The Organizational Culture of State Operated Healthcare Facilities

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Abstract

The importance of intangible elements is essential to the success of an organization. They often make the difference between success and failure. In this context, we find it useful to tackle this topic in our paper, namely the organizational culture in state operated healthcare facilities. Based on a questionnaire, we aim to identify the dominant norms and values in a healthcare facility so as to obtain an x-ray of the organization that would be a starting point for the managerial staff in order to improve the organizational climate. Tangible/material goods are exclusive, limited. Intangible assets, such as the meaning of the work, its purpose, moral dignity, the feeling of belonging are unlimited. All these are things we can obtain and use in our interest and in the interest of others only in the communities in which we live and work. A revolution in the meaning of work is called for, and a first step is the existence of a strong organizational culture characterized by purpose, principles, and autonomy.

Key words: organizational culture, norms, values, belonging, behaviors
J.E.L. classification: M10, M12, M14

1. Introduction

Among the most important sources of well-being at work are the relationships we have with the people around us. Any large-scale human cooperation, including in an organization, draws its juice from the common myths existing in people's imagination (Kofman et al, 2019). This cooperation is based on a set of people's beliefs centered on what they value, their expectations regarding what others do and say.

Culture exists in people's minds. It is a largely subconscious map of how to proceed in accordance with the rules of the group and how to remain a respected member within it. Organizational culture is a model of the basic assumptions learned, discovered or developed by a certain group, a certain community, which has functioned well enough for a certain period of time and which is to be passed on to new members as the appropriate way to perceive, think and feel about life and work in the organization (Schein et al, 2016).

In the current period, when change is the dominant feature of all the socio-economic systems, it is necessary to manage the organizational culture, so as to ensure the constant adaptation to the permanent changes in the internal and external environment of the organization. The relationship between the culture and the performance of an organization is highlighted by the functions of the organizational culture: it strengthens the cohesion of the team of employees, it improves the external adaptation of the organization, it increases staff's loyalty by encouraging feelings of devotion and loyalty to the organization (Sîrbu et al, 2009, pp. 49-54).

2. Literature review

The specialized literature abounds in definitions of and approaches to the organizational culture expression, such as: a set of symbols, ceremonies, and myths that convey the core beliefs and values of the organization to its members (Ouchi, 1981). Peters and Waterman (Peters et al, 1982) define culture as a coherent and predominant set of shared values, transmitted through symbolic means, such as myths, legends, slogans, anecdotes, stories. Culture represents the set of artificial products, core values and concepts, ways of thinking and behavior generally accepted in an organization as a common basis of action (Zorlentan et al, 1998). Nicolescu and Verboncu (Nicolescu et al, 2008) define culture as the set of values, beliefs, aspirations, behaviors outlined over time in each organization, which is predominant, and which directly and indirectly conditions its purpose and performance.

Values and norms are the main components of organizational culture. They determine how involved and productive employees are in achieving the company's objectives. The existence of a coherent and known system of values and norms is the basis of an organizational culture in which people are trying to achieve their personal goals at the same time with the interests of the group and of the community, in general.

3. Research methodology

In this paper, we have aimed to analyze the organizational culture of a state operated healthcare facility in Constanța County, by identifying the dominant values and norms in the organization with the help of a questionnaire (Kuckzmarski et al, 1995).

The questionnaire was filled in by 100 respondents employed in various management or operating positions, doctors, nurses, caregivers, orderlies, and technical-administrative staff.

The employees filled in the questionnaires anonymously, in order for us to obtain the most sincere answers, the respondents expressing their true opinion about the organization and their colleagues' behavior. For each of the 50 statements the respondent had to choose from the A, B, C or D options.

Grouping the 50 questions according to the questionnaire, we have, in the end, outlined the profile of the dominant norms within the healthcare facility, a profile described by the following elements:

- Pride of belonging to the organization;
- Concern for excellence;
- Team spirit;
- Trust in hierarchy;
- Concern for good management;
- Concern for colleagues;
- Concern for patients;
- Innovation;
- Interest in training;
- Atmosphere of trust within the organization.

4. Findings

The 50 questions, divided into groups of ten according to the questionnaire, define the 10 dominant norms which outline the organizational culture in the healthcare facility.

Following the answers received, we have used the interpretation grid of the questionnaire, and we have obtained for the 10 dominant norms and values within the organization, the following scores:

Table no. 1 Pride of belonging to the organization

	A		B		C		D		Total
1	-8	-2	-20	-1	37	1	62	2	72
11	30	2	52	1	-21	-1	-8	-2	53
21	-10	-2	-25	-1	37	1	48	2	50
31	24	2	58	2	-16	-1	-10	-2	56
43	12	2	40	1	-35	1	-20	-2	-3
Result 227x 10:100 = 22,7%									

Table no. 2 Concern for excellence

	A		B		C		D		Total
2	26	2	48	1	-27	-1	-8	-2	39
12	-4	-2	-28	-1	31	1	58	2	57
22	-12	-2	-28	-1	39	1	36	2	35
32	26	2	42	1	-23	-1	-10	-2	35
40	14	2	30	1	-41	-1	-18	-2	-15
Result 151x 10:100 = 15,1%									

Source: processing according to the results of the questionnaire.

Table no. 3 Team spirit

	A		B		C		D		Total
3	60	2	46	1	-14	-4	-4	-2	88
13	30	2	44	1	-26	-1	-14	-2	34
23	-4	-2	-20	-1	38	1	62	2	76
33	72	2	30	1	-22	-1	-4	-2	76
41	-6	-2	-14	-1	53	1	42	2	75
Result 349x 10:100 – 34,9%									

Table no. 4 Trust in hierarchy

	A		B		C		D		Total
4	42	2	38	1	-30	-1	-2	-2	48
14	28	2	38	1	-25	-1	-12	-2	23
24	32	2	45	1	-25	-1	-12	-2	40
34	34	2	51	1	-22	-1	-4	-2	59
42	-16	-2	-23	-1	36	1	48	2	45
Result 215x 10:100 = 21,5%									

Source: processing according to the results of the questionnaire.

Table no. 5 Concern for good management

	A		B		C		D		Total
5	26	2	41	1	-34	-1	-3	-2	25
15	-4	-2	-22	-2	37	1	54	2	65
25	-10	-2	-24	-1	42	1	40	2	48
35	20	2	42	1	-31	-1	-16	-2	15
44	40	2	45	1	-18	-1	-16	-2	51
Result 204x 10:100 – 20,4%									

Table no. 6 Concern for colleagues

	A		B		C		D		Total
6	-6	-2	-18	-1	20	1	92	2	88
16	52	2	43	1	-25	-1	-6	-2	69
26	42	2	42	1	-23	-1	-6	-2	55
45	-8	-2	-19	-1	28	1	80	2	81
46	46	2	44	1	-20	-1	-8	-2	62
Result 355x 10:100 – 35,5%									

Source: processing according to the results of the questionnaire.

Table no. 7 Concern for patients

	A		B		C		D		Total
7	0	-2	-28	-1	25	1	78	2	75
17	66	2	39	1	-15	-1	-8	-2	82
27	-2	-2	-21	-1	29	1	80	2	86
36	70	2	39	1	-13	-1	-4	-2	92
47	-8	-2	-31	-1	3	1	40	2	37
Result 372x 10:100 = 37,2%									

Table no. 8 Innovation

	A		B		C		D		Total
8	34	2	51	1	-15	-1	-6	-2	64
18	60	2	41	1	-18	-1	-4	-2	79
28	-4	-2	-22	-1	42	1	50	2	66
37	34	2	46	1	-24	-1	0	-2	56
48	-6	-2	-27	-1	39	1	44	2	50
Result 315x 10:100 – 31,5%									

Source: processing according to the results of the questionnaire.

Table no. 9 Interest in training

	A		B		C		D		Total
9	68	2	42	1	-14	-1	-4	-2	92
19	64	2	41	1	-13	-1	-10	-2	82
29	38	2	43	1	-29	-1	-2	-2	50
38	46	2	42	1	-24	-1	-2	-2	62
49	60	2	40	1	-18	-1	-8	-2	74
Result 360x 10:100 = 36%									

Table no. 10 Atmosphere of trust within the organization

	A		B		C		D		Total
10	40	2	44	1	-21	-1	-14	-2	53
20	28	2	47	1	-21	-1	-2	-2	34
30	28	2	47	1	-23	-1	-10	-2	42
39	-2	-2	-25	-1	39	1	46	2	58
50	-4	-2	-23	-1	22	1	44	2	39
Result 226x 10:100 – 22,6%									

Source: processing according to the results of the questionnaire.

Based on the above tables, the obtained results are presented in the following graph:

Figure no. 1. Profile of the dominant norms in the organization.
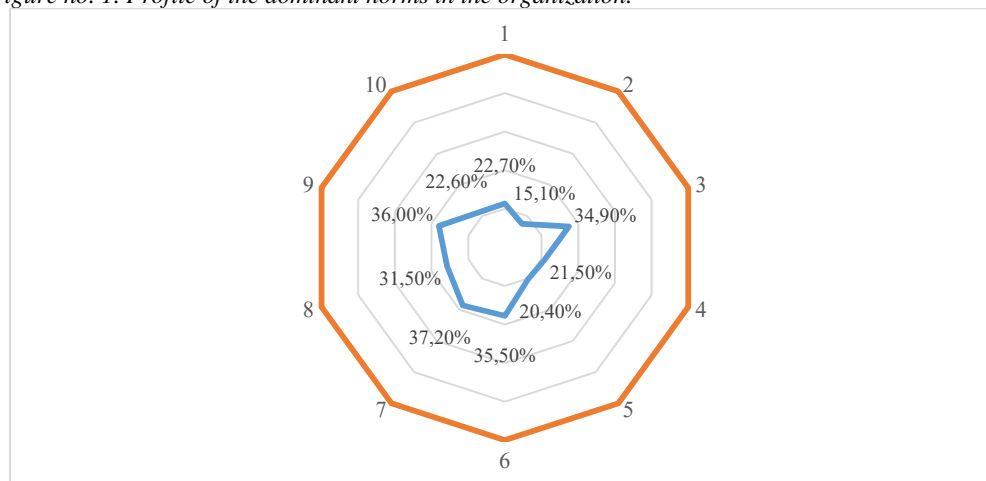
Source: processing according to the questionnaire interpretation grids.

By processing the data from this questionnaire, the shortcomings and the qualities of the staff emerged, but also their perception towards the organization. At the same time, the difficult situation we are in, a complicated and difficult to define period and far from the standard activity of the hospital have led to seeing the entire medical and non-medical staff in a new light, revealing the good, the less good or even bad things.

Given the evolution of the epidemiological situation caused by the spread of the new coronavirus, it was necessary to take specific measures to counteract and limit the spread of the virus and to protect the health of the citizens, putting a lot of pressure on all the medical and technical-administrative staff. The transformation, in a very short time, of the hospitals into Covid units, the arrangement of new circuits according to the norms, the establishment of the intensive care on call service, the change of the protective equipment at the entrance into the red zone also left their mark on the mental and emotional state of all the employees: doctors, nurses and auxiliary staff.

All these have led to a change in the perception of the organization, the behavior of employees towards each other and even towards patients, with some people becoming more and more involved in the activities of the hospital, while others had breakdowns.

5. Conclusions

Given the results obtained from the interpretation of the questionnaire, it can be said that there is a need for organizational change. The results of the study reflect the worrying situation which exists in many organizations in Romania in terms of the organizational climate and feelings of belonging and responsibility of the individual towards the work he/she puts in. The effort of the doctors, all of our efforts, would gain another synergy if we realized that at the base of the societies which survived are principles such as: quality, responsibility, altruism, trust, intangible elements that are difficult to obtain, but essential for the success of the organizations and for the overall good.

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