

THE ROLE OF ORGANIZATIONAL CULTURE IN MANAGERIAL DECISION MAKING IN PUBLIC HOSPITAL UNITS IN ROMANIA

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Abstract

The national and global economy, as well as the health status of the population, are influenced and in turn influence hospital units. Thus, managers of public hospital units in Romania must manage the most efficient use of available resources, with beneficial effects on society. Aspects such as high quality of care at the lowest and most competitive cost, a high degree of performance, medical services similar to hospitals abroad, with the constraint of often insufficient material resources, the involvement of the political factor, uncertainties in the economic field, as well as an arsenal of rules and regulations that determine lengthy procedures, organizational culture, are factors that put pressure on managerial decision making. The interest in addressing this topic was generated by the importance of cultural elements and how they can influence the effectiveness of employees and thus the institution. We believe that the performance of hospital activity is influenced by the way the manager makes decisions as well as by the organizational culture. Therefore, considering the need to emphasize the importance of organizational culture in public hospital units in Romania that can provide the basis for the development of a theory of orientation of managerial decision-making towards performance, this article aims to: (1) review the literature in this field, (2) highlight the link between organizational culture and performance, and (3) develop the factors that influence managerial decision-making.
Keywords: *economy; organizational culture; managerial decision making; health; health system.*

JEL Classification: A10, I15, I18, M12.

1. INTRODUCTION

It is well known that managerial decisions are reflected in the functioning of hospital units and thus in the health of the population, essential for economic well-being and the basis of socio-economic development. The concern of managers to provide high-performance health services, as well as the rapid increase in expenditure in this sector, together with the growing number of requests from patients, have heightened the need to identify all the factors influencing these aspects.

Organizational culture is one of the major factors in managerial practice and decision-making. Organizational culture refers to a shared set of customs, beliefs, and practices that form the basis of communication and mutual understanding. If functions are not performed satisfactorily, culture can significantly reduce employee effectiveness. Thus, organizational culture should not only be seen in terms of its cultural elements, but also in terms of its functions and relationship to hospital unit performance.

Decision-making is one of the manager's responsibilities, and the long-term development of hospital units depends on their efficiency. Decision-making and implementation require the use of human, financial, material, and information resources that are usually scarce in public organizations. In order to make the decision-making process as efficient as possible, the decisions taken in public hospital units must be as rational as possible. Managerial decision-making in public hospitals in Romania is influenced, on the one hand, by economic and political factors, and, on the other hand, by the personality of the individuals who participate in decision-making, as well as by the personality of the organizations in which decisions are made. Awareness of the influence of organizational culture in the decision-making process in public hospitals in Romania is of major importance for management, and the financial and economic implications have a major impact on the health status of the population.

2. LITERATURE REVIEW

Organizational culture refers to shared values and norms that influence employee behavior (Schein, 2004, p. 225). This concept took shape in 1951, when Jaques Elliott, cited by Pathiranage (2019), wrote about the problems of organizational culture in the manufacturing industry in England. In the early 1980s, according to Denison, cited in Denison, Haaland and Goelzer (2004), the theory of organizational culture included behavior within organizations alongside social science disciplines such as anthropology, sociology, and social psychology (Denison, Haaland and Goelzer, 2004, pp. 98 - 109). In 1982, Peters and Waterman indicated the characteristics of organizational culture in corporations for achieving high performance; the authors also ranked 46 high-performing corporations in the United States based on their organizational culture (Peters and Waterman, 1982, pp. 35 - 52).

In 1985, Schein pointed to three important parts of organizational culture in organizational performance: assumptions, artifacts, and values. Assumptions represent informal but important rules in the organization; artifacts represent the visible elements of organizational culture, including the work process, the workplace, and organizational structures; values represent the beliefs of organizational members and their business strategy. These three elements contribute to the maintenance of an effective organizational culture (Schein, 1985, pp. 67-71). On the other hand, Robbins (1986) defines organizational culture as a uniform perception of an organization that has common characteristics. Organizational culture, according to the author, is something descriptive and effectively can distinguish one organization from another. It can also integrate individuals and groups of organizational systems (Robbins, 1986, pp. 91 - 95).

In 1992, Kotter and Heskett showed a strong relationship between organizational culture and business performance in over 200 corporations in the United States (Kotter and Heskett, 1992, pp. 22 - 24). Organizational culture is also defined by Rousseau (2000) as a set of stable characteristics that show the distinguishing features of an organization and differentiate it from others. He also defines organizational culture as a set of norms and values that are shared by individuals and groups throughout the organization. These organizational values in turn form the standard norms and guidelines for the organization that make it distinct from others (Rousseau, 2000, pp. 67 - 72).

According to Azhar (2003), organizational culture is a combination of assumptions that are important to each member of an organization. Organizational culture is basically made up of two major common assumptions: values and beliefs. Values are the assumptions that have been transmitted by the leaders of the organization and are considered to be ideals that are desired by all members of an organization. On the other hand, beliefs are assumptions about reality and created by experience (Azhar, 2003, pp. 55 - 63). Later, Schein (2004) recognized this study as foundational research in the field of organizational culture, and then Schein (2010) defines organizational culture as a pattern of shared assumptions that have been accepted by a group of individuals as support to solve their problems, representing a phenomenon that is shared by members of an organization and operates unconsciously. In 2012, Flamholtz and Randle developed the field of organizational culture, i.e. its contribution to business performance with practical examples on numerous corporations in the United States, Europe, China, and other countries. Sharma and Good (2013) showed the influence of organizational culture on organizational decisions and performance. In addition to the fundamental studies mentioned above, other studies that have contributed to the development of organizational culture theory include Racelis (2010); Agbejule (2011); Eckenhofer and Ershova (2011); Ramachandran *et al.* (2011); Naranjo-Valencia *et al.* (2011); Prajogo and McDermott (2011); Gupta (2011); Ahmadi *et al.* (2012); Cerne *et al.* (2012); Singh (2013); Akhavan *et al.*

(2014); Heritage et al. (2014); Cao *et al.* (2015); Deem *et al.* (2015); Rawashdeh et al. (2015); Gambi *et al.* (2015); Asaad and Omer (2016); Chidambaranathan and Regha (2016); Willar *et al.* (2016).

3. THE IMPORTANCE OF HOSPITAL PERFORMANCE IN ROMANIA

In the 1980s, three events prompted the deepening of research into performance measurement in health care and, later, the emergence of performance management in this field; the first event was an article published in the New York Times in 1986 listing mortality rates in hospitals in the United States. Consequently, The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) launched Agenda for Change in 1987, which targeted clinical and organizational outcome measures (The New York Times Archives, March 17, 1986, p. 00018). The second set of events in this regard came in the form of publications by researcher John Wennberg, cited by Gali (2016), about large regional differences in health outcomes. The third event was a differentiation of the three aspects of health care management: structure (the available resources needed for care), process (the degree to which professionals follow the rules), and outcome (the change in a patient's health status after treatment), published by Donabedian in 1982 (Donabedian, 2003). Thus, the concept of "performance management" has been developed in health care, referring to the use of indicators to measure and improve the performance of organizations; this refers to measuring and increasing the performance of the care process, making the most efficient use of resources.

The first series of health services performance programs were implemented in the United States in the cardiology sector. In 1995, the National Committee for Quality Assurance (NCQA) launched the first (HEDIS) health plan performance reporting program in the United States, a program used in over 90% of health plans and by a number of organizations that measure performance at both the system and provider levels (Bottle and Aylin, 2017, pp. 42 - 44).

According to Armstrong and Baron (1998), healthcare facility performance is a strategic and integrated approach to ensuring success by improving employee performance and developing the capabilities of teams and individual contributors. Reynolds and Ablett (1998) argue that people and not capital provide organizations with a competitive advantage. The goal of performance management is to transform the raw potential of human resources into performance by removing intermediate barriers as well as motivating human resources (Kandula, 2006, p. 55).

The use of performance indicators in public hospital units can trigger a wide range of improvement activities. However, it is important for the organization to focus on the areas that need the most improvement, as each organization has different needs and needs to identify and prioritize its own pressure points.

Diagnosis Related Groups - DRGs are a way of assessing the performance of public health systems. The Diagnosis Related Groups (DRG) system was developed in the 1970s at Yale University in the USA by a group of physicians, economists, and statisticians, with the material support of the former Health Care Financing Administration (HCFA), who wanted to design a system for evaluating hospital performance. The DRG system shifts the paradigm of a hospital's operation from the level of resources and the process carried out to the results of activities, reflected in the health status of patients treated by the hospital unit. Thus, the DRG system takes a "snapshot" of hospital performance; it was originally developed to evaluate hospital outcomes but has been taken up and adapted for use in evaluating the efficiency of health sector financing (Busse *et al.*, 2013, p. 4). Authors who have studied the efficiency of health system financing using DRGs include Wennbero *et al.* (1984), Brizioli *et al.* (1996), Menke *et al.* (1997), Vinod *et al.* (2001), Chuang *et al.* (2003), Schreyögg *et al.* (2006), Peltola and Quentin (2013), Shoukri *et al.* (2019).

In Romania, according to the rules in force in the E.U., the performance indicators of hospital units are grouped into (1) Human resources management indicators; (2) Service utilization indicators; (3) Economic-financial indicators; (4) Quality indicators; (5) Patient safety indicators; (6) Patient satisfaction and transparency indicators (Ministry of Health, Order no. 730/ 2018).

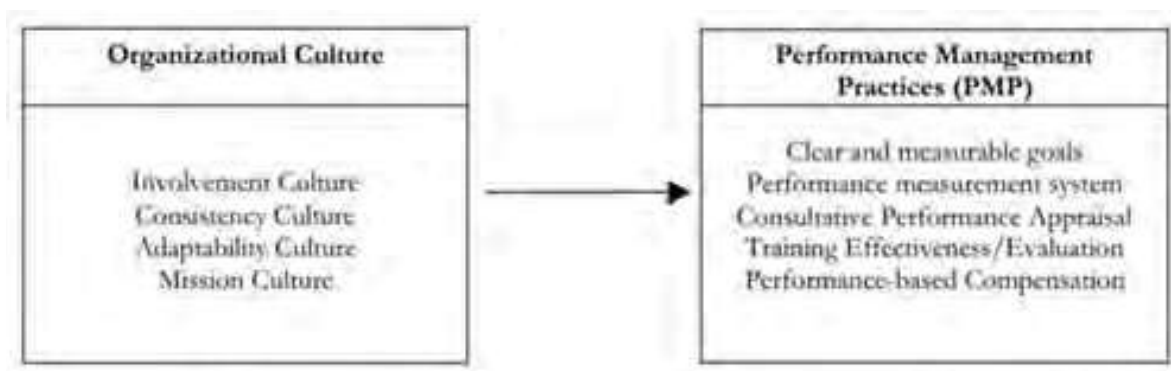
4. THE RELATIONSHIP BETWEEN ORGANIZATIONAL CULTURE AND PERFORMANCE MANAGEMENT

The level of involvement of organisational culture in the management of organisations must be high and lead to organisational performance; as managers or people with influence in the organisation will always dictate the organisational culture, emphasizing what is important or not in an organisation and how the organisation should be understood, we can state that this type of culture is closely related to performance management.

One of the key elements in achieving performance is developing a strong organisational culture. At the same time, a poorly developed organisational culture can become an obstacle to implementing new strategies (Alvesson, 1990, p. 12). The culture of a public hospital institution cannot be ignored when it comes to concepts such as risk, patient relationship management, and change management. Thus, a strong organisational culture is one in which employees work together effectively, share the same core values, and make decisions to meet key objectives that are reflected in people's health.

According to Kandula (2006), the key to good performance is a strong organizational culture. Because of the difference in organizational culture, the same strategies do not yield the same results in two organizations in the same industry and in the same location. A positive and strong culture can make a regular employee's performance, while a negative and weak culture can demotivate an

outstanding employee and drive performance. Therefore, organizational culture plays an active and direct role in performance management. Murphy and Cleveland (1995) believe that culture research will contribute to the understanding of performance management. Martin (2002) argues that without considering the impact of organisational culture, organisational practices such as performance management could be counterproductive as the two are interdependent and change in one will affect the other. Figure 1 shows the cultural traits of commitment, consistency, adaptability, and mission in organizations that exert a significantly positive influence on performance management practices.



Source: Denison and Mishra (1995)

Figure 1. A conceptual model of organization culture and performance management practices

5. FACTORS INFLUENCING MANAGERIAL DECISION-MAKING

Managerial decision-making requires continual refinement of knowledge of the formal analytical techniques, behaviors, personal characteristics, and power politics that influence the making of each decision (Duane and Chet, 2004, p. 8). Decision-making is also influenced by the environment to which decision-makers relate; the external environment, which includes all elements that are present in the external world of individuals, can interact with them and influence their behavior (March, 2004, p. 67).

Analyzing managerial decisions and starting from the idea that managers want to make the best decision in the best interest of the organization, Robbins and Coulter (2011) consider decision-making as a multilateral whole that can be approached from several perspectives. The factors that influence managerial decision-making are (1) the type of problem that exists, (2) the decision-making approach, (3) managerial style, and (4) the conditions of decision-making. Each factor participates in determining how the manager makes a decision (Robbins and Coulter, 2011, p. 192). Decision-making is also influenced by several factors that are related to the manager's personality and the external or internal environment of the organization, both of which distort the perception of the

problem and lead to solutions that may not always be ideal (Alvino and Franco, 2017). Decision-making is the main activity of managers in all types of organizations and at all levels, summarizing the behavior of managers and clearly distinguishing managers from other occupations in society.

Similar studies in the literature, such as the one by Szymaniec-Mlicka (2017), show that hospital managers' decisions in European countries such as Poland are dependent on the political environment. Equally, Olivier (2005) has pointed out that politics plays an essential role in health issues and that it is essential for public health managers to understand the political dimensions of problems and proposed solutions (Kidholm *et al.*, 2015). Influencing factors of managerial decision: external environmental factors - the political factor, the economic factor, and to a much lesser extent, the social factor and the geographical factor and internal environmental factors: values and ethical dilemmas.

Russell-Jones (2000) discusses the existence of errors or weaknesses in the decision-making process. These are (1) haste - not to be confused with speed. The decision is made before the data is available or without regard to the facts; (2) narrow perspective - often results in the wrong approach to the problem because the real problem has been pre-judged or limited in an inappropriate analytical framework; (3) overconfidence - either in the decision itself or, more commonly, in the understanding of the problem and the facts; (4) performing a superficial analysis for important decisions rather than a proper analysis; (5) lack of analytical framework and trying to manage many variables or information.

To avoid errors in the decision-making process, managers should follow a few rules. First of all, they must take into account cultural differences, taking account the values, beliefs, attitudes, and behavior patterns of the people involved. Secondly, decision-makers need to know when to quit. Negative information is blocked or distorted by most managers because they refuse to believe that they have not made a good decision, becoming so attached to a decision that they do not recognize its failure. Thirdly, managers need to build an organisation that can constantly adapt to a changing environment. Fourth, decision-makers must adopt a coherent decision-making model that focuses on what is important, is logical and consistent, recognizes subjective and objective thinking and combines analytical and intuitive thinking, requires only as much information and analysis as is necessary to resolve a given dilemma, encourages and guides the gathering of relevant information, and keeps informed advice simple, reliable, user-friendly and flexible.

6. CONCLUSIONS

In addition to formal organizational structure and standard operating rules and procedures, organizations also rely heavily on their organizational culture as an important tool in controlling and coordinating the activities of their members, providing them with the motivation to act in the ways that the organization's

managers deem necessary to achieve and sustain organizational effectiveness and performance. Broadly speaking, organisational culture is the totality of a company's values, attitudes, norms, and beliefs that control the interactions of its members. Thus, the main source of organisational culture is the people who work in the organisation. Interactions between people with different values, personalities, and ethics ultimately create a unique organisational culture, distinct from that of other similar companies.

In Romania, organizational culture is a relatively new concept, with few organizations knowing the meaning of this term and the relationship between organizational culture and long-term organizational performance. In this context, not many studies on organizational culture have been carried out, and those that do exist do not have national relevance, either because they have focused on only one organization or because a representative sample was not chosen.

Hospital regulations are the main sources of information on the organisational values promoted. An important role is also played by the website, brochures, and various meetings and training, which means that formal sources are basic in informing staff.

In a corporate group, organizational culture can be considered an essential ingredient of organizational performance and a source of sustainable competitive advantage. This paper has presented a synthesis of various reputable literature on the role of organizational culture on business performance from a corporate group perspective. It was found that organizational culture has a strong impact on organizational performance. Empirical evidence also showed that lack of cultural integration among member companies was a leading cause of failure in corporate groups. Therefore, it is found that cultural improvement would result in increased performance. Therefore, how establishing an effective organizational culture to improve corporate performance can be recognized as a necessary research area. In addition, this paper has highlighted the prevailing theoretical and empirical gaps in the field of organizational culture towards corporate performance and therefore the findings may be useful for similar future studies. More research can be done in this area to determine the nature and capability of organizational culture in manipulating corporate performance.

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