

COMMENTARY

Healthcare organizational performance: why changing the culture really matters

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An organization may be considered as having three components: a structure, systems and culture. Culture is the most difficult part of the organization to affect. After all, culture has the key role in impacting and improving organizational performance. The leadership of an organization and its key operations are paramount in shaping the culture. Leadership and organizational culture are inextricably intertwined. They are two sides of the same coin. Culture is a medium through which leadership travels and impacts organizational performance. If leaders are to fulfil the challenges of the 21st century, they must first understand the dynamics of culture and their role as sculptors through behavioural and cognitive ways.

Key words

- cultural change
- organizational culture
- leadership
- healthcare performance management

Demographic, epidemiological and economic projections highlight that the collapse of healthcare organisations is closer than stakeholders realize. The common consequence of all the projections is the increase of healthcare demand and costs, and the urge of changes able to tackle healthcare struggles resulting from the financial crisis. The need of actions to break with past trends is urgent, in order to prevent health inequities to widen, causing even greater individual, social and economic consequences.

Actions can be directed to each of the three components of healthcare organizations that is structure, systems and culture. Of these, the structure of a healthcare organization is the easiest to change and, for this reason, structural change is common. However, healthcare is so complex that there is no correct structure that can be used in all contexts, therefore attempting to modify this component is the least effective way to bring about transformation. Systems and culture are more difficult to change but can be developed and modified. Systems are defined as a set of activities with a common set of objectives and an annual report on the outcomes achieved and the resources used. Individuals and organizations need to be supported by systems that provide best knowledge currently available when and where it is required [1]. Actually most of healthcare is the opposite of a system, and are more similar to a Brownian movement with its random movement

of patients, professionals, blood samples and reports.

Health services change structure all the time and increasingly focus on systems but still retain the same culture.

An organization's culture determines the organization's behavior more than the organization's system or structure. Anyway, for many people who manage healthcare, culture is the most difficult part of the organization to affect. After all, culture has the key role in impacting and improving organizational performance [2].

Culture as a concept has had a long and checkered history and has been the subject of considerable academic debate in the last twenty-five years. The word "culture" was ranked as one of the two or three most complicated words to define [3], not just due to its intricate historical development but mainly due to its relevance and indisputable impact in other systems of thought.

From a list of 164 different definitions, the most inclusive is that one given by Schein, regarded as the guru of culture, that is: "... a pattern of shared basic assumptions that was learned by a group as it solved its problems of external adaptation and internal integration, that has worked well enough to be considered valid and, therefore, to be taught to new members as the correct way to perceive, think, and feel in relation to those problems".

Why does culture matter? It matters because it is a

powerful, latent, and often unconscious set of forces that determine both our individual and collective behaviour, ways of perceiving, thought patterns, and values. Nonetheless, few people really understand the dynamics of creating a positive and strong organisational culture that supports and enables healthcare leaders to achieve their objectives [4].

Organisational culture is an important concept and a pervasive one in terms of its impact on organisational change programmes. There is increasing evidence that it play key roles regarding organisational outcomes and determining strategy, goals, and modes of operating and that it is associated with higher rates of worker morale, lower levels of work stress, accident rates, burn-out rates, turnover and lower adverse events related to patient quality of care issues [5]. Therefore, central to success for any organisation is focusing on building and shaping a resilient culture where engagement strategies and continuous improvement are the tools to deliver superior performance. Nonetheless, nowadays most organisations still focus on changing those elements of the iceberg that are easily visible (above water, using the Iceberg analogy), which has little impact on performance.

However, working on the deeper element of the culture requires working in ambiguous areas and instigating serious research into how corporate beliefs and values surface and manifest themselves in working practices, group dynamics, and leadership into expected and actual behaviour. What is required is a thorough diagnosis of the cultural components and assessing cause-and-effect relationships so that one can create leverage to impact the culture and the behaviour of the majority towards significant performance improvement.

Understanding the dynamics of culture will made us less likely to be annoyed, puzzled or anxious when we will bump into the unfamiliar and seemingly irrational behaviour of people in our organizations, and we will have a deeper understanding not only of why various groups of people or organizations can be so different, but also why it is so hard to change them. Even more important, if we understand culture better we will better understand ourselves: we will better understand the forces acting within us that define who we are, that reflect the groups with which we identify and to which we want to belong [6].

The phrase “we need a culture change” is quoted frequently and applicable to so many areas in wider society, not only in healthcare. Examples include comments on the long-term unemployed and the creation of a dependency culture, binge drinking amongst the young, systemic violence in football, general lawlessness, sectarianism and rebellion against established moral standards, to name just a few. Societal change can happen quickly if it is planned and led by respected role models. For change in any area of society we have to focus on a vision, identifying key milestones and recruiting change champions with strong core values to seek, engage, lead and coach others in bringing that change about. Whether it is violence in football, underage drinking or the uninspired generation, change is about doing key things differently. It is about reasoned action. It starts

with passion and planning for wanting to be better and having the robustness and resilience to venture on to that path with bravery and commitment. It is not about public inquiries, and it is not about just talking; it is about leading by example. It is not theory. It is, however, about being focused, energised, decisive and engaging. It is action orientated and led by people with vision, energy and the courage to challenge the unacceptable. Decisive action and positive behaviour change is required. In many cases it is almost too late to drive that change. We need to intervene in social systems and organisations to define precisely what they want to be, do and have, and identify and recruit the best leaders to deliver those goals [7].

Leadership is an interesting issue for most, likely all, organisations. It is the single most important issue defining whether organisations will survive and prosper, be downsized and merged with others or merely continue performing at a low level. The leadership of an organisation and its key operations are paramount in shaping the culture.

Leadership and organizational culture are inextricably intertwined. They are two sides of the same coin. On the one hand, cultural norms define how a given nation or organizations will define leadership – who will get promoted, who will get the attention of followers. On the other hand, it can be argued that the only thing of real importance that leaders do is to create and manage culture; that the unique talent of leaders is their ability to understand and work with culture; and that it is an ultimate act of leadership to destroy culture when it is viewed as dysfunctional. Therefore, it could be said that culture is a medium through which leadership travels and impacts organizational performance [8].

In an age in which leadership is touted over and over again as a critical variable in defining the success or failure of organizations, it becomes all the more important to look at the other side of the leadership coin – how leaders create culture and how culture defines and creates leaders. Thus, the leadership needs to be able to develop a culture that focuses on patients, hates waste and loves sustainability, uses technology to best effect, values healthcare systems higher than it values healthcare bureaucracies, values healthcare networks higher than it values healthcare hierarchies and is ready to face the challenges of the 21st century [9].

If leaders are to fulfil this challenge, they must first understand the dynamics of culture.

Concepts, definitions, theories and models concerning culture and leadership in healthcare have been defined, as well as the role of leadership in sculpting and changing culture. In sum, leadership brings about culture change in many ways. The most influential are the behavioural and the cognitive ways. The first one concerns the behaviour of the leaders, how they treat the people who work within their organisations and how they speak of people in other organisations. This is relevant to all types of industry but there is also the need to develop a particular culture for healthcare and this particular culture for healthcare is transmitted through a new language.

Thus, the second one concerns the cognitive aspect

to culture change expressed through language and it is important to emphasise, based on the work of anthropologists and philosophers but now recognised as highly relevant in leadership and management, that language creates reality and if we want a new reality to emerge we have to create a new language and ensure that everyone uses it.

Openness to explore the strengths and limitations of the current culture is critical. This can be achieved quickly if all managers are involved in the process. Many consider that it takes too long to change or build a new culture for an organisation. In reality, it takes as long as we want it to take.

Sculpting a culture requires a realistic approach. It requires a down-to-earth and pragmatic attitude. It requires working with the culture as it currently exists and not how we would like it to be. It works on the aforementioned premise that the organizational culture is central in delivering organisational performance. A strong and positive culture will certainly deliver stronger performances than a culture that is indifferent, chaotic and not shared among members of an organisation. Furthermore, despite the self-perpetuating resistances to change, it is faster to set up and take hold than common legends suggests.

The systematic neglect of culture in health is the single biggest barrier to advancement of the highest attainable standards of health worldwide (availability, ac-

cessibility, acceptability, quality and performance) [10]. The culture of individuals and groups should be better understood and acknowledged so that care systems can adjust practices in the interest of promoting wellbeing and reducing waste. At present, the provision of health care and social care is insufficiently sensitive to culture and does not adequately account for the norms and values of both those who use care services and those who deliver health care.

"Don't tell me words don't matter" stated Barack Obama during one of his most famous speech. Yes, it's true that words and speeches don't solve all problems, but what is also true is that if we can't inspire first of all ourselves to believe again, then it doesn't matter how many policies and plans we have, because people want and need to believe in change again. Those organizations that can master the change will be rewarded with the only kind of reputation that should matter in healthcare that is excellence in outcomes and pride in the value they deliver. For this reason attention to the relation between culture and leadership presents us with both our biggest challenges and deepest hopes for healthcare systems and more broadly, let it be said, for humankind.

Conflict of interest statement

None to declare.

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