

Nursing Staff Readiness for Change and Its Relation to Job Enrichment during Hospital Transformation

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Abstract

Background: Hospitals are forced to stay responding to environmental change nurses' readiness for change considered a key aspect of any hospital change efforts. Job enrichment is an excellent means of enhancing employee job satisfaction and prevention of staff turnover or intention to leave an organization **Aim:** The present study aimed to assess nursing staff readiness for change and its relation to job enrichment during hospital transformation. **Design:** A descriptive correlative design utilized to fulfill the study aim. **Setting:** The study was conducted in (Smalout Specialized Hospital at Smalout City, Minia governorate, Egypt). **Subjects:** convenience sample included all nursing staff working in the hospital (n=415). **Data collection Tools:** Personal data sheet, Nursing Staff Readiness for Change Scale and Job Enrichment Scale. **Results:** (89.4%) of nursing staff have moderate level regarding total Readiness for change and (70.1%) from nursing staff have "moderate" level regarding total job enrichment." Moreover, there was high statistical significance positive correlation between Readiness for Change and Job Enrichment among the studied sample ($p=0.000$ & $r=.283$). **Conclusion:** readiness for change was high statistical significance with weak positive correlation to job enrichment **Recommendations:** Develop training modules focusing on change management, new processes, and required skills. Identify and implement job enrichment opportunities such as role diversification, decision-making authority, and professional development.

Keywords: Job Enrichment, Hospital Transformation, Nursing Staff, Readiness for Change

Introduction

The world is constantly changing, it is inevitable, and health care organizations have the choice to either change with their external circumstances or allow stability to drive them, along with their members (Wong, 2021). Oxford Dictionary (2018) defines "change" as "being different" or "to make difference". Change is a dynamic process and not a one-time event. Change also, can be defined as major departure from the current state and can be unintentional or planned. Moreover, change is concerned with changing current knowledge, skills, and attitude, whereas hospital readiness for change is defined as a way to bring new attitude and behaviors in the staffs and this will help them to perform their tasks more efficiently and effectively (Duchek, 2020).

Changes in hospital are associated with collective and group work, it is not easy to bring people together collectively to work hard and dearly pursue the goals and willing of the group, in many cases, people do not accompany with change and resist it. Organizational readiness for change is a critical reason for the successful implementation and integration of change in healthcare settings, especially hospital undergoing transformation, readiness for change in organizations affects resistance to change (Kachian et al., 2018).

Hospital that are undergoing organizational transformation constantly change and may be in a constant state of unfreezing, and the consistent need to be flexible may increase nursing staff readiness for Organizational change. The unfreezing stage of change process means that nursing staff attitudes about a change initiative are altered in a manner that they begin to see change process in hospital undergoing organizational transformation as necessary and likely to be successful (Burnes, 2020).

Readiness for change especially during hospital transformation is considered a critical precursor to the successful implementation of complex changes in healthcare settings. As hospital change from General Hospital to Al-Amana hospital. General Hospitals are hospitals affiliated to the directorates of health affairs in the governorates, and are called "model A" and "model B", and provide medical services to the patient in exchange for an outpatient examination ticket of very little pounds, Al-Amana hospitals are one of the government sectors under the Egyptian Ministry of Health, but they provide their services to the patient in return for a financial fee determined by the board of directors of each one of them (Nugent, et al., 2018).

Furthermore, organization transformation requires continued organization development, which means rapidly in terms of providing services and supports based on their mission and value system. During this critical inflection point that values and current approaches are challenged, and organization personnel come to realize that instead of doubling down and trying to improve what they currently have and do, it is necessary to transform their organization and create something significantly different. In that regard, organization transformation is all about wrestling with new ideas, believing that something better can be developed, and being willing to help it along (Schalock, et al., 2018).

Nurses are the largest group of healthcare delivery system, they play an integral and crucial role in change, such as change in roles, duties, and any healthcare organization transformation. Moreover, their efforts contribute to the success of this change and improvement of quality of patient care so that hospital during transformation give significance to readiness of nursing staff for this change (Wakefield et al., 2021).

Nursing staff readiness for change can be divided into two categories: affective change readiness and cognitive change readiness. Affective readiness for change, which measures the qualitative emotions of an individual in a change process. Surprisingly, a lack of research has been conducted on the affective components of individual change readiness considering that the emotions of individuals are a major antecedent of support or resistance during change initiatives (Burman, 2022). The positive and negative emotions or attitudes of individuals in response to change influence their acceptance and commitment to change (Nwanzu & Babalola, 2019).

The second category of individual readiness for change is cognitive change readiness that measures how an individual's mind processes the change message (AbuTahoun & Khan, 2019). Discrepancy in the belief that change is needed and appropriate according to the situation of the organization. Another component of cognitive change readiness is self-efficacy, or the individual's belief that the change initiative being implemented within their abilities and skills (Nwanzu & Babalola, 2019). Support coming from the organization through the leadership and management also impacts cognitive change readiness, and it may come in the form of resources or information. Lastly, the cognitive change readiness of an individual is influenced by the personal benefits or losses that one may experience for one's job such as opportunity for promotion or a pay cut (Ghahramani et al., 2022).

Job enrichment is the redesigning of jobs in a way that increases the opportunities for workers to experience feelings of responsibility, achievement, growth, and recognition. It is an improvement of job context /content in order to make challenging, autonomy, significant, have more skill variety, better control, feedback from work done, self-respect of the employee, more opportunity for growth and more chance to contribute his or her ideas, and discretion over how their job is performed which seeks to add depth to a job by giving workers more control and responsibility (Renzulli, 2021; Ruth & Njoku, 2022).

Organizations can enrich employees' jobs by involving them in managerial functions of the higher level, allowing them to do more tasks, have more autonomy, and receive more feedback which enables employees to evaluate their own performance (Wahyuni, et al., 2021). It occurs when an employer through development and intensification, placed an extra amount of work on employees with the aim of making it more interesting, and meaningful and increasing job challenge and responsibility (Robeyns, 2021). The purpose of job enrichment is to expand the tasks that each employee performs, allow them to perform tasks in different ways, and ultimately give them more control over their work. This makes work more stimulating and helps to motivate employees to do their best work (Sharma & Bora, 2022).

Significance of the study:

Nursing staff readiness and willingness for change are important; they help in introducing, managing, and maintaining the change. Studying factors that influence organizational readiness for changes will help in understanding readiness for change and shed the light on strategies needed to manage change effectively. Readiness for change in organization is linked to the culture of an organization. If the organization's culture is not consciously

considered during the transformation, the effort may fail or struggle (Burman, 2022).

Previous international studies suggested certain characteristics of culture that impact individual readiness for change and stressed the need for further research on the impact of holistic culture types. Moreover, the national study of (Burnes, 2020) found that organizations are forced to stay and respond to environmental changes in order to survive and nursing staff readiness for organizational change is considered a key aspect of any organizational change efforts and can be a determining factor of successful change.

According to the study conducted by (Saleh, et al., 2022) job enrichment is an excellent means of enhancing employee job satisfaction and prevention of staff turnover or intention to leave an organization. However, little research has been conducted to determine the effectiveness of job enrichment in organizational settings and there are misconceptions about readiness for change, and only a few healthcare and nursing studies nursing staff readiness for change, and its relation to job enrichment have been conducted. Therefore, the researcher introduced this study that assessed the relationship between readiness for change and job enrichment among nursing staff while the hospital undergoing transformation.

Aim of the Study:

The present study aimed to assess nursing staff readiness for change and its relation to job enrichment during hospital transformation.

Research Questions:

- What is the level of readiness for change among nursing staff during hospital transformation?
- What is the level of job enrichment among nursing staff during the hospital transformation?
- Is there a relation between nursing staff readiness for change and job enrichment during hospital transformation?

SUBJECT and METHODS

Research design:

A descriptive correlative design utilized to fulfill the aim of this study.

Setting:

The study conducted in a hospital undergoing organizational transformation (Smalout Specialized Hospital at Smalout City at Minia governorate, Egypt). This hospital witnessed many major transformations, hospital changed from General Hospital to Al-Amana hospital in year (2021) Recently, it also being prepared to transform into a comprehensive health insurance hospital. There have changes in building and adding new departments as physical therapy, urgent health care, trauma care, conjunctivitis clinics. Now a comprehensive quality program (GAHAR) is being applied to transform it into a comprehensive health insurance hospital, so the researcher chooses it to carry out study.

Study Subjects:

The study subjects included the convenient nursing staff working in the previously mentioned hospital during the period of data collection. Their total number was (415 nurses) and classified as shown in the following table:

Table (1): Study subject's distribution:

Hospital Name	Bachelor	Technical institute	Diploma	Total
Samalout Specialized Hospital	127	185	103	415

Data Collection Tools:

Data collected by three tools as follows:

Tool 1: Personal Data Sheet that used to collected data about the study subjects included (age, gender, educational qualification, department, job position, years of experience).

Tool 2: Nursing Staff Readiness for Change Scale:

This tool adapted by the researcher based on the studies of (Bouckennooghe et al., 2009; Kachian et al., 2018; Wong, 2021) to assess nursing staff readiness for change. It consisted of (42) items divided into both affective (22 items) and cognitive (20 items) components of individual readiness for change. Each statement measured by (5) points Likers scale as:

Never=1	Rarely =2	Sometime=3	Often=4	Always=5
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The scoring system: Total scores ranging from (42-210) and it divided into three levels as follow: Scores from (42 -98) represents a “low-level” of nursing staff readiness for change, Scores from (99 -154) represents a “moderate level” of nursing staff readiness for change, and Scores from (155 -210) represents a “high level” of nursing staff readiness for change.

Tool 3: Job Enrichment Scale:

This tool adopted by the researcher from Asikhia and Magaji (2015) to evaluate nursing staff job enrichment, it consisted of (19) items distributed in five dimensions: Skill variety (3) items, Task Identity (3) items, Task significance (3) items, Autonomy (6) items, and Feedback (4) items. Each statement measured by (5) points Likers.

Never=1	Rarely=2	Sometime=3	Often=4	Always=5
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The scoring system: ranging from (19 -95) and it divided into three levels as follow: Scores from (19 - 44) represents a “low level” of job enrichment, Scores from (45 - 69) represents a “moderate level” of job enrichment, and scores from (70 -95) represents a “high level” of job enrichment.

Validity of tools:

A panel of five professionals in nursing administration and education, including one professor and four assistant professors from Minia University's Faculty of Nursing, evaluated the study tools' face and content validity. Each member of the expert panel reviews the study tools for content coverage, clarity, phrasing, length, format, and overall format. On the jury panel's advice, in response to the advice and suggestions of experts the necessary changes were made. The Jury panel modified the scoring system in tool (2) and tool (3) to be as the following: never (1), rarely (2), sometimes (3), often (4) and always (5), instead of 5 responses that were used (strongly disagree (1), disagree (2), Neutral (3), Agree (4) and strongly agree (5). Some sentences had been rephrased and rearranged in response to the advice and suggestions of experts

Reliability of the study tools

Using data collected for pilot study, reliability of the study tools was performed to confirm its consistency by using cronbach alpha test which revealed good internal reliability for the two tools as (0.797 &0.781) for readiness for change scale and job enrichment scale in arrow.

Ethical Considerations:

- An official letter granted from the Research Ethics Committee of the Faculty of Nursing, Minia University.
- Approval to conduct the study obtained from dean of the Faculty of Nursing, Minia University
- Approval to conduct the study obtained from Manager of the hospital.
- Permission obtained from the chief person of the nursing department.
- Before the conduction of the pilot study as well as the actual study, agreement obtained from every participant before participation in the study after explaining the nature and purpose of the study.
- Study subject had the right to refuse to participate or withdraw from the study without any rational any time.
- The study subjects assured that all their data are highly confidential; anonymity was also assured through assigning a number for each nurse instead of names to protect their privacy.

Pilot study:

Pilot study was carried out before starting data collection on 10% of nursing staff (42 nurse) randomly selected form different hospital departments, to test the data collection tools regarding the phrasing, the order, and the need for adding or omitting items, as well to testing the accessibility, and applicability of the study tools, and to estimate time needed to fill each tool in addition it helped in identifying any obstacles and barriers that might interfere with data collection. Results of the pilot study indicated that the study tools were applicable without changes.

Data collection procedure:

- An official letter was granted from the Nursing Faculty Dean at Minia University, Ethical committee, Nursing Faculty at Minia University.
- The tools were translated into Arabic; then collect the jury approval for the tools to collect data of the study.
- Written approvals were obtained from the hospital directors as well as the nursing manager of the selected hospital after explaining the purpose of the study.
- After obtaining the permission, the researcher began to introduce herself to the head nurse and nursing staff then, explained the nature, aim of the study and how they should fill the study tools.
- The researcher scheduled the visit to each department of the hospital based on the nursing staff's schedule of work. The researcher selected three days on week to all hospital department, Saturday, Monday and Wednesday
- A pilot study was done to assure tools clarity and applicability. Then the reliability analysis was done.

- The study tools were administered directly by the researcher through morning, evening, and night shift during the working days. Nursing staff were given from 20 minute to 30 minutes to answer the study tools and the researcher answers any questions for clarifications that nursing staff need.
- The actual field work started from the beginning of April 2023 to the end of July 2023 for collecting data

Statistical Design:

Upon completion of data collection, the data were scored, tabulated, and analyzed through data entry and analysis by computer using the "Statistical Package for Social Science" (SPSS) (IBM 28). Data were presented using descriptive statistics in percentages, frequency mean, and standard deviation. Inferential statistical tests of significance such as chi-square and ANOVA tests were used to identify group differences among the study variables. The *p*-value > 0.05 indicates a non-significant result, while the *p*-value < 0.05 is significant, and the *p*-value ≤ 0.01 is highly significant. Spearman's correlation is used to test the nature and strength of the relation between the study variables

Results

Table (1): Distribution of the study subjects according to their personal data (n= 415):

Personal data		No.	%
Age	20: <30 years	195	47.0
	30: <40 years	112	27.0
	40: <50 years	87	21.0
	50:60 years	21	5.0
Job Position	Nursing Managers	37	8.9
	Special Care Teams Specialists	19	4.6
	Direct Care Nurses	359	86.5
Years of Experience	<10 years	199	48.0
	10: <20 years	111	26.7
	20: <30 years	84	20.2
	30 : ≥ 40 years	21	5.1
Department	Supervisors \ Special Teams Offices	21	5.1
	General Wards (GWs)	131	31.6
	Intensive Care Units (ICUs)	119	28.7
	Short stay Care Units	144	34.7
Gender	Female	290	69.9
	Male	125	30.1
Educational Qualification	Bachelor	127	30.6
	Technical institute	185	44.6
	Diploma	103	24.8

Table (1) illustrates that (47.0%) of the nursing staff are ranged between "20<30 yrs." , and (27.0%) of them are aged between "30<40 yrs." old. It is noted also as regards the nursing staff 's job position that (86.5%) are working as "direct care nurses" and (8.9%) are "Nursing Managers", then (4.6%) are " Special Care Teams Specialists". The same table shows also that (48.0%) of nursing staff have "<10 yrs. " years of experience followed by are (26.7%) with years of experience ranged between "10<20 yrs. " .

It is also noted from this table that (34.7%) of the nursing staff are working in "Short stay Care Units" then (31.6%) in "General Wards (GWs) " while (28.7%) of them are working in "Intensive Care Units (ICUs)" and (5.1%) are working in "Supervisors \ Special Teams Offices " Respectively"

It is also noted from this table that (69.9%) of the nursing staff were female, while (30.1 %) were males. this table also noted that (44.6%, 30.6%, 24.8%) of nursing staff's educational qualification had " technical institute, bachelor and diploma " respectively.

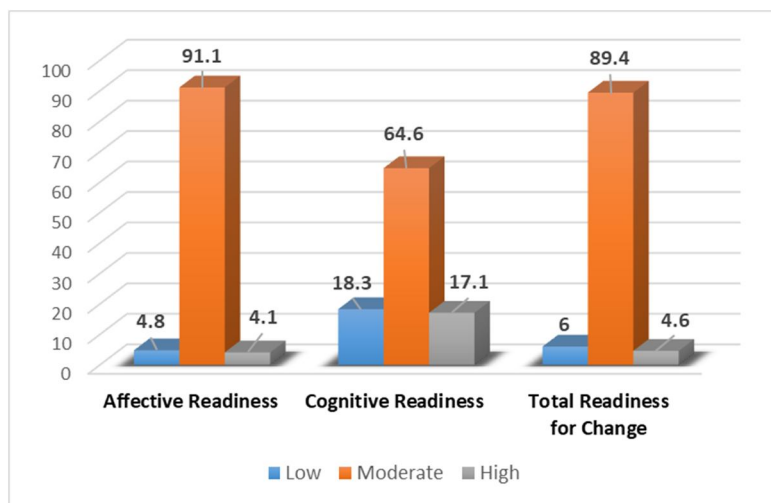


Figure (1): Distribution of total level of Readiness for Change and its Dimensions among the study subjects (n=415).

Figure (1) shows that (91.1%; 89.4%; & 64.6%) among the study subjects have "moderate" level in Affective readiness, Total readiness for change and Cognitive readiness for change respectively.

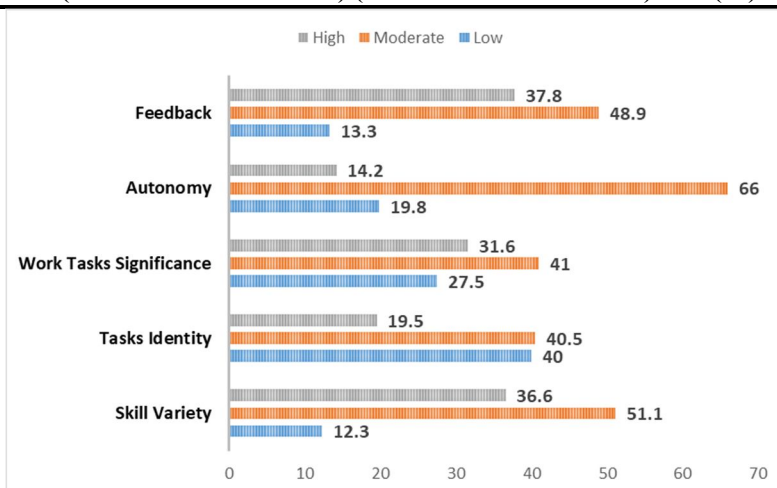


Figure (2): Distribution of Job Enrichment Dimensions among the study subjects (n=415).

Figure (2): present that (66.0%; 51.1%; 48.9%; 41.0% & 40.5%) of nursing staff have "moderate" level regarding dimensions of job enrichment "Autonomy, Skill variety, Feedback ,Work tasks significance and Tasks identity" respectively-while (37.8%; 36.6%; 31.6%; 19.5%, &14.2%) of nursing staff's had "high" level in Job enrichment dimensions" Feedback, Skill variety, Work tasks significance, Tasks identity and Autonomy" respectively, and (40%; 27.5%; 19.8%; 13.3%, &12.3%) of nursing staff's had "low" level regarding dimensions of job enrichment "Tasks identity, Work tasks Significance, Autonomy, Feedback and Skill variety" respectively.

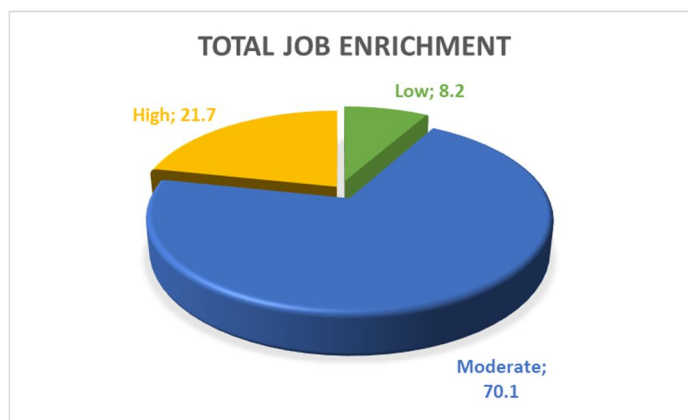


Figure (3): Distribution of Total Job Enrichment Level among the study subjects (n=415).

Figure (3): illustrate that (70.1%) of nursing staff have "moderate" level regarding total job enrichment, followed by (21.7%) have "High" level then (8.2%) have "Low" level.

Table (2): Correlation between levels of Readiness for Change and its Dimensions and Job Enrichment and its Dimensions among the study subjects (n= 415):

Items		Affective Readiness	Cognitive Readiness	Total Readiness for Change
Skill Variety	r	.179**	.283**	.193**
	P - value	0.000	0.000	0.000
Tasks Identity	r	.263**	.456**	.283**
	P - value	0.000	0.000	0.000
Work Tasks Significance	r	.129**	.506**	.292**
	P - value	0.000	0.000	0.000
Autonomy	r	.166**	.288**	.253**
	P - value	0.000	0.000	0.000
Feedback	r	.145**	.258**	.153**
	P - value	0.003	0.000	0.002
Total Job Enrichment	r	.203**	.474**	.283**
	P - value	0.000	0.000	0.000

r = spearman's correlation coefficient

** Correlation is high statistically significance at p-value < 0.01

Table (2): shows that there are high statistical significance positive correlation between "Total readiness for change " and "Total Job enrichment" at (p =0.000" & " r =.283). Also, there is high statistical significance positive correlation between "Cognitive readiness for change" and "Total Job enrichment and it's all diminutions" at (p =0.000), there are high statistical significance positive correlation between " Total readiness for change" and " all job enrichment diminutions" at (p =0.000), in addition, there are high statistical significance positive correlation between "Total readiness for change" and" Feedback" at (p =0.002).This table shows also that, there are high statistical significance positive correlation between" Affective readiness for change " and "Total Job enrichment and it's all diminutions" at (p =0.000), and there are high statistical significance positive correlation between" Affective readiness for change " and " Feedback" at (p =0.003).

Discussion

Health care organizations are continually facing many challenges to stay competitive and successful, which forces them to regularly reassess and reevaluate their strategies, structures, policies, and culture. However, effective management of change is the main challenge because of more human involvement in the change process. Nurses' readiness for organizational change is reflected in the beliefs, attitudes, intentions, and understanding of nurses that change is necessary for organization success. The readiness for change represents a higher construct than just understanding and believing that change is necessary to implement. It involves the collection of thoughts and intentions towards a precise effort to implement change which positively affect their innovative work behaviors. (Engida, et al., 2022).

The current study aimed to assess nursing staff readiness for change and its relation to job enrichment during hospital transformation. **Regarding the personal data of the studied nursing staff**, the study findings showed that, near to half of the studied nursing staff 'age is ranging from twenty to less than thirty years and most of the studied nursing staff were direct care nurses. As regarding years of experience, the current study showed that near to the half of the studied nursing staff have years of experience less than ten years in the nursing field, Regarding the distribution of the nursing staff according to their departments, the current study illustrated that more than one third of the nursing staff work in short stay care units. Also, the present study illustrated that more than two third of the nursing staff were female, while near to one third of them were males. the present study showed also that most of nursing staff's educational qualification had technical institute, followed by bachelor then diploma

The findings of the current study clarified **regarding total level of readiness for change among the studied nursing staff that**, most of staff had moderate level in total readiness for change **from the researchers' point of view** this result could be due to the fact that studied staff nurses prepared during their under graduation study how manage change through studying change, causes of change, and steps to manage change process and how to deal with resistance in a good manner as the large number of them were having technical institute and barcarole degrees in nursing. So, being highly qualified and well prepared to handle resistance professionally. In addition, most of the studied nursing staff is youth so are more open and flexible to deal with change.

This result could be attributed also to due to the support given from top management to nurses in decision-making processes, in addition to the appreciation to nurses in the form of good salaries, rewards and adequate resources, good communication system, good information about change, and effective staff training and development which supported by the assumption that favorable and positive work environment allows staff nurses to make decisions for patient and freedom to make essential work decisions may enhance their readiness for change.

The current study finding is consistent with the studies conducted by (Ahmed, et al., 2024) who illustrate that nurses had high level of factors associated with nurses readiness for organizational change and high level innovative work behaviors, and (Zeid, et al., 2023) whose results showed that most of staff nurses had high readiness to change level, Also, this result agreed with (Negm et al., 2021) who stated that the majority of studied nurse managers had a high-level

factor of readiness to change, (Saad et al., 2021) who showed that less than three quarters of studied staff nurses had readiness for change. Also, (El-sayed et al., 2019) found that the highest percentage of staff nurses had moderate level of readiness for change.

The present finding also aligns with the research conducted by Andrew, (2017) who reported that nurses had high level factors readiness for organizational change, in addition to (El-Sayed et al., 2017) which showed that most of staff had moderate level in total level of readiness for change. Also, this result was in agreement with the study of (Seada, ElGuindy, 2017) and (Abd-Elkaway et al., 2015) who found that the nurses had a moderate to high level of readiness for change. However, the present study finding disagree with (Emam et al., 2022) study which revealed weak levels of overall readiness for change.

Regarding the total and all dimensions of job enrichment the present study showed, the most of nursing staff had moderate level in the total and in all dimensions of job enrichment. **From the researchers' point of view**, resulting from the undergone transformation of the studied hospital there is a redesigning of jobs in a way that increases the opportunities for nurses to experience feelings of responsibility, achievement, growth, and recognition.

In addition, there are more sufficient freedom to nursing staff in deciding about work methods, pace, sequence, increased responsibility, encourage participation, providing feedback to the employees, nursing supervisors make the nursing staff understand how tasks contribute to a comprehensive high-quality care. adequate benefits to the employees. Additionally with management support via providing extrinsic and intrinsic rewards and adequate welfare measures to the employees to the employees depending upon their motivational patterns, staff should perceive that management is sincere and caring about them.

The present finding agreed with (Saleh, et al., 2022) Who found that nurses had high level of job enrichment. Also, (Nwankwo, et al., 2021) who found that nurses had high level in the total and in all dimensions of job enrichment. Furthermore, (Rodríguez-Monforte et al., 2021) who found that nurses had high level of job enrichment. The present finding also confirmed by (Sanda et al., 2015) who found that near to half of the variation in employee satisfaction can be explained by the changes in practice of job enrichment this study provides many implications for the practice of job enrichment.

Regarding correlation between levels of Readiness for Change and its Dimensions and Job Enrichment and its Dimensions The current study demonstrated that there is high statistical significance positive correlation between "total readiness for change "and "total job enrichment". Also, there are high statistical significance positive correlation between "cognitive readiness for change" and "total job enrichment and it's all diminutions." and between "total readiness for change" and "all job enrichment diminutions". Also, there are high statistical significance positive correlation between "affective readiness for change" and "total job enrichment and it's all diminutions".

The researcher's perspective reveals that this outcome reflected the favorable and positive work environment accompanies the hospital transformation that allows staff nurses to make decisions for patient and freedom to make essential work decisions enhance their readiness for change, enough time and opportunity to discuss patient care

problems with other nurses and working as a team with physicians through good relationship, added to that near to half of nursing staff 'age is ranging from twenty to less than thirty years were young age that make the studied nursing staff more open and low resistance for change. The current study indicated that, as perception of the professional nursing practice environment improved, availability of resources, nurses' readiness for organizational change also improved.

Moreover, Job enrichment is a very useful technique to motivate nursing staff as in the routine jobs, the employees find their jobs very boring and monotonous. The number of such employees is generally considerable and the frustration of these employees can be removed by making the job interesting with the help of job enrichment. Job enrichment helps in reducing the rates of employee turnover and absenteeism, job enrichment motivates the employees intrinsically by giving them opportunities for growth advancement and self-realization.

Furthermore, task enforcement is made easy with the help of job enrichment and the skills of workers staff are increased, the enriched jobs give more job satisfaction to the employees, job enrichment is advantageous to the organization as there is qualitative as well as quantitative improvement in output and there is higher satisfaction of the staff. Additionally, employees tend to be more creative when they work in an enriching context of complex and challenging jobs, learn new skills by having more responsibilities, the employee will have the chance to work on new tasks and therefore learn new skills.

Also, Decision making can lead to the employee to think, decide, and try new things. By having to learn new skills, the employee has the opportunity to become proficient at certain tasks and even become experts, and more resilient and welcome to change. In addition, job enrichment reduce boredom with focuses on giving employees more variety and responsibilities. The target of job enrichment is to reduce the chance of boredom from the repetitive, tedious activities, creates a better work environment The net result of job enrichment is an overall more positive environment that promotes maximum productivity. This is simply because employees who are treated better tend to have better attitudes around the workplace and tend to spread that positivism around the work success.

The current study finding is confirmed by the studies conducted by (Alqudah, et al., 2022) whose results reported positive statistically significant relationship between high – performance human resource management practices and readiness for change. Also, the current study finding is agreed with (Saad, et al., 2021) who illustrate that there was a highly statistically significant positive correlation between professional nursing practice environment and staff nurses' readiness for change, in addition to (Rafferty, & Minbashian, 2019) who showed that positive statistically significant relationship between employee change readiness and change-supportive behaviors. Moreover, the study finding was in the same line with (El-Sayed, et al., 2017) found that there was statistical positive correlation between nurses' readiness for organizational change and professional nursing practice environment.

The study results confirmed by (Egbe, 2023) who illustrate that positive significant relationship between job enrichment (employee autonomy and career growth) and organizational efficiency. Also, the study results confirmed by (Tamunokuro, et al., 2023) who demonstrate a favorable and

substantial relationship between job enrichment and organizational innovative work behavior. Moreover, these results confirmed by (Mutie, 2021) who found that there was a significant positive relationship between job enrichment and employee commitment.

Conclusion

Most of the nursing staff have moderate level regarding total readiness for change and the majority from nursing staff have "moderate" level regarding total job enrichment." Moreover, there was high statistical significance positive correlation between readiness for change and job enrichment among the studied subjects. Nursing staff Readiness for change especially during hospital transformation is considered a critical precursor to the successful implementation of complex changes in healthcare settings.

Recommendations

Some recommendations are highlighted in the light of the results of this study as follows:

Recommendations According to Administrative Authorities

Manager and supervisors

- Develop training modules focusing on change management, new processes, and required skills.
- Identify and implement job enrichment opportunities such as role diversification, decision-making authority, and professional development.

Recommendation for staff nurses:

Staff nurses should

- Engage fully in the training programs provided to enhance your skills and understanding of the changes.
- Seek out and embrace opportunities for job enrichment, such as taking on new responsibilities, participating in decision-making processes, and engaging in professional development activities.
- Stay informed about the hospital's transformation plans, goals, and progress. Take a proactive approach in understanding how these changes will impact your role and department.

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