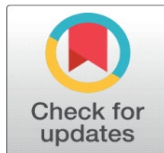
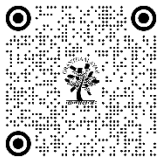


TO DETERMINE EMPLOYEE ENGAGEMENT & ITS RELATIONAL OUTCOME OF BENCHMARKING

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ABSTRACT

The healthcare sector is facing external changes and pressure to provide high-quality treatment while benchmarking. This study outlines necessary actions for successful change management in the healthcare business using a non-intervention based observational research methodology. The study involved 336 healthcare workers from public general hospitals, private chain hospitals, specialty hospitals, and charities. Cronbach's alpha was used to determine data reliability, with a reliability score of 0.654 for competence, 0.806 for technology, and 0.801 for engagement. The study highlights the need for effective change management in the healthcare industry.

Keywords: Healthcare, Hospitals, Benchmarking, Organizational, Change Management

1. INTRODUCTION

The Healthcare industry is also surrounded by these environmental transformations and has to face the pressure of delivering quality care to their customers and routing towards benchmarking. This imparts pressure on healthcare organizations to implement the changes in their mission, vision, and strategies. Effective management of organizational change is an essential need to manage the requirements. Change is moving from the present state to the desired state that the organisations and their employees undertake as a response to the opportunities and threats arising in the environment. The change towards the desired state requires healthcare organizations to move continually and successfully to maintain survival.

The intensifying environmental challenges and customer demands have foisted the need of introducing changes and their effective implementation. For the last two decades, change management is considered a significant area of concern for various industries, particularly the healthcare industry as well. The adoption of the change management system is not only a significant need but at the same time, the assurance of enhanced service quality is also required. Besides managing and moving towards a successful and sustainable position in the industry by implementing a series of changes, the organizations are also undergoing continuous pressure of improving their products and services.

Therefore, the organizational change in healthcare is driven by the amalgamation of various dimensions- like the people, process and technology along with the variables involved and their interaction to produce the desired results. With this, the notion behind the study is to unfold the complexity of the change management process showcasing the interplay of involved variables eventually leading the organization to benchmarking.

In the last two decades, the healthcare industry has experienced a high growth rate, which is attributed to the expansion and growth of its various facades and triggered a change in the industry. According to WHO's, World Health Report 2006, human resources for healthcare has been identified as one of the core building blocks of the health system. The organizational workforce is said to be the backbone of the success of any healthcare organization. Physicians, nurses, dentists, allied health professionals, midwives, social health workers and other health care professionals are part of it.

2. LITERATURE REVIEW

This has strengthened the research looking at the concept of change, its management and the factors contributing to its success. There are many approaches defined in the literature, but the underlying assumption of each approach is that the managers must have an in-depth knowledge of the organization and its structure, which allows them to adopt the most appropriate approach and factors associated with it (Barnard, 2010).

Managers are expected to understand change management as an organized application of knowledge, tools and resources. For any successful project, change management is a critical part that enables people to accept the processes, technologies, systems, structures and values to foster innovation (Akid, 2008).

Change Management aims for the desired improved state of affairs where the current state of affairs, which is deemed undesirable by the organizations, is replaced by a more desirable state of affairs through benchmarking (Chen, 2005). Benchmarking serves as the ultimate goal of organizational change because it raises the bar for organizational performance when done effectively. And this is ultimately an objective of change management, which is encompassed performance measures that used comparative data about organizations processes and operations from its competitors.

According to Akid (2008), "Change Management is a systematic and organized application of knowledge, tools and resources leading to change that aids organization to successfully attain their business strategy by focusing on new technologies, upgraded systems, improved productivity". New technologies and systems have always been a part of change management. To integrate the new technologies, a subsequent change in the structure of the organization is required

Successful management of change is required for organizations to survive and succeed in the highly competitive and continuously evolving business environment. As defined by Moran (2000), change management has been defined as "the process of continually renewing an organization's direction, structure, and capabilities to serve the ever-changing needs of external and internal customers".

3. RESEARCH METHODOLOGY

3.1. RESEARCH DESIGN

The research study was based on the non-intervention based observational research design detailing the required interventions to be introduced for the effective change management process in the healthcare industry. The advantage of using this research design was that it helped in understanding the interaction of variables involved and thus developing the interventions. The purpose of the study was to identify the dimensions and variables impacting the change management process.

3.2. DATA COLLECTION

To fulfil the objectives of the study primary and secondary data were collected. Primary data were collected with the help of observations through fieldwork. In this regard, the study entailed a set-up for closer investigations to reflect innovative practices and develop innovation variables. The data were then analyzed and the findings are discussed. The data were used to understand the involved variables and the existing relationship between them pertaining change management process in the healthcare industry. On the other hand, secondary data were collected through secondary resources like; research journals, articles, reports, and published interviews.

3.3. RESEARCH APPROACH

The sampling method of Multistage Stratified Stage based techniques. Stratification was done by putting all the professionals of varied levels together like doctors, nurses, lab technicians, administrative staff, and housekeeping staff and randomly they are selected. The first stage focused on the selection of hospitals with a minimum of 250-bed capacity. Followed by the second stage entailing this selection based on a minimum of 100 staff requirements. The third stage involved refining the hospital selection by identifying the six minimums such as training, and interventions at least in the last two years. The fourth stage narrowed the search by refining the hospitals with a minimum of 400+ patient footfall per day. In the last stage, the study respondents were selected randomly

3.4. SAMPLING

The first step, a current state analysis of the situation in the Delhi-National Capital Region was performed. A total of five hospitals is observed with the following four categories: General hospitals (Govt.); Private Chain-Hospitals, Specialized Hospitals, and Charity Run Hospitals. Amongst these hospitals, a sample of 336 healthcare professionals was entailed performing varied jobs in the chosen healthcare organizations.

3.5. DATA ANALYSIS

The data was typically extracted from the participating hospital's internal systems. The validity of data was measured with the help of Cronbach alpha, calculated as 0.654, 0.806, 0.801 for competency, technology and engagement variable respectively. All the observations were scored according to 1 to 3. The scoring of professional's responses was done based on their 1) Qualification 2) Years of experience and 3) Technology usage. These factors are further categorized as 1) Qualification- 1. Diploma, 2. Graduate degree, 3. Postgraduate degree, 2) Years of experience- 1. 0 to 5 years (entry-level), 2. 5 to 10 years (middle level), 3. 10 years and above (higher level), 3) Technology usage – 1. According to qualification, 2. According to job requirements, 3. According to the technical training provided. The cumulative score based on the professional's response was divided by 3.

4. RESULT

4.1. RELATIONSHIP WITHIN COMPONENTS OF COMPETENCY

The acquired knowledge of the employees is successfully displayed when they can effectively communicate the customer's needs, the delivery methods, and the appropriate processes. In the healthcare industry, it also entails displaying a clear understanding of the prescription that has been given to the customers by the doctors. A proficient employee will possess a deeper understanding towards the customer's expectations, as well as the changing behavior of the customer.

Table1 Relation between Reflection and Knowledge factors by studied category of hospitals

	Accepting Attitude					
	Commercial Hospitals			Non-Commercial Hospitals		
	Percentage of Respondents Agreed	Correlation Value	R-Square	Percentage of Respondents Agreed	Correlation Value	R-Square
Understanding Customer's Normative Needs	37%	0.498	0.24	91%	0.978	0.95
Understanding Customer's Expectations	25%	0.333	0.11	20%	0.218	0.047

4.2. IMPACT OF BEHAVIOR ON REFLECTION

Taking decisions in the customer's interest, patiently accepting and listening to their emotional expressions, coordinating well with their peers and developing a congenial working environment reflects the positive attitude of a

professional. An employee with a positive attitude becomes a stakeholder in the work process and effective job accomplishment becomes their priority. For healthcare professionals, the focused behavior of professionals in adopting aseptic techniques towards quality care impacts their attitude. The last three decades in the healthcare industry have witnessed extensive research and studies showing that the capability of a healthcare professional to explain, listen and commiserate can have a reflective effect on the biological, mental as well as functional health of the customers, therefore resulting in customer satisfaction and quality of care given.

Table2 Relation between Reflection and Behavioural factors by studied category of hospitals

	Receiving Attitude					
	Commercial Hospitals			Non-Commercial Hospitals		
	Percentage of Respondents Agreed	Correlation Value	R-Square	Percentage of Respondents Agreed	Correlation Value	R-Square
Behavioural Modifications	13%	0.104	0.01	35%	0.491	0.24
Attitudinal Change	8%	0	0.00	87%	0.94	0.88

4.3. REFLECTION AND RESPONSIBILITY

Every Professional must provide quality service to every customer. The service delivery should be customized according to customer requirements so that the desired service outcomes can be observed.

Similarly, in the healthcare industry care should be given according to individual basis to keep a close check on care outcomes. Also, professionals have a responsibility towards their colleagues and the organization they work with. Therefore, to facilitate the competency development of others, the workload should be shared when possible and every professional should try to perform their best even in the situation of limited resources. Proper coordination between all these R's supports the development of a professional's competency.

Table 3 Responsibility factors influencing employee's reflection by category of hospitals

	Receiving Attitude					
	Commercial Hospitals			Non-Commercial Hospitals		
	Percentage of Respondents Agreed	Correlation Value	R-Square	Percentage of Respondents Agreed	Correlation Value	R-Square
Assessing Post Service Customer's Satisfaction	29%	0.333	0.11	49%	0.538	0.28
Willing Taking Responsibility	58%	0.602	0.36	51%	0.579	0.33
Acting Responsibly	51%	0.577	0.33	41%	0.491	0.24

The responsiveness catalyst of the developed competency is based on the normative needs of the customers. Normative needs are the needs and expectations, which are defined by an expert or professional according to his/her predisposition to standards (Watson, 2002) and responsiveness is to meet the expectations. Healthcare professionals are supposed to be responsive towards customers to deliver the desired effective customer care. For the same, sustainable coordination between responsiveness and reflection of professionals should be there

Table 4 Responsiveness factors influencing employee's reflection by category of hospitals

	Accepting Attitude					
	Commercial Hospitals			Non-Commercial Hospitals		
	Percentage of Respondents Agreed	Correlation Value	R-Square	Percentage of Respondents Agreed	Correlation Value	R-Square

Customized Service Delivery	59%	0.602	0.36	97%	0.1	0.01
Recognizing Threat Posing Situation	19%	0.218	0.047	40%	0.491	0.24
Prioritizing Own Activities	27%	0.333	0.11	94%	0.98	0.96

4.4. SERVICE IMPROVEMENT AND BENEFITS OF DEVELOPMENT PROGRAMS

Training is imparted to professionals, to introduce improvement in the customer service that is delivered by them. The above-discussed relation showed the impact of training aspects on customer service. This is also shown with a strong correlation of (0.539) with 52% of professionals at the commercial hospitals, responding favorably towards the positive effect of developmental programs on the care delivered by them to the customers (Table 5). Though the hospitals offer limited training sessions, the training sessions are conducted according to the training needs of the employees. Induction training for new employees, behavioural training, employee empowerment training, stress management training, and communication training are the various training programs conducted at the commercial hospital according to the identified training needs.

At the non-commercial hospitals, a strong correlation (0.579) was found between the developmental programs and their effect on the improved care delivered to the customers and 54% of the professionals had agreed with the same (Table 5). Likewise, a holistic approach is followed while designing and delivering the training for the employees in carrying out effective customer care. Every aspect of a professional's training need is catered to and reinforced.

Table 5 Following is the table indicating the training conducted at both the hospital

Commercial Hospitals	Non-Commercial Hospitals
Induction Training	Induction Training
Stress Management	Pastoral Care
Soft Skills	Soft Skills
Communication	Communication
NABH Quality Training	NABH Quality Training

4.5. MOTIVES CONTRIBUTING TO DEVELOPED COMPETENCY

The quality of the services provided by the professionals is directly dependent on the components of competency. The knowledge component represents the technical capabilities of the individual, whereas the attitude is engrained in the mind of the employees and is reflected through their job behavior or their job performance. This is the basic package of competency that majorly entails knowledge, attitude and behavior. Though researchers have discussed that knowledge/skill and attitude predict the level of job behavior/performance, whether the desired level would be achieved or not is instigated by motives and traits. Motives can be understood as the stimulation in the person's mind that drives his / her actions

Table 6 Factors of Motive and their performance studied by category of hospitals

	Service Improvements					
	Commercial Hospitals			Non-Commercial Hospitals		
	Percentage of Respondents Agreed	Correlation Value	R-Square	Percentage of Respondents Agreed	Correlation Value	R-Square
Sharing Workload Culture	33%	0.417	0.17	66%	0.754	0.56
Identifying Colleague's needs	22%	0.29	0.084	24%	0.299	0.089

Identifying Customer's needs	33%	0.417	0.17	40%	0.48	0.23
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In the healthcare industry, the competencies are defined as their job role; so, the professionals with the same competency package and job profile can share work with others of the same domain. Thereby, a moderate correlation of (0.417) was found at the commercial hospitals between the motive of sharing the workload and the developed competency of professionals and only 33% of the professionals were found to possess the motive of workload sharing (Table6).

This is shown by a very strong correlation (0.754) found at non-commercial hospitals as 66% of professionals believed in sharing each other's workload (Table6).

The complexities of the business environment are demanding that professionals be multifaceted. Along with educational institutions, organizations are also working on developing the competencies of employees. This will equip them with developed competencies to facilitate the delivery of desired qualitative service to customers. The trait is one of the main components of developed competency. As discussed, traits are personality characteristics, which affect customer service as they induce the behaviour to provide the same. In our study, we explored how traits of healthcare professionals impact their competencies and hence improve customer care delivered by them.

Table 7 Factors of traits influencing performance by studied category of hospitals

	Service Improvements					
	Commercial Hospitals			Non-Commercial Hospitals		
	Percentage of Respondents Agreed	Correlation Value	R-Square	Percentage of Respondents Agreed	Correlation Value	R-Square
Complete Customer Information	23%	0.254	0.064	32%	0.378	0.142
Holistic Perspective	13%	0.112	0.012	45%	0.488	0.238
Systematic Evaluation	6%	0	0	61%	0.661	0.436

In the healthcare industry also, every healthcare provider must know the customer's information completely before initiating the service delivery. This information allows them to approach the illness in the best possible way and to provide the services. The acquired customer information compels the competency development of healthcare providers. As to recognize and deal with various customers' needs, they have to think and act accordingly. The horizon of their knowledge and ability widens and is reflected in their behavior through qualitative customer service. It depends upon how the professional acquires the desired information from the customer.

Possessing complete information about the customer will encourage a healthy rapport between the professional and the customer and will positively impact customer service delivery. At commercial hospitals, a structured training schedule has started since 2009. The Human Resources department of the hospital has planned various pieces of training a decade back. Though these trainings are in place, the substantial anticipated outcomes are not seen. For example, the personality development training modules are not aimed at developing crucial traits in the healthcare professional, if missing. Hence, the relation between the trait of possessing customer information and its impact on the competency development of healthcare professionals in the form of improved customer care is found to be weak (0.254) as only 23% of the professionals were found to possess complete information regarding the customers (Table7).

5. CONCLUSION

Organizations are increasingly adopting change to survive and thrive in turbulent environments. The healthcare industry is experiencing a slow process of change, but the study aims to provide a holistic approach to understanding the change management process. It delves into the applied variables and dimensions, providing a holistic understanding of the process. The study also explores the role of organizational change in enhancing the organizational environment in

the healthcare industry. This comprehensive analysis aims to provide a comprehensive understanding of the change management process.

CONFLICT OF INTERESTS

None.

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