association between the multifactorial scale of work motivation and demographic variables at a significant level $\alpha \leq 0.05$, we use the chi-squared test. The results in a table (10) show that the value of chi-square=9.412 and the p= value = .667 >0.05. We conclude that there is no association between work organization of multifactorial scale and age at the significant level $\alpha \leq 0.05$.

		Age				Total
		20 - 30	31 - 40	41 - 50	51 - 60	
Work organization	Strongly Disagree	3	0	0	0	3
	Disagree	12	17	9	3	41
	Neutral	31	25	20	6	82
	Agree	31	23	13	4	71
	Strongly Agree	2	1	0	0	3
Total		79	66	42	13	200
chi-square =9.412		Anova=.877		p= value = .667		

Table 10: Association between work organization of multifactorial scale and age.

The results in a table (11) show that the value of chi-square =7.951, and the p= value = .539 >0.05. We conclude that there is no association between work performance of multifactorial scale and age at the significant level $\alpha \leq 0.05$.

		Age				Total
		20 - 30	31 - 40	41 - 50	51 - 60	
Work performance	Strongly Disagree	0	0	0	0	0
	Disagree	1	2	2	1	6
	Neutral	31	25	21	5	82
	Agree	43	38	19	6	106
	Strongly Agree	4	1	0	1	6
Total		79	66	42	13	200
chi-square =7.951		Anova=.029		p=value = .539		

Table 11: Association between work performance of multifactorial scale and age.

The results in table (12) show that the value of chi-square =23.736, and the p=value = .526>0.05. We conclude that there is an association between power and achievement of multifactorial scale and age at the significant level $\alpha \leq 0.05$.

		Age				Total
		20 - 30	31 - 40	41 - 50	51 - 60	
Power and achievement	Strongly Disagree	0	0	0	0	0
	Disagree	1	1	0	0	2
	Neutral	6	6	13	4	29
	Agree	50	43	27	5	125
	Strongly Agree	22	16	2	4	44
Total		79	66	42	13	200
chi-square =23.736		Anova=.002		p=value = .005		

Table 12: Association between power and achievement of multifactorial scale and age.

The results in a table (13) show that the value of chi-square =7.439, and the p=value = .282>0.05. We conclude that there is no association between the involvement of multifactorial scale and age at the significant level $\alpha \leq 0.05$.

		Age				Total
		20 - 30	31 - 40	41 - 50	51 - 60	
Involvement	Strongly Disagree	0	0	0	0	0
	Disagree	0	0	0	0	0
	Neutral	15	12	13	3	43
	Agree	58	43	27	9	137
	Strongly Agree	6	11	2	1	20
Total		79	79	66	42	13
chi-square =7.439		Anova=.068				

Table 13: Association between Involvement of multifactorial scale and age.

The results in table (14) show that the value of chi-square =10.484, and the p=value = .03<0.05. We conclude that there is a significant association between the work organization of a multifactorial scale and nationality at the significant level $\alpha \leq 0.05$.

		Nationality		Total
		Saudi	Non-Saudi	
Work organization	Strongly Disagree	3	0	3
	Disagree	38	3	41
	Neutral	67	15	82
	Agree	49	22	71
	Strongly Agree	2	1	3
Total		159	41	200
Chi-Square test =10.484		T-test = -3.462	P-value= 0.033	

Table 14: Association between work organization of multifactorial scale and nationality.

The results in table (15) show that the value of chi-square =.940, and the p=value =.816 >0.05. We conclude that there is no association between work performance of the multifactorial scale and nationality at the significant level $\alpha \leq 0.05$.

		Nationality		Total
		Saudi	Non-Saudi	
Work performance	Strongly Disagree	0	0	0
	Disagree	5	1	6
	Neutral	64	18	82
	Agree	86	20	106
	Strongly Agree	4	2	6
Total		159	41	200
Chi-Square test =.940		T-test = -4.64	P-value= 0.816	

Table 15: association between work performance of multifactorial scale and nationality.

The results in a table (16) show that the value of chi-square =.7324, and the p=value =.062 >0.05. We conclude that there is no association between power and achievement of the multifactorial scale and nationality at the significant level $\alpha \leq 0.05$.

		Nationality		Total
		Saudi	Non-Saudi	
Power and achievement	Strongly Disagree	0	0	0
	Disagree	2	0	2
	Neutral	18	11	29
	Agree	101	24	125
	Strongly Agree	38	6	44
Total		159	41	200
Chi-Square test =7.324		T-test = 2.02	P-value= 0.062	

Table 16: association between power and achievement of multifactorial scale and nationality.

The results in table (17) show that the value of chi-square =2.013, and the p=value =.365 >0.05. We conclude that there is no association between the involvement of the multifactorial scale and nationality at the significant level $\alpha \leq 0.05$.

		Nationality		Total
		Saudi	Non-Saudi	
Involvement	Strongly Disagree	0	0	0
	Disagree	0	0	0
	Neutral	67	15	82
	Agree	49	22	71
	Strongly Agree	2	1	3
Total	159	41	200	
Chi-Square test =2.013		T-test =1.866	P-value= .365	

Table 17: association between the involvement of multifactorial scale and nationality.

The results in table (18) show that the value of chi-square multifactorial scale and occupation at the significant level $\alpha \leq 0.05$.
 $=40.380$, and the p -value $=.019 < 0.05$. We conclude that
there is a significant association between work organization of

		Occupation						
		Ambulatory Care Services	Administration	Clinical Services; PT, SLP, RT, laboratory, radiology, paramedics ...	HITA	Nursing	Pharmacy	Physician; MD, MBBS, BDS
Work organization	Strongly Disagree	0	0	2	0	1	0	3
	Disagree	2	9	13	3	9	3	41
	Neutral	6	23	31	0	17	4	82
	Agree	4	12	13	1	31	2	71
	Strongly Agree	0	0	0	0	3	0	3
Total		12	44	59	4	61	9	22
chi-square =40.380		Anova= .002					p= value = .019	

Table 18 : Association between work organization of multifactorial scale and occupation.

The results in a table (19) show that the value of chi-square multifactorial scale and occupation at the significant level $\alpha \leq 0.05$.
 $=29.419$, and the p -value $=.043 < 0.05$. We conclude that
there is a significant association between work performance

		Occupation						
		Ambulatory Care Services	Administration	Clinical Services; PT, SLP, RT, laboratory, radiology, paramedics ...	HITA	Nursing	Pharmacy	Physician; MD, MBBS, BDS
Work performance	Strongly Disagree	0	0	0	0	0	0	0
	Disagree	0	0	1	5	0	0	0
	Neutral	0	3	10	52	17	6	2
	Agree	1	6	7	63	29	3	7
	Strongly Agree	0	0	1	4	1	0	2
Total		12	44	59	4	61	9	11
chi-square =29.419		Anova=.026					p= value = .043	

Table 19: Association between work performance of multifactorial scale and occupation.

The results in table (20) show that the value of chi-square no association between power and achievement of multifactorial scale and occupation at the significant level $\alpha \leq 0.05$.
 $=20.276$, and the p -value $=.317 < 0.05$. We conclude that there is

		Occupation							
		Ambulatory Care Services	Administration	Clinical Services; PT, SLP, RT, laboratory, radiology, paramedics ...	HITA	Nursing	Pharmacy	Physician; MD, MBBS, BDS	Total
Power and achievement	Strongly Disagree	0	0	0	0	0	0	0	0
	Disagree	0	0	0	0	1	0	1	2
	Neutral	3	6	8	2	7	3	0	29
	Agree	7	26	39	1	41	4	7	125
	Strongly Agree	2	12	12	1	12	2	3	44
Total		12	44	59	4	61	9	11	200
chi-square =20.276			Anova= .617				p= value = .317		

Table 20: Association between power and achievement of multifactorial scale and occupation.

The results in a table (21) show that the value of chi-square =25.278, and the p= value =.014 <0.05. We conclude that there is a significant association between the involvement of multifactorial scale and occupation at the significant level $\alpha \leq 0.05$.

		Occupation							
		Ambulatory Care Services	Administration	Clinical Services; PT, SLP, RT, laboratory, radiology, paramedics ...	HITA	Nursing	Pharmacy	Physician; MD, MBBS, BDS	Total
Involvement	Strongly Disagree	0	0	0	0	0	0	0	0
	Disagree	0	0	0	0	0	0	0	0
	Neutral	7	4	16	1	12	2	1	43
	Agree	4	36	34	3	46	7	7	137
	Strongly Agree	1	4	9	0	3	0	3	20
Total		12	44	59	4	61	9	11	200
chi-square =25.278			Anova=.003				p= value = .014		

Table 21 : Association between work organization of multifactorial scale and occupation.

The table (22) results show that the chi-square value =39.923, and the p= value =.00 <0.05. We conclude that there is a significant association between the work organization of multifactorial scale and organizational transformation effectiveness at the significant level $\alpha \leq 0.05$.

		Organizational Transformation Effectiveness		Total
		Yes	No	
Work organization	Strongly Disagree	0	3	3
	Disagree	17	24	41
	Neutral	67	15	82
	Agree	61	10	71
	Strongly Agree	3	0	3
Total		148	52	200
Chi-Square test =39.923		T-test =6.074		P-value= 0.00

Table 22: Association between the work organization of multifactorial scale and organizational transformation effectiveness.

The results in a table (23) show that the value of chi-square =2.470, and the p= value =.481 >0.05. We conclude that there is no association between work performance of multifactorial scale and organizational transformation effectiveness at the significant level $\alpha \leq 0.05$.

		Organizational Transformation Effectiveness		Total
		Yes	No	
Work performance	Strongly Disagree	0	0	0
	Disagree	4	2	6
	Neutral	59	23	82
	Agree	79	27	106
	Strongly Agree	6	0	6
Total		148	52	200
Chi-Square test =2.470		T-test =1.169	P-value= 0.481	

Table 23: Association between the work performance of multifactorial scale and organizational transformation effectiveness.

The results in a table (24) show that the value of chi-square =2.470, and the p=value =.481 >0.05. We conclude that there is no association between work performance of multifactorial scale and organizational transformation effectiveness at the significant level $\alpha \leq 0.05$.

		Organizational Transformation Effectiveness		Total
		Yes	No	
Power and achievement	Strongly Disagree	0	0	0
	Disagree	1	1	2
	Neutral	24	5	29
	Agree	94	31	125
	Strongly Agree	29	15	44
Total		148	52	200
Chi-Square test =3.346		T-test =-.731	P-value= 0.341	

Table 24: Association between the power and achievement of multifactorial scale and organizational transformation effectiveness.

The results in table (25) show that the value of chi-square =4.254, and the p=value =.119 >0.05. We conclude that there is no association between the involvement of multifactorial scale and organizational transformation effectiveness at the significant level $\alpha \leq 0.05$.

		Organizational Transformation Effectiveness		Total
		Yes	No	
Involvement	Strongly Disagree	0	3	3
	Disagree	17	24	41
	Neutral	67	15	82
	Agree	61	10	71
	Strongly Agree	3	0	3
Total		148	52	200
Chi-Square test =39.923		T-test =-2.304	P-value= 0.119	

Table 25: Association between the involvement of multifactorial scale and organizational transformation effectiveness.

A multiple regression analysis was done to study the impact of age, gender, nationality, education, occupation, monthly income, and years of experience on the participant's belief in the effectiveness of organizational transformation. The demographic variables were significant in predicting the strong belief of the participant's effectiveness of organization transformation $F(192) = 3.205$, $P < .05$, which indicates demographic variables can play a significant role in the belief of the participant's effectiveness of organization transformation. Moreover, the R^2 explains

that 10.5% of the variance in the belief of the participant's effectiveness of organization transformation. In addition, the multifactorial scale for work motivation was significant in predicting the strong belief of the participant's effectiveness of organization transformation $F(195) = 11.696$, $P < .001$, which indicates the multifactorial scale for work motivation can play a significant role in the belief of the participant's effectiveness of organization transformation. Moreover, the R^2 explains 19.3% of the variance in participants' beliefs about the effectiveness of

organizational transformation.

5. Discussion

The present study is the first to explore the experiences and understandings of workforces in the early stages of a hospital's organizational transformation in Saudi Arabia. Our findings suggest that the organizational transformation has impacted the workforce's experiences in many directions and with expectations that are dependent upon the level of personal acquaintance, awareness of the change to come, and how confident they already feel in these changes. The interlocution with the respondent highlighted how organizational transformation positively influences the organization of work and work performance and encourages power and achievement; besides, that cultivates the feeling of being adequately informed and involved about what is to come. In addition, they described a range of sometimes differing expectations about the organizational effects of this change. This supports the conceptualization of hospital redevelopment as not only a physical change but an organizational one too.

This supposition will be essential to the success of organizational transformation. We show that change, even based on the best strategic design, can be disappointing and bring about negative experiences for the staff. The satisfaction and positive impact of the change expressed by staff in the present study are contrary to past research that retrospectively explored staff experiences during a hospital change [4]. Contrary to the previous studies, staff faced low morale and held negative expectations regarding the transformation; our study represented over 70% of the participants who strongly supported the organization's transformation effectiveness, for which more than 60% showed a satisfaction level from all perspectives. This reinforces how keen the transformation plan built into our system is to improve the healthcare system not only for those who seek medical help but also for those who reside inside the system, which corresponds to a previous study from 2016 that concluded that workforce flexibility is a part of the organization's change capability and a crucial success factor for a sustainable transformation to lean healthcare. Moreover, (Grady et al., 2021) showed their study that anxiety levels and work-related stress related to additional layers for decision-making and/or more communication problems experienced by healthcare professionals, especially in more considerable practice during organization changes that may lead to significant consequences such as increased conflict, absenteeism, and turnover and decrease the morale, productivity, and motivation [5]. This is a red flag of how important to investigate and monitor the satisfaction level and behavioral change of healthcare workforces. Until about the middle of the 20th century, Saudi Arabia was away from having an organized healthcare system until recently when simultaneously elements of high standard of welfare system during the transitional period [6]. It must be confessed that Saudi Arabia has harnessed and provided all the resources needed to grow the healthcare infrastructure. Still, the challenge is to make the system coherent, efficient, and sustainable. Although these challenges are not rare or impossible, with careful planning, implementation, and adjustment of policies, there is plenty of reason for optimism and hope for the future to have a unique healthcare system that

can be a role model for others.

6. Conclusion

In summary, we found that the organizational transformation in question was positively related to many studied factors that describe the workforce and influence its performance with their efforts and decisions, to the extent that the employee feels or grows in their responsibility for their job and that this positively impacts their motivation at work. Furthermore, based on the socio-demographic variation, our results found that nationality was the most significant factor that positively impacted the organizational transformation of the KFSH&RC workforce. On the other hand, the organization of work was the most significant factor of the multi-factor work motivation scale that affected the organizational transformation.

7. Limitations

As with the majority of studies, the sample size of the current study is subject to limitations due to time constraints.

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Appendix 1: The questionnaire: Multifactor Scale of Motivation at Work.

1. Preferred Language / اللغة المفضلة *

☒ Eng-lish

☐ Ara-bic

2. Age *

☐ 20 - 30

☐ 31 - 40

☐ 41 - 50

☐ 51 - 60

3. Gender *

☐ Mal-e

☐ Fe-male

4. Nationality *

☐ Sau-di

☐ Non-Sau-di

5. Education: *

☐ Below high school

☐ High school

☐ Diplo-ma

☐ Bachelor De-gree

☐ Higher Professional De-gree

10. Multifactor Scale of Motivation at Work (1)

Scale for: work performance, organization of work, power and achievement, and involvement. *

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
This organization has satisfactory working conditions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I consider that periodic evaluations motivate me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having career prospects is essential for my motivation not to work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I usually consider myself a highly motivated person.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel fulfilled with the functions that I perform in the organization.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would like to be appraised for my performance periodically.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would like to perform functions with greater responsibility.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I consider my work monotonous.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel-I am satisfied with the minimum remuneration.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I do not perform tasks, and it is essential to show some emotion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel capable of managing a work group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel emotionally involved with the organization.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I receive no work contributed as a motivational factor Or	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I receive no work contributed as a motivational factor Or "feedback"

☐☐☐☐☐

I like to be appraised not to perform tasks.

☐☐☐☐☐

I feel the need to grow more and more in my job.

☐☐☐☐☐

My knowledge is decisive in the way of working.

☐☐☐☐☐

All the officials of the organization participate in the process of taking decisions.

☐☐☐☐☐

I usually develop strategies to achieve my goals.

☐☐☐☐☐

There are awards attributed to the best officials, perceived as a factor of professional motivation.

☐☐☐☐☐

I hate myself when I don't understand the purpose of my functions.

☐☐☐☐☐

11. Multifactor Scale of Motivation at Work (2) *

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I consider that I work in an environment of cooperation between colleagues.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diversified tasks are essential for the excellent performance of the functions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Two more objectives are to reach a higher position within the organization.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I identify with the function that I perform.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The organization allows the development of two professional objectives.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is competitiveness in my work group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel motivated when my work is praised by my superior.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Work with greater effort if their forms of alternative remuneration.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Submit

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