

**CHALLENGES OF STRATEGIC CHANGE MANAGEMENT AT
THE KENYATTA NATIONAL HOSPITAL IN KENYA**

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DECLARATION

This research project is my original work and has not been presented to any university or institution of learning for the award of any diploma or degree.

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The research project has been submitted for examination with my approval as the candidate supervisor

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DEDICATION

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ABBREVIATIONS AND ACRONYMS

KNH	Kenyatta National Hospital
EMR	Electronic Medical Records
EHR	Electronic Health Record
EPR	Electronic Patient Record
CDC	Centre for Disease and Control
ROI	Return on Investment
ICT	Information and Communications Technology
MRS	Manual Records System

ABSTRACT

The world around us is constantly moving forward and getting new dimensions. Introducing change is necessary, although not solely enough, for ensuring success in the future. Change is necessary for an organization to focus on repositioning, renewal, reorganizing and a systematic development. The study identified the challenges of managing strategic change for a level five health facility like Kenyatta National Hospital and ways in which it attempts to deal with the challenges. The research design was case study. Five departmental heads agreed to an interview with the help of interview guide targeting information on demographics, objective one and objective two. The qualitative data was analyzed using content analysis. The findings revealed challenges of strategic change management at KNH as systemic and behavioral resistance, poor communication of strategies, poor training on the new system, and inconsistent support from the senior management. The study underlined the value of preparation and planning before implementation of any strategic change including budgets and role and task assignments. Lewin's three step model was employed and involved unfreezing previous behavior, changing and refreezing the new patterns but there was need to support this using Kotter's eight steps model would have been the best approach used to management the change process since it captures the finer details of Lewin's (1946) three steps on managing change successfully.

CHAPTER ONE: INTRODUCTION

1.1 Background of the Study

Change is the only constant in today's life – for individuals and organizations. Some changes can be reversible while others are not hence the risk involved in managing change. According to Smith (1996) change can be due to technological changes, demographical changes and situational changes. Balogun and Hailey (2008) argue that all organizations are currently undergoing some type of change. Many of these change programs arise from management fads such as culture change, business process engineering, empowerment and total quality.

Recognizing the need for change and leading organizations through that change is one of the most challenging for any leadership. Kotter (1996) 8 steps model illustrates the essentials of managing change in organizations through periods of disruptive change in the external environment. There are both objective and subjective conditions in making the transition in organizations. Lewin (1946) demonstrates this with the three step model of unfreezing changing and refreezing the new patterns created.

Kenyatta National Hospital is one of the public institutions that is undergoing disruptive change due to globalization and advancement in communication and information technologies. The Ministry of Medical Services has begun the process of computerizing high volume hospitals such as KNH. The implementation of electronic medical records systems being a complex process requires consistent oversight. I seek to identify the challenges and ways of coping with the same at KNH.

1.1.1 Concept of Strategic Change

Strategic change is one that involves fundamental changes in the business of the organization and its future direction. According to Kanter (1983) change management is a structured and systematic approach to achieving a sustained change in human behavior within an organization. Burnes (2004) echoes many others in observing that organizational environments have become less benign, more complex, more interconnected, and more dynamic producing conditions that pose the need for fundamental change while making it difficult to learn and change. Therefore organizations have to strategically manage change to align themselves to the same in their environments. Purpose of strategic change is to ensure that organization is heading in the right direction.

Cumming and Worley (2009) argue that strategic change management is the process, tools and techniques of managing the people side of business change to achieve the required business outcome. According to David (2000) change management is the effective management of a business change such that executive leaders, managers and front line employees work towards successfully implementing the needed process technology or organizational changes.

1.1.2 Challenges of Strategic Change Management

According to Carnal (2007) the path of organizational change is littered with the best intentions that sometimes never deliver results or value to the organization. Creating successful organizational change is not easy, but there are lessons that can be learned from others who have tried.

One of the primary obstacles of effective change management is ineffective change sponsorship from senior leaders. Burnes (2004) argues that poor sponsorship directly impacts the value a project or change delivers to the organization. In the same way that effective sponsorship can mobilize and activate the organization, poor sponsorship can inhibit and delay progress. Employees interpret an absent or inactive sponsor as an indication of how important - or unimportant - the initiative

According to Kirkpatrick (1985) resistance to the change from employees is another major challenge of change management. Employee resistance to change is common especially in government institutions. Specific areas contributing to resistance from employees include lack of understanding of why the change is happening and “What’s in it for me?”, Long-tenured employees may be unwilling to support the change, loss of control and ownership of work processes, fear of the future state, including concerns over job security. Resistance is not innocuous - it has long lasting and detrimental effects on the ROI a project delivers. Managing resistance requires both proactive steps to mitigate the sources of resistance and a reactive process for when resistance does occur.

Poor support and alignment with middle management can also impede change in an organization. William (1998) argues that middle managers may be reluctant to support change when they perceive that the change is not aligned with their operational objectives or when they expect negative impacts to their day-to-day operations. This lack of support is mostly evident with middle managers who are sometimes unwilling to communicate consistent and accurate information about the change and who subsequently poor sponsorship of the change to their employees.

Middle managers are perhaps one of the biggest allies and potentially biggest hurdles in times of change. In the transition, their key roles are communicator, advocate, coach, liaison and resistance manager. However, these same managers can also be the most resistant group to change. William (1998) further states that if middle management resists a change, so will their people and many times, resistance takes on a viral quality, spreading throughout the organization.

Lack of change management resources and planning is another common limitation to successful change management. This includes insufficient resources available to conduct the necessary planning and implementation, the lack of a formal change management approach and the lack of change management knowledge within the team. According to Lawler and Worley (2006) without resources, change management activities cannot be completed and without adequate planning, change management cannot be holistic and may miss the mark. The total value a project delivers to the organization is directly correlated with how well you manage the people side of change and the resources.

1.1.3 Health Sector in Kenya

There are more than 5,000 health facilities in Kenya. According to Katherine (2013) the government oversees 41% of health centers, NGOs run 15%, and the private sector operates 43%. The government operates most hospitals, health centers, and dispensaries, while the private sector operates nursing homes and maternity facilities catering to higher income clientele. Village dispensaries comprise the largest – and lowest – level of the pyramid. District health centers and provincial hospitals are fewer and higher on the pyramid, and the Kenyatta National Hospital in the capital city, Nairobi, sits at the top.

The Ministry of Health (1993) sets policies, develops standards, and allocates resources for health care services; however, in accordance with the decentralization scheme, the district is the level at which most management takes place. While most private hospitals have more resources and are able to put in place Electronic Medical Records systems the case is not the same for Public Hospitals. KNH being a public institution and the largest referral, teaching and research hospital in East and Central Africa, The decision to have an EMR is a large project that has taken 5 years to conceptualize. Due to issues of missing patient files for routine services and in cases of malpractice most hospitals including KNH prefer EMR systems to the Manual systems.

1.1.4 Kenyatta National Hospital

Kenyatta National Hospital (KNH) is the oldest hospital in the country having been founded in 1901 as the Native Civil hospital and then King George VI in 1952. It is currently the largest National referral, teaching and research hospital. In addition to its primary mandate to provide specialized health care services to patients on referral from provincial and district level hospitals, the Hospital facilitates medical training and research and participates in national health -care planning. The specialized health -care services provided by the Hospital include radiotherapy, heart surgery, neurosurgery, renal dialysis and kidney transplant operations, plastic and reconstructive surgery, orthopedic surgery and burns management among others.

According to Kenyatta National Hospital (2013), KNH covers an area of 45.7 hectares and within the complex are College of Health Sciences (University of Nairobi); the Kenya Medical Training College; Kenya Medical Research Institute and National

Laboratory Service (Ministry of Health). KNH currently has 50 wards, 22 out-patient clinics, 24 theatres (16 specialized) and Accident & Emergency Department. Out of the total bed capacity of 1800, 209 beds are for the private wing.

For a long time KNH has had a manual medical records system where information regarding all patients is kept in paper files and kept in one Room. The management is seeking to change this way of doing things and instead use electronic medical records systems as the primary information system with back up as paper files. This study seeks to understand challenges in the management of this change from manual to electronic record keeping and to determine how KNH is dealing with the challenges. The case study will employ qualitative data. Data will be collected through interviews. Analysis will then be done using content analysis and data presented in a descriptive format.

1.2 Research Problem

According to Burnes (2004) organizational environments have become less benign, more complex, more interconnected, and more dynamic producing conditions that pose the need for fundamental change while making it difficult to learn and change. Therefore organizations have to strategically manage change to align themselves with their environments. The purpose of strategic change is to ensure that organizations are heading in the right direction.

KNH being a public institution and the largest referral, teaching and research hospital in East and Central Africa has faced unique challenges in managing the change process. The health sector has been changing and embracing technology in its operations from Human resources to billing to clinical decision support. Given the rapid changes in KNH's operating environment, change and innovation have become strategic in managing the hospital, in fact, key to its survival.

Studies have been conducted on strategic change management for example Kibwana (2012) on strategic change management practices at local authorities in the Coastal Province of Kenya. Mwirigi (2012) also studied management of strategic change by commercial banks in Kenya and Mutwiri (2012) on Strategic Management Practices at Kenya Airports Authority.

A lot has been studied on the Hospital sector in Kenya. Nyamwange (2012) highlighted factors affecting customer satisfaction in public hospitals in Kisumu municipality. Mutuku (2012) studied corporate governance and accountability mechanisms and challenges in the private hospitals in Kiambu County in Kenya. Kalume (2012) studied corporate governance practices of private hospitals in Coast province.

Studies have been conducted at KNH in areas such as management training for instance Patrick (2011) studied management of strategic change at Kenyatta National Hospital Kenya. Lillian (2012) studied challenges facing human resources management function in Kenyatta National Hospital. To the best of my knowledge nothing has been studied on challenges of strategic change management from Manual Record keeping to Electronic

Records System at KNH. This study therefore sought to answer the following questions: what are the challenges of strategic change management with regard to the transition from Manual Records Systems to Electronic Medical Records systems? How KNH is addressing these challenges?

1.3 Research Objectives

The following objectives guided this study:

- i. To identify the challenges of change management with regard to transition from Manual Record Systems to Electronic Medical Records Systems at KNH
- ii. To establish how KNH is dealing with those challenges.

1.4 Value of the Study

This study is significant as its results contribute to the knowledge base essential for the practice of hospital administrators and management by explaining the interactive effects of factors that affect change and how to use this to their knowledge. The results obtained from this study will provide head of departments with information based on research and theory to assist them in their administrative responsibilities. Hospital management also learn as much as possible about change management so as to determine the best methods of change management best suited to their own subordinates, knowledge and situations.

The findings and recommendations of this study provide valuable information to practicing Hospital management especially how they would be able to obtain information about how different change management affects the effective implementation of EMR systems. The results are also important to the Ministry of Health and its partners, it is

hoped that the results adduced from the study may serve to inform decision making and policy development on change management and overall management of health facilities Kenya. The study is also important to the academicians in building their knowledge base and creating an insight in understanding overall management functions with regard to change management.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

Literature review provides a framework for discussion of change management. It focuses on the definition and meaning of change management as argued by different writers and strategic change management practitioners. Literature review discusses the concept of managing strategic change. This section has also brought to light the challenges that are associated with change management and provides the various means with which organizations do cope with challenges posed by strategic change.

2.2 Theoretical Foundation

Strategic change management, which falls within the broader theoretical framework of social change Lewin (1946), has been a perennially popular topic in the organizational effectiveness and management literature. Identifying the need for organization-wide change and leading organizations through that change is widely recognized as one of the most critical and challenging responsibilities of organizational leadership.

According to Lewin (1946) there are three steps managing change successfully. The process involves unfreezing previous behavior, changing and refreezing the new patterns. The first step is "unfreezing," which involves dismantling those things that support or maintain the previous behavior. In the second step, the organization "presents a new alternative." This means introducing a clear and appealing option for a new pattern of behavior. The final step in this model is "freezing" which requires that changed behavior be reinforced both formally and informally in the organization.

Kotter (1996) 8 steps model also provides essential understanding of how change can be managed successfully. Kotter (1996) argues that his eight steps are a process and not a checklist and that successful change goes through all eight stages. The 8 steps are Establish a sense of urgency, Forming a powerful guiding coalition, Creating a vision, Communicating the vision, Empowering others to act on the vision, Planning for and creating short term wins, Consolidating improvements and producing still more change, Institutionalizing new approaches.

According to Heller (1998) managing change refers to the making of changes in a planned or systematic fashion. The changes to be managed to lie within are controlled by the organization. However these changes may have been triggered by events originating from outside the organization (the environment). These may be events that the organization has no control over. Conner (1992) was of the idea that change management refers to a systematic approach to dealing with change, both from the perspective of an organization and at the individual level that is composed from at least 3 aspects which are adapting to change, controlling change and effecting change.

2.2 Managing strategic change

According Adcroft and Hust (2008) to provide a realistic understanding of how and why an organization has attempted a transformational change strategy it is important to consider four issues: the event which triggered the transformation, the program and process through which transformation was attempted, the outcome of the transformational strategy, and the myths which have been built up around the transformation.

Senior and Fleming (2006) discuss the role of leadership and claim that leader is a change agent who can take initiative and bring change for organization. A leader should ask themselves questions like; how do we get people to be more open, to assume more responsibility, to be more creative? How do we introduce self-managed teams in department X? How do we change over from system A to system B in division C? How do we get this organization to be more innovative, competitive or productive? In short, the initial formulation of a change problem is the means with which to achieve the goal stated. Viewing change as a “what” problem requires asking questions like, what are we trying to accomplish? What changes are necessary? What indicators will signal success? What standards apply? This formulation focuses entirely on the end results of implementing change

Secondly, change management can be viewed from other perspectives. That is from those implementing the change and from the recipients of change that is the organizational change management and individual change management (Bridges & Mitchell 2000). Organizational change management refers to management of change from the perspective of a manager or project team. It is the perspective of “business leadership “from the top looking down into the organization.

The primary focus is around change management strategies, communication plans and training programs. The involved parties include project team members, human resources and key business leaders that sponsor the change. Organizational change management provides the knowledge and skills to implement a methodology and tools for managing

change throughout the organization. Individual change management on the other hand according to Kanter (1983) is the management of change from the perspective of the employees. They are the ones who ultimately must implement the change. The focus here is on the tools and techniques to help an employee transition through the change process. One needs to provide the tools that employees can use to navigate their way through the change. Individual employees should therefore be involved in change process.

2.3 Challenges of Strategic Change Management

According to Ansoff and McDonnell (1990) strategic management must be used by an organization to realistically plan for future successes in a highly turbulent competitive environment. One of the challenges in Strategic change management is limited funds. Organizations experiencing shortages in capital for expansion or diversification may find it difficult and sometimes impossible to blend in with the changing environment especially when the change involves acquiring advance equipment for production.

According to Burnes (2004) and Carnal (2007) resistance to change is a key challenge in change management. It introduces delays, additional costs and instabilities in the change process. It may take the form of procrastination, unforeseen implementation delays, sabotage leading to inefficiencies in the whole process. According to Kotter (1996) there are various reasons why people resist change. Parochial self-interest is one of them. People are concerned with the impact of change on them.

Misunderstanding is another reason that may lead to resistance this arises when there is inadequate information provided about the impending change. Low tolerance to change is another reason. Employees may worry that change could threaten their jobs. They may also fear not being able to develop the new skills and behaviors required.

2.4 Coping with Challenges of Strategic Change Management

The process of change is moving from the current way of doing things to a new and different ways of doing things. Bridges (1991) believe that it is not the actual change that individual resist, but rather the transition that must be made to accommodate the change. They state, Change is not the same as transition. Change is situational: the new site, the new boss, the new team roles, and the new policy. Transition is the psychological process people go through to come to terms with the new skills and attitudes. The result may be strategic alignment which may take a variety of forms. This is often a frightening situation and hence the cause for resistance (Mintzberg & Quinn, 1991).

One of the ways of dealing with resistance to change is to give information continually and consistently. Kirkpatrick (1985) emphasizes that there should be clear reporting relationships, coordination between activities and teams and accountability of outcomes, smooth communication to keep all the stakeholders informed. There is also need to align the strategy with the resource allocation, operation, systems and staffing to be in place. Kotter (2002) emphasizes that leadership of an organization should create a sense of urgency for change to be successful.

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 Introduction

This chapter outlines the research design, data collection methods and data analysis techniques that was be used to realize the objective of the study which is to identify the challenges of change management at Kenyatta National Hospital and to establish how it is dealing with those challenges.

3.2 Research Design

The study was conducted using a case study. The aim was to identify the challenges of change management and to determine how KNH deals with those challenges. This design allows in-depth exploration of a phenomenon. It allows detailed intense analysis of a situation which is not possible with other method. Case study also allows the research to obtain the inside facts from the experienced employees.

Case study research excels at bringing us to an understanding of a complex issue or object and can extend experience or add strength to what is already known through previous research. Case studies emphasize detailed contextual analysis of a limited number of events or conditions and their relationships. According to Kaplan (1964) a single, well designed case study can provide a major challenge to a theory and to provide a source for new hypothesis.

3.3 Data Collection

The study used use primary data collected through an interview guide. The interview guide used open ended questions. This was to enable the researcher to collect qualitative data. The interview guide enabled the researcher to obtain up to date information as well

as bring to the fore information that could otherwise not be obtained through other data collection techniques. It is also preferred over other methods as it gives the researcher a better understanding and more insightful interpretation of the results from the study. The interview guide has 3 sections. Section one probed the background of the respondents. Section two addressed objective 1 while section three addressed objective 2.

The interview guide was administered to 5 respondents. The Corporate Strategy Manager, ICT Manager, Head of Medical Records, Human Resource Manager, Finance Manager. The total number of respondents was five. These are officers in charge of the implementation the EMR to replace the manual records system. I administered the tool in person.

3.4 Data Analysis

The completed interview responses were edited for completeness and consistency after which data processing commenced. This involved reading, editing and cleaning up of the interview notes and entry into the computer. Content analysis method was used for data analysis. Cooper and Schindler, (2003) describes content analysis as a techniques for objective, systematic and qualitative description of the manifest content of a communication.

Content analysis allows the breath of the content making it flexible and wide ranging tool that may be used as a methodology or as a specific technique. According to Mugenda and Mugenda (2003) content analysis is a technique that allows for making inferences by systematically and objectively identifying specific characteristics of messages.. It guards

against selective perception and content, provides for rigorous application of reliability and validity criteria and is amenable for computerization. Content analysis was used to make inferences by systematically and objectively identifying specific themes from the data, representing challenges of strategic change management at KNH. This technique has been successfully used by other researchers such as Gichohi (2007) in his study of challenges of change management at Unga Limited.

CHAPTER FOUR: DATA ANALYSIS, FINDINGS AND DISCUSSION

4.1 Introduction

The research objective was to establish the challenges of strategic change management at Kenyatta National Hospital with regard to the change from Manual Record keeping to Electronic Medical record collection and keeping. The second objective was to determine how KNH was dealing with the identified challenges. This chapter therefore presents the data analysis findings and discussions on the challenges of strategic change management at Kenyatta National Hospital. This chapter also presents discussions that relate the findings of this study to previous studies that have been conducted on change management at public health facilities.

4.2 Data Analysis

The interview guide was in three sections and was administered to Corporate Strategy Manager, ICT Head, Head of Medical Records, Human Resource Manager, and Finance Manager. The said individuals headed key departments in the hospital and were directly involved in strategic change management and the transition from MRS to EMR at Kenyatta National Hospital.

Section one study sought to understand the personal profiles of the respondents. The main aim was to find out how their personal profiles could be relevant to the strategic challenges of change management at Kenyatta National Hospital. Section two sought to understand the challenges of strategic change management being experienced at KNH with regard to the move from manual record keeping to Electronic record keeping.

Section three sought to identify how KNH is addressing the identified challenges. The completed interview responses were reviewed for completeness and uniformity after which data processing began. This involved reading, editing and cleaning up of the interview notes and entry into the computer. Content analysis method was used for data analysis.

4.3 Findings

All the respondents agreed that the transition from manual records keeping to electronic record keeping has not been easy and was plagued by challenges. They all agreed that the transition was necessary to improve the quality of care to the patient. There was systemic and behavioral resistance to change, communication and training challenges as well as resource management challenges. To cope with the challenges the hospital management tried to educate, communicate, encourage participation, increase resources and use implicit and explicit coercion.

4.3.1 Challenges of Strategic Change Management at KNH Hospital

The findings revealed that all the respondents have worked for the organization for more than five years and possess first degrees with only three having masters degrees in their relevant areas. This was an indication that they possess the necessary experience to be able to answer reliably the interview questions. Their solid background in the affairs of the organization was also a clear indication that the respondents were experienced and conversant with the strategic plans and practices.

The pace at which change was implemented was slow and that negatively impacted on the schedule. The various factors cited by the respondents to cause the slowness were

infrastructure challenges the entire hospital had to be networked. Resources were also limited with not enough computers for all the employees. The ICT team was also stretched with many employees needing their support at the same time. Patients grew impatient in the long queues as the employees had to learn the system before they could be fully efficient.

According to the study there was some resistance to change from the staff as they were unaware of what to expect and the security of their jobs. All the interviewees reported having experienced some form of resistance. Employees who were not computer literate and who felt they were too old to learn became paranoid. Some felt that their line of work would be completely taken up by the system for example the physical file retrieval team since with the system there would be no need to retrieve physical files.

Resistance to change introduced delays, additional costs and instability in the change process. Resistance was either behavioral or systematic. Behavioral resistance was exhibited by individuals, managers or groups because of parochial self-interest, misunderstanding or lack of trust or in some cases low tolerance to change. Systemic resistance originated from passive incompetence in managerial capacity to carry out the change. With the EMR came changes and realignments of duties roles and even physical rearrangement hence creating a new and positive culture was an issue. These changes were very often poorly managed with little planning.

According to three out of four of the respondents, there were challenges with the transition process integration and adoption of the new system. Most were required to perform their activities “paperless” yet they had very little computer knowledge.

4.3.2 Coping with Challenges of Strategic Change

All the respondents agree that KNH has been going through changes in the last four years. With most other health facilities even of lower levels than KNH embracing technology, KNH's management needed to move with speed and implement systems to aid in patient medical records in order to improve the quality of care at the hospital.

All the respondents agree that the hospital committed resources to facilitate the process of EMR implementation. These resources included financial in the form of infrastructure, computers and its necessary components, skilled personnel, project management resources such as external consultants, new staff, board support, matrix experts, trainings and the new system. While the resources invested were massive the communication to the staff was not adequate and therefore the management improved on the training, participation and support to the implementation process. The interviewees were of the opinion that everybody should be made aware of the operation plan. Communication on strategy implementation downwards was necessary. This will enable management to keep up with any arising issues and make timely corrective measures.

Whether there was any preparation made before implementing the EMR all the respondents agreed that there were some planning and preparation in the form of developing a vision and strategy, budgeting, communication to senior management and a training of relevant staff. There was however a gap in training and communication to staff.

4.4 Discussion

The study showed that management support is very important in countering the challenges faced in strategic change management. The management support mentioned includes coordination of the change process, providing communication to all stakeholders, leadership role, providing experience and expertise in the change process and problem solving. Three out of four of the interviewees agree that it is very important that strong leadership is provided during the change process. If staff feel that senior management are not fully committed to the process then their enthusiasm and commitment also wanes. Staff must believe the implementing the strategy is one of the organization`s top priorities. They therefore need to explain the vision and communicate the importance of the strategy to the future of the organization.

Kotter (1996) eight steps model would have been the best approach used to management the change process. Establishing a sense of urgency, forming a powerful guiding coalition, creating a vision, communicating the vision, empowering others to act on the vision, planning for and creating short term wins, consolidating improvements and producing still more change, Institutionalizing new approaches. It captures the finer details of Lewin`s (1946) three steps managing change successfully. The process involves unfreezing previous behavior, changing and refreezing the new patterns.

All the respondents also noted that management should have put more effort to ensure patients and employees fully understand the strategy. There was a tendency by senior management and chief executives to communicate the business on a need to know basis and not putting an effort to sell and explain the strategy. Front line staff must fully

understand the vision behind the strategy for them to appreciate and commit to it. The strategy implementation plan should include a communication plan which sets out who need to be told about the strategy.

The study also found out that it is important for the individual responsibilities for implementing the change are made clear. It is not sufficient just to develop a very insightful and relevant strategy and hope that the logic behind the strategy will be enough to make it a reality. The management should have given every one clear and specific responsibility for the strategy to work. Accountability must go hand in hand with responsibility. If someone has been given a task in the process, leadership should ensure they complete it. They should then follow up with regular process reviews.

Some of the respondents noted that making the employees feel like they are an important part of the change process and educating them on the details helps create enthusiasm and cooperation instead of paranoia. Most of the respondents noted that very little preliminary training on the system was done. Directive was passed down from the top management to begin use of the new system. Most employees were therefore not comfortable with the system but were forced to use it out of fear of losing their jobs.

CHAPTER FIVE: SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1 Introduction

This chapter presents a summary of the findings of the study. It also gives the conclusion, recommendations, limitations of the study and suggestions for further research.

5.2 Summary

The study shows that the respondents are aware of the strategic changes that have taken place at KNH hospital within the last four years which they deem extremely important since it is in line with the hospitals objectives, targets means of achievements and responsibilities. The respondents also had sufficient experience to be able to answer reliably the interview questions. The study revealed that the heads of department as well as all employees are fully involved in strategic change implementation in the organization. The strategies formulated are also related to the department's role and function and most of the respondents agreed to that fact.

The respondents also indicated that top managements were also the initiators of the strategies. This is significant in the strategic change management process as the top managements are the ones who initiate the strategy but also steer the strategy implantation process. Without the support of top management the challenges become bigger as no resources will be allocated to implement the strategy.

The study also underlines the importance of preparation and planning before strategic change is implemented, all the respondents agree that there were minimal planning and preparation. Strategic change involves not only deciding what to change but how and when to change specific elements in the process. The preparation though minimal included developing budgets and timetables assigning roles and tasks the will guide the process, garnering commitment to ensure that there is a high level of ownership in the process, communication to ease uncertainty and allocating resources for support. There were also organizational structural changes effected to accommodate the strategic change.

The researcher found that Lewin`s three step model was employed and involved unfreezing previous behavior, changing and refreezing the new patterns. The first step is "unfreezing," which involves removing those forces that maintain the organization`s behavior at its present level. It Is the readiness to acquire or learn new behavior. In the second step, the organization "presents a new alternative." This means introducing a clear and appealing option for a new pattern of behavior and taking action to move to the desirable state of affairs. The final step in this model is "freezing" which requires that changed behavior be reinforced both formally and informally in the organization and it seeks to stabilize the organization at the new set of equilibrium.

According to the respondents ADKAR model was used to describe the required model that an individual will go through when faced with a task. AKDAR was used as a functional tool for understanding how, why and when to use different change management tools and procedures. The people dimension of change as described by the

AKDAR model has five stages. Awareness of the need to change ,desire to participate and support the change, knowledge of how to change, ability to implement the change on a day to day basis and reinforcement to keep the change in place. For effective strategic change management the interviewees were of the opinion that everyone in the organization should be aware of the operation and the plans through proper communication. This will enable the managements to keep abreast with any issues that might emerge and to recommend corrective measures before any damage is done and continuous internal review should be done regularly. The staff involved should also be empowered through trainings delegation and giving them the mandate to make decisions.

All the respondents agreed the KNH faced challenges in the process of strategic change management. Among the challenges mentioned were resistance to change, lack of proper processes in handing customer complaints, Legal issues, infrastructure challenges, tight timelines and limited resources. The management's commitment to the change implementation was rated as high. The employee's commitment to the process was low due to lack of proper communication and therefore uncertainty, poor working conditions, low motivation and non-involvement in the formulation of the strategy. There were also constraints the to the resources needed to ensure that the strategies were implemented on schedule

Management did very little to communicated to the staff on a regular basis. Some of the tools used were emails, internal memos, weekly and monthly meeting. Though they were sometimes effective they did not to trickle down information very well. What was needed according to all respondents was update progress or status of issues and open up communication between the management and the employees. Although not all the

employees were involved in the strategy formulation, employees were part and parcel of it and therefore they would all want it to succeed. For effective and up to date strategies the interviewees were of the opinion that everybody should be made aware of the operation, improve communication downwards and make use of competent staff.

Strategic change needs to be understood and managed in a way that people can cope effectively with it. It is also important to ensure that people affected by the change agree with or at least understand the need for change and have a chance to decide how the change will be managed and be involved in the planning and implementation of the change. This helps to reduce the resistance to the change. The success of an organization depends on how they deal with the challenges which they have encountered during the implementation of the change. The respondents mentioned the management being committed to the strategic change and their reactions to strategic change challenges included frequent communication to all stakeholders, issuing public notices through the media to update the patients, sending personal letters, face to face meetings, engaging all staff holding trainings and open forums, road shows, team building, use of change champions and addressing staff concerns.

5.3 Conclusion

From the research findings conclusions that can be made from the study were, first and foremost that organizational change is about making alterations to the organizations purpose, culture, structure and processes in response to seen or anticipated changes in the environment. Strategic change is about leveraging the organization`s direction and culture. Strategic change is also about forging organizational robustness in the face of environmental pressures.

The research also finds out that strategic change management at KNH was a structured approach to transitioning individuals, teams and organizations from a current state to a desired state .KNH opted to adopt a structured approach in an attempt to effectively manage the strategic change management. Organizational change management processes were put in place including techniques for creating a change management strategy, engaging senior managers as change leaders, building awareness of the need for change, developing skills and knowledge to support the change helping employees in the transition process and methods to sustain the change

5.4 Recommendations for Policy and Practice

This study makes recommendations that have policy implications for decision makers. The study found that KNH used structural/models (Lewin`s 3 step model and ADKAR) to implement the strategic change. The researcher recommends that the organization should be flexible and organization structural strategy should be linked to all departments in order to add value and create synergy.

The study also found out that not all the employees and stakeholders were involved in the strategy formulation and implementation. It is also recommended that all employees and stakeholders should be part and parcel of the strategic change process. Strategic change managements should be an organization wide process and not the exclusive preserve of the change specialists and upper management. The change leaders should have also created an environment that actually facilitates change.

The respondents indicated that there was a natural human resistance to change that has a significant impact in the strategic change process. The major change management obstacles being employee resistance, poor executive sponsorship, limited time, budget and resources, corporate inertia and politics, lack of awareness and a culture that is resistance to change. The study recommends that training and communication are key to overcoming these challenges. There was also a need for the organization to have sought a better consultants preferably one that has handled this kind of change before or with more experience

5.5 Limitations of the Study

This study was restricted to five senior management members of staff namely the Corporate Strategy Manager, ICT Head, Head of Medical Records, Human Resource Manager, and Finance Manager. The said individuals headed key departments in the hospital and were directly involved in strategic change management and the transition from MRS to EMR. The study was therefore a case study, therefore conclusion and recommendations cannot be generalized to the entire population. Secondly, although the perception of patients is important in strategic change management, they were not included in the research as scope of the study was only on the implementing staff perceptions. The findings of this study, although limited to the study area would provide useful information for enhancing management of strategic change management in public hospitals in Kenya.

5.6 Recommendations for Further Research

The study found out that KNH used Lewin`s 3 step model and ADKAR to implement their strategic change. It is recommended that further research be done on the use and effectiveness of these models. The study also found out that employees noninvolvement in the formulation of strategies, poor working conditions, employee resistance, poor executive sponsorship, limited budget and resources, corporate inertia and policies, lack of awareness and a culture resistance to change are some of the challenges facing strategic change management at Kenyatta National Hospital. It is therefore recommended that a similar research be replicated in other organizations seeking to implement a change in EMR systems or move from MRS to EMR in the health industry .The results should then be shared so as to ensure whether there are consistencies on the challenges they encounter when they implement strategic change.

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APPENDICES

Appendix i: Letter of Introduction

23rd September 2013

Linah Atieno Okoth,

P.O. Box 2172-00200

Nairobi

Dear Respondent,

RE: INTRODUCTION LETTER

I am a postgraduate student at the University of Nairobi pursuing a course in Master of Business Administration (MBA) Specializing in Strategic Management. In partial fulfillments of the course requirement, I am conducting a case study on *challenges of strategic change management at Kenyatta National Hospital*

For the purpose of completing my research, I kindly request you to allow me to interview you. I enclose an interview guide to give you insight into the areas of interest. The information provided shall be purely for my research project and thus shall be accorded ultimate confidentiality. Copy of the final research report will be availed to yourselves upon request.

Yours sincerely,

Linah Atieno

Appendix ii: Interview Guide

Questions for the Corporate Strategy Manager, ICT Manager, Head of Medical Records, Human Resource Manager and Finance Manager.

Section A: Background information

1. How long have you been in your current position?
2. How long have you worked for in the organization?
3. What is your highest level of education?

Section B: Challenges of change management with regard to transition from MRS to EMR

1. Has the parastatal embraced modern technology?
2. How does the organizations technology compare to those of its competitors?
3. In the hospital/Division is there deep seeded culture that is resistant to change
4. In your view how was the EMR introduced at KNH?
5. Who is else assigned to oversee the implementation of the EMR?
6. Were employees consulted before the implementation of the EMR?
7. How would you rate employee's involvement in the strategic change from MRS to EMR
8. How would you rate employee's commitment to own and drive the implementation of the EMR?
9. Has the change from MRS to EMR Lead to loss of jobs?
10. How has introduction of EMR created a change in the way things are done in your office?
11. In your view, did the introduction of EMR create any urgency for change in the hospital?

12. What are the technical limitations that your office is facing during the implementation of EMR?
13. What are some of the financial or material logistics that are necessary to support effective transition to EMR
14. Does your office lack manpower in terms of numbers and key competencies

Section C: How KNH is coping with the challenges in strategic change management

1. Are there any manifestations of resistance?
2. How are you dealing with the different forms of resistance?
3. In your view does the staff or department charged with the responsibility have enough power to lead the change effort?
4. Are all the staff/Departments involved in the implementation of the EMR?
5. Are there strategists put in place to ensure that the Hospital successfully implement the EMR?
6. What are the measures the hospital management has put in place to ensure that all the staff are aware of what the EMR requires of them?
7. What measures has the Hospital put in place to consolidate improvements and still produce more change?
8. How does the Hospital ensure that the EMR implementation is on track?
9. How is the monitoring and evaluation of the EMR implementation done in the hospital
10. Who is involved in the evaluation?
11. Are there sanctions/incentives that link to measurable performance?

12. During implementation of the EMR did you receive support from your immediate supervisor?
13. During implementation is the scope of the required change well defined?
14. How has the hospital adapted to the new situation
15. Is there clear communication on change goals and objectives and what is expected of each member of your office
16. Is the management resistant to employee involvement in decision making?