INCREASING ORGANIZATIONAL CULTURE AND ETHICS
IN HEALTHCARE ORGANIZATIONS

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Abstract: As a historical excursion suggests in terms of medical ethics and health care, we can only confirm that healthcare occupies a prominent place in every society. In the modern era, this care is reported in the form of organized care and through specialized health institutions. Although they also fulfill an important ethical mission, their activity is often perceived rather in an economic sense than socio-humane, although this aspect still resonates and is also expected from citizens and society.

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The question of the moral aspect of health has been addressed and discussed from the earliest times of our civilization. The fact that this issue has intrigued the wise men and healers is shown in the oldest written scriptures and historical references from the most important historical civilizations – Indian, Chinese, Greek, Egyptian and Sumerian and Babylonian. All historical evidence suggests that ethical health care is part of the civilization development and dignity of life. In our historical-cultural environment, the ethics in medical practice is most commonly associated with the name of Hippocrates (460-380 BC) and his oath. It expresses the fundamental requirement of respect for life and responsible conduct in the medical profession. From the very beginning, the relationship with a person is oriented towards promoting the integrity, dignity and responsibility of health care providers. Emphasis is placed on the physician's co-responsibility for the quality of health, the professional behaviour of physicians and other healthcare providers.

As this historical digression suggests in terms of medical ethics and health care, we can only confirm that healthcare occupies a prominent place in every society. In the modern era, this care is presented in the form of organized care and through specialized health care institutions. Although they fulfill an important ethical mission, their activity is often perceived in rather economic than socio-humane terms, despite this aspect still resonating among and being expected from citizens and society. Unfortunately, the econometric parameter, is often preferred, affecting the way these organizations work and deforming their ethical mission and provision of the expected health care. This naturally evokes a dichotomous question of how to...
deal with this fundamental problem? How to meet the requirements of the main mission and increase the credibility of these organizations? How to reach out to all the persons involved? Is it enough to have a traditional approach, more efficient management, an appeal to individual performance through economic tools, or are there other more effective tools of organizational policy? In this context, it is necessary to accept that even economic and management approaches have their limits and often cannot be fully realized in a challenging environment. We also rely on the conviction that non-economic, soft tools and approaches can play an important role, if not crucial. The design of new mechanisms to address the organizational policy and the efficient functioning of the institution poses a great challenge to specialists in the field – both for theoreticians and practitioners. In some way this means overcoming traditional views and beliefs and including innovative forms of reasoning and action. Every change brings complications, but we are and always will be confronted with them. We want to respond to this challenge in our dissertation thesis, and we need to create new convictions, arguments and proposals for change in which the importance is pushed to the soft forms of management and organizational behaviour. In addition, we see this need in such a significant area and human-centred organizations as the health facilities certainly are.

Therefore, as a starting point, we consider that significant non-economic instruments and approaches are currently important. Our belief is based on the claim that efficiency is achieved through people and their dispositions, using their professional, individual and team potential as well as the appropriate conditions that this organization can create. An important, if not increasing, role in organizations is played by values and mechanisms to support them. That is why we want to offer solutions to use these mechanisms to increase the performance of organizational behaviour in specific conditions of healthcare facilities. We want to strengthen the belief that by making appropriate use of these “soft forms” it is possible to achieve a higher quality of health services and to ensure a higher reputation for this organization. As for the soft instruments, we shall focus primarily on the possibilities and effectiveness of organizational culture and ethics.

The starting assumption platform in thinking about organizational culture is the category of culture. According to D. Fobel, culture includes everything that man has transformed and created for generations, with the fact that culture and nature coexists but do not overlap. “Culture is an unending source of thought, it forms the uniqueness of man, it discovers, completes, cultivates and reproduces his knowledge, but especially human values. The more cultured one is, the higher his or her ethical value” (Fobel, 2000, p. 40). Despite the overall complexity of the concept of culture and its various definitions, in our scientific work we will keep the definitions provided by M. Matěj and V. Soukup in the Great Sociological Dictionary (1996) where the culture is understood as “one of the central categories of social sciences in its broadest understanding representing the specific human way of organizing, realizing and developing activities that are embodied in the results of physical and mental work” (Great Sociological Dictionary, 1996, p. 547). In this context, attention is drawn to the understanding
of culture by I. Kant, who attributes it with the moral meaning and classically complements it in an interpretative plane generally accepted today. Kant reflects culture in the axiological aspect and emphasizes the idea of morality as part of it. According to Kant, it is this morality which determines the level of freedom achieved by society and individuals, the level of science, art, labour and discipline, and self-restraint formed by upbringing. This understanding has also been underpinned by the current discourse on culture, where culture is governed by regulatory forms (a socio-regulatory function) and the functioning of an organization that organizes human activities. The legacy of ideas of classics and contemporary authors has taken the form of a modern understanding and can be seen as the basis for our reflection on organizational culture.

Individual social groups adopt specific values, views and standards that determine ways of thinking, feeling and behaviour. All this is included within the culture. Enculturation of an individual (i.e. the process of adopting socio-cultural regulations) takes place during a person's life, under the influence of an institutional agent - organization, in reference groups, in the process of social interaction. As a result, we encounter modified cultural formulas that shape people. Man is usually under the influence of different cultures, from which he or she takes different cultural formulas. We can say that this is how one gradually acquires several layers of “mental programming”. For each person, we find specific characteristics that the individual shares with other people who have socialized under the same conditions – country, region, organization, group, family or state. One of the most prominent experts on organizational culture – Höfstede (1991), points to the following basic levels of mental programming:

- the level of national culture (or culture of people who migrate during their lifetime),
- the level of culture associated with a particular ethnicity, religion or language,
- the level of culture associated with gender (especially in the understanding of male and female roles),
- the level of culture associated with belonging to a certain generation (generations are distinguished by their symbols, heroes, rituals and values),
- the level of culture related to belonging to a particular class,
- level of organizational culture (the employed individual is socialized in the organization to which he belongs).

Applied ethics draws from these considerations and translates them into application-ethical efforts. We will examine this aspect in the work of ethics professor PhDr. D. Fobel, PhD., who deals more deeply with these aspects in several monographies and studies (see list of sources). I think the most important are the following monographies: Culture in Human Life (2000), Organizational Ethics and Culture (2007).

Our mission is to strengthen the conviction while also presenting some critical analysis of those strategic considerations that prefer the economic model of functioning and achievement. Despite the overwhelming conviction that we are forced to accept efficiency in particular in economic models, we want to strengthen and substantiate our professional position that the
future and vitality of a health organization is associated with a strong background based on increasing organizational culture and ethics. Being subject to the economic paradigm (with a clear emphasis on economic and physical performance) means respecting past behaviour and transformational models of society. This style of thinking is associated with traditional morality and methodical paradigms. Today, new theoretical approaches and practical tools of ethical policy in organizations are being successfully implemented to convince us that their implementation is possible and effective. Moreover, this new strategy respects the most important human values and the humanistic perspective.

The fact that the medical staff, who is supposed to respect the Hippocratic Oath, is in clear contradiction with the treatment and functioning of medical organizations only in the economic context. It follows that ethical organizational culture and its tools are extremely important in healthcare organizations – the Code of Ethics, the values system and standards of behaviour, the culture of doctor-patient relationship, the quality of health and the protection of human life. Creating such an organizational culture that maximizes the effectiveness of medical personnel in saving health and human lives is therefore in everyone's interest.

The importance of organizational culture in healthcare organizations

As part of the concept of organizational culture, it is necessary to accept the basic attributes of the concept of culture even though it may acquire certain specificities in a specific field of study and practice. This was introduced into the professional discourse by M.E. Porter, who linked the culture of the organization with the promotion of a brand, the way to success and with overcoming of crisis situations.

The main reasons for the increased interest in organizational culture include:

- the success and growth of the Japanese economy.
- return to qualitative methods in the theories of management and theory of organization, development of applied disciplines (free discourses) in social sciences – culturology, sociology, ethics.
- recession in the Western markets, which has affected the search for efficient management techniques.
- the need to look for a competitive advantage.

In Anglo-American literature, the concept of organizational culture first appeared in 1960 as a synonym for the concept of climate. The popularization of this concept took place in the 1970s, and since 1980, many scientific studies have also been performed. The organization and its culture have been the subject of research, particularly in the area of organizational structure and strategy, control and management of people. Organizational culture is not yet clearly defined nor uniformly understood. Various related language variants, such as organizational culture, organization culture, corporate culture, but also business culture are still present in the literature. It is assumed that, within a certain tolerance, we can treat these concepts as synonyms.
Increasing organizational culture …

Given the interdisciplinary nature of the concept, it is not a domain of one science and it goes beyond the scope of traditional science. It is its multifunctionality, the interdisciplinary nature, the emphasis on the so-called soft factors and unconventional understanding point to the need for specific discourse. This is also claimed by application ethics experts, who associate the organizational culture with organizational and applied ethics paradigm, the ethical strategy of promoting the soft forms of governance, credibility creation, responsible behaviour and promoting values and mechanisms of ethics within the organization. Griffin also defines organization culture as a set of values that help its members understand the organization, what is stands for, how it works and what it thinks is important. The notion of culture does not allow accurate measurement or observation.

We can also say that organizational culture is a product of a specific organization history, applied values and patterns of behaviour of current and former managers, ways of using processes and creating corporate environment, employee behaviour and promoting the organization's value priorities. All these elements develop a symbol system that allows for a specific interpretation of the existence and functioning of the organization, presents its true historical and functional portrait, value profile, brand and social (market) prestige.

That is why many organizational culture experts see the expression of a certain social reputation that translates from one generation of employees to the other as a transfer of unspoken values, patterns of behaviour, attitudes and people's orientation. Culture is a specific code of communication between people, the way they behave towards each other, live interaction of tasks and behaviours, presentation of value orientations and preferences.

Establishing certain patterns of behaviour for social groups, the hierarchy of values forms the intellectual foundation of standards and practices. These are manifested in linguistic forms, anecdotes, legends, customs, rituals, rites.

In summary, organizational culture is a set of dominant values and norms of behaviour, characteristic of a certain organization, an active expression of the functioning of the organization both inwardly and externally.

Subsequently, two questions arise – what characteristics of organizational culture would be most important in health organizations and how to diagnose organizational culture in them. The organizational culture can be interpreted in several perspectives:

- as an independent variable – influence of the external environment on the organization, i.e. whose functioning is determined by established cultural patterns, national policies and established management styles,
- as an internal variable of the organization, i.e. as a result of the development or functioning of the organization – by considering it as typical, standard, organizations may consider it acceptable and, in given intentions, the same organizational culture, management style and its perception of employees as well as the environment apply,
- as a core metaphor – culture is identified with an organization which is understood primarily as a set of symbolic actions, in the form of human expressions and creativity,
as the expression of cognitive symptoms, the influence of the human mind or communities. Emphasis is put more on the psychological, social and symbolic aspects of their existence.

From our scientific approach point of view, our starting point will be to interpret organizational culture as an internal variable, because in this perspective we can realize our analyses in order to express the efficiency of the entire organization.

The purpose of an organization in a social context is not only to satisfy the basic material and economic needs of employees, but also their higher needs – respect, recognition and self-realization. The functioning of the organization cannot therefore be considered only in the economic context, without noticing the psychological, social, value or symbolic aspect of its existence. In this sense, the importance and role of organizational culture increases, together with the influence of its factors that provide for the above requirement and reflect the social order, the needs of employees, etc. This also applies to organizations in the healthcare sector. Experience from previous years indicates that in this area, the economic calculation, which determined the major changes in the functioning of the health care system, was preferred. Reality suggests that a typical public health problem is the poor financial situation of the subjects, the underdeveloped spending to improve the quality of health care, the necessary technical equipment and even for the smooth running of health services. Introducing severe restrictions on the financing of health services, increasing bureaucracy, adverse changes in forms of work organization, employment and remuneration, often inappropriate management from central institutions – all these factors increase demotivation of employees and decrease the quality of health service in this sector. The use of non-economic mechanisms is losing efficiency, the necessary measures increase uncertainty and confidence in healthcare facilities is decreasing. Patients – recipients of health services did not receive the necessary changes.

One of the tools to diagnose an organization's culture is the model developed by Daniel Denison. In this model, it is proposed to examine the organizational culture in four perspectives:

- organizational adaptive ability,
- mission,
- consistency,
- commitment.

The diagnosis of the organizational culture is based on the consideration of individual perspectives and the group of determinants. They can also serve as appropriate indicators in the research and identification of needs in the selected group of respondents. An important feature of this model in terms of health care organization is its consistency, as this group contains the most important organizational culture functions that determine as much as possible the quality and efficiency of health services.

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Bibliography