

THE RELATIONSHIP BETWEEN WORKING CLIMATE AND QUALITY OF PERFORMANCE IN ORGANIZATION

By: Harman Malau

Abstract: *High Quality performance is needed in every organization to succeed. It is relevant to any organization. Climate is one of the most powerful, yet overlooked, factors when determining the performance of a particular organization or work team. Thus the purpose of this study seeks to know what is the dimension of working climate that influences the quality of performance in organization.*

Through library research, it is found that organizational climate describes the practices and procedures of an organization and the values that members give to this set of characteristics or attributes. Climate determines the performance of an organization and climate drives performance because it is tied directly to motivation that is, to the energy people put into their work. There are six distinct dimensions of working climate: structure, standards, responsibility, recognition, support, and commitment.

Keywords: *High quality performance, working climate, organization climate*

I. Introduction

Working Climate is the prevailing workplace atmosphere as experienced by employees. Climate captures what it feels like to work in a group; it is the weather of the work place as well as the role of leadership of their leaders (Brownish and Savoy, 1999)

An organizations present formal structures and programs, it has internal environment, which creates an environment of work and which directs it in the choice of an approach to achieve its goals and to solve its problems. According to certain authors of the terms like "atmosphere", "personality", "feeling towards an organization" is used to indicate the internal environment of an organization. The expression "climate organizational" is generally accepted to indicate this concept: it represents, in fact, a concept less vast than that of internal environment (Savoy and Brunet, 1999).

Climate is one of the most powerful, yet overlooked, factors when determining the performance of a particular organization or work team. Studies have consistently linked climate to individual and organizational performance. Organizational climate describes the practices and procedures of an organization and the values that members give to this set of characteristics or attributes (Sleutel, 2000).

Working climate exists objectively in the organization, but it can only be described and measured indirectly through the perceptions of the members of the organization.

II. Working climate Dimensions

There are six distinct dimensions of working climate: *structure, standards, responsibility, recognition, support, and commitment* (Stringer, 2002).

Structure refers to the way in which a group is formed, its lines of communication, and it's a means for channeling authority and making decisions (Marquiz 2000). It should facilitate the vision, values, mission, philosophy, goals, objectives, strategies, policies, and procedures. It has organizational chart that defines formal relationships within the institution (Tomey, 2003).

Clear structure means that the decision-making process is clear. People need to be clear about who is accountable for what. The employee needs clarity, means that everyone knows what is expected of them and that they understand how those expectations relate to the larger goals and objectives of the organization. Effective communication is particularly important between the leader and the group. As stated by Marquis, 2000, that managers who understand an organization's structure and relationships will be able to expedite decision making and have a greater understanding of the organizational environment.

Modern management theorists have learned much about human behavior and most organizations have modified their structures to reduce rigidity and impersonality. Current research also supports the thesis that changing organization structure in a manner that increases autonomy and work empowerment for nurses will also lead to more effective patient care (Marquis, 2000).

Structure is high when people feel that everyone's job is well defined, it is low when they are confused about who does what task and who has decision making authority (Stringer, 2002).

Standard is a predetermined level of excellence that serve as a guide for practice and standards are used as measurement tools, they must be objective, measurable and achievable (Marquis, 2000).

Performance standards are derived from job analysis, job descriptions, job evaluation, and other documents detailing the qualitative and quantitative aspects of jobs. They are established by authority, which may be the agency in which they are used or a professional association, such as the American Nursing Association (ANA). They are measuring sticks for qualitative and quantitative evaluation of the individual's performance (Swansburg, 1999). Performance standards are written for a job and are used to measure the performance of the individual filling the job. Employee should know that these standards are being used and know what they are. They may be asked to bring copies of the standards to their supervisor for scheduled counseling. They may also be asked to list their accomplishments in relation to the

standards. This makes performance counseling less of a threat and allows employees to recognize and discuss their accomplishments. Employees may be guided into recognition of areas where their performance falls short and to be encouraged to voice out goals for improvement in these areas. This method of using performance standards has been found to be effective (Swanburg, 1999).

High standards mean that people are always looking for ways to improve performance. Low standards reflect lower expectations for performance (Stringer, 2002).

Responsibility, being responsible means being obligated to accomplish a task. It is the corollary of authority, as well as its natural consequence (Murray, 2003). Potter (1995) says that greater responsibility and accountability come with increased autonomy. Eliss, 1998 says that the leaders will need to accomplish some of their responsibilities by using the skills of others. The delegation of responsibilities to others has become a greater issue in nursing within recent years. She pointed out that once you have decided which task can be delegated, to which team members, it is important that you give clear and complete directions to those responsible for completing the assignments. It is also necessary to provide to your team member the authority to complete the assigned work once it has been delegated.

Being responsible means reliable and worthy of trust from colleagues and clients. A responsible nurse is competent in knowledge and skill and ethically executes duties within the guidelines of the profession (Potter, 1995).

A sense of high responsibility signifies that employees feel encouraged to solve problems on their own without having to check everything with their boss and feel fully accountable for the outcome (Snow 2002). Low responsibility indicates that risk taking and testing of new approaches tend to be discouraged (Stringer, 2002).

Recognition, studies have demonstrated that recognition is one of the most important ways health care organizations have to motivate employee performance (Heidenthal, 2003). Positive feedback and recognition of our contributions are important intangible rewards in the workplace. Everyone enjoys praise and recognition. A smile, a card or note, or a verbal "thank you" goes along way with coworkers in recognizing a job well done. Staff recognition programs have also been identified as a means to increase self-esteem, social gratification, morale and job satisfaction (Tappen, 2004). Reward should be consistent, fair, and timely and should relate to work. They should also be ample. Reward for old behavior should be removed after the individuals have been helped to see the reasons for the proposed change. Employees need to see the necessity for the new behaviors and should be given real incentives, financial or non-

financial. Non-financial rewards include enriching jobs and encouraging self-development. Such activities can satisfy individual needs (Swansburg, 1999).

Recognition as a form of reward is often forthcoming from those who have received the services of the nursing profession, but from within the organization reward or recognition is often more difficult to satisfy. Brunet 1999 say that for many the value of work is characterized not solely by extrinsic rewards such as compensation, benefits and status, but often and more important, by intrinsic rewards such as self satisfaction, achievement, pride, joy, self enhancement, socialization, and improved self esteem.

High recognition climates are characterized by an appropriate balance of reward and criticism. Low recognition means that good work is inconsistently rewarded (Stringer, 2002).

Support, reflects the feeling of trust and mutual support that prevails within a work group, the team is empowered to do what is required. Team members feel they have the resources and backing they need to achieve the work group's goals. Recourses include essential supplies, equipment, tools staff and budget, without which their performance would be severely constrained. Emotional support includes an atmosphere of trust, mutual support and deserved recognition, in addition to individual inner resources (Maduct, 2000).

The team members need to know the purpose of the team, the goals, and the targets for accomplishment. Goal setting and planning strategies to meet the goals are important. Team members should show respect for and appreciation of each other (Tomey, 2003; Stringer, 2002). Effective team need to work together and take collective responsibility to complete significant tasks. These work design characteristics motivate because they increase members' sense of responsibility and ownership over the work and because they make the work more interesting to perform (Robbins, 2001). High enthusiasm by the leader will spark high enthusiasm within the group, there by boosting group morale and stimulating the group's esprit de corps, a spirit and sense of pride and honor (Swansburg, 1999).

Support is high when employees feel that they sense that they can get help (especially from the boss) if they need it. When support is low, employees feel isolated and alone. This dimension of climate has become increasingly important for today's business models in which resources are severely constrained and a premium is placed on teamwork (Stringer, 2002).

Commitment is a deep and profound valued of emotional intelligence. It means aligning oneself with the goals of a group organization. It is applying oneself completely for a cause. People possessing this competence readily makes sacrifice to meet larger organizational goals. Hence, more than the individual interests, the group's mission or interest takes priority. It is very deep to the extent of sacrificing oneself. Emotionally balanced and committed people

don't yield to any pressure or threat, instead they courageously proceed whatever may be the consequences. Team commitment is the feeling that people are proud to belong to the organization and will provide extra effort when needed (Sprey, 2007).

Personal involvement in managing a nursing service requires commitment from the chief nurse and other managers. Managers should be highly visible to the staff, supporting, nurturing them in the process. In turn, the staff should also be committed, a characteristic they develop from association with the committed managers. They gain this commitment from seeing their bosses out at the production level where patients are being treated, from cooperating with their colleagues and managers in a spirit of teamwork (Swansburg, 1999).

Strong feelings of commitment are associated with high levels of personal loyalty. Lower levels of commitment mean that employees feel ambivalent to the organization and its goals (Stringer, 2001).

III. Climate determinants

Stringer (2001), in his ongoing research, confirmed by his experience in the field, has identified five major determinants of working climate. It is important to think of them in terms of which causes are under the direct or indirect control of an organization's leadership and which are outside of that control. This distinction will help leaders to focus their energies. At the same time, they need to be aware of the factors that cause the climate of their organization, even though they cannot control those factors:

1. **Leadership practices**, most studies have shown that the single most important determinant of an organization's climate is the day-to-day behavior of the leaders of the organization. Often the quick way to change the climate of the organization is to change the way the managers are managing.
2. **Organizational arrangements**, the formal aspect of the organization including the design of tasks and jobs, the reward system, the policies and procedures, and physical location of the people in the organization.
3. **Strategy**, if a corporation has chosen an aggressive, growth-oriented strategy, for example, and has successfully communicated this strategy to people, the working climate will, overtime, begin to reflect the strategic priorities. The absence of clearly articulated strategy also has implications for the working climate.
4. **External environment**, factors such as government regulation, economic conditions, competitive industry forces and changing technology create pressure on organizations and their managers.

5. **Historical Forces.** people's expectations regarding future rewards, punishment, and consequences are often a reflection of what they think occurred before.

Stringer, et al (2001) found, that the most important of these are the day-to-day practices of the leaders of the organization. This is fortunate because, although it is impossible to change the external environment or the historical forces, and it is difficult and time consuming to change the strategy and modify all of the formal organizational arrangements, a leader can change his or her own leadership practices.

Snow (2002) says that leaders are primarily responsible for creating the climate in their organization or on their work units. A positive climate creates a place that is easy and comfortable to work in. As a result, workers are more satisfied with their jobs and often stay committed to a particular organization over the long term (Snow, 2002).

The concept of organizational climate has often been confused with the term organizational culture. The two are very different. Culture emphasizes the unspoken assumptions that underlie an organization, whereas climate focuses on the more accessible perceptions of the organization, especially how they arouse motivation and, thus, impact performance (Stringer, 2002). Culture is a system, and interactions are unique to each organization. It is the way of thinking, behaving and believing that members of a unit have in common. It is the total of an organization's value, language, history, formal and informal communication networks and rituals (Hein, 1998).

IV. Quality of Performance

Organizational excellence begins with the performance of people. It is what people do or do not do that ultimately determine what the organization can or cannot become. It is their dedication and commitment to organizational purposes that make the difference. Whether organizational goals can be achieved will depend on the willingness of people to make the necessary contributions. It is the performance of people that is the true benchmark of organizational performance (Murray, 2003).

A wide range of factors have been put forward as influencing the performance of nursing, they are fall into four broad categories: nurse training and competencies, physical plant and structure, nursing organization and work environment. Nurse training and competencies reflect the skill individual nurses bring to the hospital and the bedside. Formal training, level of education, advanced practice training, knowledge of specific equipment and patient conditions is

part of this factor. Research on successful nurse decision making has added additional competencies that are partly provided by training and partly by experience (Taylor, 1995).

Physical plant and structure also influences workload and can contribute to performance. Computerization can reduce errors in order entry, retrieval and charting. Nursing unit layout can influence the ability to quickly respond to patient needs or obtain needed supplies and drugs quickly and without error. Standardization in design of patient rooms and equipment and presence of some types of equipment can reduce errors by nurses (Reiling et. al. 2003).

Everyone needs to know how well they are doing, from the chief executive officer to the lowest-paid maintenance worker. People need to know what is expected and what impact they have on the organization. People function better when they receive constructive feedback about their performance.

Evaluative feedback serves to clarify performance expectations, reinforce constructive behavior, correct negative behavior, provide recognition, increase self-awareness, and promote growth and change. It opens opportunities for improvement and comparing performance against set standards. It provides information about how well process and people function so they can be motivated to perform better in the future (Venzon, 2003).

Performance appraisal is a system used in organizations to measure and to improve work performance. It assures a periodic opportunity for communication between the person who assigns the work and the person who performs it, to discuss what they expect from each other and how well those expectations are being met (Murray, 1992; Pomey, 2003).

An important point to consider in appraisal to have a positive outcome is how the employee views the appraisal. Management research has shown that the following factors influence whether the appraisal as ultimately results in increased motivation and productivity:

1. The employee must believe that the appraisal is based on a standard to which other employees in the same classification are held accountable.
2. The employee should have some input into developing the standards or goals on which his or her performance is judged.
3. The employee must know in advance what happens if the expected performance standards are not met.
4. The employee should know which sources of information that will be obtained to determine performance. The sources could include peers, coworkers, nursing care plans, patients and personal observation.

5. The appraiser should be one of the employee's direct supervisors.
6. The performance is more likely to have a positive outcome if the appraisee is viewed with trust and professional respect (Marquis, 2000).

Bernardin et al described that performance is the record of outcomes produced on a specified job function or activity during a specified time period. The functions have to do with the work which is performed and not with the characteristics of the person performing. Benardin and his colleagues argue that a focus on results should be preferred approach to performance management as it takes a customer perspective and enables individuals' efforts to be linked to organizational goals.

Watling 2000 suggested that it is very important when giving feedback to focus on specific behavior, or specific instances and examples, because it is rare that the whole performance was good or bad. It is more likely that a particular behavior or habit was good or bad.

In fact, many managers are likely to ignore giving performance feedback, there are three reasons why:

1. Managers are often uncomfortable discussing performance weaknesses directly with employees. Given that almost every employee could stand to improve in some areas, managers fear a confrontation when presenting negative feedback.
2. Many employees tend to become defensive when their weaknesses are pointed out. Instead of accepting the feedback as constructive and a basis for improving performance, some employees challenge the evaluation by criticizing the manager or redirecting blame to someone else.
3. Employees tend to have an inflated assessment of their own performance.

The solution to the performance feedback problem is not to ignore it but to train managers in how to conduct constructive feedback sessions.

1. An effective review – one in which the employee perceives the appraisal as fair, the manager as sincere and the climate as constructive, can result in the employees leaving the interview in an upbeat mood, informed about the performance areas in which he or she need to improve, and determined to correct the deficiencies.

2. The performance review should be designed more as a learning activity than a judgment process. This can best be accomplished by allowing the review to evolve out of the employee's own self-evaluation (Robbins, 2003).

It is important to set aside adequate time for feedback and goal-setting processes. Both the staff nurse and the nurse manager bring data for use at this session. These data include a self-evaluation by the staff nurse and observations by the evaluator of the employee's activities and their outcomes. (Tappen, 2004).

Periodic appraisals by supervisors or peers and self-assessments can also be used to infer competence. Supervisor and peer appraisals can use data from multiple sources including observations of provider-patient interaction. Using multiple data sources helps to reduce assessor bias. Self-assessments can use pre-structured checklists or scales, as when identifying areas of poor performance (Bose et al. Forth coming).

Watling (2000) says one of the great advantages to self-evaluation and the process that allows an individual to examine their feelings and discover evidence to support those feelings is the fact that self-discovery is far more powerful than being told.

Measurement of performance is an on-going, repetitive process, with the actual frequency dependent on the type of activity being measured. For example, nursing care to patient is continuously monitored, whereas a formal performance appraisal may be done only twice a year (Venzon, 2005).

Giving feedback on a regular basis correct behavior can be changed before it becomes a habit. Regular feedback demonstrates interest and commitment by the appraiser to the appraisee. It demonstrates a real desire on the part of the appraiser to assist in the performance improvement, and calls for greater degree of accountability from the appraisee. Feedback does not always have to be carried out on a formal basis. In fact, frequent informal feedback often has a greater effect than infrequent formal feedback (Watling, 2000).

To measure the performance, we need to establish Standards. Standards are used as comparison when evaluating job performance. These based on scientific and ethical knowledge and currently accepted nursing practice.

There are 3 Types of performance Standards.

- Standards on structure are those that focus on the structure of management system used by the agency to deliver care. They include the number and categories of nursing personnel, their education, personal and professional attributes and proficiencies, their function, physical facilities and equipment.

- Process standards refer to decisions and actions of the nurse relative to the nursing process which are necessary to provide good nursing care. These include assessment, plan of care, nursing interventions
- Outcome standards are designed to measure the results of care provided in terms of changes in the health status of client served, changes in the level of their knowledge, skills and attitudes and satisfaction of those served including the numbers of the nursing and health team (Madduc, 2000).

V. Conclusion

Working climate is very important to ensure of getting quality performance in organization. It is the perceptions and feelings shared by the members of organization about their working environment: it is the personality in which it considers the following:

1. *Structure* reflects the employees' sense of being well organized and of having a clear definition of their roles and responsibility.
2. *Standards* measure the feeling of pressure to improve performance and the degrees of pride employee have in doing a good job.
3. *Responsibility* reflects employees' feelings of "being their own boss" and not having to double-check decisions with others.
4. *Recognition* indicates employees' feelings of being rewarded for a job well done. This measure the emphasis placed on reward versus criticism and punishment.
5. *Support* reflects the feeling of trust and mutual support that prevails within a work group.
6. *Commitment* reflects employees' sense of pride in belonging to the organization and their degree of dedication to the organization's goals.

<p>Harman Malau, SE., MM., Ph.D Adalah Dosen Pada Universitas Advent Indonesia, Bandung</p>

REFERENCES

- Aiken H.L, Smith and Lakke "Lower Medicare Mortality among a set of Hospitals
- Bernadin H.J; Kane J.S; Ross S; Spina J.D; Johnson D.L... *Performance Appraisal Design, Development, and Implementation*. In.G.R. Ferris, S.D. Rosen and D.T Bernum (eds) Handbook of Human Resource Management, Cambridge, MA: Blackwell, 1995

- Brunet, L & Savoy. A.** Working conditions: a lever of change. Montreal: Logical Editions, 1999
- Goble D., Holloway I.** 1996 "Nurse Perceptions of Staff Appraisal." *Journal of Nursing Management* London: 1996 Ed: 4: 257-263.
- Heidenthal P.K.** Nursing leadership and management. Singapore: Thomson learning Asia, 2003.
- Hein, E.C.** Sizing up the system. In Contemporary leadership behavior. Philadelphia: Lippincott-Raven, 1998.
- Marquis B.L; Histon. C.J.** Leadership Roles and management Functions in nursing. Lippincott Williams and Wilkins. 2003.
- Murray. M.E.G; DiCroce H.** Leadership and management in Nursing. New Jersey: Pearson Education, Inc. 2003.
- Potter, P.A., Perry, A.G.** Basic Nursing Theory and Practice, Mosby, 3rd Ed., 1995.
- Reiling, J.C, Breckbill, M, Murphy S, Mc Cullough, and C. Chernes.** "Facility Designing Around Patient Safety and its Effect on Nursing" *Nursing Economy*, 2003 Ed. 21 (3) : 143 – 7
- Robbins S. P.** Organizational Behavior. Singapore: Pearson Education Asia, 2001.
- Sleutel M.R.** "Climate. Culture. Context or Work Environment? Organizational factors that influence Nursing Practice" *Journal of Nursing Administration*, 2000 Ed.: Vol. 30, No. 2.
- Snow J L.** "Enhancing Work Climate to Improve Performance and Retain Valued Employees." *Journal of Nursing Administration*, 2002 Ed. Vol.32, No 7 8.
- Stringer R.** Leadership and Organizational Climate. Prentice Hall, 2002.
- Swansburg. R.C., Swansburg R.J.** Introductory management and leadership for nurses. Sudbury, Massachusetts: Jones and Bartlett Publishers, 1999
- Tappen R.M., Weiss S.A; Whitehead D.K.** Essentials of Nursing leadership and management. Philadelphia: F.A Davis Company, 2004.
- Taylor C.** "Rethinking Nursing Basic Competencies." *J.Nurse Care Quality* 9 (4) : 1-13
- Watling, B.** "The appraisal Checklist" Prentice Hall p. 118 – 119, 2000
- Tomey A.M.** Guide to Nursing management and leadership. Mosby, 6th Edition, 2003.
- Venzon, L.M.** Nursing Management Towards Quality Care. C & E Publishing, Incorporated, 2003