

## Original Article

# Healthcare Employees' Attitudes on Change Management: The Case of a Health Center in Greece

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### Abstract

**Background:** Human resource change management is a complex process that encounters various obstacles and resistances when attempting to implement it.

**Objective:** The research aims to explore the role of change management in human resources, using the Health Centre of Pyli Axiou in Thessaloniki, Greece, as a case study. The focus is on the views and attitudes of employees toward an impending change.

**Methodology:** A cross-sectional study was conducted in the Health Center of Pyli Axiou in Thessaloniki. The study population selected was 126 people, doctors and nurses, permanent and auxiliary, administrative staff, and other specialties, who constitute the total number of employees at the Health Centre. The survey was conducted in the spring of 2023. The questionnaire was created by Belias et al., (2019) and measures employees' attitudes toward change. The statistical analysis was performed using SPSS 25.

**Results:** 61.6% were female, 36.6% belonged to the 50-59 age group, 38.1% of the participants belonged to the nursing staff, 33.3% to the paramedical service and 21.1% hold a responsible position. Most employees had a favorable outlook on a possible change, but they were somewhat skeptical that it would improve their relationships with colleagues and superiors. The prioritization of work incentives showed financial benefits from working as first and self-esteem as second incentive. Concerning conflict management techniques, 76.8% of employees indicated that they favor dialogue. Demographic and occupational characteristics of employees appear to influence their attitudes toward resistance to change.

**Conclusions:** The findings seek to assist decision-makers in tackling important challenges at the Health Centre of Pyli Axiou in Thessaloniki, aiming to improve its sustainability and competitiveness.

**Keywords:** Change management; Health care sector reforms; Health care center, Greece

### Introduction

Change management is the process of overseeing and controlling various changes within an organization's structure and operations. This process involves not only people but also technology and organizational systems and processes (Gordon & Pollack, 2018). "Organizational change" refers to the transition from an existing state in an

organization to a new one, or from one set of processes and conditions to another (Sroufe, 2017).

The disruption of the status quo and the balance that existed prior to the change often raises questions about the impact of the change and the process by which it is implemented. Most organizational changes involve a reallocation of resources. Structural changes typically

entail a redistribution of power and status, changes in compensation systems involve a redistribution of financial resources, and technological changes frequently lead to a redistribution of knowledge. Consequently, workers may question how the change will affect their physical or social environment, their wages or benefits, and the nature of their tasks (Oreg & van Dam, 2009).

Organizational change can be categorized into subtypes based on the organization's ability to respond and its preparedness for pressures and challenges arising from both internal and external environments. Changes can be classified as unplanned or imposed when they are driven by external factors such as political conditions, economic circumstances, or competition, or by internal factors. Changes may also be categorized as planned, anticipated, or natural when they result from deliberate planning or concerted efforts. Additionally, there are negotiated organizational changes (Rotea et al., 2023; Alagoz et al., 2018).

Various theoretical models and tools have been proposed in the literature regarding the stages and processes of implementing change, including the Lewin-Schein model (Arifin et al., 2019), the planned change model of Lippitt, Watson, and Westley (Kanellou, 2019), the Action Research model (Dickens & Watkins, 1999), Kotter's eight-step process (Laig & Abocejo, 2021), and Judson's model (Schumacher et al., 2016; Appelbaum et al., 2015). Despite differences, these models converge on three main sequential processes. First, they emphasize disengaging from the status quo to reduce resistance, then executing the necessary steps to implement the change, and finally re-engaging to solidify the change.

The implementation of any organizational change requires an effective approach to managing it. To address resistance to

change, it is essential to investigate the underlying reasons for it. According to empirical research and existing literature, fear is a primary source of resistance to impending changes (Cameron & Green, 2019). Any change introduces a new situation, often accompanied by uncertainty regarding its consequences for individuals (Schumacher et al., 2016). In many cases, individuals may feel that the change could result in a loss of their current status, such as power, value, type of work, prestige, or usefulness. Another source of resistance is habit. Habit can foster inertia, leading to resistance and indifference toward change (Amarantou et al., 2018).

In large organizations, many employees often do not understand the benefits of change, either for themselves or for the organization as a whole, due to insufficient communication from those leading the change (Belias et al., 2019). It is natural for different views on organizational change to arise within an organization, usually stemming from varying perceptions, beliefs, values, judgments, choices, and goals (Cheraghi et al., 2023).

In the constantly evolving healthcare sector, knowledge of effective methods and theoretical models for introducing change is considered essential (Clegg et al., 2019). Successful human resource management is crucial for delivering high-quality healthcare. In recent years, healthcare systems worldwide have set goals focused on efficiency, effectiveness, quality, and equity (Gomes et al., 2021).

During both the economic crisis and the health crisis, significant issues arose in staffing and the operation of health services in Greece (Kousi et al., 2021). Primary health care (PHC) was also heavily affected by these two crises, as well as by the successive reforms and changes it underwent.

Thus, this research aims to explore the role of change management in human resources, using the Health Centre of Pyli Axiou in Thessaloniki, Greece, as a case study. The focus is on the views and attitudes of employees toward an impending change.

**Methodology:** A cross-sectional study was conducted in the Health Center of Pyli Axiou in Thessaloniki. This Health Center is located at a central point and connects the Eastern and Western sides of the city, covering daily a significant part of the needs of PHC of thousands of citizens. The center was integrated into the organizational structure of the 3ης ΔΥΠΕ according to Law 4238/2014 (Government Gazette 38Α') and is a decentralized health care unit according to Law 4486/2017 (Government Gazette 115 Α'). There are understaffing problems at the Health Center, increasing the time waiting time for appointments in key specialties. The lack of qualified medical staff and the increase in waiting time for appointments has resulted in patients turning to private medical centers for service. Because the permanent medical and nursing staff are on the verge of retirement, seconded auxiliary health workers are called upon to cover the needs of the operation of this health center, struggling daily with the uncertainty of the renewal of their employment contract.

**Study population:** The study population selected was 126 people, doctors and nurses, permanent and auxiliary, administrative staff, and other specialties, who constitute the total number of employees at the Health Centre of Pyli Axiou in Thessaloniki. The survey was conducted in the spring of 2023.

**Questionnaire of the Stud:** The research questionnaire selected for this particular study was created by the researchers Belias et al., (2019) from whom permission to use it was requested and given. The questionnaire measures

employees' attitudes toward change and consists of three parts. Its first part contains 5 questions concerning the demographics of the respondents. The second part includes 21 questions about change management. Responses are based on a 5-point Likert scale (1. strongly disagree, 2. disagree, 3. neither disagree nor agree, 4. agree, 5. strongly agree). The third part includes three questions: 1) about employee motivation, 2) conflict management, and 3) relationship with technology. Responses are based on a 5-point Likert scale (1. not at all, 2. a little, 3. neither a little nor a lot, 4. a lot, 5. very much).

**Ethical aspects:** The study was approved by the Scientific Council of the 3rd Regional Health Authority of Macedonia (protocol number Δ3β/21160. 05.03.2023). Health professionals were informed about the aim of the study and their agreement for participation was requested, providing informed verbal consent. The survey was voluntary and anonymous, with a withdrawal option at any stage. The questionnaires were collected in a closed envelope.

**Statistical analysis:** The data was analyzed using SPSS v25 (Statistical Package for Social Sciences). Descriptive statistics, including frequencies, percentages, mean, and standard deviation, were calculated. Since the variables were not normally distributed, non-parametric tests were selected to explore differences. Statistically significant differences between dichotomous variables were assessed using the Mann-Whitney test. Additionally, Kruskal-Wallis's test was used to analyze differences among variables when examining three or more groups. The significance level was set at  $p \leq 0.05$ .

## Results

Table 1. Presents the demographic and occupational characteristics of the study

population. The majority of employees were women (61.6%). Of the participants, 36.6% were in the 50-59 age group, and 60.3% had completed university education. In terms of occupation, 38.1% of the participants were nursing staff, 33.3% were from paramedical services, 18% were doctors, and 10% were administrative employees. Most respondents did not hold a position of responsibility (78.9%).

**Table 2.** Provides the descriptive statistics regarding employees' attitudes toward change. It was found that most employees had a positive outlook on potential changes, as the average score for most questions was 4 or higher. Notably, employees moderately believe that change will improve relationships with colleagues and supervisors.

**Figure 1.** Illustrates the prioritization of work motivations according to the study population. The incentives employees most agreed upon were financial benefits, self-esteem, and job satisfaction.

**Figure 2.** Regarding conflict management methods, 76.8% of employees preferred dialogue, with lower percentages for the other suggested options. Concerning the relationship between employees and technology, 61.1% of respondents stated that they have a good or very good relationship with technology, 34.9% reported an average relationship, and only 4% indicated a poor or very poor relationship.

It is important to highlight the comparisons that emerged from the statistical analysis of demographic characteristics and responses regarding employee change management. Specifically, women were more likely to believe that colleagues help each other during new processes ( $p = 0.015$ ) and that

they themselves help their colleagues ( $p = 0.023$ ), compared to men, who were less likely to hold these views. As employees age, they are more likely to believe that being actively involved in a change process improves relationships with both colleagues ( $p = 0.021$ ) and supervisors ( $p = 0.019$ ). Additionally, as the education level of employees increases, so does the belief that changes are positive ( $p = 0.028$ ), that motivation is necessary for participation in change ( $p = 0.007$ ), that training programs are essential to ease the transition ( $p = 0.019$ ), and that they help colleagues during new processes ( $p = 0.010$ ). However, with higher education levels, there is also an increase in resistance or opposition to changes employees disagree with ( $p = 0.019$ ).

**Table 3.** Presents comparisons between different employee categories and their responses regarding change management. Nursing and paramedical staff are more likely to believe that workers across all specialties should be thoroughly informed before a change is implemented. Moreover, nursing, paramedical, and administrative staff tend to think that employees should be informed about the reasons behind the change and its benefits. Medical and administrative staff are more likely to believe that active involvement in a change process fosters better relationships with colleagues. Additionally, employees without a position of responsibility are more likely to feel positive about changes if they involve input not only from management but also from employees ( $p = 0.05$ ), compared to those in positions of responsibility. Lastly, employees without a position of responsibility also believe more strongly that colleagues help them during new processes ( $p = 0.05$ ).

**Table 1. Demographic and occupational characteristics of the study population**

		Number	Percentage
Gender	Man	48	38.4
	Woman	77	61.6
Age	21-39	17	13.8
	40-49	32	26.0
	50-59	45	36.6
	60+	29	23.6
Education level	Secondary	11	8.7
	University	76	60.3
	Master/ PhD	22	17.4
	no reply	17	13.5
Category of employees	Physician	23	18.3
	Nurse	48	38.1
	Administrative staff	13	10.3
	Paramedical staff	42	33.3
Responsible position	Yes	26	21.1
	No	77	78.9

**Table 2. Descriptive measures of employee attitudes toward change**

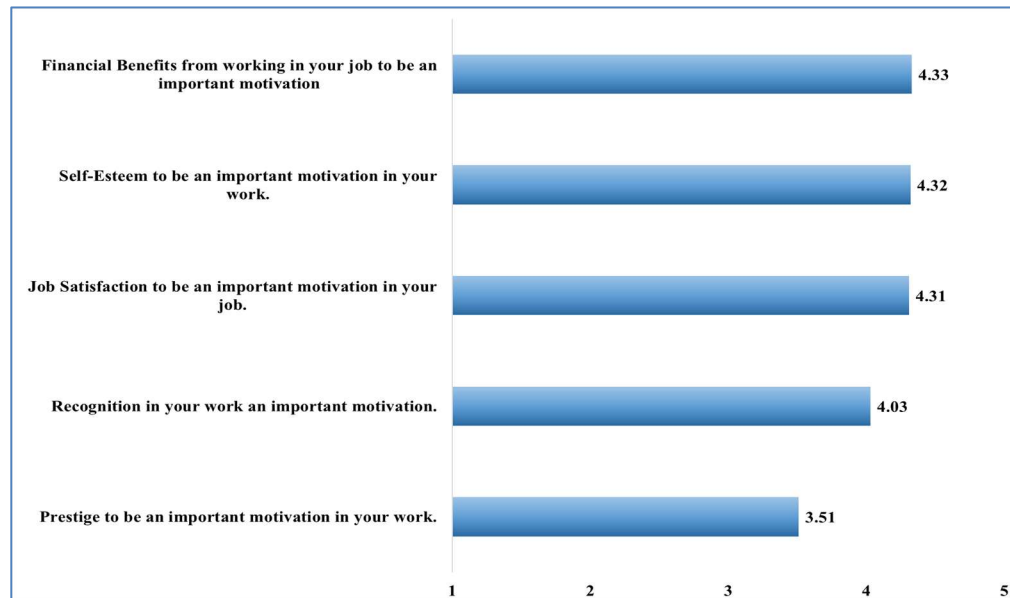
	Mean	Std. Deviation	Median
I believe that change is necessary in a primary health service for progress to occur	4.21	0.68	4.00
I experience change as a positive process	4.01	0.76	4.00
I feel better when the conditions at my work do not change.	3.09	1.04	3.00
Changes should only be made when there is no other solution	3.03	1.10	3.00
Employees of all specialties must be informed in detail before a change is implemented	4.48	0.69	5.00
Do you consider it necessary to inform employees about the reasons that led to the change?	4.44	0.63	5.00

Do you think employees should know the benefits of adopting a change?	4.41	0.58	4.00
The existence of communication & information channels for upcoming changes in PYY increases the probability of their success.	4.14	0.59	4.00
I will be more positive in the implementation of a change if it has arisen through proposals not only from the management, but also from the employees	4.41	0.58	4.00
If I am actively involved in a change process, I will have better relationships with my colleagues	3.35	0.83	3.00
Participating in a change process will improve my relationship with my supervisors	3.21	0.80	3.00
If I help to implement a change, I will have the opportunity to demonstrate my skills as a worker	3.67	0.76	4.00
Do you think it is necessary to motivate employees to participate in a change process?	4.08	0.68	4.00
Will you participate more actively in implementing a change if you know you will be rewarded by management?	3.68	0.99	4.00
Do you find it useful to carry out training programs in order to facilitate the process of incorporating a change?	4.20	0.65	4.00
For a new technological change to be successfully implemented, there must be continuous support for users with ancillary services	4.30	0.60	4.00
The integration of modern information systems helps me to do my job more efficiently	4.16	0.77	4.00
Even if I disagree with a change, I will participate in its implementation	3.65	0.83	4.00
If I disagree with a change, I will oppose and refuse to implement it	2.52	1.00	2.00
My colleagues help me when there is a new process in the service.	3.75	0.74	4.00

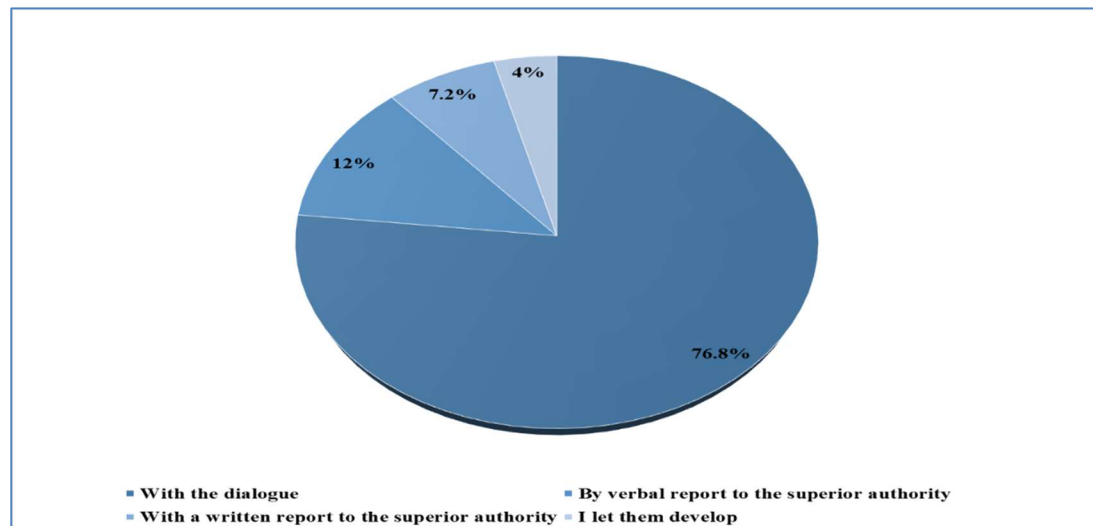
I help my colleagues when there is a new process in the service	4.16	0.53	4.00
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**Figure 1. Work motivation prioritization**



**Figure 2. Conflict management methods**



**Table 3. Mean rank of the category of employees in terms of perceptions about change management**

	Physician	Nurse	Administrative staff	Paramedical staff	P value
Employees of all specialties must be informed in detail before a change is implemented	45.41	67.44	56.73	71	0.011
Do you consider it necessary to inform employees about the reasons that led to the change?	42.54	71.52	62.46	66.13	0.005
Do you think employees should know the benefits of adopting a change?	46.46	67.88	57.96	69.55	0.028
If I am actively involved in a change process, I will have better relationships with my colleagues	72.67	66.89	76.23	50.67	0.017

## Discussion

The findings of this survey indicate that most employees at the Health Centre of Pyli Axiou in Thessaloniki have a positive outlook on upcoming changes and even see them as essential for the evolution and sustainability of the primary healthcare (PHC) system. While job security and stability are often associated with tenure, healthcare workers typically perceive changes as potential threats to their positions.

However, the employees in this study expressed a need for detailed information before any changes are implemented.

They prefer to be informed about the reasons and drivers behind these changes and would favor an approach where suggestions come not only from management but also from the employees themselves. In recent years, especially following the implementation of austerity measures, there have been multiple reform efforts aimed at improving the effectiveness and efficiency of PHC services. These successive changes have had a direct impact on PHC workers, who often feel that their achievements and job security are at risk.

The findings of this survey align with those of Belias et al. (2019), which showed that employees at Kalamata General Hospital wish to be thoroughly informed before each change is implemented. They seek full details, open communication channels, and, if possible, collaborative decision-making with management. Similarly, Bhattacharjee and Hikmet (2007) found that doctors prefer to ensure a change will aid their work before committing to its adoption.

Our survey also highlighted higher levels of job insecurity among nurses and other specialized staff, who expressed a stronger need for detailed information prior to any change, compared to doctors and administrators. This may stem from nurses' lower income levels and higher burnout rates, exacerbated by the nursing shortage in Greece. The significant imbalance between doctors and nurses, along with the existing regulatory framework in Greece's healthcare sector, reinforces nurses' sense of job insecurity and their need for professional support. Research by Lourantaki & Katsaliaki (2017) analyzes the reasons why the expansion of the professional role of nurses is considered necessary in our country. The research argues that the effort in Greece in recent years to introduce expanded nursing roles has been fruitless, as there was a lack of universal professional support from nursing and medical staff, a lack of appropriate educational programs and a sufficient number of university nurses.

The importance of incentives in fostering adoption changes is also underscored in this study, consistent with existing literature. Employees are more inclined to engage in change initiatives when they know they will be recognized or rewarded by management. Here, moral incentives—such as satisfaction, recognition, prestige, and self-esteem—are more valued than financial rewards, as these factors

significantly boost efficiency and effectiveness. The research of Grammatikopoulos et al. (2013) on mental health professionals, highlighted among others, collegiality and professional achievements as the most important motivators.

Furthermore, the majority of the sample stated that they deal with potential conflicts with their colleagues through dialogue, while few through verbal or written reports to their supervisor. According to Papadopoulou (2014) article on nursing staff conflicts in health services, it has been found that the level of intensity of various conflicts in a health organization is related to its effectiveness.

**Limitations:** A limitation to note is that the survey was conducted over a very short period. Despite this limited timeframe, all 126 employees at the Axios Gate Health Center of Thessaloniki participated. Additionally, the research was confined to a single Health Center within the 3rd Regional Health Authority, meaning the results may not be generalizable. Consequently, it is essential to conduct similar surveys across the country's health system to gain a broader understanding of employees' attitudes toward these changes.

**Conclusion:** The survey results indicated that employees at the Health Centre of Pyli Axiou in Thessaloniki are generally receptive to upcoming changes, viewing them as opportunities to enhance their professional skills. However, they emphasized the need for clear communication and information channels before implementing any change, including a clear understanding of its causes and benefits. Additionally, employees believe that decisions regarding changing processes should be made collaboratively between leadership and staff. They see change as essential for

the evolution and sustainability of a primary healthcare (PHC) structure.

In terms of motivation, employees highlighted the importance of moral incentives, with job satisfaction being a primary goal over financial rewards. They also stressed the necessity of training programs to introduce and support changes and promoted dialogue as the preferred method for resolving conflicts.

This study aims to contribute to decision-makers' efforts in addressing these critical issues at the Health Centre of Pyli Axiou in Thessaloniki, with the goal of enhancing its viability and competitiveness.

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