

Track: People – Human Resource Behavior & Practices

**Searching antecedents for work outcomes in healthcare organizations: work context and
Public Service Motivation**

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Introduction

Since the 1990s, under the name of New Public Management (NPM), reforms have involved the design of the administrative bureaucracies to facilitate both its efficiency and its effectiveness. Critics of NPM underline that the primary foundation for administrative reform is the imperative of political control (Perry, 2012). An emerging alternative to traditional foundation for administrative reform has its roots in research on altruism, behavior, and work motivation in public organizations. In the last decades, in fact, the interest on work motivation in the public sector in general and public

service motivation (PSM) in particular has grown (Kim, 2005; Moynihan, Pandey, 2007; Wright, Pandey, 2008). Whereas the former refers to motivation in general, the latter is defined in terms of altruistic motivation to serve the interests of a community of people, a state, a nation or humankind (Crewson, 1997; Perry, Wise, 1990). Perry and Wise (1990) define PSM as a mixture of rational, normative and affective motives, explaining how the combination of these motives will vary over time, depending also upon contextual factors. While a bulk of studies analyzed the relation of aggregate PSM on job satisfaction, only few studies analyzed the relationship between each dimension of PSM on both job satisfaction and organizational commitment. Additionally, focusing on the effects of the different dimensions of PSM becomes more important. Thus, our work contributes to this stream of literature and we expect that some dimensions play a more relevant role than others in influencing job satisfaction and organizational commitment.

However, PSM could be not sufficient to explain differences in work outcomes: the boundaries placed on the scope of PSM (Perry, 2012) suggest that it is a particular form of altruism or pro-social motivation that could be animated by specific values, mission and culture of public organizations. Moreover, we assume that the impact of the most recent reforms involved public organizations will result, firstly, in change in organizational characteristics (more emphasis on outputs, on measurements, on service quality) that could provide less (or more) opportunity for employees to fulfill their needs and values. In particular, the latest financial crisis presented governments with an exacerbated situation, as the performance of governments and their administrations affect our society much more than any other private sector organization (Wright, 2001).

Starting from these premises, the paper aims to fulfill this gap by testing how both PSM and work context might influence work outcomes (job satisfaction and organizational commitment) helping public organizations to pursue their missions and goals. To investigate these relationships we use data from the healthcare sector which has been impacted heavily by ongoing reform movements.

Reforms in the Healthcare Organizations

Healthcare organizations are at the center of public management reforms in almost every OECD country (Böhm et al., 2013). Notwithstanding its complexities and specificities, the healthcare sector absorbs the main part of public expenditure and cannot escape reforms aimed at reducing public debts and deficits as requested from the current global crisis. The reforms have often brought unintended effects when introduced in hospitals and healthcare units characterized by the co-existence of different organizational values, high turnover and burn out, a worrisome shortage of key professional figures.

In addition to the aforementioned features, in Italy the greatest part of the public debt is represented by the regional healthcare deficits. Privatization, outsourcing, the implementation of public–private partnership and other market-type mechanisms, have been introduced without a prior testing in other government sectors. Moreover, two reform programs – performance budgeting through standard costs and heavy cutback interventions, including the mergers of several small hospitals – are currently generating a significant stress upon the healthcare organizations and their employees. Nonetheless, it remains one of the most critical public sector areas for ensuring the wellbeing of the community.

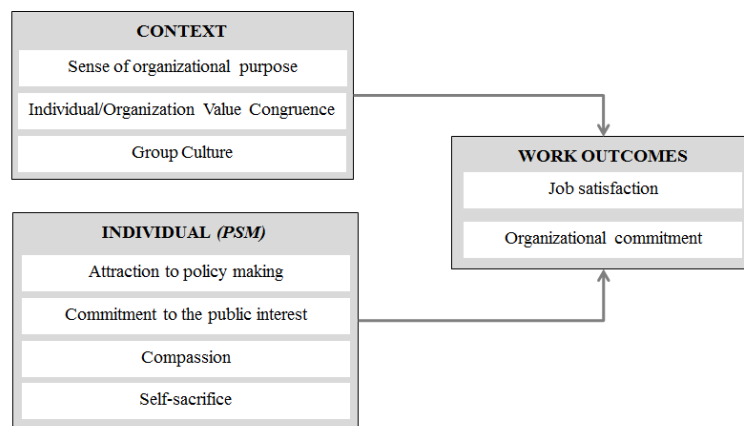
Although many technical aspects of health sector reform in the international context have been researched, there has been a surprising lack of attention to the human (employees) elements of reforms (Dussault, 1998; Franco, Bennett, Kanfer, 2002) even if the health workforce is arguably the most important input in a unique service delivery process and has a strong impact on overall health system performance. However, while resource availability and worker competencies are essential, they are not sufficient in themselves to ensure desired worker performance: health sector performance is critically dependent on its workforce and its satisfaction and commitment (Franco, Bennett, Kanfer, 2002). For these reasons, service quality, efficiency, and equity are likely all to be directly affected by workers' PSM.

A Conceptual Model for Studying Work Outcomes

Previous literature suggests that work outcomes are driven by both individual and work context variables (Moynihan & Pandey, 2007; Wright & Pandey, 2008). However, it is not simple to identify context and individual factors since work outcomes are linked to how employees interact with, and view, their organizations (Allen & Meyer, 1990). In order to choose the concepts to operationalize work outcomes itself we referred to the central and interrelated components used to explain or represent the concept of work motivation as evidenced by Locke's (1997) review of the theories and associated empirical work on this concept.

The study of the impact that both individual attributes and context have may still be instrumental in identifying and understanding the determinants of two different work outcomes: job satisfaction (Gabris & Simo, 1995; Jurkiewicz et al. 1998) and organizational commitment (Mowday et al., 1979; Meyer & Allen, 1991; Liou & Nyhan, 1994; Robertson & Tang, 1995). Figure 1 shows the theoretical and conceptual framework for this study.

Figure 1 – The conceptual model



Context and Work Outcomes

The stream of research on work context refers to the characteristics of the organizational setting in which individuals are employed. Public administration literature has identified several aspects of the employee's work context that may influence work outcomes and that may influence the sense of whether the organization is a appealing and rewarding place to work (Wright, 2001, 2003; Wright & Davis, 2002; Wright & Kim, 2005). Starting from this literature, our study helps to extend our understanding of the relevance of context in public organizations by investigating three different variables: the sense of organizational purpose, the individual-organization value congruence and group culture. According to Perry (2012) individuals who are compatible with the characteristics of their organization, will have higher level of work outcomes. Thus, we generally expect to see an association among organizational context factors and work outcomes such as job satisfactions and organizational commitment.

Particularly, the following hypothesis can be identified:

Hp1a: The more employees share the organizational purpose, the higher their levels of work outcomes, i.e. job satisfaction and organizational commitment.

Hp1b: The more employees agree with the organizational values, the higher their levels of work outcomes, i.e. job satisfaction and organizational commitment.

Hp1c: The more employees perceive a strong group culture the higher their levels of work outcomes, i.e. job satisfaction and organizational commitment.

PSM and Work Outcomes

The second stream of existing research explains much of the variation in the work outcomes as a result of individual differences in motives.

One of the most important predictor of work outcomes, reflective of the particular features of public service work, is *Public Service Motivation* (PSM). There is a traditional belief among academics and practitioners in the field of public administration that PSM attracts individuals to the public sector and to public service work because it is in these contexts that the public interest is most served. Building on this framework, Perry (1996) identified the well-known scale to measure PSM and to assess the level of attraction an individual has to serve the public interest. Specifically, this scale covers four dimensions: attraction to policy making (APM), commitment to public interest (CPI), compassion (COM), and self-sacrifice (SS).

Empirical research shows positive relationships between PSM and both organizational commitment and job satisfaction (Crewson, 1997; Kim, 2005; Kjeldsen & Andersen, 2012; Naff & Crum, 1999; Moynihan & Pandey, 2007; Taylor, 2007; Vandenabeele, 2009; Wright & Pandey, 2008). Following the line of thought presented in these studies, we expect that PSM influences work outcomes. Particularly, the following hypothesis can be identified:

Hp2a: Employees with high level of PSM will have higher levels of organizational commitment.

Hp2b: Employees with high level of PSM will have higher levels of job satisfaction.

Method

The research tests the hypotheses using data collected from 6 Italian hospitals. We have collected 451 usable responses, from a variety of hospital staff members including both first and second level Medical Directors, Nurses, Nurses Coordinator and, finally, some other categories such as medical practitioners and technical support operators. All variables were measured using multiple items taken from scales previously validated in literature. PSM was measured using all 24 items from the Perry (1997) scale. The 4 items measuring the individual/organization value congruence was obtained from Wright and Pandey (2008). Finally both group culture (6 items) and sense of organizational purpose (3 items) was measured using the scale proposed by Moynihan and Pandey (2007). To measure job satisfaction 3 items taken from Moynihan and Pandey (2007) were used. Organizational commitment was measured adapting the scale provided by Coyle-Shapiro and Kessler (2003).

Preliminary Results and Discussions

The descriptive statistics reveal that the average scores are relatively high for COM, CPI, and SS. Looking at the variables used as proxies of work outcomes the average scores of job satisfaction and organizational commitment are quite high, suggesting that most of the respondents are committed to and satisfied with their jobs. Moreover, the results of the *bivariate analysis* show that some of the main hypothesized relationships between the organizational and individual variables and work outcomes are in the predicted directions.

To examine the hypothesized relationships we employ OLS regressions. Preliminary results suggest that most of our hypotheses are supported. For example, CPI and SS are positively associated with job satisfaction and organizational commitment. Additionally, sense of organizational purpose is positively linked to job satisfaction. More detailed results will be presented at the workshop.

Conclusions

The several attempts to link work outcomes both to individual attitudes and behaviors and to context variables have produced, in literature, mixed results. The conceptual model presented in this study does advance some theoretical understanding of this matter.

First of all, this research represents an attempt to enrich literature containing assertions that work outcomes could have particular and different features in public sector organizations or in particular areas such as healthcare. Second, this research highlights the usefulness of undertaking an analysis of the impact of each PSM dimensions on job satisfaction and organizational commitment. Previous studies have mainly focused on the aggregate PSM construct (Alonso, Lewis, 2001; Brewer, Selden, 1998; Crewson, 1997; Moynihan, Pandey, 2007) evidencing that PSM too has an impact on several work and social outcomes. Our work extends this stream of studies by focusing on PSM dimensions.

Second, we emphasize the work context variables and their direct influence on work outcomes. This is particularly relevant in a period where public sector organizations are involved in several reform processes that focusing on measurement and evaluation of both organizational and individual performance, and on cutback management policies.

Our results are relevant for managers in public organizations, in particular in the healthcare sector. For example, the fact that the individuals who are more committed and satisfied are those who believed their job permit them to act for the common good, suggests that it is up to public administration to remove any type of impediment that can prevent public employees from doing “what they are employed to do in the first place - serve the public interest” (Taylor, 2007, p. 953). In their search for service quality, efficacy of the administrative action and efficiency, both policy-

makers and public managers should not forget core purposes, nature and mission of public organizations. Employees' job satisfaction and commitment may improve if public sector organizations share with them the rationale behind their policies and procedures so that individual can understand not only their necessity but also how they can coexist with community needs and performance expectations (Vinzant, 1998). It is critical to make clear what the employee's role is in the organization and communicate how effective performance creates and advances public value (Moynihan, Pandey, 2007; Pandey, Garnett, 2006).

Moreover, going beyond the organizational boundaries, our analysis could provide also some implications for health reform policies. Often, reform programs have focused on a very limited number of channels (e.g. financial incentives) to influence worker behavior, and neglected other less tangible aspects, such as the work itself, the shared values, the understanding and the alignment with the organizational goals (Moggi et al., 2013) . Given this lack of information, it is critical that policy makers consider a broad range of motivational determinants, that they initiate incentives which all work in the same direction (organizational goals), and that the potential negative effects of new incentives are considered and counteracted with balancing measures.

Moreover, the design of reforms needs to include design of the transition process including change management strategies. Health sector reforms are rarely confined to changing organizational structures. The thrust of the reform is often more far-reaching, and aimed at changing values within an organization. When health workers feel that the values associated with a reform program are not values to which they personally can subscribe, there is likely to be a discontent with the reform process which may lead to low levels of motivation.

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