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Introduction: Why Focus on Culture and Climate?

Catherine Pope, Jeffrey Braithwaite and Paula Hyde

This book brings together a series of papers which detail recent international research on the theme of culture and climate in health care organizations. It is the sixth edition in the Palgrave series of edited collections on organizational behaviour in health care and was developed from the highly successful Organizational Behaviour in Health Care Conference held at the University of New South Wales, Sydney in March 2008.

This conference is a key biennial meeting for members of the Society for the Study of Organizing Health Care (SHOC) and it attracts scholars from across the globe who share an interest in health care organizations and change. The theme of the sixth conference in Sydney was ‘Culture and Climate: Cracking the Code’. The topic of culture and climate was chosen for the Conference to encourage participation by a range of different interest groups – researchers, health care managers, practitioners, and policy makers aiming to explore climate in changing health systems, relationships and collaboration, and culture and climate research and its interface with practice. This clearly sparked interest. The conference was very well attended, with over 71 submitted papers presented as well as lively panel discussions and plenary addresses. This volume provides a historical record of some of the best papers at the Conference and an opportunity to advance the concepts of culture and climate in health care organizations. It provides a showcase for international research about health care organizations which we hope will continue the debates and conversations begun at the Conference, and which will help move critical academic debates forward.

The book builds on the structure of the conference. The chapters in Part I take a critical look at the concepts of culture and climate and related organizational constructs in the context of change within health systems and services. These twin concepts are much used but difficult to pin down and define. The idea of organizational climate has been mobilised in organizational research to signal an interest in the environment within organizations, and has led to work exploring the attitudes of members of groups and the relationships within and between teams. Much of this work has

been influenced by social psychology and has utilised psychometric measurement and statistical analyses. While there is corresponding quantitative research on organizational cultures, the concept of culture has particularly drawn on more qualitative approaches such as ethnography and face to face interviews. This in part reflects the anthropological and sociological origins of the concept, but is also suited to capturing data about meanings, norms and values, and routines and rituals – all phenomena that are variously collected under the heading ‘culture’. The three chapters in Part I provide a welcome opportunity to re-explore the concepts of culture and climate. Braithwaite et al. open the debate by showing the interrelationships between these concepts, using an empirical case study of the Australian health service organizations. The next two chapters, by Mannion et al. and Freeman and Peck, provide different examples of the operationalization of the concept of culture in the context of organizational and managerial change in the NHS.

Part II looks more closely at relationships and collaboration to help understand how these create and challenge organizational culture and climate. Here we have chapters examining conflicting relationships in health care organizations, including an account of difficulties posed by the dual roles of clinician-managers (Fitzgerald & Dadich), the tensions between Human Resource managers and clinical managers (Hyde) and the special difficulties experienced in bullying cultures (MacMahon et al.). Other chapters tease out a range of factors associated with culture and their influence on organizational behaviour and change, ranging from the impact of individuals and place on an organizational innovation (Pope et al.), to the role of interpersonal relationships in managerial decision-making (Eljiz et al.). The chapters by Rondeau and Wagar on human resource management practices and by Callen et al. on team climate highlight the ways in which culture and climate can hinder or support organizational performance and change. This section concludes with two chapters looking at collaboration, one based on creating organizational networks (Sheaff et al.) and the other looking at attempts to foster learning cultures (Casebeer et al.). All these chapters provide rich and detailed descriptions of relationships and collaboration in health care organizations. What they also do is draw on a range of different conceptual models, theoretical and methodological approaches to understand the processes and structures of the interactions which influence organizational cultures and climates.

Part III presents four chapters which shine fresh empirical light on how cultures and climates manifest in practice. McDermott and Keating provide a case study of the links between organizational climate and the capacity for change. The chapter by Long and colleagues reflects on their, often difficult, participatory action research approach to organizational change and they provide some useful lessons for those that wish to use this approach to get research into practice. A different kind of collaboration is highlighted

in the chapter by Greenfield which looks at how a clinical group worked together to change the culture and climate of their clinical practice. This book concludes with a chapter from Dickinson et al. exploring cultural performance.

The chapters collectively represent work by a range of scholars from diverse disciplinary backgrounds and working in different countries and health systems. The methods deployed demonstrate the wide variety of approaches to studying organizations, from in depth observation and interviews, focus groups, surveys and questionnaire based measures. This book also offers strong, but diverse theoretical perspectives, calling on the likes of Butler on performativity (Freeman and Peck), Lefebvre on place and space (Pope et al.), Mitchell on stakeholders and Timmermans and Berg on technologization (Greenfield). The case studies and research settings on which the chapters are based reflect very different types of health care organizations and focus on the work of people at all levels – clinicians, managers, practitioners. They provide rich empirical evidence about the importance of understanding culture and climate in health care organizations and, we believe, take us some way along the path to cracking the code for understanding culture and climate in health care organizations.

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