

Evaluation of Organizational Culture As a Step To Improve Patient Safety at RSIGMP Sultan Agung Semarang

Gesti Bening Aulia¹, Kusuma Arbianti^{2*}, Nira Ardlina³

* Correspondence Author : kusumaarbi@unissula.ac.id

¹ Student of the Faculty Of Dentistry, Sultan Agung Islamic University, Semarang, Indonesia

^{2,3} Department of Public Dental Health, Faculty of Dentistry, Sultan Agung Islamic University, Semarang, Indonesia

INDEXING

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ABSTRACT

This study assessed and evaluated organizational culture to improve RSIGMP Sultan Agung Semarang patient safety. This observational analytic study used a cross-sectional model. Data were collected by distributing questionnaires of the Organizational Culture Assessment Instrument (OCAI) to all RSIGMP Sultan Agung Semarang staff, with a total of 54 people. The questionnaire was previously tested for validity and reliability. It consisted of 24 statements from 10 dimensions of organizational culture (dominant characteristics, organizational leadership, management of employees, organizational glue, strategic emphasis, and criteria for success). The study showed that the dominant type of culture at RSIGMP Sultan Agung Semarang was clan culture.

Penelitian ini bertujuan untuk menilai dan mengevaluasi budaya organisasi sebagai langkah peningkatan keselamatan pasien di RSIGMP Sultan Agung Semarang. Penelitian berikut berjenis penelitian Analitik Observasional dan pendekatan cross sectional. Metode penelitian dengan membagikan kuesioner Organizational Culture Assessment Instrument (OCAI) pada seluruh staf di RSIGMP Sultan Agung Semarang. Kuesioner yang digunakan sudah teruji validitas serta reliabilitasnya. Terdapat 24 pernyataan dari 10 dimensi budaya organisasi (karakteristik dominan, kepemimpinan organisasi, manajemen staf, perekat organisasi, penekanan strategi, dan kriteria keberhasilan). Hasil penelitian dari 54 responden menunjukkan tipe budaya dominan di RSIGMP Sultan Agung Semarang adalah Clan Culture.

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INTRODUCTION

The prevalence of Adverse Events (KTD), as reported in “To Err is Human: Building a Safer Health System” by the Institute of Medicine (IOM), has become the cause of death for 33.6 million hospitalizations in America. Around 44,000-98,000, patients die from medical errors (Najihah, 2018). Adverse Events (KTD) can be avoided with a comprehensive service plan that involves patients based on their rights to get services (Ismainar, 2015). (Kemenkes RI, 2021) reported that as of August 2021, 4,462 cases which included 1,533 near misses (KNC), 1,388 non-injury incidents (KTC), and 1,541 unexpected incidents (KTD). The consequences of these incidents included 94 deaths, 36 serious injuries, 298 moderate injuries, 696 minor injuries, and 3,340 no injuries. The impact of patient safety incidents is not only experienced by patients, but hospitals can also be subject to lawsuits related to injuries patients suffer because, in Law Number 36 of 2009 concerning Health, “hospitals must prioritize the safety of patients’ lives.” The Ministry of Health of the Republic of Indonesia also supports this statement by issuing regulation Number 129 of 2008 concerning Hospital Minimum Service Standards, stating that “the number of safety incidents in hospitals should be 0% or “zero accidents” (Salsabila & Supriyanto, 2019).

Implementing an organizational culture can minimize the impact of incidents that can be detrimental to patients and hospitals. Cushway and Lodge describe organizational culture as



an organizational value system that can influence how an organization's work is completed and its members' behavior (Widyanti, 2016). Each healthcare organization has a culture that influences the attitudes and behavior of its members. Organizational success can be seen from the competence and values of staff and managers of health services (Irviranty et al., 2016). The organizational culture encourages the creation of a patient safety culture. Suppose a health service organization does not implement a patient safety culture. In that case, the risk of accidents can increase, which can cause latent errors, psychological and physiological disturbances to staff, decreased productivity, reduced patient satisfaction and can lead to interpersonal conflict (Idris, 2017).

Hidayat explains that quality health services are a basic need for everyone (Gulo A, 2018). Hospitals as health service institutions, both public and private, need continuous improvement to provide quality and useful services for the community. One of the indicators of a quality hospital is the proper implementation of the patient safety program.

Patient safety programs' success lies in services carried out continuously to achieve the expected results (Gulo A, 2018). Thus, it requires skilled personnel, good facilities and infrastructure, and periodic supervision. Organizational culture influences patient safety culture, such as the management and organizational levels. The management level includes management's perception of patient safety and involvement in patient safety. The organization creates a patient safety culture, including providing resources, providing professional training, and developing an incident reporting system. Incident reporting systems in healthcare have a positive impact on patient safety culture. The reporting system includes maintenance errors, safety-related reports, unexpected events and near misses. Reporting incidents benefits health workers by learning material and improving patient safety culture (Rachmawati & Harigustian, 2021). Patient safety is the main priority of the hospital, and the goal of patient safety is the reduction of Adverse Events (KTD), which are elements of patient safety incidents (Najihah, 2018). This study aims to evaluate the organizational culture profile at RSIGMP Sultan Agung Semarang to determine steps to improve patient safety.

RESEARCH METHOD

This study involved all staff at the RSIGMP Sultan Agung Semarang. The determination of the sample used the total sampling method by taking all population members as respondents consisting of 54 people. This observational analytic study used a cross-sectional method to evaluate the organizational culture at Semarang's Dental and Oral Islamic Education Hospital. All staff obtained data by distributing Organizational Culture Assessment Instrument (OCAI) questionnaires. Kim Cameron and Robert Quinn developed OCAI as a valid research method for assessing organizational culture. OCAI is a development of the CVF (Competing Values Framework), which is useful in assessing the direction in which the organization is grouped based on its culture. The questionnaire was previously tested for validity and reliability, in which all items are classified as valid and reliable. OCAI has 6 dimensions: dominant characteristics, organizational leadership, staff management, organizational glue, strategic emphasis, and success criteria. Each dimension has 4 statements or questions that respondents must fill in, so the total is 24. Then the respondents gave a score in each dimension point according to the cultural conditions that

are felt now (“Currently”) and expected (“Expected”) with a total score of 100. Each dimension includes 4 statements representing clan, adhocracy, market, and hierarchical cultures.

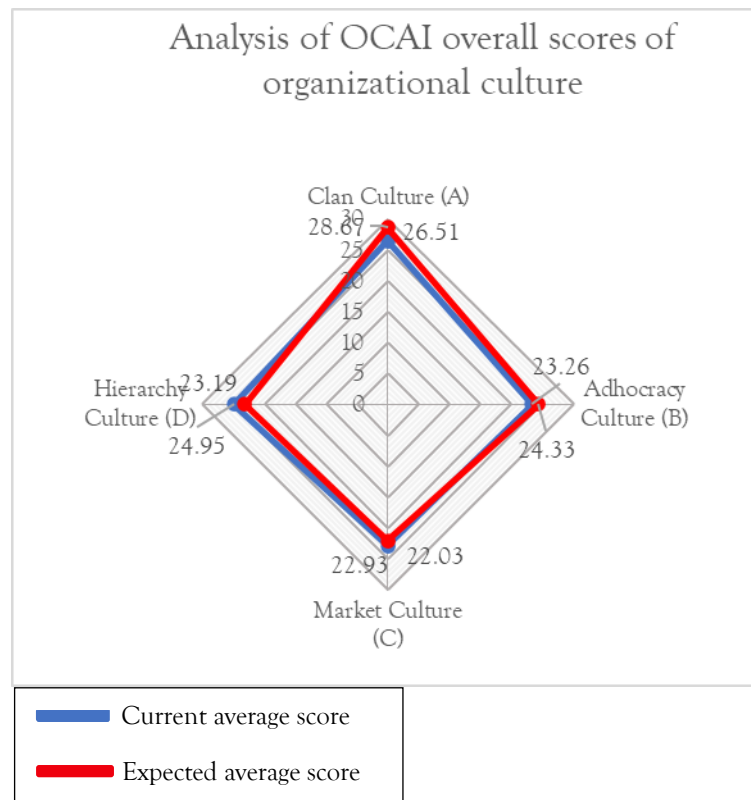
RESULT AND DISCUSSION

Table 1 reveals the average score of the Organizational Culture Assessment Instrument (OCAI) for six dimensions of organizational culture at RSIGMP Sultan Agung Semarang for “current” and “expected” organizational culture characteristics.

Table 1. OCAI Overall Scores

Culture type	Dimension of Organizational Culture	
	Current average score	Expected average score
Clan Culture (A)	26,51	28,67
Adhocracy Culture (B)	23,26	24,33
Market Culture(C)	22,93	22,03
Hierarchy Culture (D)	24,95	23,19

Source: processed primary data, 2022



Source: processed primary data, 2022

Figure 1. OCAI Radar Chart of Overall Scores of Organizational Culture Dimensions

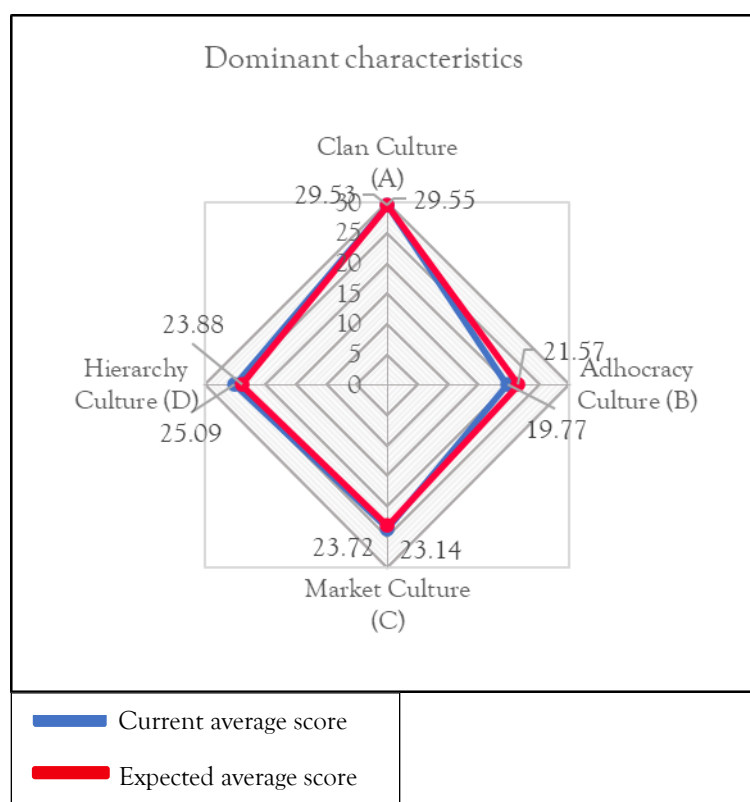
The results showed that the highest score for the type of organizational culture was Clan Culture, with the “current” and “expected” average score of 26.51 and 28.67, respectively. Clan Culture is similar to family characteristics that can be managed with teamwork and are related to organizational learning, feedback and communication about mistakes,

development of Human Resources (HR), and non-punitive responses when mistakes occur (Widyanti, 2016). In the long term, organizational culture is a means to meet needs and achieve goals. Vision and mission in the organization have the meaning of reference values in activities related to the problem of achieving an organization such as ideology, ideals and beliefs (Mahardayani & Dhania, 2013).

Table 2.OCAI Average Scores of the Dominant Characteristics

Culture Type	Dominant Characteristics	
	Current average score	Expected average score
Clan Culture (A)	29,55	29,53
Adhocracy Culture (B)	19,77	21,57
Market Culture (C)	23,72	23,14
Hierarchy Culture (D)	25,09	23,88

Source: Processed primary data, 2022



Source: processed primary data, 2022

Figure 2. OCAI Radar Chart of the Dominant Characteristics

On the dominant characteristics dimension, the highest “current” and “expected” average score was 29.55 and 29.53, respectively, namely the Clan Culture type. Clan Culture is characterized by the comfortable feeling of the staff in the working environment at RSIGMP Sultan Agung Semarang and the close relationship between staff, indicating that a hospital is a pleasant place. Supportive work environment factors include harmonious co-workers, a

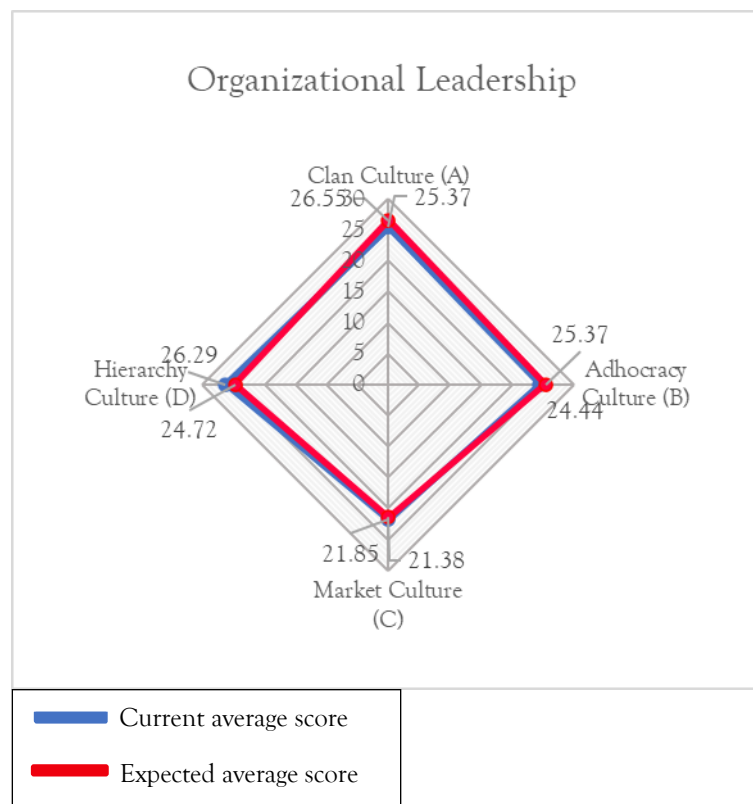
comfortable atmosphere, and supportive facilities. Employees who feel enthusiastic will get optimal work results (Ismail et al., 2022).

a. Organizational Leadership

Table 3. Average Scores of the Organizational Leadership

Culture Type	Organizational Leadership	
	Current average score	Expected average score
Clan Culture (A)	25,37	26,55
Adhocracy Culture (B)	24,44	25,37
Market Culture (C)	21,85	21,38
Hierarchy Culture (D)	26,29	24,72

Source: processed primary data, 2022



Source: processed primary data, 2022

Figure 3. OCAI Radar Chart of the Organizational Leadership

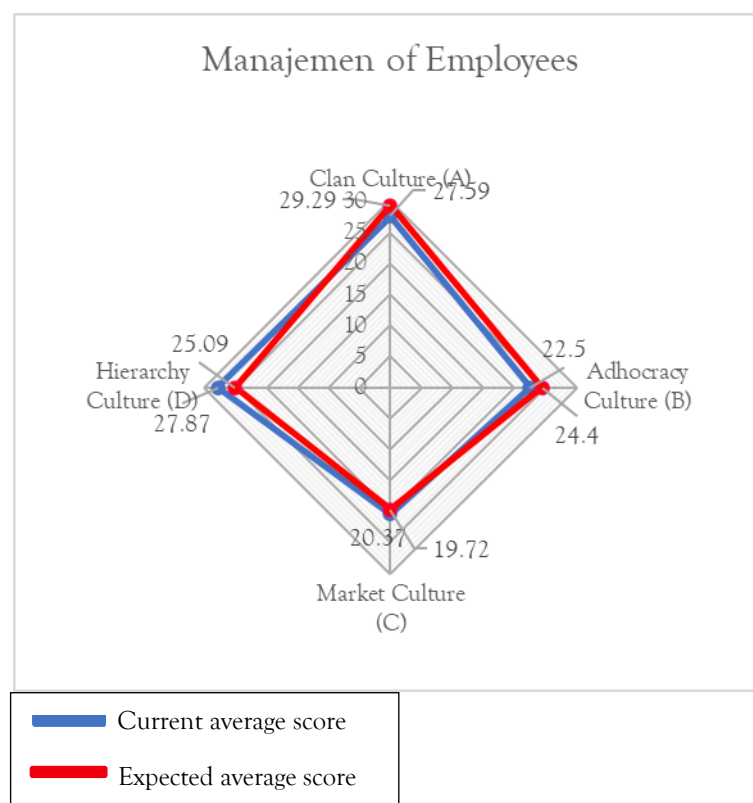
On the organizational leadership dimension, the highest “current” and “expected” average score was Hierarchy Culture (26.29) and Clan Culture (29.55), respectively. Leaders are expected to play an active role as mentors or facilitators so that staff feel more comfortable carrying out organizational learning evaluations (Husin, 2022). RSIGMP Sultan Agung’s leadership must be a role model for its members and provide direction to members/subordinates.

b. Management of Employees

Table 4. Average Scores of the Management of Employee

Culture Type	Staff Management	
	Current average score	Expected average score
Clan Culture (A)	27,59	29,29
Adhocracy Culture (B)	22,50	24,40
Market Culture (C)	20,37	19,72
Hierarchy Culture (D)	27,87	25,09

Source: processed primary data, 2022



Source: processed primary data, 2022

Figure 4. OCAI Radar Chart of Management of Employees

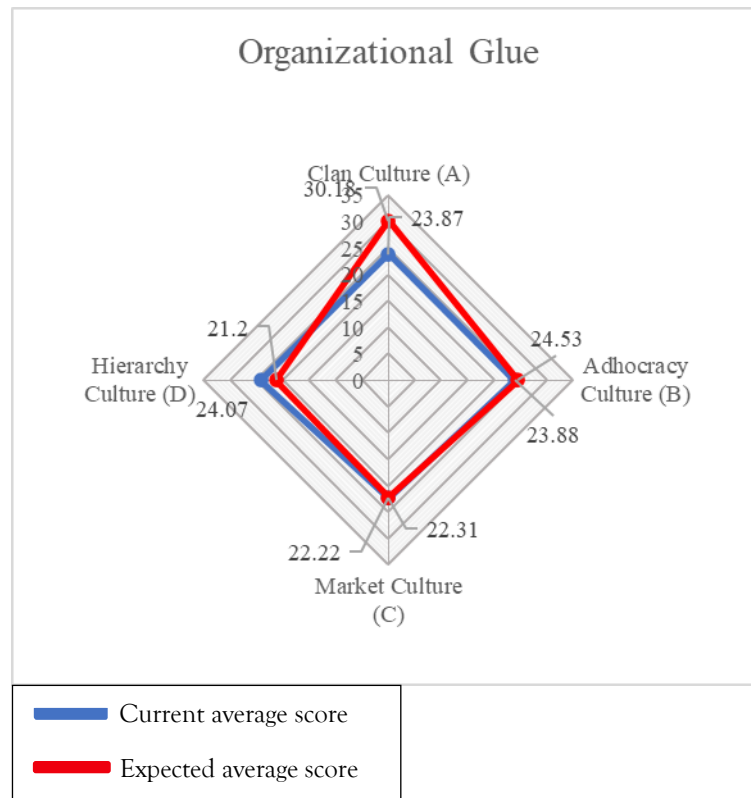
On the management of employee dimension, the highest “current” and “expected” average score was Hierarchy Culture (27.87) and Clan Culture (29.29), respectively. An organization frees its members to develop themselves through education or training to improve abilities and skills to achieve goals in running the organization (Masiyati et al., 2020). Thus, RSIGMP Sultan Agung Semarang can initiate a training program for staff, both internal and external training. Internal training is training that is attended by all staff in the hospital. In contrast, external training is attended by several hospital staff and not carried out in the hospital (Prayitno, 2018).

c. Organizational Glue

Table 5. Average Scores of the Organizational Glue

Culture Type	Organizational Glue	
	Current average score	Expected average score
Clan Culture (A)	23,87	30,18
Adhocracy Culture (B)	23,88	22,22
Market Culture (C)	22,31	24,53
Hierarchy Culture (D)	24,07	21,20

Source: processed primary data, 2022



Source: processed primary data, 2022

Figure 5. OCAI Radar Chart of the Organizational Glue

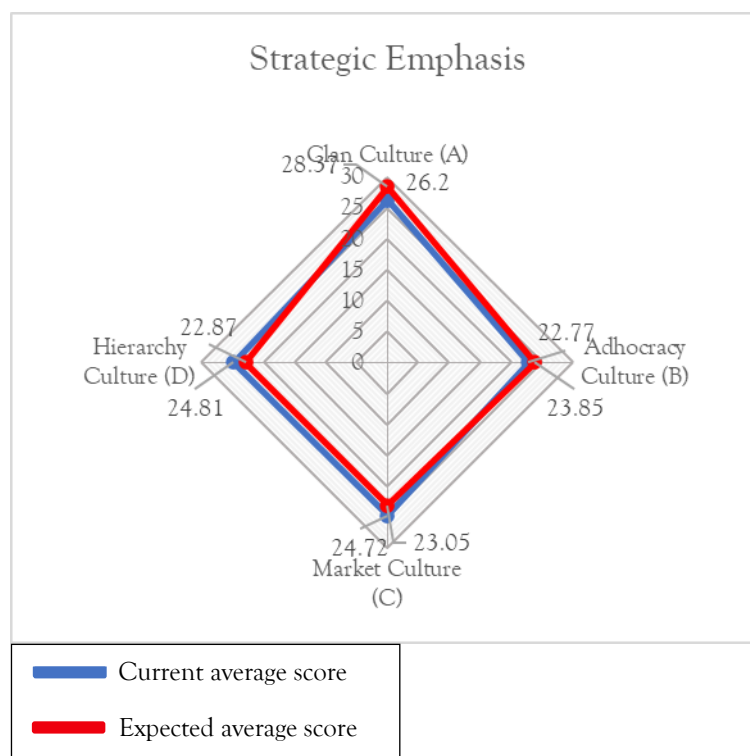
On the dimension of organizational glue, the highest “current” and “expected” average score was Hierarchy Culture (24.07) and Clan Culture (30.18). An organization needs shared commitment, a provision mutually agreed upon by all staff regarding guidelines, implementation, and organizational goals (Muis, 2018). RSIGMP Sultan Agung Semarang staff are expected to be committed to a stable work environment to achieve the common goal.

d. Strategic Emphasis

Table 6. Average Scores of the strategic emphasis

Culture Type	Strategic emphasis	
	Current average score	Expected average score
Clan Culture (A)	26,20	28,37
Adhocracy Culture (B)	22,77	23,85
Market Culture (C)	24,72	23,05
Hierarchy Culture (D)	24,81	22,87

Source: processed primary data, 2022



Source: processed primary data, 2022

Figure 6. OCAI Radar Score of Strategic Emphasis

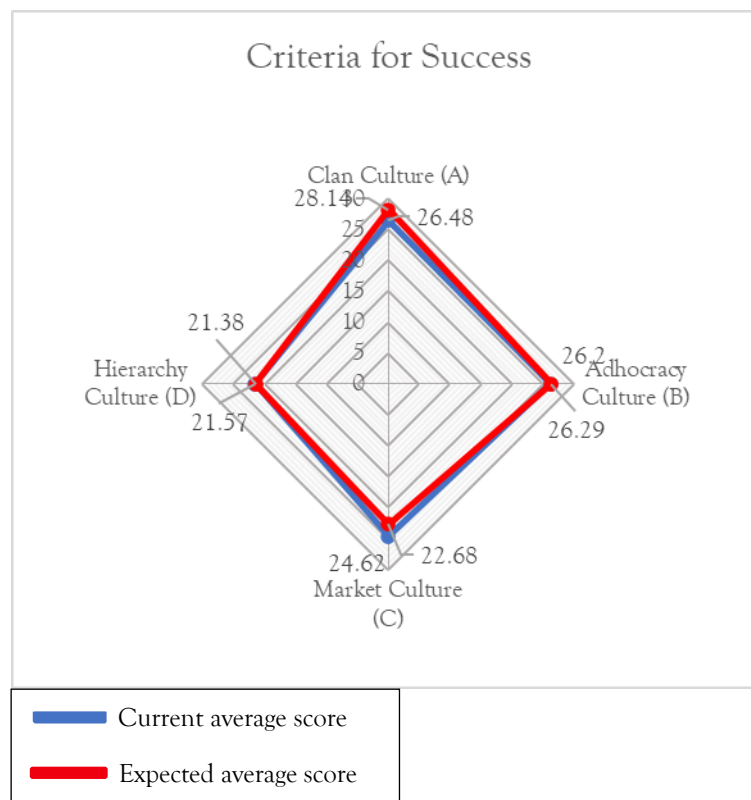
In the strategic emphasis dimension, the highest “current” and “expected” average score was 26.20 and 28.37, namely in the Clan Culture type. The development and utilization of human resources is an organizational need characterized by an emphasis on and development of human resources, openness, and participation (Hidayat & Mardiawan, 2017). RSIGMP Sultan Agung Semarang has developed human resources, for example, initiating coordination meetings discussing input and work programs. Health development and implementation in hospitals must always be improved to provide quality medical services. Hospital management needs to try hard to provide the best service to provide patient satisfaction. Improved care is crucial to building public trust in hospitals (Zaviera et al., 2021).

e. Criteria for Success

Table 7. Average Scores on the Criteria for Success

Culture Type	Criteria for Success	
	Current average score	Expected average score
Clan Culture (A)	26,48	28,14
Adhocracy Culture (B)	26,20	26,29
Market Culture (C)	24,62	22,68
Hierarchy Culture (D)	21,57	21,38

Source: processed primary data, 2022



Source: processed primary data, 2022

Figure 7. OCAI Radar Chart of the Criteria for Success

On the dimension of success criteria, the highest “current” and “expected” value was 26.48 and 28.14, which is in the Clan Culture type. Healthcare organizations need stronger efforts in implementing teamwork to achieve comprehensive patient safety culture. Teamwork can be proved by coordination and support between staff to achieve common goals (Lestari et al., 2021). Therefore, RSIGMP Sultan Agung Semarang staff is expected to build good cooperation so that health facilities are considered successful in providing comprehensive medical services.

The Clan Culture shows a conducive condition to patient safety. As organizations are a place for each member to share personal information, the organization tends to be open to all input and suggestions from its members. If the staff makes an error and is allowed by other staff, it can cause delays in enforcing rules and standards. This condition can also be an

obstacle to developing patient safety. A dynamic workplace and entrepreneurship characterize the type of organizational culture. The assumption is that they can innovate and invite their members to take the initiative to bring organizational success, especially in developing and preparing for future changes. Clan Culture is member-centered and organizational to meet the mix through consensus, job satisfaction, and commitment through staff involvement (Anuar et al., 2021). Even though an organization can highlight one type of organizational culture, other characteristics remain. A study showed that organizations have functional subcultures, hierarchical subcultures based on position, geographic subcultures, job subcultures based on degrees or positions, and social subcultures of social activity (Kreitner, 2013). Clan Culture can make staff more open and allow them to express opinions freely. This type of organizational culture also encourages organizations to be more creative and innovative because there are various ideas put forward by staff (Berkemeyer et al., 2015).

Organizational culture implementation and development is an effective way to improve staff performance. Therefore, it is hoped that it can strengthen the organizational culture formed and implemented at RSIGMP. Applying organizational culture can be a means of controlling and improving health services and facilitating the implementation of patient satisfaction programs.

This study has not identified the combination of types of organizational culture that support patient safety. The researchers suggest that hospitals improve patient safety with an organizational culture approach. Thus, conducting in-depth studies on the analysis of organizational culture at RSIGMP to provide an overview of the organizational culture that promotes patient safety is necessary.

CONCLUSION

Clan Culture is the dominant type of organizational culture at RSIGMP Sultan Agung Semarang. RSIGMP Sultan Agung Semarang is a pleasant workplace, prioritizes cooperation, and has a family atmosphere and good communication between staff.

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