

# ORGANIZATIONAL CULTURE AND NURSES' BEHAVIOUR IN IMPLEMENTING PATIENT SAFETY

Santa Monika Sinurat<sup>1</sup>, Septiani Simanullang<sup>2</sup>, Solagratia Latumaerissa<sup>3</sup>, Riama Marlyn Sihombing<sup>4</sup>, Windy Sapta Handayani Zega<sup>5</sup>

<sup>1,2</sup>Siloam Hospital Lippo Village B, Tangerang Banten, Indonesia

<sup>3</sup>Siloam Hospitals Ambon, Maluku, Indonesia

<sup>4,5</sup>Faculty of Nursing, Universitas Pelita Harapan, Tangerang Banten, Indonesia

*Email: riama.sihombing@uph.edu*

## ABSTRACT

Patient safety is an essential indicator of healthcare quality. The initial interview indicated that within a month, there is always a patient safety incident such as patient falls and medication errors. The organizational culture, vision, mission, goals, and leadership style surely have an impact on a nurse's behaviour when it comes to patient safety. Many research studies discovered that the culture of organization inherent in nurses impacts the quality of hospital services, and nurses can reflect themselves as professional nurses with the organizational performance culture. This study aimed to find a correlation between corporate culture and nurse's behaviour to patient safety. This study used a quantitative correlational method with a cross-sectional approach. The sample consisted of 191 nurses who had been selected through accidental sampling. The questionnaires on organizational culture and nurse's behaviour in patient safety are distributed online via Google Forms and have been tested for its validity and reliability on 31 nurses. This study was conducted from March 29 to June 30, 2020. More than half of the respondents observed a bad organizational culture, and more than half of the nurses demonstrated poor behaviour in implementing patient safety. The Spearman correlation test revealed no significant relationship between corporate culture and nurse's behaviour in adopting patient safety. The hospital administration can provide coaching in terms of socialization, training, mentorship, and supervision through the head nurse or team leader.

**Keywords:** Health services, Leadership, Nursing, Organizational culture, Patient safety

## INTRODUCTION

Patient safety is a significant measure of the quality of health services. The health services are the action of medical personnel involving behaviour and cultural aspects, mainly in hospitals and in the field of nursing. One of the medical personnel who plays a crucial role in health service is the nurses. The behaviour of nurses in performing nursing care must pay attention to the patient safety because it closely impacts on prevention, control and improvement of patient safety

(Mariati et al., 2014). The behaviour of nurses in performing patient safety is still influenced by organizational culture, teamwork, commitment and leadership style from every hospital where nurses work (Jafarpanah & Rezaei, 2020).

The observation results which were done to nine nurses during clinical practice in a private hospital in western part of Indonesia, from October until November 2019, indicated that six out of nine nurses wholly performed five from six patient's safety

targets. While the other two nurses failed to use gloves when performing the actions related to the patient's body fluid. One nurse failed to put the fall risk card in the room of a patient who had a high risk of falling. In the interview with seven nurses in the inpatient room, the researchers found that patient safety incident could happen once to two times a month. The most common incident included falling patients and medication errors.

The incidents of patient safety in the hospital are evident and have not shown a decrease. The incidents profoundly impact the credibility of health services and the professionalism of the health workers. The professional behaviour and organizational culture are one of the basic concepts in nursing resulted from individual interactions. Professionalism in nursing plays a vital role in patient safety goals (Harandi et al., 2017). Organizational culture is a social issue that reflects organizational behaviour or attitudes. The nurses' corporate culture has an essential effect on hospital service quality. Organizational culture values ought to be improved, and hospital service quality will increase linearly. In addition, the researchers performed an initial interview with the nurses at one private hospital in western side

of Indonesia and discovered that all the nurses were involved in the planning, were allowed to submit ideas, encouraged to work competitively, and awarded cash or goods for excellent staff.

Research conducted by Mariati et al. (2014) at University Hasanuddin hospital shows that there is a relationship between organizational culture and the nurses' behaviour in implementing patient safety as much as 73%. The other research conducted by Kang et al. (2020) shows positive correlation as much as 0.95, indicating the relationship between organizational culture and nurses' behaviour. Based on the above-given explanation, the researchers were interested in examining whether there was a relationship between organizational culture and the behaviour of nurses in implementing patient safety in a private hospital in western Indonesia.

The primary objective of this study was to investigate the relationship between organizational culture and nurse's behaviour regarding patient safety. This study's goal was to reduce patient safety incidents. Furthermore, this research aimed to provide insight into the hospital's organizational culture and contributed to developing hospital management and nursing behaviour.

Finally, this study sought to get a chance to increase the quality of nursing services.

## **METHOD**

The design of the study was correlational quantitative aiming to find out the relationship between the independent variable of organizational culture and the dependent variable of nurses' behaviour in implementing patient safety. The data collection was done in a cross-sectional approach with a total sampling technique. A total of 191 respondents participated in the research.

In this study, two types of surveys had used. The first questionnaire was adapted from Sihombing (2015), which was based on the Denison and Neale model. This questionnaire has once used to investigate organizational culture. The following instrument was a modified observation sheet by Mariati et al. (2014) containing five of six patient safety goals to assess nurses' safety performance. The questionnaire's statements have been tested for validity and reliability, enabling researchers to determine that nurse behaviour could be quantified using a questionnaire.

The questionnaire's validity and reliability had been tested on 31 nurses. The

organizational culture questionnaire validity test showed 36 valid statements with  $r \text{ count} = 0.475-0.811$  ( $r \text{ count} \geq r \text{ table} = 0.355$ ). Similarly, 30 questions about the nurse's behaviour in implementing patient safety had found valid assertions with  $r \text{ count} = 0.444-0.911$  ( $r \text{ count} \geq r \text{ table} = 0.355$ ). The reliability test resulted in findings for an organizational culture questionnaire with a Cronbach alpha value of 0.962 and a nurse behaviour instrument in implementing patient safety with a Cronbach alpha value of 0.982. Based on the criteria used,  $r \geq 0.600$  indicates that the item of questions is reliable (Sugiyono, 2018), thus both variables are reliable and meet the standards.

The data collection was carried out from May 8 to May 28, 2020. The questionnaire was distributed online in the google form. However, the number of respondents did not meet the target. This situation forced the researchers to distribute paper questionnaires to respondents. The online questionnaire was distributed through social media such as WhatsApp. Before filling in the demographic data, the respondents had to sign the informed consent form first, which was attached within the online questionnaire. As soon as they clicked 'yes', the explanation of the research procedures and the research ethics will pop up. The

questionnaire paper, on the other hand, was distributed directly to the nurse by first providing an explanation of research to the respondents and sharing the informed consent form to get their approval to be research respondents. The researchers let the respondents fill in the questionnaires unattended to conform with the ethical protocol (number 058/KEP-FON/III/2020).

Both the online and paper questionnaire included the purpose of the research so that respondents did not have disadvantages when filling out the questionnaire. Besides, the researchers maintained the confidentiality of any information obtained from respondents, where only the researchers who had access to the data. The data collected were grouped and coded into a computerized program. This study used a Spearman to test the existing variable. Researchers used the Spearman statistical test because the measurement of the two variables used a nominal scale (Yulianto et al., 2018)

## RESULT

The table below showed the distribution of the characteristics of the respondents, including gender, education level and length of work.

**Table 1.** Frequency Distribution of the Characteristics of Respondents in One Private Hospital in Western Indonesia (N=191)

<b>Respondent characteristics</b>	<b>Frequency</b>	<b>Percentage</b>
<b>Gender</b>		
Male	40	25.5
Female	151	74.5
<b>Level of education</b>		
Diploma in nursing	52	21.8
Bachelor nursing	139	72.8
<b>Department</b>		
Outpatient	5	2.6
Intensive room	74	38.7
Inpatient	112	14.5

Table 1 showed that 79.1% of respondents were female, 72.8% of respondents had a bachelor's degree in nursing, and 58.6% of the respondents worked in the inpatient room. Table 2 showed that 52.9% of the participants perceived poor organizational culture.

**Table 2.** Frequency Distribution of Respondents on Organizational Culture in One Private Hospital in Western Indonesia (N=191)

<b>Organizational culture</b>	<b>Frequency</b>	<b>Percentage</b>
Poor	101	52.9
Good	90	47.1

**Table 3.** Dimension of Organizational Cultures in One Private Hospital in Western Indonesia (N=191)

<b>The dimension of organizational culture</b>	<b>Mean</b>	<b>Median</b>	<b>SD</b>	<b>Min-Max</b>	<b>95% CI</b>
Involvement	35.19	35.00	3.83	23-44	34.64-35.74
Adjustment	19.41	19.00	2.50	12-36	19.05-19.77
Consistency	28.58	28.00	3.37	19-36	28.10-29.06
Mission	31.00	30.00	3.93	18-40	30.44-31.56

Table 3 showed the mean of involvement dimension was 35.19%, the median was 35%, and the concluding result of the interval was 95%. The mean of respondents perceiving an organizational culture of adjustment was 19.41%, the median was 19%, and the concluding result of the interval was 95%. The mean of respondents perceiving organizational culture of consistency was 28.58%, the median was 28%, the standard deviation was 3.37%, and the concluding result of the interval was 95%. The mean of respondents perceiving the organizational culture of the mission was 31%, the median was 30%, the standard deviation was 3.93, and the concluding result of interval was 95%.

Table 4 showed that 50.3% of respondents had poor behaviour.

**Table 4.** Dimension of Organizational Cultures in One Private Hospital In Western Indonesia (N=191)

<b>Nurses' behaviour</b>	<b>Frequency</b>	<b>Percentage</b>
Poor	96	50.3
Good	95	49.7

**Table 5.** Distribution of Nurses' Behaviour When Implementing Patient Safety In One Private Hospital in Western Indonesia (N=191)

<b>Nurses' behaviour</b>	<b>Mean</b>	<b>Median</b>	<b>SD</b>	<b>Min-Max</b>	<b>95% CI</b>
Patient identification	17.38	18.00	2.78	8-20	16.98-17.77
Effective communication	20.50	21.00	3.34	9-24	20.02-20.98
Drug safety	22.57	23.00	3.90	10-28	22.01-23.13
Risk of infection	24.92	26.00	3.92	7-24	24.36-25.48
Fall risk	17.10	17.00	2.68	10-28	16.72-17.48

Table 5 indicated the behaviour of nurses with the highest mean was on the target risk of infection of 24.92% and a standard deviation of 3.92, a median of 26% with a maximum value range of 7-28. Meanwhile, the lowest mean was in the target risk of falling 17.10%, standard deviation of 2.68, and and median 17% with a minimum value range of 8-20.

**Table 6.** The Relationship Between Organizational Culture and Nurse's Behaviour In One Private Hospital in Western Indonesia Based On Spearman's Correlation Test (N=191)

Variables	Mean	Median	SD	Min-Max	95% CI	P Value
Organizational culture	114.18	113.00	11.28	87-144	112.5-115.79	
Nurse' behaviour in implementing patient safety	102.46	105.00	14.74	50-120	100.36-104.57	0.326

Table 6 showed the results of the correlational study. The Spearman correlation test revealed no significant correlation between the organizational culture and nurse's behaviour ( $p = 0.326$ ).

## DISCUSSION

Poor organizational culture could have bad implications to the organization's objectives. According to the analysis of organizational culture characteristics, there was a higher percentage of those who perceive poor organization cultures (101 respondents) than those who perceive strong organization cultures (90 respondents). As a result, more than half of those respondents believe their organizations have poor cultures. The finding parallels Marquis and Huston (2017) who mention that most nurses could view organizational culture to be deficient or weak due to psychological tension.

The objective of organizational culture existence is to implant current company values in all staff members. As a result, the researchers recommend that hospitals re-socialize the cultures of an organization through a discussion forum where each staff

member can express their opinions on organizational cultural values.

The results found that 96 respondents (50.3%) showed poor behaviour, and 95 (49.7%) demonstrated good behaviour. These findings are in line with research done by Putri (2016), who discovered that more than half of nurses showed poor patient safety behaviour. Poor nurse behaviour can jeopardize patients and decrease the quality of health care. This will affect the nurses' professionalism when accomplishing a significant role in patient safety (Harandi et al., 2017). Based on the studies by Jafarpanah and Rezaei (2020), there was a positive response from nurses who manage patient safety well.

The dimension of nurses' behaviour with the lowest result is identifying patients. This finding will almost certainly harm drug administration, implementation process, and clinical examinations (Minister of Health of the Republic of Indonesia, 2017). According to Kunaviktikul et al. (2015), several variables, such as severe workloads,

numerous job duties, overloaded working hours, and a lack of supervision from the head nurse, cause nurses to identify patients incorrectly. As a result, researchers suggest that the hospital apply nursing leadership roles such as team leader, head nurse, and head of the inpatient room and general nursing units to guide through various procedures, such as socializing, training, mentoring, or bedside teaching and supervising. The nurse's performance in implementing the six objectives for patient safety could be assessed and evaluated by the team leader or the head of the unit.

The integrated leadership role in each management function is related to the behaviour of nurses in implementing patient safety such as planning, working arrangements, using conflict resolution strategies, being able to negotiate, delegating and directing and performance appraisals (Marquis & Huston, 2017). Nurses are always required to work according to the existing operational standards and the application of patient safety standards. Rewards are also given not only for outstanding nurses but also for those who can be the role model for the implementation of patient safety.

Spearman correlational test shows no relationship between organizational culture and nurses' behaviour in implementing patient safety with a significant value of 0.326 ( $p > 0.05$ ). The results obtained in this study are in line with research conducted by Khachian (2017), that there is no relationship between nurses' professional behaviour and organizational culture. However, the finding is different from the research conducted Mariati et al. (2014) who found a significant relationship between organizational culture and nurses' behaviour in implementing patient safety. Research by Jafarpanah and Rezaei (2020) states that the behaviour of nurses in implementing patient safety is still influenced by organizational culture, teamwork, interaction, commitment, and leadership style of each hospital where nurses work. An active organizational culture needs to be created because it is very crucial in organizations to deal with patient safety problems (Sutrisno, 2017).

The findings of this study suggest that organizational culture and nurses' behaviour remain ineffective in adopting patient safety. However, there is a slight difference in the number of respondents compared to their perception of nurses' behaviour (101 good: 90 poor). Similarly, the variable of nurses' behaviour has only one distinct response

(poor 96: good 95). As a result, the researcher suggests that additional studies should be carried out with qualitative research methodologies to evaluate aspects such as the level of knowledge or motivation that influence nurses' behaviour in adopting patient safety. A larger sample size and expanding number of hospitals will be necessary for future research.

## CONCLUSION

Based on the data and discussion, it concluded that 52.9% of respondents see organizational culture negatively. Poor behaviour in implementing patient safety had identified in 50.3% of respondents. The Spearman correlational test results showed no significant correlation between organizational culture variables and nurses' behaviour, with  $p = 0.326$ .

Researchers provide several recommendations for hospitals to be able to

conduct disciplinary procedures and coaching for staff members through using leadership roles in nursing. It is suggested that the nursing field relies on research as a point of reference to re-evaluate nurses' behaviour in implementing and improving patient safety behaviour. Future researchers employ qualitative study methodology to investigate other aspects, such as knowledge or motivation, that can influence nurses' behaviour in implementing patient safety.

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