STRATEGIC MANAGEMENT PLANNING AND THE DEVELOPMENT OF HEALTHCARE SECTOR IN ABU DHABI: STRUCTURAL EQUATION MODELING (SEM) APPROACH

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Abstract:
The purpose of this study is to determine the impact of strategic management planning in the development of healthcare sector in Abu Dhabi. The hypothesized research model and the key relationships were considered for the achieving the research objectives. In this proposed model, altogether seven hypotheses are developed to test the relationships among the various variables. To test the specific relationship of hypothesis, quantitative data must be collected to analyze the relationship and finally the result could be generalized on the population and select a sufficient sample size which represents the whole population that is what this research employed. In this study, the target population is the healthcare employees in Abu Dhabi. For this study, the sample size was 326 respondents from the healthcare sector in Abu Dhabi. Results revealed that healthcare service and facility is positively and significantly correlated with development of healthcare sector, as well as healthcare service and facility is positively and significantly correlated with financial and operational efficiency. Result also showed that financial and operational efficiency is positively and significantly correlated with development of healthcare sector, and healthcare service and facility is positively and significantly related with strategic management planning. However, strategic management planning does not a positive and significant influence on
development of healthcare sector. The results of this study provide evidence that increased healthcare service and facility is associated with increased development of healthcare sector. This research has contributed to the existing knowledge by providing an empirically tested/validated model which could be used to predict a material portion of the variables that contributes to the eventual success of the healthcare.

**Keywords:** measurement model, strategic management planning, development of healthcare sector, Abu Dhabi, Structural Equation Modeling (SEM)

**1. Introduction**

The rising global trend of chronic diseases has led to the effective development of strategic plans through the use of health programs such as cardiovascular screening programs, lifestyle and behavior change. As far, a hospital creates techniques, which must be gotten from a situational or key examination, which is regularly performed by analyzing the strengths, weaknesses, opportunities and threats (Bryson, 2004). Total Quality Management cannot be successfully used as an aggressive weapon unless quality can be precisely characterized, measured, assessed, and observed over the long haul (Azam & Moha Asri; 2015; Tarofder et al., 2017). In fact, the growth of quality management processes ensures an effective strategic plan for the organization (Dahari et al., 2011; Azam et al., 2014; Tham et al., 2017). The problem statement of the current study highlights the issues of strategic management planning in the development of healthcare sector in Abu Dhabi. The issue of value estimation in medical services is approached as a mix of administration, quality credits regular to other administration associations and specialized quality ascribes one of a kind to social insurance. We trust that this exploration will serve as an initial move toward the union of the different quality properties characteristic in the human services area and urge different specialists to address the collaborations of the different quality traits. The key arrangement sorted out through objectives and goals offers an arrangement of quantifiable results which can be assessed.

Besides, there is a need to identify the gaps in Abu Dhabi health care facilities and develop a strategic plan for future healthcare services. Once the strategic opportunities have been recognized and potential dangers considered, a list of particular steps that will be taken to actualize the arrangement ought to be shaped. The research has focused with clear objectives in light of the targets has the capacity to concentrate on particular achievements. The research will help individuals stay healthy and to give access to convenient, high-quality, patient-focused health awareness.
2. Literature Review

2.1 Strategic Management
Strategy developed from a practical need to a distinguishing factor between failure and success in many organizations (Haque et al., 2014; Haur et al., 2017). Strategy was devised as performance tool on the top management for effective decision making and performance measurement. Chandler (1962) highlight that strategy is made at the top and executed at the bottom. In fact, the strong decision making process with the top management while implementation and execution role with the middle management of the organization. Andrews et al. (2006) dichotomizes strategy content into strategic stance (organization wide approach) and strategic actions (the implementation of the strategic stance). On the other hand, Rhodes and Keogan (2005) utilized a model that limits strategy to “decisions and actions” undertaken in order to fulfill the organization’s mission. While Hambrick and Fredrickson (2001) discuss strategy in terms of five aspects, 1) arena - the entity’s core business, 2) vehicles - methods for achieving targets, 3) differentiators, 4) staging timing of methods and, 5) economics - logic profit producing plans. They contend that each element is necessary to produce a coherent comprehensive organizational strategy.

2.2 Theoretical Underpinning
Floyd and Woolridge (2000) provide research evidence that strategy fails in an organization where the ineffective plans and unproductive work allocation in strategy execution is seen. There have been effective strategic tools like BCG matrix which aids firms to measure their business based on market growth. BCG Matrix shows the market share and market growth rate in four areas.

Cash cows are highly profitable business in low growth market. Since the low market is uncertain, its unique proposition and high revenue in the market ensures that the high profits are used by the business owners to run business in the higher market share business to solidify and strengthen their position. Dogs are those business ventures which make very low returns in the low growth market space and result in loss making business for the investors (Brian, 1996). BCG has an advantage that it is too simple and easy for the top management to identify their company position for creating significant business decisions and having a clear snapshot view of the performance of the company over the years and its future ahead. BCG matrix can be enhanced for better cash flow, balanced portfolio of investments, understanding the operations of the various business units of the firm and develop the characteristics of investment in a firm.
Brian (1996) mentions that although BCG had advantages, it also had its own limitations of being too simplistic in the depiction of market share and growth rate as there are many associated factors that too need to be considered along with market growth. The market attractiveness and business position are too complex to be depicted in high or low factor and need for differentiated factors to correctly depict the market performance.

Cooper (2000) highlights the General Electric and McKinsey developed the BCG model into a nine-cell matrix that considers the market situation and business interest of the firm into a more dynamic pattern for market assessment. The BCG matrix is mostly used as a snapshot view of the activities within a business group and the various business units within a business organization. Question marks are low market share products in a very competitive market space and as the name rightly says, it is question mark on their future existence. Stars are those products in with high market share in highly competitive market space and these businesses are highly profitable and generate higher sales and quality driven products and services.

2.3 Strategic Management and Healthcare
For the healthcare sectors, the quality of service, internal operations, the financial situation of vulnerability, institutional efficiency and effectiveness and etc. all play a critical role for its survival and expansion, in which any one of them cannot be neglected. The evaluation of the healthcare is a significant matter to resolve with difficulty. While the application of an all-inclusive evaluation is constrained by the size, capability to assess, the outside environment constraints of the healthcare, the benefits of including evaluation methods, in addition to the prospect of development tendency of the healthcare’s is bound to make a widespread measurement for encouragement and popularization.

The strategic planning with healthcare’s working in nations is by applying the system as changed by Rhodes and Keogan (2005). This interfaces the achievement of its technique to HRM and institutional courses of action, which are interconnected. This system gives an across the board base to the appraisal strategic planning hones in the healthcare’s (Blackmon, 2008). It is viewed as comprehensive since it traverses the traditional parts of strategic planning procedures to cover the execution stage, which is by and large the worry of the more extensive key administration ground. The main segment of Rhodes and Keogan (2005) strategic management process is procedure content. They depicted procedure content as far as “moves and choices made to accomplish association’s main goal”. This is entirely critical for healthcare’s strategic planning endeavors since it permits them to center their activities on accomplishing their main
goal. Procedures produced for Healthcares can either be helpful driving to enhance monetary assets or aggressive prompting objective uprooting. The determination of any procedure content depends mostly on the Healthcares subsidizing needs. The Healthcares internal background constitutes of the institutional capability, administration, management, and inside networking’s (Blackmon, 2008). Healthcare outside setting is collected of statutory bodies, private organizations, Healthcares, people, funding agencies, and beneficiaries (Barman, 2002).

The healthcares are in a unique environmental position; they must meet the needs of the organization itself while serving the public’s interest (Chetkovich and Frumkin, 2003) which may at times be opposing. The internal environment may consist of leadership, organizational capacity, and networking capacity. In addition to managing the complex internal environments, Healthcares have to contend with external environmental forces such as state and local governments, private foundations, private citizens, along with others that might provide funding (Barman, 2002) and the consumers. Furthermore, the changing fee structure is altering the competitive environment in the healthcare’s (Chetkovich and Frumkin, 2003). As a result there is a shifting toward fee based revenue streams rather than government funding and private donations. Chetkovich and Frumkin (2003) propose that healthcares respond by employing efficiency-based business responses or marketing-based differentiation responses. Regardless of which strategic response is employed by the organization, human resources are a vital component. Consequently, as the behaviors of key players in the Healthcare environment this impacts strategic management profoundly, human resources management is emerging as an issue that warrants additional attention as presented in the section that follows (Brown and Iverson, 2004; Canary,1992; Rhodes and Keogan, 2005; Weilemaker and Flint, 2005).

Rhodes and Keogan’s (2005) and Blackmon (2008) developing the mission in the healthcare’s is a vital element of their strategic planning efforts and must be considered as the hub of the BSC evaluation procedure. Therefore, the mission statements in the healthcare have been creating an impact on the strategic management practice of the organization. Rhodes and Keogan (2005), initiate that organizations are required to keep the integrity that is recommended in the unique mission. Therefore, a number of them maintain that the appropriate arrangement between the mission and the organizational goals facilitates the execution process (Moseley and Hasting, 2005; Okumus, 2003).

Campbell and Yeung (1998) and Rhodes and Keogan (2005) showed the HRM has to be incorporated into the healthcare’s usual efforts of strategic planning. This means that it can more be applied as a planned quite than conventional purpose to encourage for better competitive gain (Cakar et al., 2003; Macpherson, 2001).
authors’ argument is confirmed by the investigator concerning the strategic accountability of HRM and how it can be a necessary part of an organization’s strategic planning pains. Weilemaker and Flint (2005) mention that there are two schools of thoughts which are to communicate to human resources, where one maintains that HRM is a support activity and the further a strategic instrument. Cakar et al (2003) stresses the tendency to pay attention on human capital and internal business processes as a means of strategically achieving competitive advantage as evidenced by the quality management.

2.4 Variables
This study adopts three types of variables, which are the independent variables, mediating variable and dependent variable. The process of identifying these variables was climacteric and in depth studies were taken in order to develop a well-founded conceptual framework. The dependent variable is of chief importance in this research. The aspirations of this research are to understand the dependent variable as well as to quantify and predict it too. In this study, the dependent variable is ‘Development of Healthcare Sector’. Basically, the dependent variable is influenced by the mediating variable and independent variables. It can be regulated either in a positive or negative manner. The independent variables are vital in the process of predicting or analyzing the dependent variable. Hence, the independent variables in this research are Patient Centered Service, Financial and Operational Efficiency and Quality Medical Facilities. The moderating variables are the ones that impose strong contingent effect on the relationships between the independent variables and dependent variable. In this research, there are no moderating variables. Lastly, Strategic Management Planning is the moderating variable, which is also known as that conceptualizes the influence of the independent variables on the dependent variable.

2.5 Conceptual Framework and Hypotheses
The conceptual framework that is shown in Figure 1 depicts the relationship between the variables used in this study. The hypothesized research model and the key relationships to be tested in this study are illustrated in Figure 1.
In this proposed model, altogether seven hypotheses are developed to test the relationships among the various variables. The following section presents an exhibition on the five hypotheses developed for this study.

H1: Healthcare Service and Facility is positively and significantly correlated with Development of Healthcare Sector
H2: Healthcare Service and Facility is positively and significantly correlated with Financial and Operational Efficiency
H3: Financial and Operational Efficiency is positively and significantly correlated with Development of Healthcare Sector
H4: Healthcare Service and Facility is positively and significantly related with Strategic Management Planning
H4: Strategic Management Planning has a positive and significant influence on Development of Healthcare Sector

3. Research Methodology

3.1 Research Approach
Healthcare sectors attempt extensive key strategic planning, yet a lot of these efforts neglect to accomplish the advantages of effective planning, and in some cases it is totally insufficient. So, the research approach of this study is very important to achieve the research goal. Moreover, the deductive approach is used for this study since it is using statistical analyzing system by collecting data based on a theory.
3.2 Research Method
Strategic planning has gotten to be a great deal more advanced, driven by improvements in related disciplines and improvements in the field. To understand the real phenomenon, the method is important when the research is concerned. The study which uses quantitative method is more objective that compare with the qualitative strategy. The data are subsequently analyzed to explain the relationships among the variables by employing statistical analysis namely descriptive and inferential statistics. Therefore, the quantitative method is more appropriate since present study test the hypotheses developed rather than a building theory.

3.3 Study Population
The study population is entire group of people or events that the researcher wishes to investigate (Sekaran & Bougie, 2016). The defining target population is helpful the researcher to select the appropriate sample from which the data are to be gathered (Zikmund, et al., 2010). In this study, the target population is the healthcare employees in Abu Dhabi.

3.4 Sampling Design and Sample Size
The simple random sampling is characterized with every element in the population has an equal chance of being included as a subject in the sample (Zikmund, et al., 2010) whereas some limitations are appeared in terms of cost, cumbersome of the sample (Sekaran & Bougie, 2016). Instead of simple random sampling, Zikmund, et al., (2010) and Sekaran & Bougie, (2016) underlined the alternatives of probability sampling methods. Hence, present study employs the simple random sampling method under the probability sampling design, because this study focuses on the strategic management planning in the development of healthcare sector in Abu Dhabi. Furthermore, for this study, the sample size was 326 respondents from the healthcare sector in Abu Dhabi.

3.5 Statistical Technique of Data Analysis
To conduct the Structural Equation Modelling (SEM), the first step that is to specify the measurement model in three stages. Firstly, specify the number of factors or latent variables which is represented by ovals to be hypothesized by the scale’s items constituted by rectangles. Next is to specify the items linked to each factor whereby each item linked to only one latent variable. Thirdly, if the hypothesized model includes multiple factors, then the associations between factors specify are to be represented. In this measurement model specification stage, three types of parameters are desired that
are the hypothesized factor loadings, correlation between factors or the loading of a lower order factor on a higher order factor and error variance for each item.

4. Data Analysis

4.1 Demographic Analysis
The first part of the analysis emphasizes on the demographic characteristics. The demographic characteristics comprise of gender, designation, age, educational qualification etc. It can be seen that the gender split in the sample were almost equal; 46.93% and 53.07% are male and female respondents respectively, where many of the respondents (55.52%) were Administration respondents, means admin staffs; whilst 44.48% of respondents were from Medical side either Doctor or Nurse. The majority (41.41%) respondents are in the 20-29 years’ age group and 37.42% respondents belong to the 30-39 years age group. The other three age categories only represent 21.17% of the sample. Referring to the findings, the majority of respondents (55.83%) claimed that they have obtained Bachelor degree qualification, whilst 13.50% claimed they have studied up to Diploma level. The survey found that 26.69% respondents have obtained Master Degree. Furthermore, 3.99% respondents possess Doctoral degrees.

4.2 Structural Equation Modelling (SEM)
In this study, a two-step approach was used in Structural Equation Modelling (SEM). The first step involved CFA to estimate the measurement model; this allows researchers to examine the reliability and the validity of the constructs. The second step involves the development of a structural model which yields the results for hypotheses testing and validation. For this purpose, the measurement model that has been tested with CFA is then transformed into a full structural model based on the nature of the causal relationships among the latent constructs in order to test the hypotheses. SEM techniques are then used to test the goodness-of-fit of the model to the data, meaning that there is no difference between the theoretical model and the data. The significance of the structural model is evaluated through the differing kinds of absolute fit indices and incremental fit indices as mentioned in chapter three.

The structural model in Figure 2 shows the proposed relationship between the exogenous variables and the endogenous variables. Exogenous variables are synonymous with independent variables in regression analysis and cause fluctuations in the values of other variables in the model. Changes in the values of exogenous variables are not explained by the model. In contrast, endogenous variables are similar to dependent variables and are influenced by the exogenous variables in the model,
either directly or indirectly (Western and Gore, 2006). Healthcare Service and Facility (HSF) is the exogenous variable in the model. Development of Healthcare Sector (DHS), Financial and Operational Efficiency (FOE) and Strategic Management Planning (SMP) are the endogenous variables in the model. Each of these endogenous variables is seen as an outcome for a basis on which the hypotheses can be developed within the study. In other words, the proposed relationships between research variables as shown in this path diagram can be accessed through the statistical outcome of the model. As mentioned in the proposed research model, the present study hypothesizes that Healthcare Service and Facility of the respondents (HSF) has a positive effect on: Development of Healthcare Sector, Financial and Operational Efficiency and Strategic Management Planning. In addition, the positive effects are to be expected between Financial and Operational Efficiency and Development of Healthcare Sector, Strategic Management Planning and Development of Healthcare Sector, Financial and Operational Efficiency and Strategic Management Planning.

The estimated structural model is depicted in Figure 2 whilst the \( \chi^2 \) (653) value is 1428.79. The \( \chi^2 / \text{df} \) is < 3. Absolute and incremental fit indices evidence a better fit of the model; in fact, a GFI value of 0.909 is a reasonable fit; indicating that the model has a good improvement over the based model. The absolute fit indices of RMSEA and RMR are reported with a value of 0.048 and 0.020, this indicates that they fit well with the model. In addition, the incremental index of CFI is reported with a value of 0.918; these values are above the general cut-off criteria of 0.90 and confirm that the model reasonably fit’s with the data. The other two indices, IFI and TLI also record decent values (0.918 and 0.906) over 0.90 and further confirm the outcome of the other indices.
Table 1: Model Fit Indices for the Initial Structural Model for the Framework

<table>
<thead>
<tr>
<th>$\chi^2$</th>
<th>df</th>
<th>$\chi^2/df$</th>
<th>GFI</th>
<th>RMSEA</th>
<th>RMR</th>
<th>NFI</th>
<th>CFI</th>
<th>IFI</th>
<th>TLI</th>
</tr>
</thead>
<tbody>
<tr>
<td>1428.79</td>
<td>653</td>
<td>2.188</td>
<td>0.909</td>
<td>0.048</td>
<td>0.020</td>
<td>0.866</td>
<td>0.918</td>
<td>0.918</td>
<td>0.906</td>
</tr>
</tbody>
</table>

Table 2 demonstrates the results for path estimates and their associated p-values. The P-statistics associated with the standardized estimates show that path estimates between the exogenous variable and the endogenous variables are significant at a minimum 0.05 level. The standardized regression estimates of HSF $\rightarrow$ FOE, HSF $\rightarrow$ SMP, HSF $\rightarrow$ DHS are statistically significant at the 0.001 level of significance and FOE $\rightarrow$ DHS is significance at 0.05 significance level. They are consistent with the expected direction and proposed relations. However, the SRW of SMP $\rightarrow$ DHS is not statistically significant.
Table 2: Regression Weights for the Structural Model

<table>
<thead>
<tr>
<th>Hypothesized Paths</th>
<th>Estimate</th>
<th>S.E.</th>
<th>C.R.</th>
<th>P</th>
<th>SRW</th>
</tr>
</thead>
<tbody>
<tr>
<td>FOE --&gt; HSF</td>
<td>.586</td>
<td>.069</td>
<td>8.455</td>
<td>***</td>
<td>.548</td>
</tr>
<tr>
<td>SMP --&gt; HSF</td>
<td>.686</td>
<td>.087</td>
<td>7.875</td>
<td>***</td>
<td>.493</td>
</tr>
<tr>
<td>DHS --&gt; FOE</td>
<td>.106</td>
<td>.052</td>
<td>2.055</td>
<td>.040</td>
<td>.119</td>
</tr>
<tr>
<td>DHS --&gt; SMP</td>
<td>-.032</td>
<td>.036</td>
<td>-.903</td>
<td>.366</td>
<td>-.047</td>
</tr>
<tr>
<td>DHS --&gt; HSF</td>
<td>.567</td>
<td>.078</td>
<td>7.252</td>
<td>***</td>
<td>.596</td>
</tr>
</tbody>
</table>

The multivariate normality for structural model was measured using Marida coefficient of multivariate kurtosis. Since this value is more than 0.5, the assumption of normality is not met. Thus, 1000 bootstrap re sample was used and Bollen-Stine p value is 0.69 which is more than 0.05. Thus model correctness is accepted. Since the standardized residual covariance are less than two in absolute value, the model fit well to the data.

The Table 3 demonstrated that AVE values for the entire constructs are greater than 0.5. Further to this, the CR values are greater than the AVE values which indicates the convergent validity.

Table 3: AVE and CR Values for the Structural Model

<table>
<thead>
<tr>
<th>Variables</th>
<th>AVE</th>
<th>CR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthcare Service and Facility</td>
<td>0.82</td>
<td>0.96</td>
</tr>
<tr>
<td>Development of Healthcare Sector</td>
<td>0.92</td>
<td>0.96</td>
</tr>
<tr>
<td>Financial and Operational Efficiency</td>
<td>0.52</td>
<td>0.79</td>
</tr>
<tr>
<td>Strategic Management Planning</td>
<td>0.57</td>
<td>0.83</td>
</tr>
</tbody>
</table>

4.3 Hypotheses Testing

This section discusses the results of the structural model that was derived through the SEM in section 4.7 and the results of hypotheses testing. Table 4 demonstrates the summarised results of the five hypotheses.

Table 4: The Results of the Hypotheses Testing

<table>
<thead>
<tr>
<th>Hypothesized Paths</th>
<th>SRW</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>H1: HSF --&gt; DHS</td>
<td>.596</td>
<td>***</td>
</tr>
<tr>
<td>H2: HSF --&gt; FOE</td>
<td>.548</td>
<td>***</td>
</tr>
<tr>
<td>H3: FOE --&gt; DHS</td>
<td>.119</td>
<td>.040**</td>
</tr>
<tr>
<td>H4: HSF --&gt; SMP</td>
<td>.493</td>
<td>***</td>
</tr>
<tr>
<td>H4: SMP --&gt; DHS</td>
<td>-.047</td>
<td>.366</td>
</tr>
</tbody>
</table>

Note: *** p-value is statistically significant at the 0.001 level
** p-value is statistically significant at the 0.05 level
H1: Healthcare Service and Facility is positively and significantly correlated with Development of Healthcare Sector
Based upon the standardized regression weight and significant level shown in Table 4, the following result in Table 5 was derived for hypothesis one.

Table 5: Decision for Hypothesis One

<table>
<thead>
<tr>
<th>Hypothesis</th>
</tr>
</thead>
<tbody>
<tr>
<td>H1: Healthcare Service and Facility is positively and significantly correlated with Development of Healthcare Sector</td>
</tr>
<tr>
<td>Conclusion</td>
</tr>
<tr>
<td>Supported</td>
</tr>
</tbody>
</table>

H2: Healthcare Service and Facility is positively and significantly correlated with Financial and Operational Efficiency
Based upon the standardized regression weight and significant level shown in Table 4, the following result in Table 6 was derived for hypothesis two.

Table 6: Decision for Hypothesis Two

<table>
<thead>
<tr>
<th>Hypothesis</th>
</tr>
</thead>
<tbody>
<tr>
<td>H2: Healthcare Service and Facility is positively and significantly correlated with Financial and Operational Efficiency</td>
</tr>
<tr>
<td>Conclusion</td>
</tr>
<tr>
<td>Supported</td>
</tr>
</tbody>
</table>

H3: Financial and Operational Efficiency is positively and significantly correlated with Development of Healthcare Sector
Based upon the standardized regression weight and significant level shown in Table 4, the following result in Table 7 was derived for hypothesis three.

Table 7: Decision for Hypothesis Three

<table>
<thead>
<tr>
<th>Hypothesis</th>
</tr>
</thead>
<tbody>
<tr>
<td>H3: Financial and Operational Efficiency is positively and significantly correlated with Development of Healthcare Sector</td>
</tr>
<tr>
<td>Conclusion</td>
</tr>
<tr>
<td>Supported</td>
</tr>
</tbody>
</table>

H4: Healthcare Service and Facility is positively and significantly related with Strategic Management Planning
Based upon the standardized regression weight and significant level shown in Table 4, the following result in Table 8 was derived for hypothesis four.

Table 8: Decision for Hypothesis Four

<table>
<thead>
<tr>
<th>Hypothesis</th>
</tr>
</thead>
<tbody>
<tr>
<td>H4: Healthcare Service and Facility is positively and significantly related with Strategic Management Planning</td>
</tr>
<tr>
<td>Conclusion</td>
</tr>
<tr>
<td>Supported</td>
</tr>
</tbody>
</table>
**H5: Strategic Management Planning has a positive and significant influence on Development of Healthcare Sector**

Based upon the standardized regression weight and significant level shown in Table 4, the following result in Table 9 was derived for hypothesis five.

<table>
<thead>
<tr>
<th>Hypothesis</th>
<th>Conclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>H5: Strategic Management Planning has a positive and significant influence on Development of Healthcare Sector</td>
<td>Not Supported</td>
</tr>
</tbody>
</table>

**5. Conclusion**

This study mainly focuses on four main variables; Healthcare Service and Facility, Development of Healthcare Sector, Financial and Operational Efficiency and Strategic Management Planning. The researcher examined the level of Healthcare Service and Facility, Development of Healthcare Sector, Financial and Operational Efficiency and Strategic Management Planning of Administration and Medical related respondents using a questionnaire.

The Abu Dhabi Health Services Strategy aims to give the required medical policies and facilities boost to attract the globally renowned healthcare facilities to Abu Dhabi to ensure that the best healthcare and hospital management systems are in place to bring the best medical expertise to the region. For the purpose of this study Healthcare Service and Facility is defined as; the positive psychological state of development which is characterised by self-efficacy, health orientation, optimism and resilience. The data shows that the mean value of Healthcare Service and Facility is 3.86; according to the results, there was no remarkable difference between mean scores of each sub-scale. The mean values for each sub-scale are within 3 to 4. This provides evidence that the respondents’ self-efficacy, health orientation, optimism and resilience are relatively higher in the development of healthcare sector.

However, gender, designation, educational qualification and age have had no significant effect on Healthcare Service and Facility. However, the development of strategic plan involves the design or adjustment of the organization through which the varying financial, economic, human and operational changes. There are constant changes to existing roles of people, their reporting channels, their performance evaluation and control mechanisms in the company. However, human resource and organizational arrangement are significant to strategic management in healthcare. In fact, they assist the implementation phase of strategic management.
The dependent variable of this research is Development of Healthcare Sector, according to the statistics; the mean value of Development of Healthcare Sector is 4.12. Further to this, the age level of respondents has significantly affected Development of Healthcare Sector; the age group below 21 years old are the highest performing group in the Development of Healthcare Sector (M = 4.494, F = 3.598, p < 0.05). However, gender, designation and education do not have any significant effect on their development of healthcare sector. The strategic direction gives a set of indicators that gives operational processes that are applied to various departments in the organization. The business model and operational plan ensures that the organization creates and distributes the products and services with high operational value and high quality. The strategy is made at the top and executed at the bottom. The strong decision making process with the top management while implementation and execution role with the middle management of the organization, the strategy fails in an organization where the ineffective plans and unproductive work allocation in strategy execution is observed.

Above and beyond, the development of strategic plan involves the design or adjustment of the organization through which the varying financial, economic, human and operational changes. There are constant changes to existing roles of people, their reporting channels, their performance evaluation and control mechanisms in the company. Once the strategic opportunities have been recognized and potential dangers considered, a list of particular steps that will be taken to actualize the arrangement should be shaped.

This research found positive significant relationships between healthcare service and facility, financial and operational efficiency, strategic management planning and development of healthcare sector. Financial and operational efficiency and strategic management planning did not work as mediators. This study was the one of the rare research study which investigated the impact of healthcare service and facility within Abu Dhabi according to the reported research literature. The available research knowledge regarding healthcare service and facility is based on European and American knowledge and the cross-cultural validation of the construct is much needed. Thus, it is very important to extend this knowledge to the Asian context. Future studies can be extended to check the applicability and relevance of healthcare service and facility within Abu Dhabi using different samples from different medical sectors, occupations etc. Therefore, future research should focus on examining the antecedents of healthcare service and facility.
References


