

**Factors Affecting Employee Resistance to Accept Changes in Healthcare Services
Located in Petaling Jaya, Selangor**

By

Ravinder Jeet Kaur A/P Ram Singh

UNIRAZAK
UNIVERSITI TUN ABDUL RAZAK
Copying, modifying, or reprinting, is not permitted.

Project Paper Submitted in Partial Fulfilment of the Requirements

for the Degree of Master of Business Administration

Universiti Tun Abdul Razak

October 2021

DECLARATION

I hereby declare that the case study is based on my original work except for quotations and citations that have been duly acknowledged. I also declare that it has not been previously or concurrently submitted for any other degree at University Tun Abdul Razak (UNIRAZAK) or other institution.



Signature :

Name : Ravinder Jeet Kaur A/P Ram Singh

Date :

ACKNOWLEDGEMENT

First and foremost, I want to thank *God* for giving me the strength and determination to complete this dissertation paper, and I want to thank Professor Benjamin Chan Yin Fah, my research project supervisor, for nurturing and encouraging me during the research project. Also, my heartfelt gratitude to Dr. Sharma Mahendran Jairam for his constant support, encouragement, and inspiration in completing the research project.

Apart from that, I would like to express my gratitude to Associate Professor Farhana Newaz, who taught me research methodology during my Master of Business Administration fifth semester. Aside from that, I'd want to express my gratitude to all my lecturers who have taught me since I started university, as they have inspired me with their knowledge and qualities, which have helped me progress through the years and enabled me to develop my research project.

In addition, I would like to express gratitude to all of my friends and colleagues who supported me in finishing the research project. Their psychological support was essential throughout the research project, and they assisted in the distribution of the questionnaire to the target respondents in the Petaling Jaya, Selangor area.

Last but not least, I'd like to take this moment to express my gratitude to my family, especially my spouse, Mr. Sandeep Singh, who has provided encouragement and moral support. Nonetheless, I would want to express my gratitude to my mother, Mdm. Kalwant Kaur, and my brother, Mr. Manjit Singh, for their moral support. I may not be able to accomplish the research project on time and successfully without their knowledge and ingenuity. As a result, I'd like to dedicate the research project success to them.

TABLE OF CONTENTS

DECLARATION	ii
ACKNOWLEDGEMENT	iii
LIST OF FIGURES	vi
LIST OF TABLES	vii
ABSTRACT	viii

CHAPTER 1: INTRODUCTION

1.1	Background of the Study	1
1.2	Problem Statement	2
1.3	Research Objectives.....	3
1.4	Research Questions	3
1.5	Research Framework	4
1.6	Research Hypothesis	5
1.7	Significance of the Study	5
1.8	Limitation of Study	6
1.9	The Organisation of the Study	6

CHAPTER 2: LITERATURE REVIEW

2.1	Introduction.....	8
2.2	Theoretical Foundation.....	8
	2.2.1 Management Theory.....	8
	2.2.2 Leadership Theory	9
	2.2.3 Information Technological Theory.....	10
2.3	Empirical Research	10
	2.3.1 Poor Internal Communication.....	11
	2.3.2 Lack of Management Skills	13
	2.3.3 Lack of Technological Skills and Exposure	15
2.4	Proposed Conceptual Framework	16
2.5	Hypothesis Development	17
	2.5.1 Poor Internal Communication.....	17
	2.5.2 Lack of Management Skills	18
	2.5.3 Lack of Technology Skills and Exposure	19
2.6	Summary of Chapter 2	20

CHAPTER 3: RESEARCH METHODOLOGY

3.1	Introduction.....	21
3.2	Research Design.....	21
3.3	Study Population and Sampling Procedures	22
	3.3.1 Target Population.....	24
	3.3.2 Sample Technique.....	24

3.3.3	Sampling Size	25
3.4	Data Collection Method	25
3.5	Operationalisation and Measurement	27
3.6	Data Analysis Techniques.....	28
3.7	Ethical Consideration.....	28
3.8	Summary of Chapter 3	28

CHAPTER 4: DATA PRESENTATION AND FINDINGS

4.1	Introduction.....	29
4.2	Summary of Data Collected.....	29
4.2.1	Respondent Data	29
4.2.2	Demographic of Respondent.....	30
4.3	General Information.....	32
4.4	Descriptive Studies	33
4.4.1	Poor Internal Communication.....	33
4.4.2	Lack of Management Skills	36
4.4.3	Lack of Technology Skills and Exposure	38
4.4.4	Strategies Implemented by Management.....	40
4.4.5	Action Plan to Overcome Resistance to Accept Changes	42
4.5	Pearson Product-Moment Correlation Coefficient Test	44
4.6	Pearson Product-Moment Correlation Coefficient Findings	45
4.7	One-way ANOVA	46
4.8	Multiple Regression Test	52
4.9	Summary Chapter 4	54

CHAPTER 5: CONCLUSION, RECOMMENDATIONS, & RESEARCH LIMITATION

5.1	Introduction.....	55
5.2	Recommendation	58
5.3	Research Limitation	59

REFERENCES.....	60
------------------------	-----------

APPENDICES.....	62
------------------------	-----------

LIST OF FIGURES

Figure 1. Factor Affecting Employees Resistance to Accept Changes in Healthcare Services..	4
Figure 2. Factor Affecting Employees Resistance to Accept Changes in Healthcare Services	16
Figure 3. Distribution of Summation on Poor Internal Communication	35
Figure 4. Distribution of Summation Lack of Management Skills.....	37
Figure 5. Distribution of Summation Lack of Technology Skills and Exposure.....	39
Figure 6. Distribution of Summation Strategies Implemented by Management	41
Figure 7. Distribution of Summation Action Plan to Overcome Employee Resistance to Accept Change.....	43
Figure 8. Pearson-Moment Correlation Coefficient Test Findings	45
Figure 9. One-way ANOVA Summation Poor Internal Communication (D3-Age)	47
Figure 10. One-way ANOVA Summation Poor Management Skills (D3-Age)	47
Figure 11. One-way ANOVA Summation Lack of Technology Skills and Exposure (D3-Age)	48
Figure 12. One-way ANOVA Summation Strategic Plans by Management (D3-Age)	48
Figure 13. One-way ANOVA Summation Action Plan Mitigating Resistance to Accept Changes (D3-Age)	49

LIST OF TABLES

Table 1. Research Hypothesis.....	5
Table 2. Research Population, Research Sampling, and Research Sample Size	25
Table 3. Data Collection Method.....	27
Table 4. Respondents Data	29
Table 5. Demographics of Respondents, in Row Percentage	30
Table 6. General Information, in Row Percentage	32
Table 7. Poor Internal Communication, in Row Percentage	34
Table 8. Lack of Management Skills, in Row Percentage.....	36
Table 9. Lack of Technology Skills and Exposure, in Row Percentage.....	38
Table 10. Strategies Implemented by Management, in Row Percentage	40
Table 11. Action Plan to Overcome Employee Resistance to Accept Change, in Row Percentage.....	42
Table 12. Pearson-Moment Correlation Coefficient Test.....	44
Table 13. ANOVA Testing (Age Group)	46
Table 14. Multiple Regression Model of (Sum_Strategie) with Independent Variables.....	52
Table 15. Multiple Regression Model of (Sum_Action) with Independent Variables	53

Abstract of the project paper submitted to the Senate of Universiti Tun Abdul Razak in partial fulfillment of the requirements for Master of Business Administration.

Factors affecting employee resistance to accept changes in Healthcare Services Located in Petaling Jaya, Selangor

By

Ravinder Jeet Kaur A/P Ram Singh

October 2021

Today's healthcare organisations are deemed highly competitive due to the changes in the environment that pushes them to adapt to the organisational structures. However, to have a successful positive change in an organisation, there are barriers/obstacles faced by the existing workforce/employees who feel unready to adapt and make changes. Organisational/Management support is needed to develop trust among employees and foster better collaborations that bring about effective, and positives changes in an organisation. The most important resources required by employees in an organisation are transparency in sharing, reward offering, and support, as it provides employees with the assurance that management will be able to cater resources and assistance as needed. The objectives of the study were to determine the factors affecting employee's resistance to accept the changes in healthcare services located in Petaling Jaya, Selangor. The research design is carried out for this study was a descriptive research design. Respondents are from the human capital and non-human capital perspectives of healthcare services in Petaling Jaya, Selangor. Primary data is collected using questionnaires which consist of close-ended questions. The resistance to changes is due to employee perspectives on poor internal communication and information, poor management skills, and lack of technological skills and exposure. As results, it affects the healthcare services on the uncertainty of organisation structure, management direction, and change of government policy. Thus, collective data on previous researchers' literature is gathered and together with the researcher's primary data and experience in this study. Furthermore, employees in healthcare services need to make themselves comfortable in accepting positive changes and for the management to strategies on how to overcome barriers to positive changes.

CHAPTER 1 INTRODUCTION

Changes in healthcare practice are welcome if they improve in the quality, service, and cost saving. However, it is vital to cater healthcare programs to meet the needs of the local population and create awareness programs and effective communication between the public and organisation is essential and highly required. In addition, changes in healthcare happens often to remain competitive to generate a vast economic potential to be able to survive in a short term and actively plans for the long term. To achieve this, an organisation must harness the forces driving transformation and use them to its advantage. Lastly, the change in healthcare services entails incremental improvement on existing organisational capabilities, more empowerments to the changing agents and continuous supports to the changing leaders (Al-Abri, 2007).

1.1 Background of the Study

In today's healthcare services, organisations are operating in an active and competitive environment that requires them to undergo continuous changes to stay relevant and abreast with the industry norm. However, most of the changes have been proven to be ineffective to achieve the expected results and it is believed that people's behaviour is probably the reason for this outcome. In general, some people may view the change as a challenge and an opportunity for the organisation, while others may see it as a threat and react negatively to it. Thus, resistance to accept changes can be seen among the employees in the event the data and facts are not communicated effectively with the employees. The element of resistance might be due to their inability to adjust and adopt their behaviour, skills, and commitment to meet the new requirements; they may not possess skills in relation to readiness to accept changes. Successful change requires change readiness, which is a critical factor in ensuring effective change implementation.

According to Jones & George (2001), an individual readiness for change is vital for the success of an organisation as the changes only can be made on the act through their members. In addition, according to Erwin & Garman (2010), the study has found that anti-change behaviour was both passive and overt among the employees. However, employees are psychologically influenced by their ability to cope with the changes (Erwin & Garman, 2010). Employees' reactions were also affected by their perception of the skills and competencies which are required for their success in career advancement. Furthermore, factors examined that influence a tendency for resistance included a preference for routines, negative reactions

to announcements of change, a short-term focus, and a rigid or dogmatic point of view (Erwin & Garman, 2010).

Nevertheless, being a healthcare regulator, striving to provide the best standards of services continuously to perceive a higher standard. Therefore, the employee needs to adapt and evolve as the healthcare services moving forward. Employees should embrace change in order to be a part of the growing opportunity to continuously improve healthcare services and provide better healthcare systems to patients.

1.2 Problem Statement

Healthcare services are rapidly expanding in the industry as a result of the industry's adherence to the national healthcare operating standard. The organisation implements to the current competitive sector, with a rapidly increasing communication platform as a technology that is in great demand among consumers. Therefore, although organisational change is inevitable it should be accepted positively by the employees in the event there is a need for healthcare services.

In this study, the problem that encountered by the employee in healthcare services are having lack of advancement opportunities on training and development skill. Employees are not empowered with training and development skill, poor organisational culture, poor management engagement and collaboration. As a result, based on the employer's perspective, employee's resistance to accept the changes leads to further resentments. Employers are required to meet the Standard Operating Procedure (SOP) with compliance to Government bodies.

Ultimately, organisations determined that it is indeed vital to manage employees' resistance to change in order for the public to benefit from more efficient healthcare services. In the long run, if the problems and issues faced by the employee and employer are not addressed appropriately, it may have a negative impact on healthcare services. Employees will be demotivated, demoralized, and a lack of positive responses will affect the resistance to changes. However, from the perspective of the employer, resistance to changes can impede their change process, slowing the agenda, obstructing, or hindering implementation hurdles, and thereby resulting in high implementation costs.

Nevertheless, overcoming employee resistance to accept the changes is important for the organisation to tackle the issues at the beginning by engaging the employee in the process of the implementation and being transparent on the workflow process. In the face of remarkable changes, the employer must find attractive ways in nurturing employees to

enhance their skills, productivity, high performance, and capabilities. The employer will be able to make a smooth transition work with effective engagement and collaboration.

1.3 Research Objectives

This study focuses on employee resistance to accept changes in healthcare services when there is lack of engagement and collaboration when the organisation wishes to implement a change. Below are the three chosen objectives for this research project.

- i. To identify the challenges faced by employees to accept organisational changes with regards to healthcare services located in Petaling Jaya.
- ii. To understand the strategies that should be implemented by the management to improve their communication gap and employees' motivation level in order to reduce their resistance to accepting changes.
- iii. To provide appropriate action plans are required in mitigating employee resistance to accept the changes.

1.4 Research Questions

- i. What are the challenges faced by employees to accept organisational changes with regards to healthcare services located in Petaling Jaya?
- ii. What are the strategies that should be implemented by the management to improve their communication gap and employees' motivation level in order to reduce their resistance to accepting changes?
- iii. What are the action plans required to smoothen and overcome employees' resistance to accept those changes?

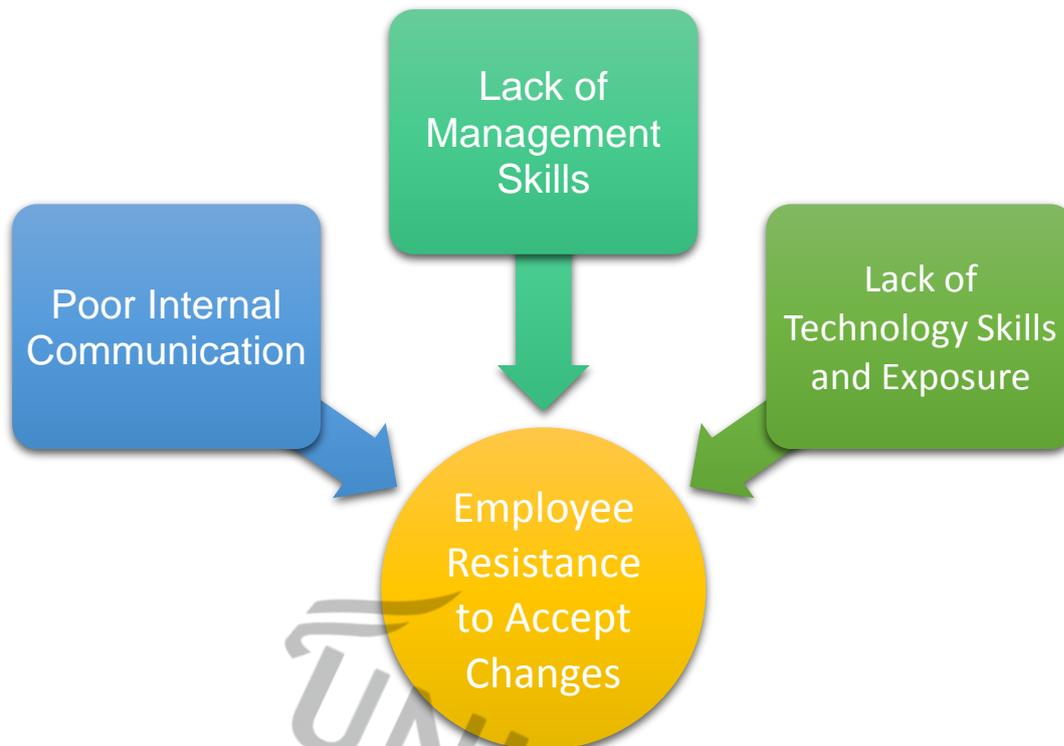


Figure 1. Factor Affecting Employees Resistance to Accept Changes in Healthcare Services

Figure 1 shows the research framework on employee resistance to accept changes in healthcare service located in Petaling Jaya, Selangor. In this study, the core issue is to identify the challenges faced by employees to accept organisational changes with regards to healthcare services located in Petaling Jaya. Three major attributes have been chosen as the independent variables, which act as the “perceiver” resistance to accept changes. These factors are poor internal communication, lack of management skills, and lack of technology skills and exposure. All of the perceivers will be tested throughout the research process to examine whether it impacts the decision of the adopter in adopting organisational changes.

1.6 Research Hypothesis

No	Statement	Types of Analysis
HO ₁	There is no significance correlation between poor internal communication and employee resistance to accept changes in Healthcare Services located in Petaling Jaya, Selangor.	Pearson moment correlation test
HO ₂	There is no significance correlation between poor management skills and employee resistance to accept changes in Healthcare Services located in Petaling Jaya, Selangor.	Pearson moment correlation test
HO ₃	There is no significance correlation between lack of technology skills and exposure and employee resistance to accept changes in Healthcare Services located in Petaling Jaya, Selangor.	Pearson moment correlation test

Table 1. Research Hypothesis

1.7 Significance of the Study

This research aimed to study the employee's acceptance of changes within the healthcare services, located in Petaling Jaya, Selangor. Employee resistance to changes is primarily due to a lack of internal communication about information, a lack of management skills in engagement and collaboration, and a lack of technology skills and exposure. Businesses required to develop a long-term plan in light of the current state of healthcare services. This research has the potential to create a harmonious organisational culture that promotes constructive thinking among employees, significantly reducing resistance to changes in healthcare services. Employee resistance to change is frequently cited as one of the primary reasons that most "change management" initiatives fail. Furthermore, when it comes to the management of healthcare system changes, it is vital to take careful consideration of all the factors. Hence, many factors can create employee resistance to accept the changes. This research will provide a better understanding of the resistance to changes in healthcare services and employee performance which would benefit other researchers in this field.

1.8 Limitation of Study

The study has been designed in a structured manner by streamlining the importance of this project. The goal of this study is to examine and evaluate the factors that influence employee resistance to accept changes in healthcare services using target samples. The trustworthiness of this study is entirely reliant on the respondents' integrity and memory in providing the necessary information in their best interests. The findings of this study should not be generalised because it only includes a small number of healthcare services in Petaling Jaya, Selangor, and the results obtained may be unique to this targeted sample. This study's limitations include time and cost constraints. A set of questionnaires was developed to evaluate employees' perspectives and barriers to changes in healthcare services. The interpretation of individual data and the total number of 120 respondent details entered [IBM SPSS Statistics 28.0] in stages will be evaluated on a group basis.

1.9 The Organisation of the Study / Chapter Scheme

The present Research Project has been organized into five chapters.

- ❖ **Chapter 1** entitled “**Introduction of the Study**” consist of Background of The Study, Problem Statement, Research Objectives, Research Questions, Research Framework, Research Hypothesis, Significance of the study, Limitation of study, and The Organisation of the study / Chapter Scheme. Change is inevitable, resistance to change can impede change in the organisation. Research objectives was established to understand the cultural problems among employee resistance to accepting changes in healthcare services after acknowledging the problem among employee resistance to accepting changes.
- ❖ **Chapter 2** entitled “**Literature Review**” consist of Theoretical Foundation, Empirical Research, Proposed Conceptual Framework, and Hypothesis Development of the current works of literature on the common symptoms and the reason for employee’s resistance to accept the changes and the factors that affect employee resistance.
- ❖ **Chapter 3** entitled “**Research Methodology**” consist of Research Design, Study Population and Sampling Procedures, Data Collection Method, Operationalisation and Measurements, and Data Analysis Techniques which explains the profile of the study.

- ❖ **Chapter 4** entitled “**Data Presentation and Analysis**” consist of the data findings and analysis of the Research Project.
- ❖ **Chapter 5** entitled “**Conclusion, Recommendations, and Research Limitation**” deals with summarized findings of the study and provides suggestions and conclusion.


UNIRAZAK
UNIVERSITI TUN ABDUL RAZAK
Copying, modifying, or reprinting, is not permitted.

CHAPTER 2 LITERATURE REVIEW

2.1 Introduction

This chapter provides a literature review of research that has a focus on change, employee resistance to accept the change and cultural issues. This literature review consists of a few different sub-chapters on the other researcher's ideas and concepts deliberated. The first section of this literature review provides a clear understanding of the challenges faced by employee resistance to accept the change. In section two to understand the cultural issues and types of resistance to change. This section of the literature review is to understand the cultural issues and reasons for change that involves internal communication, management skills, and technology development. In section three, to identify the aspects of the resistance to change. Section four deliberates reasons employees resistant to accept the changes. Section five discusses the factors that affect employee resistance to accept the changes in healthcare services.

This section discusses the literature review and factors affecting employee resistance to accept the changes in healthcare services in the aspect of management factors (poor internal communication and information) leadership factors (poor management skill) and the other factors on learning the new technology which employees have the fear in losing the power and fear of being overloaded. Hence, all the factors above will provide a clear understanding of factors affecting employees in accepting the changes in the healthcare industry. Last but not least, the last section discusses the appropriate action to smoothen and overcome the employee resistance to accept the changes in healthcare services.

2.2 Theoretical Foundation

2.2.1 Management Theory

First and foremost, why changes are an important factor for any organisation? According to (Chron, 2020) changes is important for any organisation that may result in positives aspects. Also, changes lead to retaining a competitive edge and failing to do so the organisation may not succeed to meet the needs of their customer. Positive changes encourage innovation, skills development, nurturing employees for better business growth and improves employee's morale (McCullough, 2012 - 2019). Several types of research have

stressed the challenges faces by an employee to accept organisational change. According to (Amarantou, Chatzoglou, Chatzoudes, & Kazakopoulou, 2016), managing resistance to change has been a concern in the international research community. However, in most of the studies, there were limited and gaps of information. Moreover, a study was done in Sweden healthcare on implementing changes among the healthcare professionals as result behind resistance to change will be accepted by the healthcare professional themselves to initiate the changes and their input matters before any changes take place (Nilsen, Schildmeijer, Ericsson, & Seing, 2019). Furthermore, healthcare employees' attitudes toward change can be ambiguous, and change can be positive if management listens to employees' opinions, and change can be for the better (Jiri, 2018).

2.2.2 Leadership Theory

According to Landaeta, Rabadi, JI, & Levin (2008), resistance to change is positively effective with the presence of behaviour and without it, the organisation will not provide better treatment and care to patients. Furthermore, according to a study, effective communication with employees can expand hospital administrator innovation in recognizing staff morale, productivity, and stimulate better management (Crittles, 2019). As a result, improving staff morale and productivity in a supportive workplace can improve healthcare business operations. (Crittles, 2019). According to Erwin & Garman, (2010), resistance to change is found in employees are having anti-change behaviour that passively and explicitly looking forward to any changes. Eventually, employee resistance to change is one of the main responsible for a lack of employee engagement, which leads to lower employee performance and a lack of trust in the management agenda. (Jeffrey, 2016).

Nevertheless, apart from all the aspects above, leadership style plays an important role in organisations by encouraging members to evolve more in a participative role in the decision-making process. This democratic leadership role promotes a sense of belongingness among the employees and fundamentally they feel in their destination. The success of change need leaders who can drive changes through new processes, mindset, and structure within the organisation (Farooq, Naqshbandi, Kaur, & Ng, 2018). In addition, many employees and top management have lack of experience and motivation to recognize the importance of change (Erwin, 2009).

2.2.3 Information Technology Theory

Change initiatives for the organisation were systematic, however, very few changes effort experienced an adequate return on investments (Gardner, 2009). Several studies have shown that often project of implementation fails due to the relevant team concentrate more on the implementation but overlooked effective communication in preparing the employee for a transition (Gardner, 2009). According to Anders and Cassidy, 2014, Poorly designed change plans, a lack of responsiveness, and increased complexity are all examples of poor change implementation in the workplace. It's important to note that organisational resiliency could be a key asset for implementing change. Change is less likely to be achieved if the necessary time, workforce resiliency, and managerial and personal capabilities to execute change are not accessible. Employee readiness for change includes personal knowledge, skill and exposure, self-efficacy, analytic competence and tools for implementation. Similarly, the organisational level includes awareness, culture, and continuous learning (Vaishnavi, Suresh, & Dutta, 2019). Nevertheless, the older employees may perceive adaption and change to be difficult due to technology anxiety growing with age and usually having less confidence with the knowledge embedded in them as compared to the younger generation (Soja & Soja, 2020).

2.3 Empirical Research

Empirical research is data gathered by the researcher through observation and measurement of experiences that he or she has personally observed. As a result, the collected data will be compared with the theory or hypothesis, and the final findings will be based on real-world experience (Emerald Publishing, 2021). As a result, for this research study, the researcher will collect data through an online survey questionnaire using the google platform which the employees could easily access the questionnaire without any hassle within the healthcare services group.

A very few industries will survive without having to adapt to organisational changes. Generally, changes can be very negative when implementation is not performed accordingly. However, changes are necessary for the future growth of the industry to remain competitive. The ADKAR (Awareness, Desire, Knowledge, Ability, and Reinforcement) theory can be used to incorporate a change for a smooth transition (Hiatt, 1994). Application

of the principle would be strongly encouraged to prevent any significant problems in the workplace change the implementation process by anticipating these hiccups.

Below are the few challenges reviewed to propose a Conceptual Framework.

2.3.1 Poor Internal Communication

One of the major reasons preventing employees from accepting change is a lack of communication. In the absence of that, certain companies struggle to keep employees informed about the industry's growth. Employees have a strong sense of not being a part of any decision that will affect their productivity. The transition process can be supported by including staff as much as possible during meetings or brainstorming sessions. Leadership is essential when working in top management with numerous levels of hierarchy above the rank-and-file employees. When it comes to any change phase, a top-down management style is extremely successful because employees feel confident and motivated. In the event, management decides to implement change, good communication with employees is necessary to ensure that they understand the preparation process. However, translating the transition process to an employee is essential, failing which they will feel uncomfortable and unfamiliar with it, and they will resist it. Furthermore, having employee input, suggestions, and insights about how to render the improvements as effective as possible is worthwhile. For instance, management introduced Grooming Policy and sent out a memo of the importance of compliance to set standards and so that the employee portrays the right positive image of the organisation. The conflict happened at the time the employee simply refuses to comply went; they were not informed of the changes. Changes are inevitable and so are conflicts, however, moving forward an employee is to abide by the rules and regulations set for the betterment of the organisation as a whole.

Furthermore, ineffective communication can be extremely stressful for employees, leading to mistrust and ambiguity. Furthermore, a clear line of communication between employees and management is vital; without it, employees may feel as though their voices are not being heard, which can result in poor organisational development. As a result of poor communication and a lack of confidence, the organisation can fail to have an open culture, which can result in a high turnover rate. Having an open communications network during the implementation process may indeed be essential. In addition, allowing employees to express their concerns, seek input, and address any conflicts which positively achieve improvements.

Allowing employees to be more engaged would aid teammates in overcoming challenges and make the implementation process simpler and more efficient. For instance, Madam Satvinder is a new HR Manager who leading a new assignment of changing the current employment contract in the organisation and this also involves other Team Leaders. Madam Satvinder is ambiguous on the feedback of the Team Leaders. Some of them was working on the assignment and suddenly Madam Satvinder commented on a Team Leaders work on not following according to the requirement. This conflict is caused by poor internal communication.

Ultimately, having a high-stress level in the workplace is a huge sign of poor communication. Besides that, poor communication may affect the employee work process with having messy workload, everything seems to be urgent, feel tense, overworked and feeling the hurriedness to complete given task. Good communication brings a sense of comfortability and stability, but lack of communication or unhealthy communication brings a sense of fear which is counterproductive to efficiency. Moreover, the stress encountered by the employee will eventually be carried home and will impact the families. Having some families waiting for their spouse to be home to have family time will eventually not happen went the employee brings back emotions that affect the family. Having full of emotions may create conflict at home with their families. Moreover, stress will stay if the employee fails to overcome it and further will be hard to get ahead. Having a poor communication line will affect employee resistance to accept change. For instance, when my higher level of management person in charge takes sides and favour certain employees over the others due to personal reasons. Even though provided analysis of the medical leave data is correct and those with an alarming number of medical leave and poor performance are to be reprimanded as per their yearly increment put on hold because the reason justifies as work is based on performance. But when a leader takes sides, is biased, and still gives unjustifiable raises based on favouritism or personal motives, it creates a dysfunctional conflict because it demotivates those who genuinely work hard and perform better and continues to raise the level of stress.

A communication platform is a represented media used for transmitting messengers to the audience of interest. In addition, an organisation using multiple communication platforms to convey information to employees to buy in on change initiatives could connect them to achieve their goals. Effective communication brings success went the communication that flowed through the right communication platform has been received clearly and understood well by the receiver (Dexter, 2013). Besides that, effective

communication is vital to stimulate employee behaviours to reach organisational objectives. However, when there is ineffective communication it creates obstacles for an organisation to meet its goals. With that, employee resistance to accept changes when the communication does not convey effectively and in results lead to frustration (Dexter, 2013). Ultimately, when an employee experienced a lack of understanding of the information received, resisting behaviours were natural reactions (Dexter, 2013).

2.3.2 Lack of Management Skills

Poor management skills can be a long-lasting effect that will impact the whole organisation. With having a toxic environment, misguided leadership will develop a repercussion. The challenges faced by the employees with having a lack of management skills will eventually affect the level of productivity. The level of productivity will not only affect the employee but other team members on the targeted goals and achievements. For instance, leadership which is an autocratic and draconian type of leadership can lead to frustration, emotional anguish, and resentment among the employee, this is because in the case of some healthcare services the Leader or CEO, has control over all decisions without any communication platform with employees nor the managers. He/she were appointed by the management for the position of managers, but lack of empowerment leads to authoritative leadership, which is ultimately bounded by internal or direct instructions and remain unquestioned to their one-sided decisions made. In the event, the managers just want clarification and attempt to advise him of the danger, he often brushes his employees aside and does not listen to them. A draconian leader can quickly demoralise the workforce as he/she is being inflexible. Whenever an employee attempts otherwise to even safeguard the employee's interest, the leader does not hesitate to impose any form of draconian ruling which enforces punitive action among the employee who directly involves with them.

This often leads to organisational changes like unenthusiastic towards job performance, low morale, poor job performance, not responsive to coaching, resistance to accept changes, not taking ownership, negative attitude, poor work ethics, arrogance, poor communication skills, skills that don't match the job and overall become a silence individual who will work according to the hours stipulated and leaves sharp on the dot without much effort for improvements not seeking additional knowledge to learn or grow from the teammates. Moreover, having managers with poor leadership often fear employees on their job security. A fearful employee will eventually look for another job and even if they do not

their morale will be decreased, they will have barriers to trust in management. At some point, managers tend to put blame on the employee, not providing proper information and reply sarcastically. As result, the employee develops fear factors with the unpredictable behaviour of the manager. For instance, Marcus, the manager, frequently hands off his tasks and obligations, and people see that he's not looking at his staff's work. Alternatively, Sasi was a very detailed manager, and she perceived that she had little confidence in her team members doing their job. The former employee will lead to apathy on the part of those who are not self-motivated; the latter may lead to frustration among those who are self-motivated. This interpretation of conflict is due to the inferiority of their leader.

Having a negative working environment, employees will suffer from anxiety and stress which nothing will be workable. Furthermore, employees are resistance to accept the change in the event the management having inconsistent policies, favouritism, and a lack of managerial presence. A poor organisational culture has also been encountered in this study, with the lack of emphasizing formal structures, regulation, and reporting relationship with appeared to be negatively associated with quality improvement activity. According to Scott, Mannion, Davies, & Marshall (2003), organisational culture is essential and associated with the effectiveness of healthcare services. For instance, as an Operation Manager of Regen Healthcare, there a various business measurement needs to develop to achieve department's goals. One of the major problems derived from the management failure to provide clear and concrete instructions. At times Line Managers are given different directives by the Executive Director that creates conflict between managers and employees. Despite having a chain of command employees tend to seek approval directly from the Executive Director, bypassing the Line Manager and this conflict affects the departmental goals and leads to the employee feeling demotivated. Ultimately, adhering to the chain of command is vital for both the Line Manager and employees to have a smooth process flow following the structure in place.

To synthesize, change not only happens to an organisation; it also affects an employee to go through changes in healthcare procedures (Ogbe & Crolley, 2021). An employee will feel anxious, stress, confusion, and many other emotions went they know something is going to change and that could turn into barriers to change in healthcare organisations (Ogbe & Crolley, 2021).

2.3.3 Lack of Technology Skills and Exposure

In healthcare services technology is vital for each employee who serves the healthcare industry including administrators. The administrators are responsible for effectively implementing any new technology system within the organisations, which include electronic medical records, modern coding and billing software, electronic communication, and other imaging technology. The change in technology in the healthcare facility particularly on its development of electronic medical records (EHR) technology. This rapidly changing environment in healthcare facilities creates a great opportunity to improve its settings. In addition, embracing the new norm, a healthcare organisation needs to dive deep into digitalization to remain sustainable (Crittle, 2019). Moreover, a healthcare organisation can provide the best care when changes are made rapidly. The best health collected data can ensure changes were implemented effectively. Management to ensure the smooth transition in changes made to the technology which a proper training, development, and information nurtured to the employees. Employees should not be having the old mindset with reluctance to changes as healthcare is rapidly evolving and if employees are not able to adapt to this evolution will not ensure change (Crittle, 2019).

Many organisational changes require the effort of an organisation to make some level of change to processes, people, or technology. Basically, the level of change depends on the complexity of the change initiatives. Implementation of technology change that involved end-users often leads to failure compared to other change initiatives. Hence, a proper communication channel is vital in the organisation to disseminate information to the end user's resistance which results in fewer implementation failures (Dexter, 2013). The best effective way in managing the resistance to change is by empowering the employee to have a sense of accountability which would be a professional practice adoption of strategies to encourage greater IT security protocols (Crittle, 2019).

Employee morale would be affected by an autocratic leader who makes decisions that will affect his employees. He/she recently decided to change to an alternative electronic medical record system because the current software would not allow patients to schedule appointments remotely. He/she decided to change the entire software to suit his/her needs without soliciting employee feedback on the new software. Employees were dissatisfied with the new software because they were so used to the old software, and they were resistant to

change. Employees were not aware of the abrupt changes, and as a result, they were dissatisfied with the leaders' decisions. Providing adequate training and education is vital for employment and professionals in healthcare services as being a professional often juggle a busy schedule and may not have time to learn the new technology. Ultimately, lack of training and exposure to the new technology will have encounter many errors.

2.4 Proposed Conceptual Framework

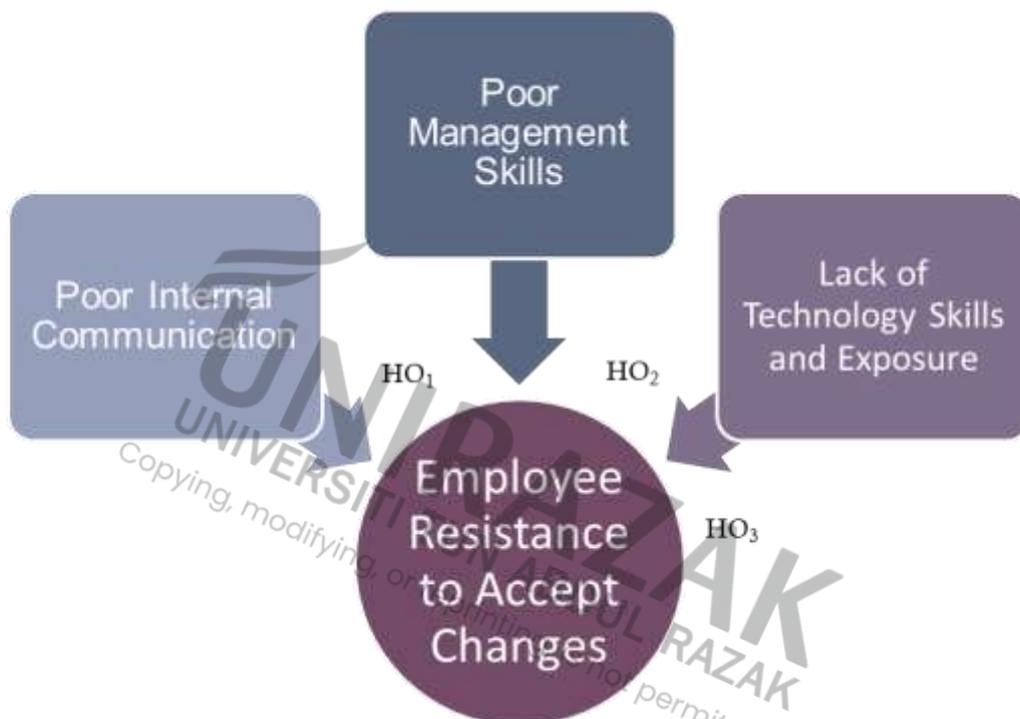


Figure 2. Factor Affecting Employees Resistance to Accept Changes in Healthcare Services

The above model shows a conceptual framework that serves as the foundation to continue in this research. It contains a presentation of a conceptual framework, applicable to the theories, purpose and research questions that have been highlighted. This framework is based on a descriptive design. This proposed descriptive framework evaluates the relationship between the variables with the relationship between poor internal communication, lack of management skills, and lack of technology skills, and exposure that leads to employee resistance to accept changes in the healthcare industry in Petaling Jaya, Selangor.

2.5 Hypothesis Development

2.5.1 Poor Internal Communication

Employees will be motivated and productive if a leader has excellent communication skills with them. Communication is not only able to influence employee performance through motivation, but it gives an indirect impact on employee resistance to accept change. A mutual understanding between management and employee builds a genuine relationship and understanding between both parties in the organisation. For instance, in the organisation, there is a manager that has a bad temper. Employees were not given a chance to understand the new implementation of company policy. Hence, his/her autocratic behaviour has brought to a decreasing employee trust towards the organisation and as a result employee resistance to accept the change. According to (Anna, 2021), a lack of internal communication can affect employee low morale. Ineffective communication can create misunderstanding, lack of opportunities, a conflict between management and employee, no proper channel of internal communication, and overall employees will feel defeated. In this condition, the employee will tend to seek better opportunities in other healthcare services.

Besides that, lack of communication certainly will create unnecessary conflict between team members. For instance, Dr. Thomas has reviewed the patient and advise us to see our internal physiotherapist. The patient then made his appointment to see the physiotherapist. During his assessment with the physiotherapist, the patient was asked many questions like what treatment plan has Dr. Thomas done on him. The patient seems to be not happy as there was no internal communication between the clinicians. According to this scenario, there seems to be no pass over of referral from Dr. Thomas to the Physiotherapist. Consequently, inadequate internal communication is preventing the patients from returning to the healthcare facility.

In addition, poor internal communication could seriously impact the organisation culture. In the healthcare services industry, positive culture relies on communication. In the event, organization's employees are not on the same path about where the company is going, it will have an impact on the company's vision and objectives. The collaboration of team members will be impacted without sufficient guidance and direction, as well as a thorough understanding of each employee's roles and responsibilities.

Ultimately, an organisation should emphasise having transparent communication among the employees as it builds trust and reveals uncertainty. In contrast, management openness could benefit the ideas of the employee and sufficiently share information among employees. As a result, communicating the change within the organisation is vital for all levels of individuals, groups, departments, and divisions of employees (Vaishnavi, Suresh, & Dutta, 2019).

H0₁: Poor internal communication has significant impact on employees' resistance to accept changes in the healthcare services.

2.5.2 Lack of Management Skills

The lack of management skills will have a negative impact in the event the healthcare organisation never takes a proactive action plan in mitigating employee resistance to accept change. The Healthcare industry is the most essential industry to serve the nations, failing to structure their organisation will lead to losing good employees. Besides that, the lack of management skills will also affect recognizing the stress and the skills gap of an employee. Being a healthcare service provider, the first and most important is the patients care is of utmost vital failing which will impact on the management structuring in the process of daily operations. Nurses are being exhausted and making mistakes cause them to be burnout and lead to a shortage of employees. In addition, in this current pandemic Covid-19 situation, management support and encouragement will help employees to deliver the services to patients care positively. Essential support from the top management is vital, especially the doctors and nurses will be led down with lots of mental stress and burned out.

As a manager, you are often isolated from your team members. The difficulties that managers face in getting their team members together to form an efficient and timely communications network. To have a successful team, managers need to adopt good listening and speaking skills to overcome any misunderstanding. According to Perkbox, n.d., a lack of interdepartmental communication has been recorded in the UK which has caused the biggest stress in the year 2020. This shows lack of internal communication will negatively affect not only the industry but also the individual progress as a result manager and employee will have a conflict which will lead to work-related stress. For instance, in our group of companies, we have two different entities, the Orthopedic Specialist Centre and the Physiotherapy Centre. Often Physiotherapy Centre organizes a function or team building among its Team Members

without thinking of the Specialist Centre Team Members. They sometimes do things on their own without worrying about getting it coordinated as a group function or a team-building program. On a special day, the Specialist Centre is planning to celebrate the Deepavali Open House, and we invited the whole group to join the event. But the Physio Team had a Thanksgiving Party on the same day. The Specialist Centre is considered as a mother company and our priority are to coordinate every activity and the rest to follow. Disagreement between both the entity arguing to put forth one of the functions, both the group has misunderstandings and arguments. From the above example, we can conclude that this is an Inter-group disagreement in which there was no collaboration, contact between the two parties to be addressed during the celebration. After this dispute, the organization had concluded, in every possible celebration, to be conducted as a collective by not making any distinction between the entities in order to take any member of the team as a whole. Thereafter, our team members became more cooperative, bringing everyone together and the company sees improved results.

In addition, a healthcare organisation culture and policies are vital to have positivity in employees the embrace any change. Employees to be well compensated in crucial areas like quality of care, patient's experience, patient's safety and operational efficiency. The outcomes can be achieved if the leader provides clear instruction and provide essential tools to the employees for the enhancement of the performance (Vaishnavi, Suresh, & Dutta, 2019).

H0₂: Poor management skill has significant impact on the employees' resistance to accept the changes in the healthcare services.

2.5.3 Lack of Technology Skills and Exposure

Digital technology has become integrated with the healthcare industry and is poised to revamp patient care. Digital edge took the battle to provide the best practice of healthcare service and meets the standards of patient care. As a result of the transformation, both healthcare providers and patients have had a significantly improved overall experience. Nevertheless, practitioners and employees do face challenges in new technology and switch to new technology will disrupt the way they work in future. Employees always look forward to something new in the industry, but they are also afraid of losing power and future job opportunities. Leaders should ensure the collaboration of technology can be successfully

adopted by the organisational culture and failing to define best practices, will affect employee resistance to change in the new technology. Moreover, having autocratic leadership in an organisation will tend to increase the workload for an excuse not to provide training despite employees struggling with an increase in workload may lead to a lack of skills and exposure.

The organisation will foresee poor job performance and increased work-related stress if there is no adequate training and development provided to the employee. This will subsequently affect employee morale and undervalued, and the chances will be open for them to seek better opportunities. To become the leading healthcare industry, businesses should follow the government's standard operating procedure. Moreover, to stay competitive in the healthcare industry, having advanced technology equipment is vital. Therefore, employees need to undergo training to upgrade their skills to work safely and productively. An employer that fails to provide training will reduce workplace productivity, loyalty, and engagement. Ultimately, the tendency of an employee to make common mistakes which will directly affect the patient care system.

In addition, with the increase of work-related stress, an employee will feel unappreciated in their job and unable to perform the task which eventually will be fired by the employer. Mostly, this happens when new technology changes the organisational structure and top and middle management is inclined to redefine the new business model (Singh, 2015). Best in retaining good employees, the organisation should emphasise employee development to see a positive increase in the level of productivity and an increased in financial growth.

H0₃: Lack of technology skills and exposure have significant impact on employees' resistance to accept changes in healthcare services.

2.6 Summary of Chapter 2

Chapter two delivers a thorough overview and understanding of the factors affecting employee resistance to accept changes in healthcare services. All the 3 hypotheses will be tested based on the survey questionnaire response from the sample with proper research methodology which will be discussed in the next chapter.

CHAPTER 3

RESEARCH METHODOLOGY

3.1 Introduction

This chapter describes the methodology employed in this research which aims to explore and understand employee resistance to accept changes in the healthcare service in Petaling Jaya, Selangor. The main focus is on presenting the research discussion and technique that was derived from the literature review, as well as developing a conceptual framework. It discusses the descriptive of the research and the data collection.

3.2 Research Design

The background of the research method and techniques applied in this research is a descriptive research design. The research design refers to the strategies adopted to integrate with the chosen study in a logical way and ensuring it addresses the effectiveness of the research problem; it rhymes with the blueprint collection, measurement, and analysis of data (Kirshenblatt-Gimblett, 2006). The researcher chosen study is about factors affecting employee resistance to accept changes in healthcare services located in Petaling Jaya, Selangor. The study aims to identify the challenges faced by an employee to accept the organisational changes with regards to healthcare services, the best strategies to be implemented by the management to improve their communication gap and employee's motivation level whereby to reduce their resistance to changes, and best practice action plans to smoothen and overcome employee's resistance to accept the changes.

The methodological approach used to provide data is by using a five-point Likert-scale online survey questionnaire. This data collection aims to measure the factors affecting employee resistance to accept changes in healthcare services within the district of Petaling Jaya, Selangor. In the survey questionnaire, there will be five parts which will be the demographic, general information, challenges of employee resistance to accept change, strategies implemented by management on communication gap and employee motivation level to overcome employee resistance to accept changes, and action plan to overcome employee resistance to accept change. The data of respondents will be explained on the outcome of the assessment and employee's perception of the challenges, strategies, and action

plans. As for this research project, a total of 120 participants were selected to perform the online survey questionnaire on the factors affecting employees to accept changes from the healthcare services within the district of Petaling Jaya, Selangor.

The challenge of measuring is determining the reliability and validity of a method. Analytical questions are instruments or procedures for determining the relationship between independent and dependent variables. A survey tool that has been used in this current research project is a systematic and structured questionnaire, which is divided into five parts that could obtain reliable data. Therefore, the researcher has chosen the same tool to be applied for this research project.

3.3 Study Population and Sampling Procedures

A study population is a subset of the target population from which the sample is being selected. It would normally be impractical to study the whole population. However, the sampling method will be accessible to get information about a population based on results from a subset of the population, without having to investigate every individual. Reducing the number of individuals in a study reduces the cost and workload and makes it easier to obtain high-quality information.

Based on Appendix 1, Factor Affecting Employee Resistance to Accept Changes in Healthcare Services Located in Petaling Jaya, Selangor. This is an online survey questionnaire developed for this research project and data was provided on the challenges faced by employees in the healthcare services. As a result, this research was able to carry out successfully with the collective number of respondents for this proposal as a direction for my research project.

In section A of the survey questionnaire, demographic data of respondents were collected. The demographic profile consists of the respondents' gender, age, educational background, and division. The total number of samples for this research were 120 respondents as per figure 4 Part A: Demographics. The majority of respondents in this survey derived from the female category which consists of 57.6 percent and the minority respondents are male with totaling 43.3 percent. All the respondents are from a healthcare services industry background. Ultimately, the respondents are divided into groups of age, gender, educational background, years of service, and division.

In section B, general information was collected from respondents on working experience, challenges at the workplace and communication within the organisation are collected. As shown in Appendix 1, a linear measurement scale was used to compile the scale from 1 (Strongly Disagree) to 5 (Strongly Agree).

In Section C, data of challenges faced by employee resistance to accept changes have been presented. As shown in Appendix 1, a linear scale is used to compile the scale from 1 (Strongly Disagree) to 5 (Strongly Agree).

Ultimately, section D shows the strategies implemented by management on communication gap and employee motivation level to overcome employee resistance to accept changes. As shown in Appendix 1, a linear scale is used to compile the scale from 1 (Strongly Disagree) to 5 (Strongly Agree).

The survey questionnaire is prepared based on the factors affecting employee resistance to accept changes in healthcare services. Moreover, it examines the organisation behaviour on employee perception and barriers using a non-sampling technique which has an inter-relation between lack of management skills affects the communication among the employees. However, lack of technology skills and exposure not affecting employee's resistance to accept the changes. Indeed, the comparison made was important to determine the structure using the above hypotheses.

Therefore, a pilot test of the question was tested out prior to collecting the real data for this study. The purpose of organizing the pilot test is to identify any issues that may be difficult to comprehend and revised them before conducting this survey. Based on this, the researcher had used a quantitative approach for the research project by expanding the online survey to gather the data and measurement of the factors affecting employee's resistance to accept changes in healthcare services. The collective data is to gain some insights on the challenges faced by healthcare services employees. Ultimately, using a quantitative approach will be ideal to analyse the research data and answers the research questions on the finding.

3.3.1 Target Population

To determine the target population is important for a research project as to set a clear direction on the scope and objectives of the research and types of data. Besides that, research project the contribution will be from the employee and employer in the field of healthcare services. In addition, since a quantitative approach is used for the research project, a survey questionnaire is given to employees using emails, social media platforms, and WhatsApp messenger to identify the challenges faced by employee resistance to accept changes in healthcare services, as well as identify the characteristic of employee behaviour. Besides that, it provides an employee with the positivity of change. Moreover, the target population aim for this research project is 10 private healthcare services located in Petaling Jaya, Selangor. Sunway Medical Centre, Subang Jaya Medical Centre, Thompson Hospital, Columbia Asia Hospital - Petaling Jaya, University of Malaya Medical Centre, Beacon Hospital, KPJ Damansara Specialist, Alpha Medical Centre, Iheal Specialist Centre, and Cengild G.I Medical Centre are among the participating private healthcare services. The employees will be from both human capital and non-human capital division. The main objective is to identify the perception and barriers affecting employees of resistance to accept changes in healthcare services.

3.3.2 Sampling Technique

Sampling techniques are one of the most important that determines the accuracy of the research project. As for this research proposal, a non-random sampling technique (non-probability sampling) is applied. Besides that, it will provide the researcher with accurate information relates to the research questions and meets the research objectives. Moreover, the study population researcher has chosen are employees from the healthcare industry located in Petaling Jaya, Selangor, to analyses the hypothesis and resolving the research questions. Since the researcher has obtained a significant result based on the online survey within a short period, the researcher is to apply the same method for the research project.

3.3.3 Sampling Size

An allocation of questionnaires with targeted sample size is applied in this research study. A resourceful tool is used to disseminate the questionnaires to gather information from the respondents. The distribution technique of the questionnaire was an uninterrupted method for selecting the sample. Moreover, the correct method of distributing the questionnaire will benefit the researcher with effective and reliable results. Based on this study, a non-random sampling is applied to manage the convenience of respondents. The aim of the research project by allocating a sample size of 80 – 100 respondent employees of healthcare services located in Petaling Jaya, Selangor.

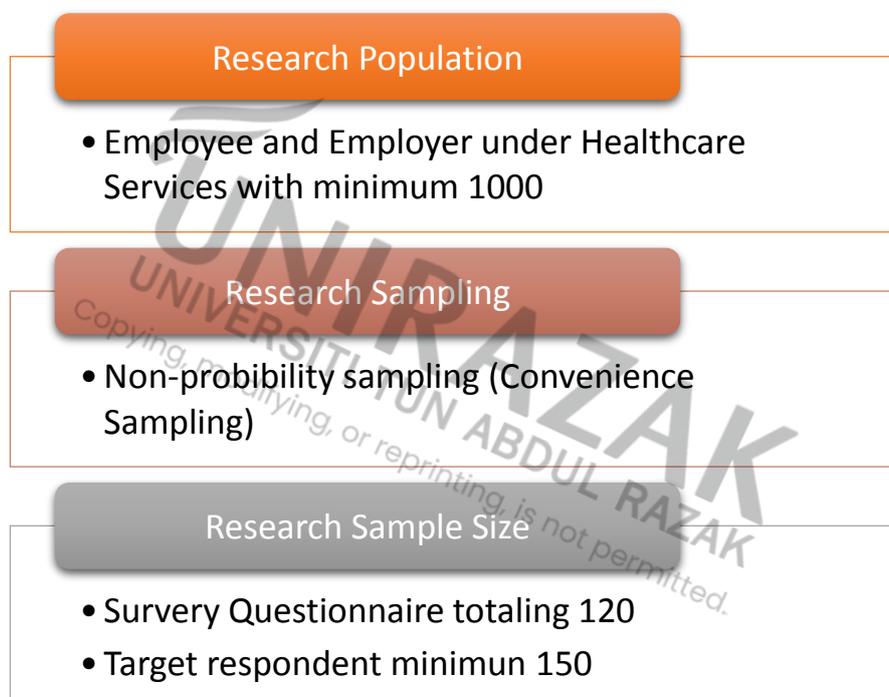


Table 2. Research Population, Research Sampling, and Research Sample Size

3.4 Data Collection Method

The data collection approach used for this research study is based on the contribution of healthcare services employees within the district of Petaling Jaya, Selangor on the resistance accepting changes. The primary data is collected by using online survey questionnaire tools on the selected group who are willing to share their input. A prepared questionnaire will be distributed to employees working in the healthcare services. Non-random sampling techniques (non-probability sampling) method will be applied to make the

research much reliable. This is to minimize systematic error (bias) on the true value and the measurement as psychology some of the things may not be able to calibrate. As psychologists, they rely heavily on the reliability and validity of measurement to gather accurate data. The linear scale is designed to evaluate the degree of intensity agree to or disagree based on the statements provided by the respondents.

1. **Part A** is designed to assess the demographics of respondents. Questions one to five in this survey have demographic dimensions.
2. **Part B** is designed to assess respondents' general information on working experiences. Questions one to thirteen in this research survey ranges on employee general information.
3. **Part C** is designed to evaluate the challenges of employee resistance to accept changes. Questions one to five are challenges faced by the employee in accepting change questions in this survey.
4. **Part D** is designed to access the strategies implemented by management on communication gap and employee motivation level. Question one to five are the strategies adopted by management and employee motivation level questions in this survey.
5. **Part E** is designed to evaluate the action plans to overcome employee resistance to accept changes. Question one to five is the action plan in mitigating employee resistance to accept change in this survey question.

	Part A: Demographics Question 1 - 5 ranges employees demographics dimension.
	Part B: General Information Question 1 -13 ranges employees working experinces.
	Part C: Challenges of Employee Resistance to Accept Change Question 1 - 5 ranges on challenges faced by employees in accepting change.
	Part D: Strategies Implemented by Management on Communication Gap and Employee Motivation Level to Overcome Employee Resistance to Accept Changes Question 1 - 5 ranges strategies adopted by management and motivation level of the employee.
	Part E: Action Plan to Overcome Employee Resistance to Accept Change Question 1 - 5 ranges on action plans to overcome employee resistance to accept change.

Table 3. Data Collection Method

3.5 Operationalisation and Measurement

The research approach is to embrace the contribution of employees of the healthcare services located in Petaling Jaya, Selangor on the resistance to accept changes. The collective of data will be compiled using an online survey platform with employees from human capital or non-human capital division. Moreover, using the online survey questionnaire will lower the cost and will be able to cover the selected geographical area. In addition, the respondent can complete the online survey questionnaire in a very convenient way at their own convenient time. Moreover, to achieve better respondent results, the researcher has made the questionnaire very short and precise. The measurement aims to measure the reliability and validity of the research. Moreover, the relationship between the independent variables and the dependent variable will be analyzed using the analytical method. A Statistical Package for Social Sciences (IBM SPSS Statistics 28.0.0.0) tool is used for this research project to support quantitative data analysis.

3.6 Data Analysis Techniques

A set of questionnaires was developed, related to employees' perspectives and barriers in resistance to changes in healthcare services. The total number of 120 respondent details entered (IBM SPSS Statistics 28.0) in stages and the interpretation of individual data will be analysed on a group basis. Concise statistics such as percentage and frequency are used to interpret the results. Descriptive analysis will be used to explain the characteristics of the study's target population, such as age, gender, working experiences, educational background, and division. Graphs, charts, and diagrams are used to consolidate and show the collected facts in a more comprehensible way. This study employed the Pearson Moment Correlation test to examine the relationship between the variables.

3.7 Ethical Consideration

These are among the ethical considerations that should be made before, during, and after conducting research in an ethical manner. To begin with, researchers must respect any data collected from respondents as absolutely private and confidential. Second, prior to conducting the survey, researchers must get agreement from respondents; no respondents should be coerced to participate. Finally, researchers should not intentionally falsify or alter data. Upon agreeing to participate, respondents should give their full cooperation to complete this research. Finally, respondents must provide accurate and genuine responses.

3.8 Summary of Chapter 3

Chapter three explains the research design and the development plan in conducting the research project using an online survey questionnaire platform to further analyses the data and further findings for the upcoming research project. In section 3.2, it discusses the research design that is used for this research project. In section 3.3, discusses the study population and sampling procedures based on the target population chosen for 10 private healthcare located in Petaling Jaya, Selangor. Besides that, section 3.4 discusses the data collection method by using only a google survey questionnaire. Moreover, the following section of 3.5, explains the instrument used for the data collection method. In section 3.6, will discuss the data analysis based on the independent and dependent variables. In section 3.7, discuss the ethical consideration of the data collection to be private and confidential.

CHAPTER 4

DATA PRESENTATION AND FINDINGS

4.1 Introduction

This part of the research project has focused on analysing the data and interpreting the findings with an illustration of charts and tables. Data from 120 respondents were gathered from the online survey. This study focuses on employee resistance to accept changes in healthcare services when there is a lack of engagement and collaboration when the organisation wishes to implement a change.

This chapter analyses survey data and examine the findings in light of the objectives of the study. The quantitative data collected through the survey is coded for analysis in SPSS. The qualitative data was also thoroughly analysed and discusses based on the objectives of the study.

4.2 Summary of Data Collected

4.2.1 Respondents Data

A total of 150 sets of questionnaires were distributed to the employees of healthcare services and only 120 sets of questionnaires are responded to. Hence, the data analysis of this research project was analysed with 120 respondents.

	Total	Percentage
Questionnaires distributed	150	100%
Collected questionnaires	120	80 %
Data used in the analysis	120	80%

Table 4. Respondents Data

4.2.2 Demographics of Respondents

The first section of the survey questionnaire includes the demographic respondents' profile which includes gender, educational background, age, working experiences (In years), and division. Table 5 shows the respondents' profile in frequency and percentage.

		Frequency	Percent	Valid Percent
D1: Gender	Female	68	56.7	56.7
	Male	52	43.3	43.3
	Total	120	100.0	100.0
D2: Educational Background	Bachelors	59	49.2	49.2
	Certificate	45	37.5	37.5
	Masters	14	11.7	11.7
	PhD	2	1.7	1.7
	Total	120	100.0	100.0
D3: Age	31 – 49	75	62.5	62.5
	Above 50	15	12.5	12.5
	Under 30	30	25.0	25.0
	Total	120	100.0	100.0
D4: Work Experiences	2 – 3	31	25.8	25.8
	4 years above	62	51.7	51.7
	Less than 1 year	27	22.5	22.5
	Total	120	100.0	100.0
D5: Division	Human Capital	52	43.3	43.3
	Non-Human Capital	68	56.7	56.7
	Total	120	100.0	100.0

Table 5. Demographics of Respondents, in Row Percentage

A total of 120 respondent questionnaires is collected for the research project which is shown in Table 5 from employees in healthcare services located in Petaling Jaya, Selangor. The table above shows the highest number of respondents are female employees with (56.7%) as compared to males with (43.4%). Based on the respondent's educational background, the bachelor holder is the highest respondent with (49.2%) followed by certificate (37.5%), masters (11.7%), and PhD (1.7%). Besides that, based on the respondent's age, the highest respondent age is between 31 – 49 years old with (62.5%), followed by under 30 years old with (25.0%), and above 50 years old with (12.5%). The highest working experience respondent comes with 4 years working experience of (51.7%) followed by 2 – 3 years with (25.8%), and (22.5%) less than 1 year of service. Most of the respondents were from the non-human capital division with (56.7%) and human capital (43.3%).

Based on the percentage and frequency on the table shown above, we can briefly analyse that the majority are female respondents employees employed in healthcare services as compared to male employees. An employee with minimum bachelor degree qualification being employed in the healthcare sector and mostly in the non-human capital division. Majority of the respondents are with 4 years of working experience. A non-human capital department in healthcare services include the Clinical, Administrative, Procurement, Finance, and Housekeeping departments. As a result, the data gathered will be based on the experiences and knowledge of employees working in healthcare services.

4.3 General Information

No	Statements	1	2	3	4	5
G1	Overall, my work experience in my organisation is satisfying and rewarding.	5.0	8.3	25.0	40.0	21.7
G2	I obtain the right amount of recognition and acknowledgement from my immediate superior.	2.5	6.7	25.8	40.0	25.0
G3	There is effective communication within my organisation.	4.2	8.3	25.8	39.2	22.5
G4	I feel challenged in my current position.	5.8	11.7	30.0	31.7	20.8
G5	Career advancement is possible here if an opportunity is given.	1.7	8.3	30.8	32.5	26.7
G6	I'm treated fairly at the company.	4.2	9.2	26.7	32.5	27.5
G7	I'm comfortable dealing with my manager on related issues and/or concerns.	2.5	10.8	16.7	38.3	31.7
G8	I'm part of the decision-making process within the organisation.	5.8	14.2	28.3	25.0	26.7
G9	My manager is a good coach/mentor.	5.8	9.2	22.5	30.8	31.7
G10	I'm fairly compensated for the work I do.	6.7	8.3	29.2	32.5	23.3
G11	I'm rewarded when I go above and beyond what is expected in my job.	6.7	8.3	32.5	30.8	21.7
G12	The company's total benefits program meets my needs.	6.7	11.7	33.3	31.7	16.7
G13	The company's benefits program is competitive with others in the industry.	4.2	14.2	31.7	30.8	19.2

*Note: 1: Strongly Disagree, 2: Disagree, 3: Neutral, 4: Agree, 5: Strongly Agree

Table 6. General Information, in Row Percentage

Table 6 above shows the results on general information obtained from employees of the healthcare sector on their experience, recognition, communication gap, opportunities, value, and benefits. Statement G1 (40.0%) indicates employees agree with the overall work experience in their organisation is satisfying and rewarding. In statement G2 (40.0%) indicates employees agree that they have obtained the right amount of recognition and acknowledgement from their immediate superior. This shows a positive working

environment practises in the healthcare sector. Besides that, in statement G3 (39.2%) of respondents agree there has been effective communication within their organisation.

In addition, in the statement of G4 (31.7%) of respondents agree that they feel challenged in their current position which could be related to the needs of the organisation due to essential services. However, in the statement G5 (32.5%) of respondents agree that career advancement is possible in their organisation if the opportunity is given to them to further upgrade their skills and knowledge. Fair treatment is seen given to an employee with most respondents agree in G6 with (32.5%) and employee seems to be comfortable dealing with their superior on related issues and/or concerns with G7 (38.3%). Employee certainly feels that they are not being part of the decision-making process within the organisation with a neutral statement of G8 (28.3%).

Moreover, in statements, G9 (30.8%) and G10 (32.5%) of respondents agree that their manager is a good coach/mentor and being fairly compensated for the work given. Last but not least, in statement G11 (32.4%), G12 (33.3%), G13 (31.7%) of respondents being neutral in rewards given when the employee goes beyond based on the expectation of job, the company total benefits program meets their needs, and the company benefits program is competitive with others in the industry.

As a result, the majority of the general information acquired from healthcare service employees believe that they are fairly represented by the management. Overall, to achieve the opportunity of having a positive working environment with an effective culture; support and development; potential leaders; innovating technology that is cost-effective and meets the needs; redesigning jobs and processes to achieve maximum effective use of expertise; and restoring trust in and among stakeholders (Cummings & Worley, 2008).

4.4. Descriptive Analysis

4.4.1 Poor Internal Communication

No	Statements	1	2	3	4	5
Challenges of Employee Resistance to Accept Change						
COM 1	Any changes in company's policies are well communicated within the organisation.	2.5	13.3	35.0	29.2	20.0
COM 2	How much effort does your direct manager makes to keep you informed?	5.0	10.0	27.5	33.3	24.2
COM 3	How would you rate your knowledge of the company goals?	3.3	8.3	30.0	34.2	24.2
COM 4	Do you care about the future of your organisation?	0.8	14.2	15.0	30.8	39.2
COM 5	Do you feel organisation listen to your concerns?	6.7	12.5	33.3	25.0	22.5

*Note: 1: Strongly Disagree, 2: Disagree, 3: Neutral, 4: Agree, 5: Strongly Agree

Table 7. Poor Internal Communication, in Row Percentage

Based on Table 7 above, shows the results from respondents based on the statement on challenges of employees resistance to accept changes. Poor internal communication is one of the variables and each contains five questions to each variable. In statement COM 1 (35.0%) of respondents have a neutral result on any change in company's policies are well communicated within the organisation, COM 2 (33.3%) of respondents have agreed that the direct manager keeps them informed, COM 3 (34.2%) of respondents agree on the knowledge they have towards the company goals, COM 4 (39.2%) of respondents agree that they care about the future of the organisation, and COM 5 (33.3%) of respondents has neutral feeling on the concerns being listened by the organisation.

As a result of the above table, 39.2% of employees strongly agree that caring about the future of the organisation is their main place of source of income. Therefore, the management to improve internal communication by enhancing a better communication platform within the organisation to avoid having poor internal communication.

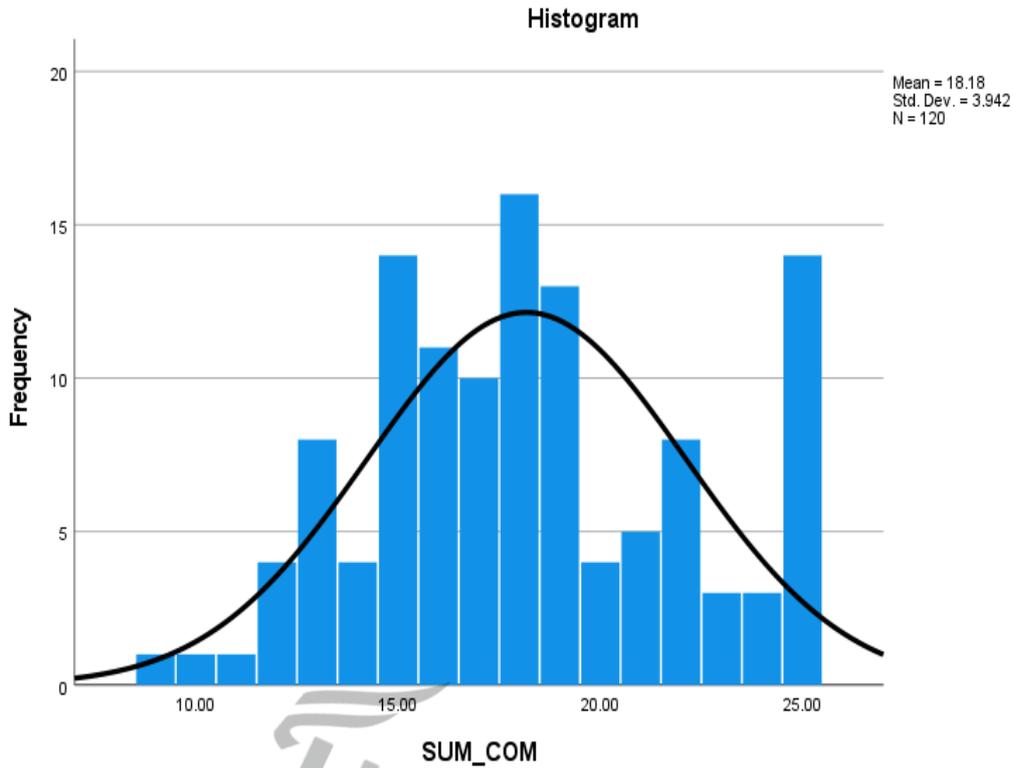


Figure 3. Distribution of Summation on Poor Internal Communication

Mean=18.18 Std. dev= 3.942

Figure 3 above shows the result of the distribution on the independent variables, poor internal communication. The mean score of poor internal communication is 18.18 and the standard deviation is 3.942. The skewness of the graph is 0.190 and Kurtosis is -0.655.

4.4.2 Lack of Management Skills

No	Statements	1	2	3	4	5
Challenges of Employee Resistance to Accept Change						
SKILLS 1	Employee are encouraged to voice up their opinion/idea in writing using bottom-top approaches.	4.2	10.0	25.8	35.0	25.0
SKILLS 2	Employees are encouraged to upskill or reskill themselves.	1.7	10.0	8.3	49.2	30.8
SKILLS 3	Do you feel comfortable in your manager's effectiveness?	2.5	14.2	20.0	44.2	19.2
SKILLS 4	The feedback I receive helps me to grow and develop.	0.8	7.5	15.0	40.8	35.8
SKILLS 5	Corporate governance is everyone's commitment.	1.7	6.7	21.7	25.0	45.0

*Note: 1: Strongly Disagree, 2: Disagree, 3: Neutral, 4: Agree, 5: Strongly Agree

Table 8. Lack of Management Skills, in Row Percentage.

Based on Table 8 above, it shows results from the respondents based on the statement on challenges of employees resistance to accept changes. Lack of management skills is one of the independent variables and each contains five questions to each variable. In statement SKILLS 1 (35.0%) of respondents has agreed that employee is encouraged to voice up their opinion/idea in writing using bottom-top approaches, SKILLS 2 (49.2%) of respondents has agreed that organisation encouraged to upskill or reskill by themselves, SKILLS 3 (44.2%) of respondents agree that comfortable in their manager effectiveness, SKILLS 4 (40.8%) of respondents agree that the feedback that they obtain from the management can help them to grow and develop, and SKILLS 5 (45.0%) of respondents has strongly agreed that corporate governance is everyone's commitment in the organisation.

As a consequence, 49.2% of respondents believed that employees should be encouraged to upskill and reskill in order to improve their abilities in a specific field of expertise, as well as reskilling in order to prepare them for a different career, according to the table above. In contrast, upskilling and reskilling would benefit both the company and the individual in terms of innovation, productivity, and internal mobility, allowing the organisation to retain its talent while also bringing in new skill sets.

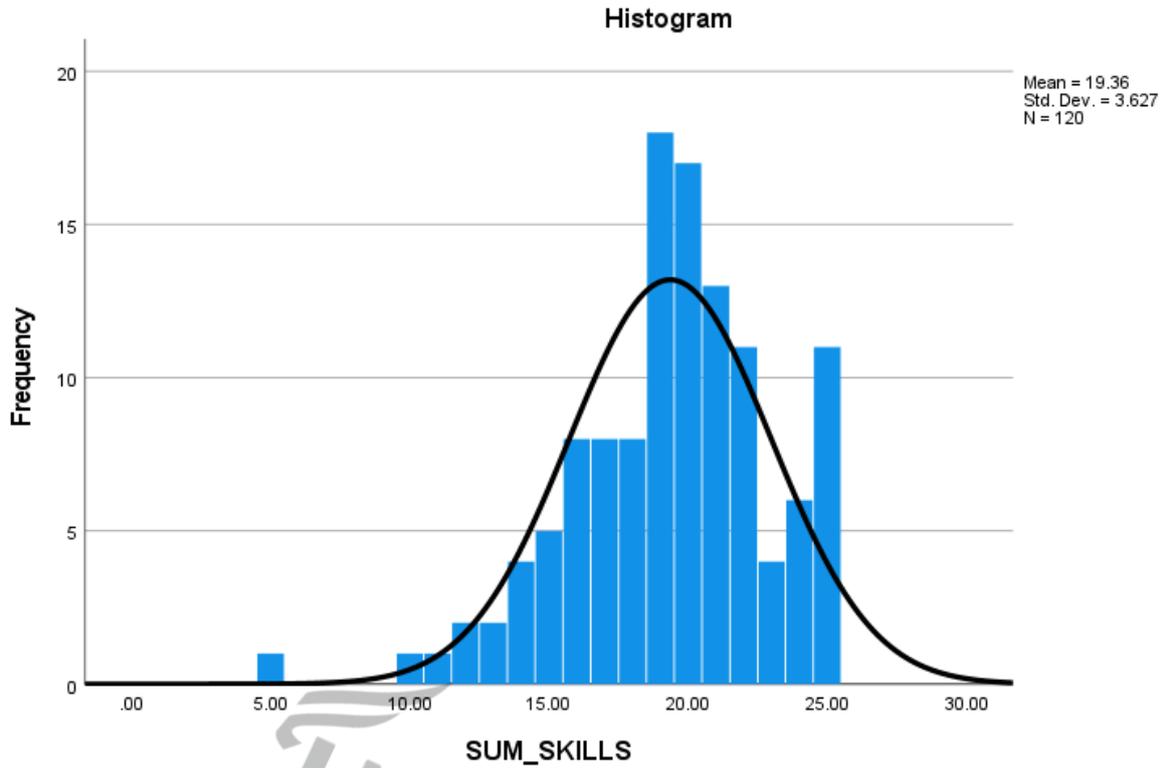


Figure 4. Distribution of Summation Lack of Management Skills

Mean=19.36 Std. dev= 3.627

Figure 4 above shows the result of the distribution on the independent variables, lack of management skills. The mean score of lack of management skills is 19.36 and the standard deviation is 3.627. The skewness of the graph is -0.734 and Kurtosis is 1.306.

4.4.3 Lack of Technology Skills and Exposure

No	Statements	1	2	3	4	5
Challenges of Employee Resistance to Accept Change						
TECH1	All employees are technology savvy.	5.0	13.3	35.8	27.5	18.3
TECH2	Any changes in technology are well communicated and trained within organisation.	2.5	10.8	34.2	28.3	24.2
TECH3	Do you feel the impact of technology change effect the upskilling and skill mismatch?	2.5	2.5	26.7	46.7	21.7
TECH4	Several of my skills will become outdated in the next 5 years	5.8	3.3	17.5	45.8	27.5
TECH5	With constant updates in technology will effect the level of productivity?	0.0	0.8	19.2	42.5	37.5

*Note: 1: Strongly Disagree, 2: Disagree, 3: Neutral, 4: Agree, 5: Strongly Agree

Table 9. Lack of Technology Skills and Exposure, in Row Percentage

Based on Table 9 above, it shows results from the respondents based on the statement on challenges of employees resistance to accept changes. Lack of technology skills and exposure is one of the independent variables and each contains five questions to each variable. In statement TECH1 (35.8%) of respondents being neutral that all employees are technology savvy, TECH2 (34.2%) of respondents being neutral that any changes in technology are well communicated and trained within the organisation, TECH3 (46.7%) of respondents agree that they feel the impact of technology change affect the upskilling and skill mismatch, TECH4 (45.8%) of respondents agree that several skills obtain may become outdated in the next 5 years, and TECH5 (42.5%) of respondents have agreed that with constant updates in technology will affect the level of productivity of an employee in the organisation.

According to the table above, 46.7 % believe that technological change will have an impact on upskilling and skill mismatch. As a result, management should concentrate on how to improve its core competencies in order to add long-term value to the organisation and maintain a competitive edge. Furthermore, understanding each employee's skill gap allows management to decide on skills needed by employees based on their current knowledge, as well as how employees will be involved in new technology to perform efficiently and avoid

skill mismatch. Managers must communicate effectively during the upskilling stage to ensure that employees understand their needs and desires (Brush, 2020).

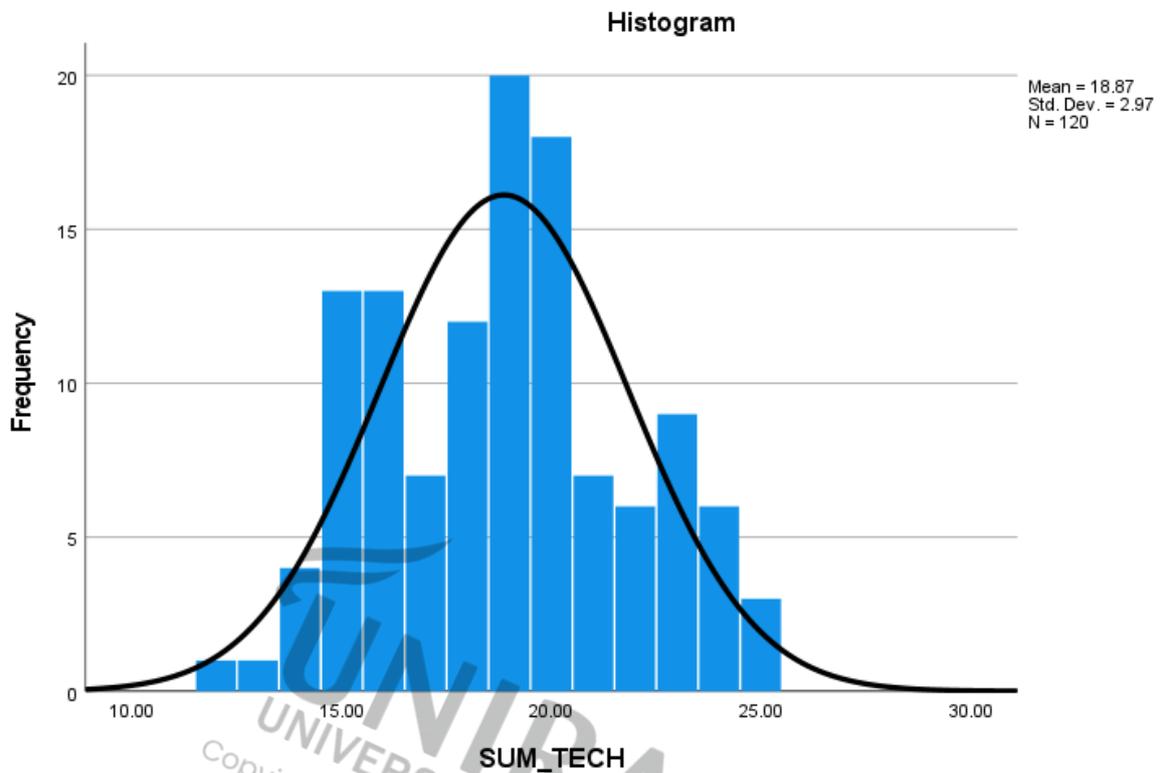


Figure 5. Distribution of Summation Lack of Technology Skills and Exposure

Mean=18.87 Std. dev= 2.97

Figure 5 above shows the result of the distribution on the independent variables, lack of technology skills and exposure. The mean score of lack of technology skills and exposure is 18.87 and the standard deviation is 2.97. The skewness of the graph is 0.104 and Kurtosis is -0.656.

4.4.4 Strategies Implemented by Management on Communication Gap and Employee Motivation Level to Overcome Employee Resistance to Accept Changes

No	Statements	1	2	3	4	5
STRATEGIE 1	Shall conduct regular meetings to obtain employee's opinion or idea.	0.8	3.3	21.7	35.0	39.2
STRATEGIE 2	Consistently emphasise on chain in command.	3.3	0.8	19.2	37.5	39.2
STRATEGIE 3	Introduce Independent Departments and empowerment to Team Leaders.	0.8	3.3	16.7	38.3	40.8
STRATEGIE 4	Minimize unnecessary interference from Top Management.	5.0	2.5	17.5	40.0	35.0
STRATEGIE 5	Distinguish skills and experience among employees.	0.8	1.7	25.8	35.8	35.8

*Note: 1: Strongly Disagree, 2: Disagree, 3: Neutral, 4: Agree, 5: Strongly Agree

Table 10. Strategies Implemented by Management, in Row Percentage

Based on Table 10 above, it shows results from the respondents based on the statement on strategies implemented by management in communication gap and employee motivation level to overcome employee resistance to accept changes. The strategies implemented by management is one of the dependant variables and each contains five questions to each variable. In the statement of STRATEGIE 1 (39.2%) of respondents have strongly agreed that an organisation shall conduct a regular meeting to obtain employee's opinion or idea, STRATEGIE 2 (39.2%) of respondents has strongly agreed that a consistent chain of command should be emphasised, STRATEGIE 3 (40.8%) of respondents strongly agree that the organisation to introduce independent department and empowerment to team leaders, STRATEGIE 4 (40.0%) of respondents agree that to minimize unnecessary interference from top management, and STRATEGIE 5 (35.8%) of respondents has strongly agreed to distinguish skills and experience among employee in the organisation.

As a result, according to the table above, the majority of respondents strongly agree that management should establish strategic objectives for the organisation in order for it to be in line with the goal settings. Conduct internal and external strategic position analyses to better understand the strengths and weaknesses in people skills, technological resources, financial position, and microenvironment. Furthermore, to evaluate and select the best option

that fits the organisational culture and organisational strengths in order to further improve the internal and external environment (Graetz, Rimmer, Smith, & Lawrence, 2011).

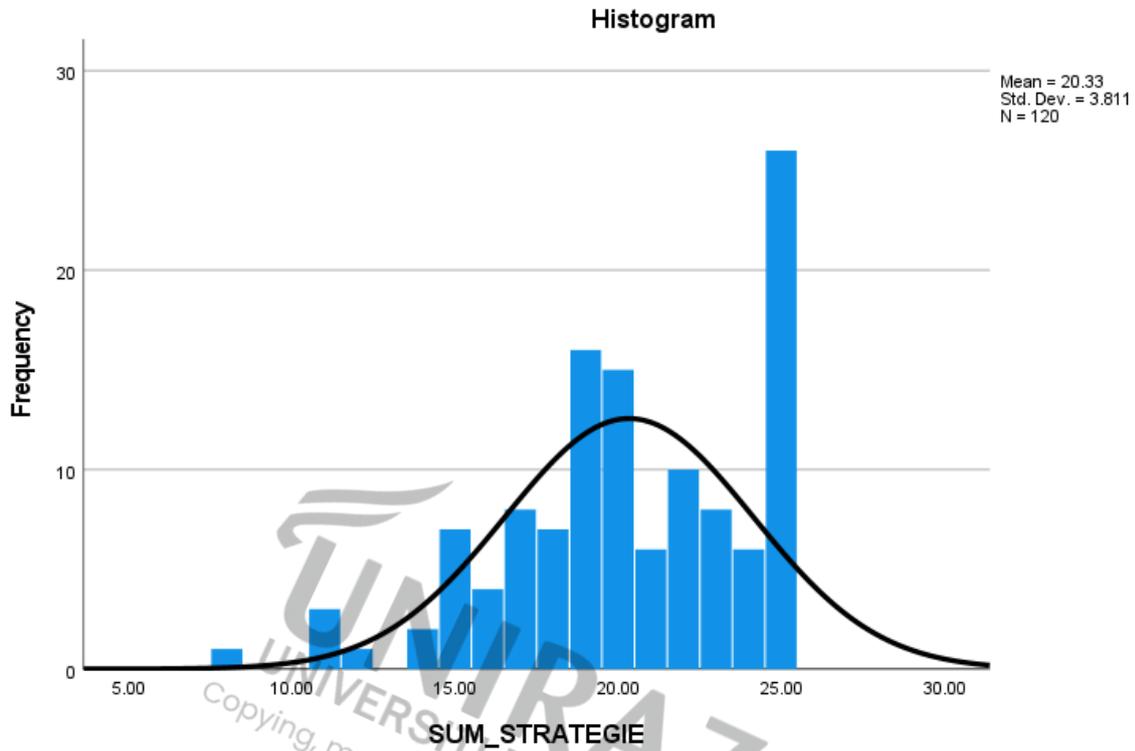


Figure 6. Distribution of Summation Strategies Implemented by Management

Mean=20.33 Std. dev= 3.811

Figure 6 above shows the result of the distribution on the dependent variables, strategies implemented by management on communication gap and employee motivation level to overcome employee resistance to accept changes. The mean score of strategies implemented by management is 20.33 and the standard deviation is 3.811. The skewness of the graph is -0.629 and Kurtosis is 0.113.

4.4.5 Action Plan to Overcome Employee Resistance to Accept Change

No	Statements	1	2	3	4	5
ACTION 1	Involve all the employee or employee engagement in the change process.	0.8	6.7	17.5	34.2	40.8
ACTION 2	Management to enlighten on the change management.	0.0	3.3	18.3	34.2	44.2
ACTION 3	Management to elucidate the company expectation.	0.8	1.7	20.0	39.2	38.3
ACTION 4	Promoting departmental communication.	0.0	3.3	19.2	33.3	44.2
ACTION 5	Employee to demonstrate technology skills to convey opinions or ideas.	1.7	2.5	17.5	36.7	41.7

Note: 1: Strongly Disagree, 2: Disagree, 3: Neutral, 4: Agree, 5: Strongly Agree

Table 11. Action Plan to Overcome Employee Resistance to Accept Change, in Row Percentage.

Based on Table 11 above, it shows results from the respondents based on the statement on the action plan to overcome employee resistance to accept changes. The action plan to overcome employee resistance to accept change is one of the dependant variables and each contains five questions to each variable. In statement ACTION 1 (40.8%) of respondents have strongly agreed that an organisation should involve all the employee or employee engagement in the change process, ACTION 2 (44.2%) of respondents has strongly agreed that management to enlighten on the change management, ACTION 3 (39.2%) of respondents agree that the management to elucidate the company expectation, ACTION 4 (44.2%) of respondents strongly agree in promoting departmental communication will lead to better transition, and ACTION 5 (41.7%) of respondents has strongly agreed for the employee to demonstrate technology skills to convey opinion and ideas for the betterment of the organisation.

According to the data in the table above, the majority of respondents strongly agree that management should implement an action plan strategy to overcome employee resistance to change. Employees who are unable to accept changes can be helped by providing support and empathy. Employees want more attention, and their perceptions make them feel less defensive and more willing to admit their doubts. This ultimately provides

positive information on their resistance and also aids in the resolution of problems and the removal of barriers to change (Cummings & Worley, 2008).

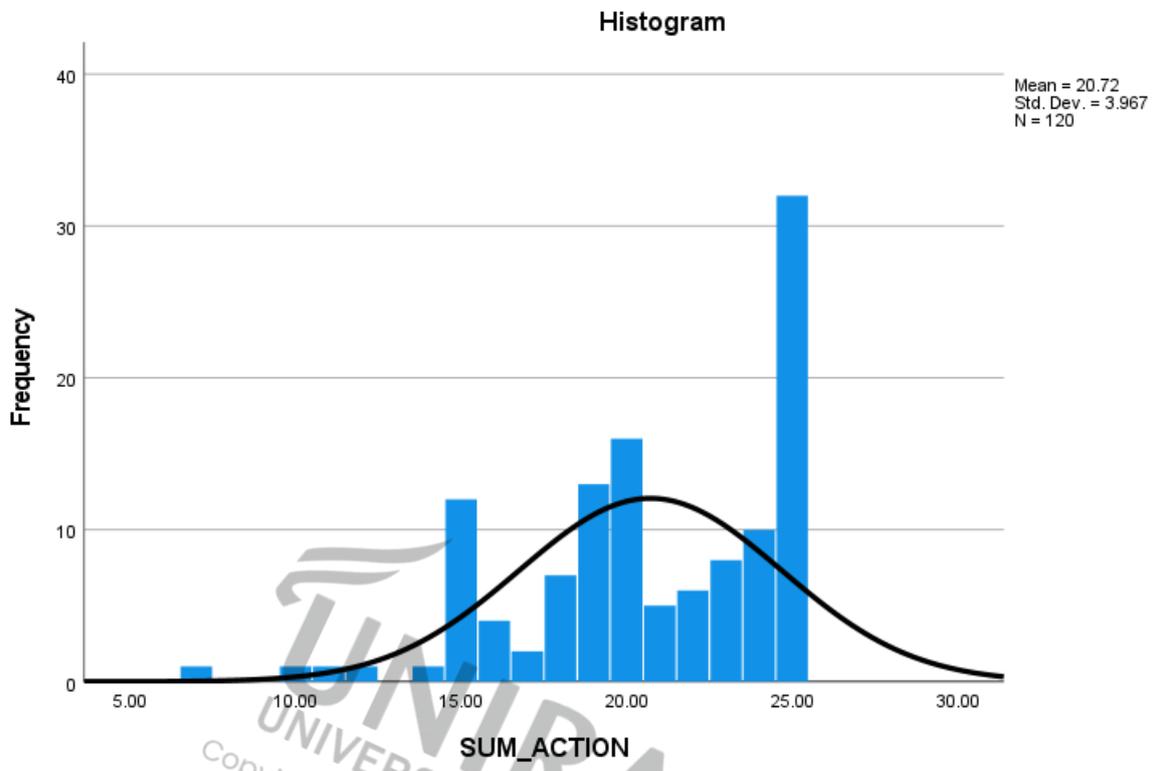


Figure 7. Distribution of Summation Action Plan to Overcome Employee Resistance to Accept Change

Mean=20.72 Std. dev= 3.967

Figure 7 above shows the result of distribution on the dependent variables, action plan to overcome resistance to accept change. The mean score of the action plan to overcome resistance is 20.72 and the standard deviation is 3.967. The skewness of the graph is -0.780 and Kurtosis is 0.248.

4.5 Pearson-Moment Correlation Coefficient Test

Correlations

		SUM_COM	SUM_SKILLS	SUM_TECH	SUM_STRATEGIE	SUM_ACTION
SUM_COM	Pearson Correlation	1				
SUM_SKILLS	Pearson Correlation	.645**	1			
SUM_TECH	Pearson Correlation	.397**	.299**	1		
SUM_STRATEGIE	Pearson Correlation	.342**	.486**	.330**	1	
SUM_ACTION	Pearson Correlation	.389**	.473**	.305**	.770**	1

** . Correlation is significant at the 0.01 level (2-tailed).

Note: ** = $p \leq 0.01$

Table 12. Pearson-Moment Correlation Coefficient Test

The use of correlation is mainly to measure an association between the variables. The data obtained in correlation can be changed in the magnitude of 1 variable to another variable and the results can be the same (positive correlation) or in the opposite (negative correlation) direction. This correlation term is most often used in the context of a linear relationship between 2 continuous variables and expressed as Pearson-moment correlation. The correlation coefficient is scaled from -1 to +1 and 0 indicated there is no linear and this where the relationship between the variables get stronger and ultimately approaches a straight line (Pearson correlation) or a constantly increasing or decreasing curve (Spearman correlation) as the coefficient approaches an absolute value of 1 (Schober, Boer, & Schwarte, 2018).

Based on Table 12 above, the Pearson correlation between the independent variable and the dependant variable shows positive significant results that have been studied for this research project. There is a significant positive correlation between the summation communication (0.342), summation skills (0.486), and summation technology (0.330) with summation of strategic. As result, it shows the higher no of poor internal communication, lack of management skills, and lack of technology skills and exposure leads to management positively doing its strategic planning in improving employees communication gap and motivation level in order to reduce their resistance to accept changes in the healthcare services located in Petaling Jaya, Selangor. The higher the internal communication, the higher the management skills and the higher the technology skills and exposure will have a positive correlation on the company strategic planning.

4.6 Pearson-Moment Correlation Coefficient Test Findings

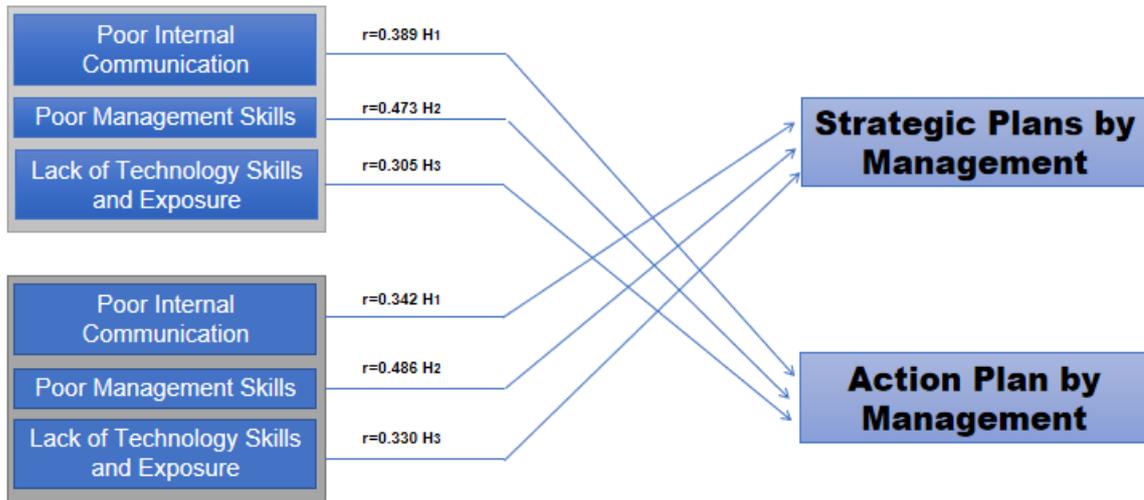


Figure 8. Pearson-Moment Correlation Coefficient Test Findings

Based on Figure 8 shown above is the illustration of the significant correlation between the independent and dependent variables in this study. All the independent variables are found to have a positive significant correlation with the dependent variable (employee resistance to accept changes). Both the dependent variable are arranged with poor internal communication, lack of management skills, and lack of technology skills and exposure for the management that have found strategic and action plans in mitigating employees from resistance to accept changes in healthcare services located in Petaling Jaya, Selangor. As listed in the above diagram, we found that management has the initiatives in mitigating management skills by encouraging the employee to voice their opinion, employees are encouraged to upskill or reskills themselves, employees feel more comfortable communicating with their direct superior, management feedback helps the employee to grow and develop, and corporate governance certainly being well practised in the organisation.

4.7 One Way ANOVA

A one-way ANOVA is designed to measure the type of statistical test which compares the variance in the group that considered only one independent variable or factor. It is also a hypothesis-based test that aims to evaluate numerous theories on the data collected (Mackenzie, 2018). Below are the selected age group explanation on using one-way ANOVA

ANOVA					
		Sum of Squares	df	Mean Square	F
SUM_COM	Between Groups	95.238	2	47.619	3.176
	Within Groups	1754.087	117	14.992	
	Total	1849.325	119		
SUM_SKILLS	Between Groups	13.638	2	6.819	.514
	Within Groups	1551.953	117	13.265	
	Total	1565.592	119		
SUM_TECH	Between Groups	19.780	2	9.890	1.123
	Within Groups	1030.087	117	8.804	
	Total	1049.867	119		
SUM_STRATEGIE	Between Groups	17.280	2	8.640	.591
	Within Groups	1711.387	117	14.627	
	Total	1728.667	119		
SUM_ACTION	Between Groups	22.787	2	11.393	.721
	Within Groups	1849.580	117	15.808	
	Total	1872.367	119		

test findings based on my primary data and previous literature reviews.

Table 13. ANOVA Testing (Age Group)

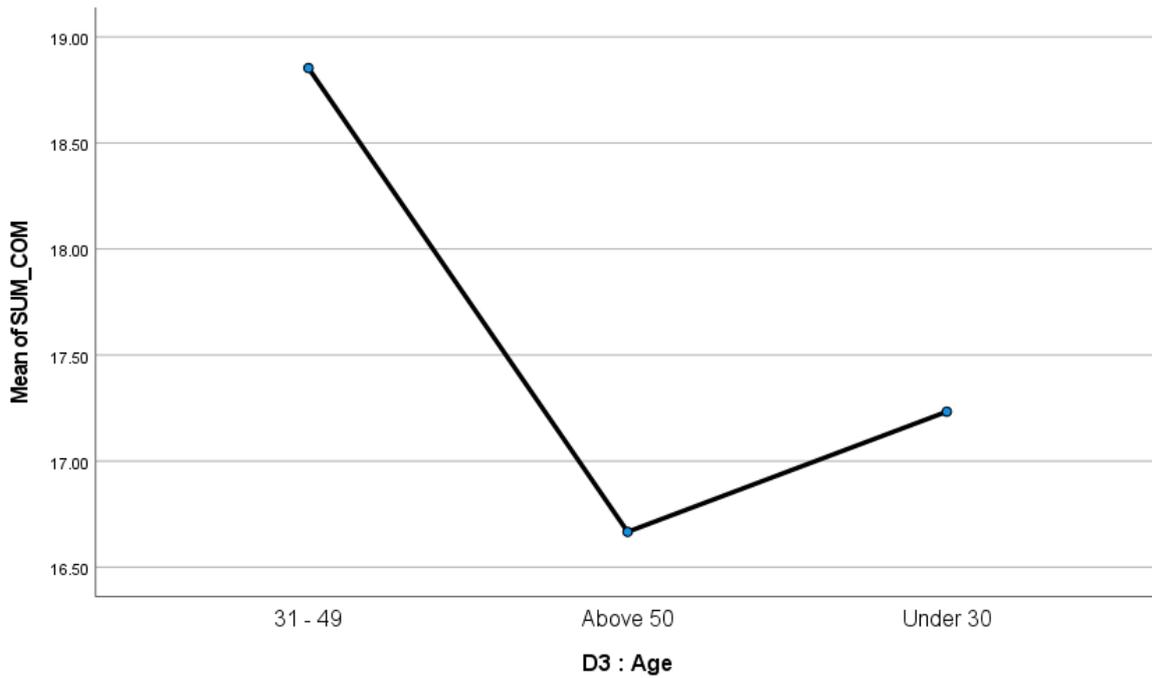


Figure 9. One-way ANOVA Summation Poor Internal Communication (D3-Age)

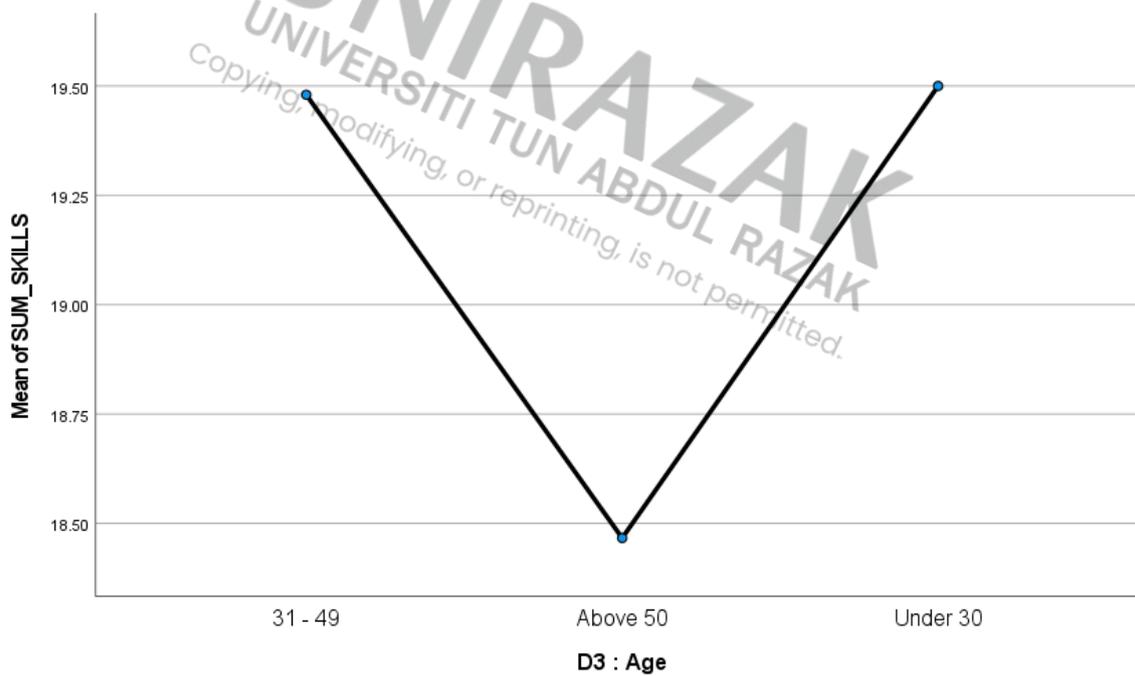


Figure 10. One-way ANOVA Summation Poor Management Skills (D3-Age)

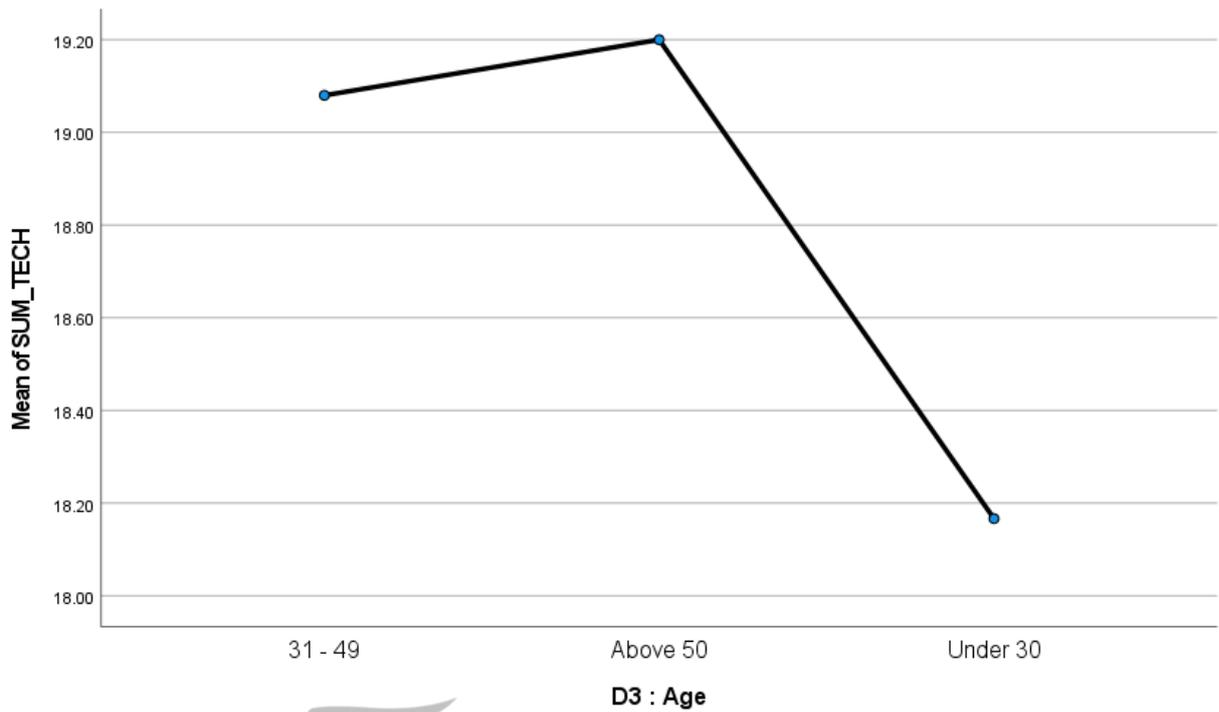


Figure 11. One-way ANOVA Summation Lack of Technology Skills and Exposure (D3-Age)

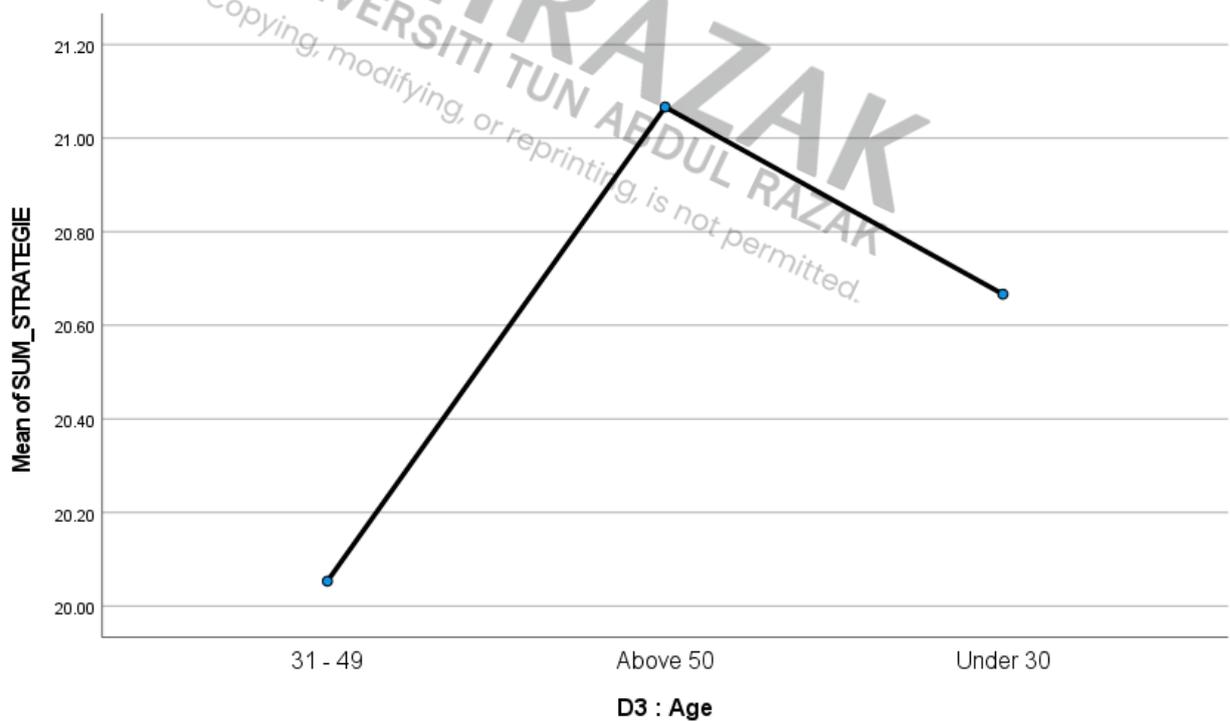


Figure 12. One-way ANOVA Summation Strategic Plans by Management (D3-Age)

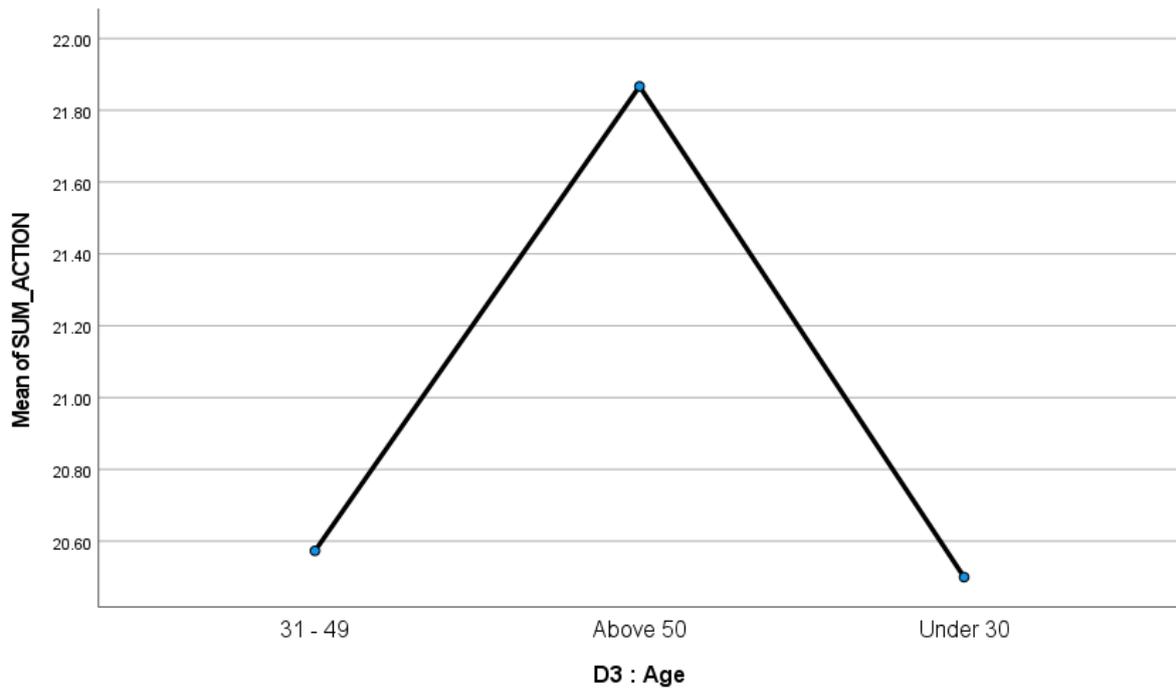


Figure 13. One-way ANOVA Summation Action Plan Mitigating Resistance to Accept Changes (D3-Age)

Above is the finding as shown in Figure 9 (SUM_COM), Figure 10 (SUM_SKILLS), Figure 11 (SUM_TECH), Figure 12 (SUM_STRATEGIE), & Figure 13 (SUM_ACTION). As we can see in Figure 20, the age group between under 30 and 31-49 years old are having the barriers in poor communication falling which they are more resistance to accept changes. Based on the previous findings, according to (Anna, 2021), a lack of internal communication can affect employee low morale. Ineffective communication can create misunderstanding, lack of opportunities, a conflict between management and employee, no proper channel of internal communication, and overall employees will feel defeated. In this condition, the employee will tend to seek better opportunities in other healthcare services.

As result, the younger generation seeks more attention as compared to the age group above 50 as they feel that communication platforms are vital moving forward. In the event, if they feel uncomfortable or have backdated communication platform, they seek a better opportunity for their career advancement. Moreover, it matches my previous finding that effective communication brings success went the communication that flowed through the right communication platform has been received clearly and understood well by the receiver (Dexter, 2013).

Besides that, Figure 10 (SUM_SKILLS) shows that the group aged under 30 and 31-49 years old seek more attention in the management skills as compared to age above 50 years old. As result, the organisation needs to provide better management skills in handling the young age group as compared to the older age group. This matches my previous findings whereby employee readiness for change includes personal knowledge, skill and exposure, self-efficacy, analytic competence and tools for implementation. Similarly, the organisational level includes awareness, culture, and continuous learning (Vaishnavi, Suresh, & Dutta, 2019).

In addition, lack of management skills will have a negative impact in the event the healthcare organisation failed to take a proactive action plan in mitigating employee resistance to accept change. The healthcare industry is the most essential industry to serve the nations, failing to structure their organisation will lead to losing good employees. Besides that, the lack of management skills will also affect recognizing the stress and the skills gap of an employee. Being a healthcare service provider, the first and most important is the patients care is of utmost vital failing which will impact on the management structuring in the process of daily operations.

Moreover, in Figure 11 (SUM_TECH), it is shown that the older age seeks more attention towards technology skills and exposure. As for the age group below 30 and 31-49 years, less attention is needed in the technology skills and exposure. Based on previous findings, the older employees may perceive adaption and change to be difficult due to technology anxiety growing with age and usually having less confidence with the knowledge embedded in them as compared to the younger generation (Soja & Soja, 2020).

Providing adequate training and education is vital for employment and professionals in healthcare services as being a professional often juggle a busy schedule and may not have time to learn the new technology. Ultimately, lack of training and exposure to the new technology will have encounter many errors. Moreover, it matches with my previous findings that the older age employee will feel anxiety, stress, confusion, and many other emotions went they know something is going to change and that could turn into barriers to change in healthcare organisations (Ogbe & Crolley, 2021).

Besides that, Figure 12 (SUM_STRATEGIE) and Figure 13 (SUM_ACTION) are the dependent variables that show that the management needs to provide more attention to the

employee above 50 years old as compared to under 30 and 31-49 years old. The older employees are resistance to accept changes in healthcare services located in Petaling Jaya, Selangor. The older employee seeks better engagement with management in terms of their opinion and idea, emphasise chain of command, introduce an independent department and empower team leaders, minimize unnecessary interference from top management and distinguish skills and experience among employees.

In comparison to my previous findings, the perceptions of the following barriers among the youngest and oldest respondent groups, the perceptions of reluctance, fear, acceptance, management staff, age, and ICT expertise appear to increase with respondent age. This is evident in both respondent responses and the frequency with which barriers are reported. Older employees' perspectives, particularly those related to negative attitudes, appear to be more developed than younger respondents' pronouncements, which sometimes just mentioned the problem without providing any explanation (Soja & Soja, 2020).

The management to have an action plan in mitigating older employee resistance to accept changes with evolving them in the change process, to enlighten on the change management, promote departmental communication, elucidate the organisation expectation, and encourage employees to demonstrate technology skills to convey opinions or ideas to process a smooth transition. Based on my previous findings, employee resistance to change is one of the main responsible for a lack of employee engagement, which leads to lower employee performance and a lack of trust in the management agenda. (Jeffrey, 2016). According to Erwin & Garman, (2010), resistance to change is found in employees who are having anti-change behaviour that passively and explicitly looking forward to any changes. Therefore, management needs to emphasise mitigation of employee resistance to accept changes in healthcare services to remain sustainable in this competitive market.

4.8 Multiple Regression Test

Coefficients

		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	6.776	2.223		3.048	.003
	SUM_COM	-.023	.104	-.024	-.220	.826
	SUM_SKILLS	.462	.109	.439	4.236	<.001
	SUM_TECH	.267	.111	.208	2.410	.018

a. Dependent Variable: SUM_STRATEGIE

R square = 0.274, df = 3; F = 14.596; p = 0.001

Table 14. Multiple Regression Model of (Sum_Strategie) with Independent Variables

The F statistic for the overall goodness of fit of the model is 14.596, which is significant at $\alpha = 0.001$. After excluding the non-significant variables, the final regression model produced by enter method for management strategies plan is:

$$\text{Management Strategies} = 6.776 + 0.462 \text{ Skills} + 0.267 \text{ Technology}$$

This model explains 27% of the variance in management strategies. This indicates that 27% of the dependent variable (management strategies) was explained by the linear combination of the two-predictor variables. Among the two-predictor variables, poor management skills are found to contribute more significantly towards management strategies. Of the three predictor variables, two variables have shown a positive relationship (skills and technology) with management strategies. It can be explained by the more skills and technology barriers an employee is facing in the organisation, the higher tendency the management implement to meet the needs of the employees. Besides, the better the management skills they have the lower employee resistance to accept changes in healthcare services located in Petaling Jaya, Selangor.

Coefficients

	Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	7.283	2.341		3.112	.002
	SUM_COM	.088	.110	.087	.798	.427
	SUM_SKILLS	.403	.115	.369	3.513	<.001
	SUM_TECH	.214	.117	.160	1.834	.069

a. Dependent Variable: SUM_ACTION

R square = 0.257, df = 3; F = 13.368; p = 0.001

Table 15. Multiple Regression Model of (Sum_Action) with Independent Variables

The F statistic for the overall goodness of fit of the model is 13.368, which is significant at $\alpha = 0.001$. After excluding the non-significant variables, the final regression model produced by enter method for the action plan is:

$$\text{Action Plan} = 7.283 + 0.088 \text{ Communication} + 0.403 \text{ Skills} + 0.214 \text{ Technology}$$

This model explains 25% of the variance in the action plan. This indicates that 25% of the dependent variable (action plan) was explained by the linear combination of the three-predictor variables. Among the three-predictor variables, poor management skills are found to contribute more significantly towards the action plan. All of the three predictor variables have shown a positive relationship (internal communication, management skills, and technology skills) with the action plan. It can be explained by the more internal communication, management skills, and technology barriers an employee is facing in the organisation, the higher tendency the management will execute action plan mitigation employee resistance to accept changes. Besides, the better the internal communication, management skills, and technology skills and exposure they have the lower employee resistance to accept changes in healthcare services located in Petaling Jaya, Selangor.

4.9 Summary of Chapter 4

Chapter four presents the data and findings of the online survey questionnaire using (IBM SPSS Statistics Version 28.0) to be tabulated and analyses the data findings for this research project. In section 4.1, the introduction of the chapter. Whereas section 4.2, discusses the summary of data collection followed by subsection 4.2.1 respondent data and the 4.2.2 demographic of the respondent data. Besides that section 4.3, discusses the general information of the respondents. In section 4.4, discusses on descriptive analysis of the respondents on frequency findings with the subsection of the independent variables of 4.4.1 poor internal communication, 4.4.2 lack of management skills, 4.4.3 lack of technology skills and exposure together with the dependent variable of 4.4.4 management strategies and 4.4.5 action plan. In section 4.5, the Pearson-moment correlation coefficient test is tabulated. In section 4.6, Pearson-moment correlation coefficient finding. In section 4.7, one-way ANOVA and in section 4.8 is the multiple regression test between the two variables being presented on the final findings of this research project on which variable is vital for the management in mitigating employee resistance to accept changes in healthcare services located in Petaling Jaya, Selangor.

UNIRAZAK
UNIVERSITI TUN ABDUL RAZAK
Copying, modifying, or reprinting, is not permitted.

CHAPTER 5

CONCLUSION, RECOMMENDATIONS, AND RESEARCH LIMITATIONS

In this chapter, it presents the summary, recommendations, and research limitation. The results of the research study have been illustrated below with findings.

5.1 Conclusion

In this research, it can be concluded that there is strong agreement from management factor the most important key driver to resistance to accept changes in healthcare services located in Petaling Jaya, Selangor as the change agent lacking the required skills to adopt the new changes and lacking necessary information, skills, and adequate training lead to employee resistance to accept change when the organisation wants to implement any changes in the healthcare services. Besides that, the results have shown that all the three variables tested using different tests have a positive significant correlation with the dependent variable on employee resistance to accept changes in healthcare services, located in Petaling Jaya, Selangor. Below are the explanation of the research objectives and research questions of this study.

Answering Research Objective 1: To identify the challenges faced by employees to accept organisational changes with regards to healthcare services located in Petaling Jaya.

Based on the descriptive analysis, table 7 shows challenges faced by employees with poor internal communication in the organisation. As a result, employees neutrally accept on any changes in company policies are well communicated within the organisation. Besides that, employees agreed that their direct manager takes effort in keeping them informed and they have positive knowledge towards the company goals. The employees are positively concerned about the future of their company goals. However, they neutrally accept that the organisation listens to their concerns. Thus, the organisation should look forward to a mechanism platform to improve on the internal communication to effectively listen to their opinion/ideas of an employee to mitigate employee resistance to accept changes.

Based on the descriptive analysis, table 8 shows challenges faced by employees with a lack of management skills in the organisation. As a result, employees positively agreed that they are encouraged to voice up their opinion/idea in writing using a bottom-top approach, encourage to upskill or reskill themselves, comfortable with their manager effectiveness, and the feedback they receive helps them to grow and develop. Nevertheless, they strongly agreed that corporate governance is everyone's commitment. As a result, management should look forward to providing employees with training and development skills in order to keep them productive and enthusiastic about any changes implemented by the company.

Based on the descriptive analysis, table 9 shown challenges faced by employees with a lack of technology skills and exposure in the organisation. As a result, employees neutrally accept all employees in the organisation are technology savvy, and any changes in technology are well communicated and trained within the organisation. However, the employee agreed that they feel the impact of the technology change and will affect their upskilling and skills mismatch, several of their skills will be outdated in the next 5 years, and the constant update in technology will affect their level of production. Thus, based on these employees are positively affected by the lack of training and development skills. Moreover, they seem to be afraid of the constant update in technology that will affect their current skills. The management to tackle the issues at the beginning by engaging the employee in the process of the implementation and being transparent on the workflow process to mitigate the resistance to accept changes in the organisation.

Answering Research Objective 2: To understand the strategies that should be implemented by the management to improve their communication gap and employees' motivation level in order to reduce their resistance to accepting changes?

Based on the descriptive analysis, table 10 shows strategies that should be implemented by the management to improve their communication gap and employees' motivation level in order to reduce their resistance to accepting changes. As a result, employees have strongly agreed that the organisation shall conduct regular meetings to obtain employees opinions/ideas, consistently emphasise a chain of command, introduce independent departments, empower the team leaders, and distinguish skills and experience among employees. In addition, the employee agreed that the management should minimize the unnecessary interference from top management.

Moreover, with the multiple regression test performed as per table 14, is shown that there is 27% variance in the management strategies which explains by the linear combination of two-predictor variables. Among the two-predictor variables, poor management skills are found to contribute more significantly towards management strategies. Of the three predictor variables, two variables have shown a positive relationship (skills and technology) with management strategies. Thus, this explains that the management should emphasise the improvement of its management skills in nurturing employees with training and development skills, empowering team leaders, and creating more engagement and collaboration within the organisation to improve the communication gap and motivate employees to reduce its resistance to accepting changes.

Answering Research Objective 3: To provide appropriate action plans are required in mitigating employee resistance to accept the changes.

Based on the descriptive analysis, table 11 shows the provide appropriate action plans are required in mitigating employee resistance to accept the changes. As a result, employees strongly agreed that the organisation should involve all the employee or employee engagement in the change process, management to enlighten on the change management, promoting departmental communication, and provide a chance to the employee to demonstrate technology skills to convey opinion/idea. Besides that, employees agree that management elucidates the company expectation.

Moreover, with the multiple regression test performed as per table 15, it is shown that 25% of the variance in the action plan explains the linear combination of the three-predictor variables. Among the three-predictor variables, poor management skills are found to contribute more significantly towards the action plan. All of the three predictor variables have shown a positive relationship (internal communication, management skills, and technology skills) with the action plan. Thus, this explains that the management should take a proactive action plan in mitigating employees in resistance to accept changes by creating awareness on the changes, collaboration to understand change better, a commitment of an employee towards the change, and action plan of the feedback of the transition.

5.2 Recommendation

Changes in healthcare practice have an important influence on organisational performance. There is a close relationship between internal communication, management skills, technology skills, and organisational performance. In addition, changes in healthcare happens often to remain competitive to generate a vast economic potential to be able to survive in the short term and action plans for the long term. To achieve this, an organisation must harness the forces driving transformation and use them to its advantage. Ultimately, change in healthcare services necessitates gradual enhancements to current organisational capabilities, increased empowerment of change agents, and constant support for leadership roles (Al-Abri, 2007).

Thus, the following recommendations are put forward for further transparency. An organisation needs to take initiatives steps to avoid such situations, poor internal communication, lack of management skills, and lack of technology skills and exposure. The organisation can be more specific about the changes and explain how the change will benefit them globally such as better career advancement and opportunities. As such leaders and managers should maintain a positive working environment and keep the employees motivated and engage them in collaboration with team members to be more productive and fearless on any changes implemented by the organisation.

In addition, to be able to maintain its stability, and by seeking consensus, an organisation can meet resistance successfully if they provide feedback, communicate effectively, motivate, and provide appropriate training and development. The management will receive positive feedback from the employee towards their management and will help the employees to overcome their fears in any organisational changes.

With regards to an action plan, an organisation to provide education and communication to employees to avoid any misunderstanding. Secondly, to get employees to participate and be involved in the change process by giving opinions/ideas. Thirdly, management to facilitate and support the employee with cutbacks and lost opportunities to motivate them on the change process. Moreover, a certain employee will simply not adapt to change and perhaps have a vested interest in the change process. By having a negotiation and agreement with the employee on better position within the organisation to avoid further

disruption on the transition process. Besides that, manipulation, and co-optation process to be taken if needed for the change process and lastly by explicit and implicit coercion action to be taken in the event employee refuse to adopt or comply with the change in the organisation (Altadonna, 2020).

Last but not least, integrating employees in the change process through participation and involvement is one of the most successful ways for overcoming resistance. Participation can help to produce new ideas, a wider range of knowledge, and high-quality improvements, as well as overcome resistance to their implementation. Employees can also spot potential stumbling blocks and roadblocks to implementation. Team members' interests and needs are more likely to be considered during the intervention if they are involved in the planning process. As a result, participants will be committed to making the changes since it is in their best interests and will meet their requirements. Furthermore, for those who have strong needs for involvement, the act of participating can be motivating in and of itself, leading to higher effort to make the changes work (Cummings & Worley, 2008).

5.3 Research Limitations

The study has been designed in a structured manner by streamlining the importance of this project. The goal of this study is to examine and evaluate the factors that influence employee resistance to accept changes in healthcare services using target samples. The trustworthiness of this study is entirely reliant on the respondents' integrity and memory in providing the necessary information in their best interests. The findings of this study should not be generalised because it only includes a small number of healthcare services in Petaling Jaya, Selangor, and the results obtained may be unique to this targeted sample. This study's limitations include time and cost constraints. A set of questionnaires was developed to evaluate employees' perspectives and barriers to change in healthcare services. The interpretation of individual data and the total number of 120 respondent details entered (IBM SPSS Statistics 28.0) in stages will be evaluated on a group basis.

REFERENCES

- Ogbe, A., & Crolley, F. (2021). *Understanding & Addressing Resistance to Change in Healthcare Organizations*. Retrieved from Airiodion Global Services (AGS): <https://www.airiodion.com/barriers-to-change-in-healthcare/>
- Al-Abri, R. (2007). Managing Change in Healthcare. *Oman Medical Journal*, 9-10.
- Altadonna, N. (2020, July 28). *Resistance to Change: How to Overcome Employee Pushback*. Retrieved from apty: <https://www.apty.io/blog/how-to-overcome-employee-pushback>
- Amarantou, V., Chatzoglou, P. D., Chatzoudes, D., & Kazakopoulou, S. (2016, January). Factors affecting “resistance to change”: an explanatory study conducted in the healthcare sector. *Strategic Innovative Marketing*. Retrieved from ResearchGate: https://www.researchgate.net/publication/318948084_Factors_affecting_resistance_to_change_an_explanatory_study_conducted_in_the_healthcare_sector
- Anders, C., & Cassidy, A. (2014). Effective organizational change in healthcare: Exploring the contribution of empowered users and workers. *International Journal of Healthcare Management*, 132-151.
- Anna , M. H. (2021). *7 Problems Good Communicators Are Able to Avoid*. Retrieved from Fairygodboss: <https://fairygodboss.com/career-topics/lack-of-communication#>
- Brush, K. (2020, February). *Whatis.com*. Retrieved from TechTarget Network: <https://whatis.techtarget.com/definition/upskilling>
- Chron, C. (2020, July 2). *Why Is Change Important in an Organization?* Retrieved from Chron: <https://smallbusiness.chron.com/change-important-organization-728.html>
- Crittle, S. S. (2019). Healthcare Organization Change Management Strategies for Information Technology Change Initiatives. *Healthcare Organization Change Management Strategies for Information Technology Change Initiatives*, 157.
- Cummings, T. G., & Worley, C. G. (2008). *Organization Development & Change, 9th Edition*. Mason: South-Western Cengage Learning.
- Dexter, D. L. (2013). Organizational communication channels and the relationship to employee resistance to change initiatives: CRM organization change. *Organizational communication channels and the relationship to employee resistance to change initiatives: CRM organization change*, 80. Emerald Publishing. (2021). Retrieved from Emerald Publishing: <https://www.emeraldgrouppublishing.com/how-to/research-methods/conduct-empirical-research>
- Erwin, D. (2009). Changing organizational performance: Examining the change process. *Hospital Topics: Research and Perspectives on Healthcare*, 87(3), 28-40.
- Erwin, D. G., & Garman, A. N. (2010, February). *ResearchGate*. Retrieved from ResearchGate: https://www.researchgate.net/publication/235321238_Resistance_to_organizational_change_Linking_research_and_practice
- Erwin, D. G., & Garman, A. N. (2010, February). Resistance to organizational change: Linking research and practice. *Leadership & Organization Development* , 39-56. Retrieved from ResearchGate: https://www.researchgate.net/publication/235321238_Resistance_to_organizational_change_Linking_research_and_practice
- Farooq, A., Naqshbandi, M. M., Kaur, S., & Ng, B. K. (2018). Roles of leadership styles and relationship-based employee governance in open service innovation: Evidence from Malaysian service sector. *Leadership styles and open service innovation*, 353-374.

- Gardner, P. J. (2009). Organizational Change: All We Want is Better Projects—Why So Difficult? *2009 AACE International Transactions*, PM.03.1 - PM.03.25.
- Graetz, F., Rimmer, M., Smith, A., & Lawrence, A. (2011). *Managing Organisational Change, Third edition*. Milton: John Wiley & Sons Australia, Ltd.
- Hiatt, J. (1994). *Prosci*. Retrieved from Prosci: <https://www.prosci.com/methodology/adkar>
- Jeffrey, B. (2016, November 23). *Harvard Business Review*. Retrieved from Harvard Business Review: <https://hbr.org/2016/11/how-to-get-health-care-employees-onboard-with-change>
- Jiri, M. (2018, November). Resistance of health personnel to changes in healthcare. *Resistance of health personnel to changes in healthcare*, 262-272. Retrieved from ResearchGate: <https://www.researchgate.net/publication/328880814>
- Jones, G. R., & George, J. M. (2001, April 1). *SAGE Journals*. Retrieved from SAGE Journals: <https://journals.sagepub.com/doi/10.1177/0018726701544002>
- Kirshenblatt-Gimblett, B. (2006). *Organizing Academic Research Papers: Types of Research Designs*. Retrieved from Sacred Heart University Library: <https://library.sacredheart.edu/c.php?g=29803&p=185902>
- Landaeta, R. E., Rabadi, G., Ji, H. M., & Levin, D. (2008, February). *ResearchGate*. Retrieved from ResearchGate: https://www.researchgate.net/publication/211389693_Identifying_sources_of_resistance_to_change_in_healthcare
- Mackenzie, R. J. (2018, July 20). *Technology Networks*. Retrieved from Informatics: <https://www.technologynetworks.com/informatics/articles/one-way-vs-two-way-anova-definition-differences-assumptions-and-hypotheses-306553>
- McCullough, K. (2012 - 2019). *Karen McCullough*. Retrieved from Karen McCullough: <https://www.karenmccullough.com/change-in-the-workplace-a-guide-for-companies/>
- Nilsen, P., Schildmeijer, K., Ericsson, C., & Seing, I. (2019, May). Implementation of change in health care in Sweden: A qualitative study of professionals' change responses. *Implementation Science*. Retrieved from ResearchGate: https://www.researchgate.net/publication/333094631_Implementation_of_change_in_health_care_in_Sweden_A_qualitative_study_of_professionals%27_change_responses
- Perkbox. (n.d.). Retrieved from Perkbox: <https://www.perkbox.com/uk/platform/recognition/management-challenges-and-how-to-overcome-them>
- Schober, P., Boer, C., & Schwarte, L. (2018). Correlation Coefficients: Appropriate Use and Interpretation. *International Anesthesia Research Society*, 1763-1768.
- Scott, T., Mannion, R., Davies, H. T., & Marshall, M. N. (2003, March 1). *International Journal for Quality in Health Care*. Retrieved from Oxford Academic: <https://academic.oup.com/intqhc/article/15/2/111/1894353>
- Singh, K. (2015). Key factors resistance to change when adoption of new technologies in the companies. *Key factors resistance to change when adoption of new technologies in the companies*, 1-98.
- Soja, E., & Soja, P. (2020). Fostering ICT use by older workers. *Journal of Enterprise Information*, 407-434.
- Vaishnavi, V., Suresh, M., & Dutta, P. (2019). A study on the influence of factors associated with organizational readiness for change in healthcare organizations using TISM. *Emerald Group Publishing Limited*, 1290-1313.

APPENDICES

UNIRAZAK
UNIVERSITI TUN ABDUL RAZAK
Copying, modifying, or reprinting, is not permitted.

APPENDIX 1

SURVEY QUESTIONNAIRE

Factor Affecting Employee Resistance to Accept Changes In Healthcare Services Located in Petaling Jaya, Selangor.

Greetings, Valued Respondents.

You are cordially invited to participate in the above-mentioned survey. The aim of this research is to study the Factors Affecting Employee Resistance to Accept Change in Healthcare Services located within the district of Petaling Jaya, Selangor. This survey is divided into five parts: "Demographic, General Information, Challenges in Organizational Change, Strategies Implemented by Management on Communication Gap and Employee Motivation Level, and Action Plan to Overcome Employee Resistance to Accept the Change".

This survey would benefit greatly from your thoughts on employee resistance to accept the changes in healthcare services. This survey is only for academic purposes.

Your insightful feedback will be greatly appreciated.

Ravinder Jeet Kaur A/P Ram Singh
Masters of Business Administration (Management)
University Tun Abdul Razak (UNIRAZAK)

Part A: Demographic

1. Gender
 - Male
 - Female
2. Age
 - Under 30
 - 31 – 49
 - Above 50
3. Education Background
 - Certificate/diploma
 - Bachelors
 - Masters
 - PhD
 - Others
4. Work Experience in Healthcare Services (years)
 - Less than a year
 - 2-3 years
 - 4 years above
5. Department/division
 - Human Resource
 - Non-Human Resource

Please rate the following items on a scale from 1 through 5, with 1 being “strongly disagree” and 5 being “strongly agree.”

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Part B: General Information

No	Questions	1	2	3	4	5
1.	Overall, my work experience in my organisation is satisfying and rewarding.					
2	I obtain the right amount of recognition and acknowledgement from my immediate superior.					
3	There is effective communication within my organisation.					
4	I feel challenged in my current position.					
5	Career advancement is possible here if an opportunity given.					
6	I'm treated fairly at the company.					
7	I'm comfortable dealing with my manager on related issues and/or concerns.					
8	I'm part of the decision-making process within the organisation.					
9	My manager is a good coach/mentor.					
10	I'm fairly compensated for the work I do.					
11	I'm rewarded when I go above and beyond what is expected in my job.					
12	The company's total benefits program meets my needs.					
13	The company's benefits program is competitive with others in the industry.					

Part C: Challenges of Employee Resistance to Accept Change

Poor Internal Communication						
No	Questions	1	2	3	4	5
1.	Any changes in company's policies are well communicated within the organisation.					
2	How much effort does your direct manager makes to keep you informed?					
3	How would you rate your knowledge of the company goals?					
4	Do you care about the future of your organisation?					
5	Do you feel organisation listen to your concerns?					

Lack of Management Skills						
No	Questions	1	2	3	4	5
1.	Employee are encouraged to voice up their opinion/idea in writing using bottom-top approaches.					
2	Employees are encouraged to upskill or reskill themselves.					
3	Do you feel comfortable in your manager's effectiveness?					
4	The feedback I receive helps me to grow and develop.					
5	Corporate governance is everyone's commitment.					

Lack of Technology Skills and Exposure						
No	Questions	1	2	3	4	5
1.	All employees are technology savvy.					
2	Any changes in technology are well communicated and trained within organisation.					
3	Do you feel the impact of technology change effect the upskilling and skill mismatch?					
4	Several of my skills will become outdated in the next 5 years					
5	With constant updates in technology will effect the level of productivity?					

Part D: Strategies Implemented by Management on Communication Gap and Employee Motivation Level to Overcome Employee Resistance to Accept Changes

No	Questions	1	2	3	4	5
1.	Shall conduct regular meetings to obtain employee's opinion or idea.					
2	Consistently emphasise on chain in command.					
3	Introduce Independent Departments and empowerment to Team Leaders.					
4	Minimize unnecessary interference from Top Management.					
5	Distinguish skills and experience among employees.					

Part E: Action Plan to Overcome Employee Resistance to Accept Change

No	Questions	1	2	3	4	5
1.	Involve all the employee or employee engagement in the change process.					
2	Management to enlighten on the change management.					
3	Management to elucidate the company expectation.					
4	Promoting departmental communication.					
5	Employee to demonstrate technology skills to convey opinions or ideas.					

APPENDIX 2

One way ANOVA

Descriptives						
		N	Mean	Std. Deviation	Std. Error	95% Confidence Interval for Mean
						Lower Bound
SUM_COM	31 - 49	75	18.8533	3.86842	.44669	17.9633
	Above 50	15	16.6667	3.53890	.91374	14.7069
	Under 30	30	17.2333	4.03163	.73607	15.7279
	Total	120	18.1750	3.94215	.35987	17.4624
SUM_SKILLS	31 - 49	75	19.4800	3.72486	.43011	18.6230
	Above 50	15	18.4667	4.12080	1.06398	16.1846
	Under 30	30	19.5000	3.14862	.57486	18.3243
	Total	120	19.3583	3.62715	.33111	18.7027
SUM_TECH	31 - 49	75	19.0800	2.78878	.32202	18.4384
	Above 50	15	19.2000	3.23375	.83495	17.4092
	Under 30	30	18.1667	3.25982	.59516	16.9494
	Total	120	18.8667	2.97025	.27115	18.3298
SUM_STRATEGIE	31 - 49	75	20.0533	3.91081	.45158	19.1535
	Above 50	15	21.0667	3.91821	1.01168	18.8968
	Under 30	30	20.6667	3.54608	.64742	19.3425
	Total	120	20.3333	3.81138	.34793	19.6444
SUM_ACTION	31 - 49	75	20.5733	4.09407	.47274	19.6314
	Above 50	15	21.8667	3.41983	.88300	19.9728
	Under 30	30	20.5000	3.91945	.71559	19.0365
	Total	120	20.7167	3.96663	.36210	19.9997

Descriptives					
		95% Confidence Interval for Mean		Minimum	Maximum
		Upper Bound			
SUM_COM	31 - 49	19.7434		9.00	25.00
	Above 50	18.6264		13.00	25.00
	Under 30	18.7388		11.00	25.00
	Total	18.8876		9.00	25.00
SUM_SKILLS	31 - 49	20.3370		5.00	25.00
	Above 50	20.7487		12.00	25.00
	Under 30	20.6757		12.00	25.00
	Total	20.0140		5.00	25.00
SUM_TECH	31 - 49	19.7216		14.00	25.00
	Above 50	20.9908		15.00	24.00
	Under 30	19.3839		12.00	25.00
	Total	19.4036		12.00	25.00
SUM_STRATEGIE	31 - 49	20.9531		8.00	25.00
	Above 50	23.2365		14.00	25.00
	Under 30	21.9908		15.00	25.00
	Total	21.0223		8.00	25.00
SUM_ACTION	31 - 49	21.5153		7.00	25.00
	Above 50	23.7605		15.00	25.00
	Under 30	21.9635		12.00	25.00
	Total	21.4337		7.00	25.00

Regression

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.523 ^a	.274	.255	3.28914

a. Predictors: (Constant), SUM_TECH, SUM_SKILLS, SUM_COM

ANOVA^a

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	473.728	3	157.909	14.596	<.001 ^b
	Residual	1254.939	116	10.818		
	Total	1728.667	119			

a. Dependent Variable: SUM_STRATEGIE

b. Predictors: (Constant), SUM_TECH, SUM_SKILLS, SUM_COM

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.507 ^a	.257	.238	3.46330

a. Predictors: (Constant), SUM_TECH, SUM_SKILLS, SUM_COM

ANOVA^a

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	481.014	3	160.338	13.368	<.001 ^b
	Residual	1391.352	116	11.994		
	Total	1872.367	119			

a. Dependent Variable: SUM_ACTION

b. Predictors: (Constant), SUM_TECH, SUM_SKILLS, SUM_COM


UNIRAZAK
UNIVERSITI TUN ABDUL RAZAK
Copying, modifying, or reprinting, is not permitted.

APPROVAL PAGE

**TITLE OF PROJECT PAPER: FACTOR AFFECTING EMPLOYEES
RESISTANCE TO ACCEPT CHANGES IN
HEALTHCARE SERVICES LOCATED IN
PETALING JAYA, SELANGOR**

NAME OF AUTHOR: RAVINDER JEET KAUR A/P RAM SINGH

The undersigned certified that the above candidate has fulfilled the condition of this project paper prepared in partial fulfilment for the degree of Master of Business Administration.

SUPERVISOR

Signed : _____

Name : _____

Date : _____



ENDORSED BY:

Dean

Graduate School of Business

Date : _____