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# A contemporary understanding of organizational climate in healthcare setting: A concept analysis

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## Abstract

**Aim:** The overarching objective of this report is to provide an updated definition of the concept of organizational climate and to strengthen its operational application.

**Background:** Organizational climate is one of the major contributing factors to the exodus of the nursing workforce from the profession. Extensive research has addressed the impact of “organizational climate” on the nursing workforce; yet variations in the interpretation of the concept calls for an updated definition.

**Design:** Walker and Avant's strategy was implemented.

**Data Source:** Data were compiled from Medline and CINAHL, Google search engine, and book chapters.

**Review Method:** A comprehensive and detailed review of the literature was performed. Nineteen historic publications (1939–2012) and 39 healthcare-related publications (2013–2018) were included in the final review.

**Results:** The climate of an organization reflects a set of core values and behaviors that can be used to implement evidence-based leadership and management within the context of the 21st century. We have revised the definition of organizational climate to capture this context.

**Conclusion:** The perception of a supportive and constructive climate in an organization propels the workforce, independent of ethnic or personal background, to a higher level of productivity and encourages loyalty and workforce stability.

## KEYWORDS

concept analysis, healthcare leadership, healthcare management, healthcare services, nursing management, organizational climate

## 1 | INTRODUCTION

Growth of the aging population has put an unprecedented demand for healthcare services, meanwhile the projected long-term supply of healthcare professionals, but in particular, the nursing professionals' points to a shortage.<sup>1,2</sup> Preemptive leadership and managerial measures are needed to curb the impact of this shortage on the quality of healthcare services. The economic crisis of 2008 was a sobering experience for governments and the healthcare industry across the globe.

Since then, governments and private sectors have imposed financial austerity measures and health policies and procedures to reduce the cost and to improve the cost-effectiveness of delivery of healthcare services.<sup>3</sup> Many healthcare organizations, in consequence, have been striving to provide quality healthcare services with less budget.<sup>4</sup> These changes have put more emphasis and demands on the roles and responsibilities of the healthcare workforce, but particularly on the nursing professionals.

The epidemic of burnout among the nursing professionals has been attributed to the increased work-related stress and frustration due to

the absence of a constructive and harmonious work environment.<sup>5</sup> A constructive and harmonious work environment, which is a reflection of an organization's culture, is the tenet of the success of the organization in the delivery of its mission effectively and efficiently. An organization with a culture that is deep in values, mutual respect, and effective communication fares well in times of uncertainties and economic storms, no matter how strong.<sup>6,7</sup> The climate of an organization can be described as a snapshot of its culture.

## 2 | BACKGROUND

The concept of the "organizational climate" took traction in the healthcare industry, especially among the nursing workforce, after the release of the report by the Quality Interagency Coordination Task Force, sponsored by the US Federal Government.<sup>8</sup> The Task Force identified three specific working conditions, the physical work environment, work hours and staffing levels, and organizational climate as the primary factors that affect the workforce in the healthcare industry.<sup>8,9</sup> Since then, a plethora of work in academic nursing and research has addressed the impact of "organizational climate" on the nursing workforce. However, there have been considerable variations in the interpretation of the concept of "organizational climate" and its components, for example, its attributes. These variations most likely reflect the complexity of this concept. A contemporary concept analysis of "organizational climate" is emphasized, given the influence of "organizational climate" in the retention of the nursing workforce. The overarching objective of this report is to provide an updated definition and understanding of the concept of organizational climate and to strengthen its operational application.

## 3 | DATA SOURCES

We applied the concept analysis of Walker and Avant<sup>10</sup> to implement our research. The steps included selecting the concept, determining the aims of analysis, discovering the usage of the concept, determining the defining attributes, identifying antecedents and consequences, and defining the empirical referents. An array of terms in the literature have been used to define the concept of organizational climate.<sup>11</sup> For the purpose of our research, we adhered to the molar definition of organizational climate that encompasses perceptions and attitudes of a workforce about the overall ambience of its workplace.

We implemented a three-step intensive literature review, which began by identifying articles published in the English language (Figure 1). The first step consisted of searching the most comprehensive scientific and clinical databases between 2013 and 2018, using the "Medline," "CINAHL," and "Discover" search engines that covered a spectrum of scientific databases and platforms such as PubMed, ProQuest, ScienceDirect, Springer Link Journals, EBSCOhost, Web of Science, and Wiley Online Library. We used the search terms

"organizational climate," "healthcare," or "hospital" with proper Boolean operators to conduct our literature search. We opted to exclude key terms such as "service climate," "team climate," "safety climate," "justice climate," and "psychological climate" because these key terms are descriptive terms for the focused climate, which cannot capture the molar definition of organizational climate.

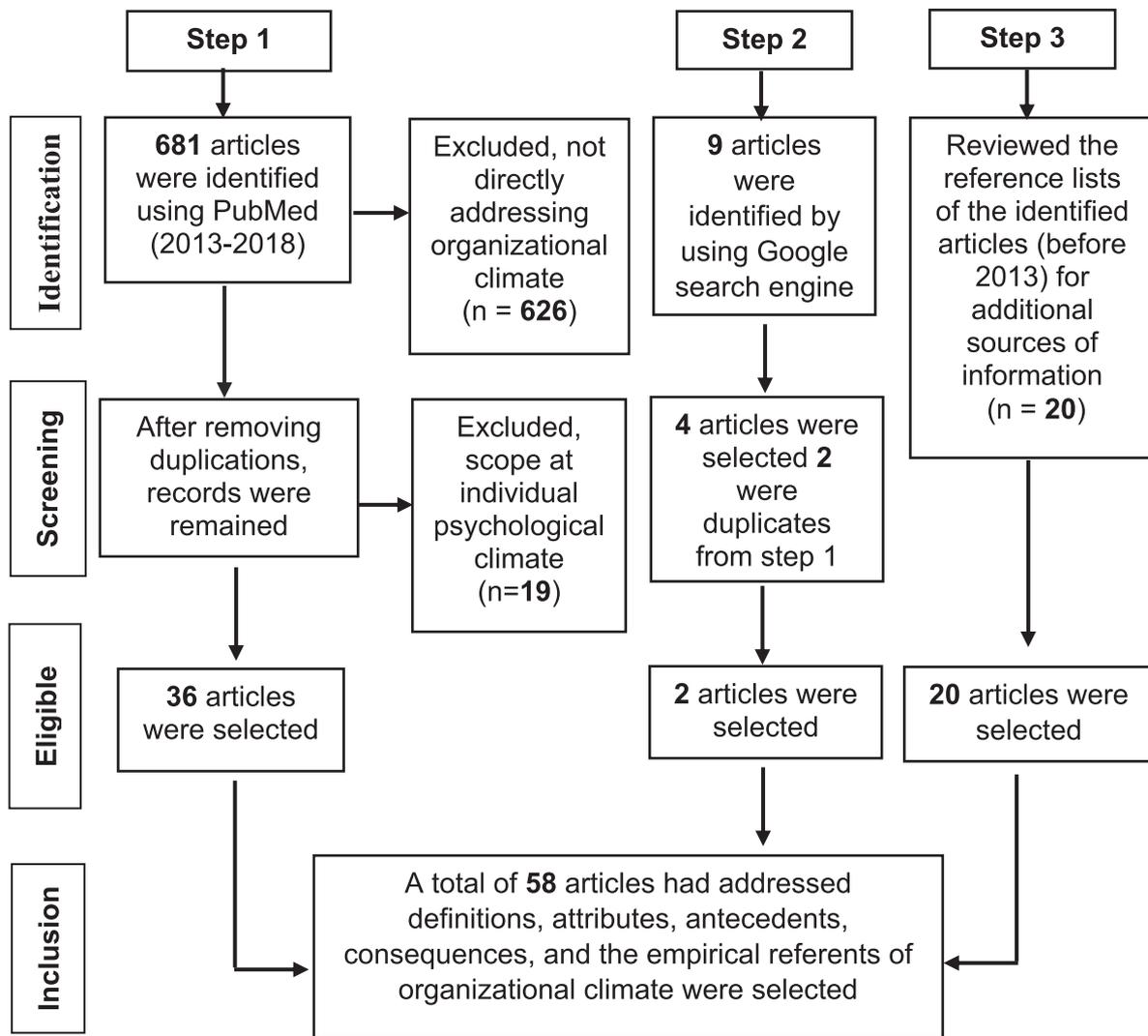
Our initial search was refined by limiting the results to full text, peer-reviewed journals that were published in the English language. This process yielded a total of 681 peer-reviewed publications (Figure 1). This step was followed by manually scanning the titles and abstracts of the identified publications. A total of 626 publications were excluded because they were either duplicates or had not addressed the concept of organizational climate. The remaining 55 publications were subjected to careful and meticulous review and evaluation of their contents. A total of 19 articles were removed because scopes of their contexts were either the focused climate or the individual level psychological climate. The final selection from step one of our search strategy yielded a total of 36 articles directly addressing the molar definition of organizational climate (Figure 2).

In the second step, we used the search engine "Google" to identify the gray literature and potentially missed peer-reviewed publications. We used the same search terms as in step one, with proper Boolean operators. Our search yielded a total of nine publications of which five were excluded because they had not addressed the concept of organizational climate. Of the remaining four articles, two were duplicates from step one. The final selection from this step yielded two articles (Figure 1). In the last step of our search strategy, we benefited from the reference lists of the identified publications for additional sources of information. We were able to identify an additional 20 publications (Figure 1). We then carefully reviewed the 58 selected publications to reduce the likelihood of knowledge bias in identifying the generic aspect of organizational climate. Additionally, five books and book chapters were carefully studied. We evaluated the contents to define the attributes, antecedents, consequences, and empirical referents to address the objectives of our analysis.<sup>10</sup>

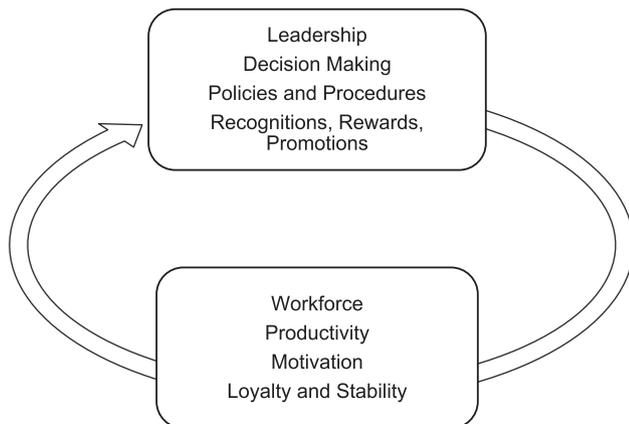
## 4 | RESULTS

### 4.1 | Development and evolution

Birth of the concept organization climate can be traced back to the disciplines of gestalt psychology, social anthropology, and organizational theory.<sup>11</sup> In 1939, the publication of "Social Climate" by Lewin et al., instigated a scientific fervor in the theory of social climate and its influence on workforce psychology and performance.<sup>12,13</sup> Through time and because of extensive efforts of scholars and researchers, the concept of "social climate" has evolved and morphed into the organizational climate.<sup>13</sup> This metamorphosis is supported by the variations in terminology used since 1917 in the academic literature to define and describe the concept of organizational climate.<sup>11</sup>



**FIGURE 1** The three-step selection process of the reviewed literature and concept analysis



**FIGURE 2** The reciprocal influence of the uniqueness of an organization and workforce

The evolutionary period of “social climate” can be divided into four main eras. The first era, labeled as the “Pioneering Work Era,” can be traced back to pre-1971, during which extensive research on the social context in organizations was conducted.<sup>14</sup> During the second era (1971–1985), the foundation for much of the contemporary concept of “social climate” was established.<sup>11</sup> Scholarly activities during this era focused on data collection and analysis to discern the association between the so-called “social climate” of an organization and job satisfaction. Additionally, a series of scholarly work was published on the concept of “focused climate,” where the attention was pivoted on specific issues such as service or safety.<sup>11</sup> The publication by Pettigrew<sup>15</sup> in which he explicated the concept of social anthropological culture within the framework of organizations could be considered the hallmark of this era.

The period between 1986 and 1999, is considered as the third era in the evolution of the “organizational climate.” During this era,

much of the research focused on the analysis and clarification of aggregated data, which yielded in a precipitous increase in utilization and emphasis on the notion of “focused climate.”<sup>11</sup> Additionally, during this era, scholarly work on the antecedents of “organizational climate,” particularly on the role of leadership, was flourished.<sup>11</sup> However, during this era, the concept of “organizational culture” took precedence over “organizational climate” in workplaces. Most likely, the prominent scholarly work which relied on analogies such as tribes, rites, and rituals to describe ambiances of different organizational settings were the influencing factors.<sup>11,16</sup>

The final era of the evolutionary period of “organizational climate” covers the period 2000–2014. This era is characterized by an escalation of scientific inquiries and research activities about the concept of “organizational climate.” The achievement of some consensus about the levels of “climate organization” and vigorous research activities and strengthening the notion of “organizational climate” are the signets of this era.<sup>11</sup> The scholarly works during this era emphasized the extent and agreement across employees within an organization as the essence of “organizational climate” concept. Furthermore, research pushed the boundaries of “focused climate” from a perspective of strategic organizational outcomes, for example, safety and service, to organizational administrative planning and processes. Scholarly work during this era not only addressed the attributes, for example, justice, creativity, and innovation of organizational climate but also established leadership as one of the more important antecedents of organizational climate.<sup>11,17,18</sup>

Almost 75 years after the publication of “Social Climate” by Lewin et al., the concept of “organizational climate” has been morphed into the notion of a shared perception about an organization by its workforce. The workforce observes, interprets, and internalizes its organizational policies, practices and procedures, and the expected behaviors and how these behaviors are supported and/or rewarded. The shared perception of the workforce about its organization is influenced by the personal values and experiences each member of the workforce; furthermore, this shared perception is influenced by the societal norms and economic conditions.<sup>13,19</sup>

## 4.2 | Uses of the term organizational climate

Forehand and Von Haller<sup>24</sup> defined climate as “the set of characteristics that describes an organization and that (a) distinguishes the organization from the other organizations, and (b) these characteristics are relatively enduring over time, and (c) can influence the behavior of people in the organization.” Tagiuri et al.<sup>26</sup> improved the definition of Forehand and Von Haller as “a relatively enduring quality of the internal environment of an organization that (a) is experienced by its members, (b) influences their behaviors, and (c) can be described in terms of the values of a particular set of characteristics (or attributes) of the organization” (p. 27). Thus, the initial definitions of this concept placed emphasis on the organization's characteristics and its internal environment.

By the late 1960s, the definition of organizational climate was expanded to capture the notion of employees' perceptions about

their work ambiance and their behaviors at their work environment. In 1968, Litwin and Stringer<sup>20</sup> offered a new definition of organizational climate by asserting that organizational climate as “a set of measurable properties of the work environment, perceived directly or indirectly by the people who live and work in this environment and assume to influence their motivation and behavior.” About 2 years later, Campbell et al.<sup>14</sup> expanded on this rendition of organizational climate by asserting the importance its attributes. Specifically, they defined the concept of organizational climate as “a set of attributes specific to a particular organization that may be induced from the way that organization deals with its members and its environment.”<sup>14</sup> The next seismic change in the definition of organizational climate concept occurred about more four decades later. In 2014, Ehrhart et al.<sup>13</sup> proposed the definition of organizational climate as a “shared meaning in which members of an organization attach to the events, policies, practices, and procedures they experience and the behaviors that they observed as expected and supported and reward worthy” (p. 115).

The publication by the Quality Interagency Coordination Task Force, sponsored by the US Federal Government endorsed the constitutional value of organizational climate in healthcare industry.<sup>8</sup> Since then, attempts have been made to define the concept of organizational climate within the realm of healthcare industry. In 2005, Stone et al.<sup>21</sup> offered the definition of organizational climate as “members' perceptions of organizational features such as decision making, leadership, and norms about work.” In 2013, De Simone<sup>22</sup> expanded on the definition of organizational climate by including the notions of policies, practices, procedures, and behaviors within the proposed definition by Stone and colleagues. Therefore, as of 2014, the concept of organizational climate within the realm of healthcare industry has been viewed as a shared meaning by employees about policies, practices, and procedures that are experienced daily and behaviors that are expected, acknowledged, supported, and/or rewarded.<sup>23</sup>

## 5 | DEFINING ATTRIBUTES

Attributes are sets of characteristics, frequently associated with a concept, which portray the core meaning of and the broadest insight into the concept.<sup>10</sup> The validity and quality of a concept analysis study fulcrum on the accuracy of the identified attributes of the concept. Our research yielded four attributes that have been used to define the concept of “organizational climate” over its evolution and development. These four attributes are classified into (1) The Uniqueness of an Organization; (2) Workforce Shared Perceptions and Experiences; (3) Macro-Level Organizational Perception; and (4) Quality of an Organization's Ambiance.

### 5.1 | Uniqueness of an organization

The “Uniqueness of an Organization” refers to a set of characteristics that describes the organization. These characteristics, which usually

are the results of the workforce perception, set organizations apart, and distinguished them from each other.<sup>13,21</sup> The workforce internalizes its organization through observing and absorbing the leadership's decision-making process and the set of policies, procedures, and practices that are placed and enforced within the organization.<sup>14</sup> This perception of the workforce, usually shared, in turn, influence the productivity, motivation, and loyalty toward the organization (Figure 2). These characteristics of an organization tend to remain stable over time; however, they are flexible and can be susceptible to external forces, such as global or domestic economic and political factors.<sup>11,24</sup>

## 5.2 | Shared perceptions and experiences

The workforce "Shared Perceptions and Experiences" are the second of the four attributes of the "organizational climate." This attribute explains the extent to which members of a workforce in an organization find commonalities between their personal values and norms and those of their organizations.<sup>22</sup> The assumption of commonalities is influenced, directly and indirectly, by the experiences of the workforce at the work settings.<sup>20,25</sup> Furthermore, personal values and norms of the workforce, which often are shaped by an individual's cultural heritage and family upbringing, also can influence the perceptions, experiences, and behaviors of the workforce at the organization.<sup>13,26</sup>

## 5.3 | Macro-level organizational perception

The third attribute, "Macro-Level Organizational Perception," refers to the extent of the collective perceptions of the workforce about the overall administration and leadership of its organization.<sup>13,26</sup> A positive perception motivates and propels the workforce in meeting the mission and vision of its organization; while a negative perception does otherwise.<sup>11,20</sup> Additionally, the negative perception seems to have a higher "infectivity rate" and have more "virulence" in damaging the morale of the workforce.<sup>27</sup>

## 5.4 | Quality of an organization's ambience

The last attribute, "Quality of an Organization's Ambience," refers to relatively enduring macro-level milieu of an organization in which its workforce can adapt positively, constructively, and effectively to its policies, procedures and professional requirements, and performance etiquettes.<sup>12</sup> The quality of an ambience within an organization is considered as a set of measurable properties which include, but not limited to, the workforce safety, availability, and adequacy of tools and skilled personnel for task performance, workforce autonomy and yet provision and quality of guidance by the superiors and/or leadership, when or if needed.<sup>13,20</sup> These measurable properties permit the workforce to effectively familiarize itself with the internal milieu of the organization. When the milieu is positive, the workforce

responds positively by maintaining, if not elevating, its efficiency and productivity; however, when, the milieu portends a negative atmosphere, the propensity for the workforce is to respond negatively, which can have deleterious and sometimes long-lasting consequences for the organization.<sup>13,14,28</sup>

## 6 | CONSTRUCTED CASES

### 6.1 | Model case

All the defining attributes are presented in this model case, which is based on a real-life example. The objective is to elucidate and facilitate the internal structure of the concept of the organizational model.<sup>10</sup> Hospital "A" has been providing quality healthcare services for its community. The hospital staff, in general, has a positive perception about the overall working climate at their hospital. This positive perception emanates through the staff's motivation and positive attitudes and behaviors, which has made it possible for the hospital to provide high-quality healthcare services for its community. The positive perception of the employees at hospital A is a consequence of the effectiveness of and constructive leadership and management of the hospital. The basis of the leadership at hospital A has been based on mutual trust, mutual respect, effective communication, and collaboration with a clear role awareness about and recognition of responsibilities.

The style of leadership at hospital A has permitted employees to share their experiences and/or share their perceptions and interpretations of various policies and procedures, either directly or indirectly. Most of the employees at hospital A perceive the climate of their hospital as a set of characteristics that defines their hospital uniqueness in terms of its specific contexts and processes. For instance, the hospital leadership emphasizes and values staff career development of the staff; therefore, hospital employees are offered and encouraged to participate in various training opportunities, either in-house and/or external training opportunities. Or, when the leadership strives to improve the quality of work environment for its employees and offers them means to effectively adapt to these improvements is another example which further supports the uniqueness of the climate of this hospital. The employees at hospital A consider these characteristics as their interrelated roles and responsibilities, shared among and by all of them. These shared roles and responsibilities, in return, have motivated the hospital employees and have promoted positive attitudes and behaviors within the hospital work environment. Ultimately, the winners are the hospital leadership, the employees of the hospital, and the community that they have been serving.

### 6.2 | Borderline case

The borderline case presentation is based on a real-life scenario, experienced by one of the authors. Hospital B has an overall satisfactory operation and has maintained a good standing in the

community that it has been serving for over a century; however, at the macro-level the ambience of Hospital B shows deficiencies in some of the defining attributes of a healthy organizational climate. This hospital functions on the basis of vertical administration and centralized operation philosophy. In consequence, employees are faced with obstacles and “red-tape” limitations when seeking to implement a change for the betterment of their work environment and/or expediency in the delivery of healthcare services.

At hospital B, departments operate independently, despite their operational interdependency. In general, cohesiveness and effective communication are present within each department; but not across departments and/or at the overall organizational level. Another example that put hospital B in the category of borderline case is the required management style from each department head/manager. Most managers/department heads operate on the premises of the administration task organization and planning to improve workforce performance. This task organization approach precludes contributions and inputs of the workforce; furthermore, the autonomy of the workforce is not relevant to its performance. The layers of administration and “red tape” in conjunction with limitations of task-based decision autonomy has created frustration and psychological duress for many of the employees and has been a triggering point for many to seek employment at other hospitals. This case presents an example where the attribute of “*the macro organizational level perception*” is missing.

### 6.3 | Related case

The related case is based on a hypothetical scenario; the objective is to demonstrate the difference between a related and a model case; in doing so, we have offered a case based on a hypothetical hospital C.

Hospital C is prominent in the community that has been providing healthcare services. Employees at the hospital, in general, demonstrate optimism about the present and future of their work environment. They are cognizant of policies, procedures, and practices within their hospital and yet, the underlying trust is missing. Absence of this trust prohibits employees from sharing their perceptions and thoughts. At the micro-level, the employees, in general, are pleased with their independence and exercising their judgments and discernments in making the necessary decisions to complete their required tasks. The staff members within each unit feels content because of the general sense of harmony and collectiveness among them; furthermore, they exercise effective communication among themselves and with their patients. These positive interactions and communications have made the delivery of healthcare services effective, and patients are satisfied with their care, and employees are optimistic about their work environment. However, the leadership style at the macro-level resonates more of the oligarchy philosophy and doctrine than democracy, in administration, and governance of the hospital. In consequence, the underlying foundation of trust is compromised, which is reflected in the employees' hesitancy in speaking out and about their thoughts and

perceptions. Furthermore, this hesitancy can be interpreted as trepidations by the hospital staff about their job security.

The above example demonstrates that within hospital C the existence of a constructive ambience at the micro-level. However, at the macro-level, the oligarchy approach of the leadership prohibits the expression of thoughts and shared perceptions. Whereas a model case emphasizes the expression of thoughts and shared perceptions. For example, the leadership at hospital A, as discussed above, supports and promotes effective communication and expression of thoughts and concerns. The style of the leadership at hospital A is based on mutual trust and respect between the administration and the staff members at the hospital. While at hospital C, this mutual trust is missing, and the silence practiced by the employees most likely reflects fear, not the actual respect.

### 6.4 | Contrary case

The contrary case presentation is based on a real-life scenario, experienced by one of the authors. Hospital D has been known, within the realm of the healthcare industry, as a theoretical model in efficiency in the delivery of healthcare services. However, hospital D is far from efficiency, primarily because it is struggling to retain staff members at every level of healthcare delivery. Hospital D due to its remoteness of geographic location, is not attractive to many healthcare providers. Therefore, the hospital administration offers considerably above the national average salary and fringe benefits to entice qualified healthcare providers to join the hospital. Despite these lucrative and attractive enticements, a considerable proportion of these qualified staff members depart from the hospital after 2–5 years of tenure with the hospital. This high turnover rate of the employees is an indication of a chaotic work atmosphere within hospital D. For example, the totalitarian leadership approach is the prevailing method of governance in this hospital. It is not uncommon for the leadership and the top tier management to raise their voices on the staff members or even to use profane language to demonstrate their dissatisfaction. In this hospital, the concept and practice of trust do not exist among the top-ranking administration and management, and this lack of trust has diffused and penetrated throughout and at every level of the organization. Frustration and contentious behaviors among the hospital D staff members have impacted productivity and the quality of delivery of healthcare services. The ultimate losers are the hospital leadership who perpetually are searching for competent and qualified healthcare providers and the community that is now reaching outside its boundary for healthcare services.

## 7 | ANTECEDENTS

Establishing a supportive, positive, and constructive organizational climate depends on multiple prerequisites or antecedents.<sup>10</sup> Antecedents of organizational climate have been classified into “personal factors” and “organizational constituents.” Our research yielded

personal traits as one vital antecedent of the concept of “organizational climate.”<sup>13</sup> Per theories of management by McGregor, human nature or so-called person traits is the fundamental assumption of management and is the underlying driver for how leaders guide and treat their workforce. The workforce reciprocates to the style of leadership by demonstrating its commitment and loyalty to the leadership and the vision and mission of their organization.<sup>13</sup>

Personal traits can influence the climate of an organization. Personal traits are the results of interactions between the genetic constitutionality of individuals and their life experiences.<sup>29</sup> In general, personal traits phenotypically are expressed when/if triggered by external stimuli such as stress or conflicts.<sup>30</sup> In a workplace among the members of its workforce, differences in personal traits do emerge. At times, these differences can be sources of disagreements or even contentions. The emergence of the climate within an organization is a continuous and time-dependent phenomenon because of interactions, exchanges, and communication among and between the leadership and the workforce.<sup>31</sup>

“Organizational Factors,” the other antecedent of the concept of “organizational climate,” are equally as important as personal traits. Organizational policies and procedures, and operational activities and processes are antecedents that directly affect the workforce daily.<sup>32</sup> Some of these policies and procedures may have short impacts, while the influence of others may be chronic or even pernicious.<sup>33</sup>

Research supports that tiers of hierarchy and formality can create a distance between the workforce and the leadership.<sup>13,34</sup> The chasm between the leadership and the workforce and the perception of an “out-of-reach” and “out-of-touch” leadership can be exaggerated by the size of an organization.<sup>35</sup> The larger an organization, the less likely for the leadership to have direct interaction and communication with the workforce.<sup>35</sup> Frequency and intensity of technology utilization within an organization have been proposed as another hindrance between the workforce and the leadership.<sup>13,34</sup> However, the implications of technology on quality and effectiveness of communication among the workforce and between the leadership vary among scholars.<sup>36</sup> Leadership that recognizes and values the importance of human-to-human communication and demonstrates the ability to constructively infuse trust among its workforce can have entrenching positive influences on its workforce's perception about the organization and its climate.<sup>37,38</sup>

## 8 | CONSEQUENCES

The primary outcome of an organizational climate on its workforce is the emotional stability and lower level of exhaustion and psychological duress. The perception of a supportive climate in an organization propels the workforce to a higher level of productivity and encourages the delivery of the organizational mission effectively and efficiently.<sup>39</sup> Furthermore, in an organization where the prevailing attitude is positive, the workforce demonstrates a higher level of

loyalty and stronger allegiance to the organization; this loyalty and allegiance is demonstrated by a lower turnover rate, continuity of employment, less absenteeism, and less workplace destructive attitudes or perhaps behaviors.<sup>5,40</sup>

## 9 | DERIVED DEFINITION

The concept of “organizational climate” was developed in the early 20th century in response to the complex issues impacting the workforce and its productivity. The notion of “organizational climate” has evolved because of the advancement of the science of management and leadership. Despite the extensive research on the impact of “organizational climate” on the workforce, for example, psychology, productivity, loyalty, and stability of the workforce within an organization, there is no consensus about its definition. Therefore, we have proposed a definition to capture the concept of “organizational climate” within the context of the 21st-century workforce and work ambience. We have defined “organizational climate” as “*Direct or indirect shared perceptions of a workforce about its organization; these perceptions are reflections of the leadership's decision-making processes, policies, procedures and practices and are influenced by personal experiences and personal traits and ethnocultural values of the workforce.*”

## 10 | IMPLICATIONS FOR THE NURSING WORKFORCE

Nursing leaders and the other leaders within a healthcare system should discern, design, and develop effective strategies to improve not only the overall climate of but also micro-climates within their organizations. The overall climate of an organization is an umbrella term that reflects a core set of values and behaviors which permits implementation of evidence-based recommendations about human resource management and organizational design.<sup>22</sup> The concept of micro-climate refers to the milieu within various entities, that is, wards and division units, where the effectiveness of the nursing leadership primarily demonstrated through the social capital at the workplace.<sup>41</sup> The concept of social capital reflects a relational network among the nursing workforce within each specific work entity; this relational network is configured by respect, trust, and reciprocity among the nursing professionals. However, the inter-connectivity of and the mutual influence of organizational climate at the macro- and micro-level should not escape the attention of the nursing leadership.

The concept of organizational climate continues to evolve, particularly in the era of more autonomy for the nursing professionals and more demographic heterogeneity among the nursing workforce. The nursing leaders should embrace the concept of change and develop creative and novel management and leadership styles to develop and nourish a positive and constructive climate within their organizations.<sup>22</sup> The ultimate objective is to achieve success in the delivery of healthcare services effectively and efficiently. This

success only can be achieved with a low rate of turnover of the nursing workforce, low burnout rates, and continuous loyalty to the mission and vision of the healthcare organization.<sup>42,43</sup>

## 11 | LIMITATIONS

Our concept analysis has two limitations. First, the resources that were used in this analysis, although from a wide range of literature, were limited to the English language; therefore, scholarly work published in other languages most likely were not captured. Second, our research focused on capturing empirical studies from all disciplines up to the year 2012, after which we focused our literature search on the domain of healthcare. Despite its limitations, our study is the first of its kind in conducting a comprehensive review and assessment of the literature to develop a more contemporary definition of the organizational climate and its potential impact in nursing leadership and nursing workforce.

## 12 | CONCLUSION

The climate of an organization is essential for the delivery of its mission effectively and efficiently; while the culture of an organization ascertains not only its survival; but also its perpetuity in addressing its vision with success. From a leadership perspective, the key message is the continuous expanding role and the importance of the nursing profession in the delivery of healthcare services should propel the nursing leadership to embrace the leadership styles and managerial strategies that encourages the development and/or improvement of the climate of their organizations. A positive and constructive “organizational climate” is necessary to reduce professional stress, burnout rate, and to improve work satisfaction and loyalty of the nursing workforce.

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