

EDITORIAL – Introduction

KATE SHACKLOCK*, YVONNE BRUNETTO#, ROD FARR-WHARTON+ AND CARY COOPER

*Department of Employment Relations and Human Resources, Griffith University – Gold Coast Campus, Southport, QLD, Australia; #School of Commerce and Management, Southern Cross University, Tweed Heads, NSW, Australia; +Faculty of Business, University of the Sunshine Coast, Maroochydore, QLD, Australia; Lancaster University Management School, Lancaster University, Lancaster, England

Healthcare managers face many challenges in delivering quality healthcare. Numerous OECD countries face a challenge in retaining healthcare professionals – particularly doctors and nurses. In the case of Australia, the nurse shortage is equivalent to 3% of the practicing registered nurses, which is approximately 10,000 nurses, just to meet present demand. The situation is similar for medical practitioners. This predicament is exacerbated by the aging population and the high percentage of older healthcare professionals working in the system. Additionally, past research has identified that healthcare professionals reporting dissatisfaction with management policies and practices have a 65% higher probability of leaving than those reporting satisfaction, plus the retention of skilled employees is a key factor affecting organizational effectiveness. This special issue of the *Journal of Management & Organization* on healthcare management [ISBN 978-1-921348-98-3] was initiated to explore the current progress, problems and solutions that healthcare and aged care organizations grapple with in several parts of the globe. The research has been conducted in a variety of locations including Australia, South Korea, United Kingdom, United States and Taiwan, and examines both public and private health care sectors.

The topics covered in this special issue include a number of papers exploring the area of staff retention. This is not surprising, given the nurse shortage challenges facing many countries around the globe, and such workforce issues and their consequences have dominated the health debate over the past few years. Additionally, in many countries, an aging population means that the demand for healthcare services is increasing, but this situation runs simultaneously alongside

an aging workforce, meaning large numbers of skilled older healthcare workers reduce and finish work. However, advances in knowledge and technology have increased the longevity of people of all ages, some of whom may previously have not survived fatal injuries and illnesses. Yet, such longevity may not be without consequences such as: long-term disability and chronic illness, including heart disease; stroke; cancer; chronic respiratory diseases and diabetes; plus the associated high-level skill care required. The combination of issues, an aging population and workforce, increased longevity, plus increased overall demand for services and especially for complex and chronic conditions, means that health management faces difficult challenges. The papers in this issue begin to address some of these challenges.

The first part of this issue examines service improvements in healthcare systems from the wider perspective. One article investigates the English National Health System and its reform complexities and tensions within a tight budgetary climate. The next article studies the perceptions of healthcare customers, necessary because of the increase of competition in the hospital industry in some countries and the impact that customer perceptions can have. The second part of this special issue examines healthcare management via the challenges that nurse managers face. The third part of this special issue explores the challenges associated with managing and retaining skilled healthcare workers, including the roles of human resource management (HRM) and retention strategies, supervision and mentoring and links between healthcare workers' levels of job satisfaction (JS), plus other work-related factors and turnover intentions and service quality.

The first part of this issue comprises an article by Burgess and Radnor (2012), who argued from system-wide perspective that the English National Health Service, a free public sector service with the aim of delivering high quality health care, has endured many decades of reform, yet is entering a particularly tough financial climate. The authors discuss the complexities and tensions of implementing service improvement within a context of consistent policy reform, tight financial constraints and tough regulation. The findings reported in their paper suggest that Lean improvement methodologies vary in implementation effectiveness between the three organizations investigated, which highlights the complexities of hospital contexts and the associated tension with service improvement activity. Another article in this first part, by Weng, Huang, and Lo (2012), proposes that in Taiwan's hospitals new service development (NSD) is influenced by the capacity of hospitals to identify, assimilate, and exploit customer knowledge (knowledge owned by the organization and provided by customers). Organizations must have sufficient abilities to absorb, integrate and create various kinds of knowledge to promote NSD (the process of transforming embedded knowledge into embodied knowledge) and then create a high knowledge-based economy. By acquiring and applying customer knowledge, organizations can ascertain customers' needs and then develop new products or services to satisfy customers. The authors quantitative study found that a hospital's ability to integrate, generate and exploit new combinations of existing customer knowledge mediates that influence, with suggestions that hospital managers place more emphasis on customer-oriented thinking in the development of new services.

The second part of this issue focuses on the healthcare management issue from the manager/management perspective, including examining the challenges that nurse managers face and how health managers learned their roles. Researching qualitatively within acute care settings in Australia, Gaskin, Ockerby, and Russell (2012) found 14 challenges faced by nurse unit managers and directors of nursing in their roles, which were primarily related to interactions with others. Interestingly all the reported challenges were managerial challenges,

not clinical. In response to these challenges, the participants also suggested 16 strategies to achieve better outcomes. The authors recommended that management education be enhanced as part of the solution to meet the reported challenges. Also within Australian healthcare settings, Briggs, Cruickshank, and Paliadelis (2012) explored health managers to understand their perceptions regarding the health system and to understand how they learned to become health managers. Not unlike other countries, the qualitative findings identified a health system undergoing consistent change, and found that health managers perceived that system as being mostly slow to respond, and a combination of non-integrated parts controlled by bureaucrats and political interests. While the respondents enjoyed their managerial role, they saw it as contested between the professions. Supporting Gaskin et al., Briggs et al. recommended enhanced education and training of healthcare managers.

The third part of this issue begins with an article by Shacklock, Brunetto, Farr-Wharton, and Cooper (2012), who researched the impact of the relationship between nurses and their supervisors and the work outcomes for the nurses, including turnover in two of the Australian healthcare sectors—public and private (the third being non-profit). Within a management reform climate similar to the UK, Australia public sector hospitals have moved to private sector business models based on efficiency. Shacklock et al.'s study found there may have been differing reform consequences between the sectors, with mixed method results identifying that private sector nurses had higher satisfaction levels with their supervisor–nurse relationships, patient role clarity and autonomy, and hence, higher levels of JS. Similarly, examining nurse JS in Australia, Cavanagh, Fisher, Francis, and Gapp (2012) revealed that JS and organizational citizenship behavior (OCB) are both significant predictors of nurses' perceptions of organizational values. The findings also suggested that nurses more readily internalize organizational values when their levels of JS and OCB are high. A worrying further finding was that the tendency for nurses to engage in OCBs declines significantly as length of service increases. Within a climate of an aging workforce and a shortage of skills, healthcare organizations

are naturally seeking to actively retain skilled workers, but perhaps with possible longer-term negative OCB consequences.

In contrast, turnover in Taiwan was found to be related to mentoring relationships. In Taiwanese hospitals, Huang and Weng (2012) found that the mentoring relationship among new nurses and their mentors (a well-established system in that country) was influenced by interpersonal attraction, the mentor's transformational leadership and mentoring functions, and that mentoring effectiveness affected nurses' JS and commitment to their organization. Both of these latter factors are well-known predictors of turnover. The final article in this issue is about the role of HRM in the wellbeing and service outcomes of nurses, and presents a theoretical model for nurses working in aged care in Australia. Clarke and Rao Hill (2012) argue that by identifying and implementing appropriate HRM strategies, both employee wellbeing and service quality will be enhanced, thus ensuring that aged care service, which has the capacity to create uplifting changes and improvements to the quality of life for individuals and communities, meets the needs of its many stakeholders. Specifically identified as assisting in employee wellbeing are HRM practices that address issues such as learning and development, employee voice and involvement, plus workplace health and safety.

The next three articles in this part of the issue each explore staff retention, but from differing angles. Researching registered nurses and licensed practical nurses in two different hospitals in the southeastern US, Becton and Matthews (2012) argue that the use of biodata (information related to an individual's personal background and life experiences) provides valid prediction of medical errors, tardiness, policy violations, and overall job performance. This is important because nursing quality has a significant impact on patient outcomes. However, while expected to be effective, biodata was not found to be an effective predictor of voluntary or involuntary turnover. In South Korea, Kim and Hwang (2012) investigated the relationship between organizational cultural types, social capital and organizational effectiveness, among employees in dental clinics (mostly dental hygienists). The authors explain that dental clinics there have high

turnover rates due to the negative perceptions of dental clinics compared with dental hospitals. The quantitative research identified that consensual culture is the best fit with social capital, and that high levels of organizational identification, trust and cohesiveness increased JS and lowered turnover intentions. The third article related to staff retention in this section, by Belbin, Erwee, and Wiesner (2012), reports a study in the Australian public healthcare sector employing quantitative methods to examine nurses' awareness of, participation in, and effectiveness of retention strategies offered by their large organization. The authors also sought to discover whether any of those retention strategies impacted upon the nurses' turnover intentions, and found that those strategies with a financial advantage were the most effective, while those offering some professional development opportunities were still effective, but less so.

The guest editorial team developed this special issue to identify and disseminate some of the latest research and suggestions for future research in the area of healthcare management. We hope that it provides a greater understanding of the complexity of healthcare and aged care management in the public and private sectors, with particular emphasis on capturing the HRM issues emerging for healthcare managers in the 21st Century, and provides some impetus for further research to meet the various challenges.

DESIGN/METHODOLOGY/APPROACH

The *Journal of Management & Organization's* usual double blind review process was used to select the papers included in this special issue. The papers themselves represent a wide variety of designs, methodologies, and analytic strategies used to study healthcare management. In addition, a wide variety of disciplinary approaches and levels of analyses and perspectives is employed across the studies. The most frequent approach used is quantitative, but there are also qualitative papers and a mixed methods paper. Two papers are theoretical only – one contributes a model for human resource management in the aged care sector in Australia and the other contributes a review of the complexities and tensions of implementing service improvement in the National Healthcare System in the United Kingdom.

REFERENCES

- Becton, J. B., & Matthews, M. C. (2012). Using biodata as a predictor of errors, tardiness, policy violations, overall job performance, and turnover among nurses. *Journal of Management & Organization*, 18(5), 714–727.
- Belbin, C., Erwee, R., & Wiesner, R. (2012). Employee perceptions of workforce retention strategies in a health system. *Journal of Management & Organization*, 18(5), 742–760.
- Briggs, D., Cruickshank, M., & Paliadelis, P. (2012). Health managers and health reform. *Journal of Management & Organization*, 18(5), 641–658.
- Burgess, N., & Radnor, Z. (2012). Service improvement in the English National health service: Complexities and tensions. *Journal of Management & Organization*, 18(5), 594–607.
- Cavanagh, J., Fisher, R., Francis, M., & Gapp, R. (2012). Linking nurses' attitudes and behaviors to organizational values: Implications for human resource management. *Journal of Management & Organization*, 18(5), 673–684.
- Clarke, M. A., & Hill, S. R. (2012). Promoting employee wellbeing and quality service outcomes: The role of HRM practices. *Journal of Management & Organization*, 18(5), 702–713.
- Gaskin, C. J., Ockerby, C. M., Smith, T. R., Russell, V., & O'Connell, B. (2012). The challenges acute care nurse unit managers face and the strategies they use to address them: Perceptions of directors of nursing and nurse unit managers. *Journal of Management & Organization*, 18(5), 625–640.
- Huang, C.-Y., & Weng, R.-H. (2012). Exploring the antecedents and consequences of mentoring relationship effectiveness in the healthcare environment. *Journal of Management & Organization*, 18(5), 685–701.
- Kim, Y.-T., & Hwang, Y.-I. (2012). Strategic human resources management for dental clinics in South Korea. *Journal of Management & Organization*, 18(5), 728–741.
- Shacklock, K., Brunetto, Y., Farr-Wharton, R., & Cooper, C. (2012). Editorial: Introduction. *Journal of Management & Organization*, 18(5), 590–593.
- Weng, R.-H., & Huang, C.-Y. (2012). The impact of customer knowledge capability and relational capability on new service development performance: The case of health service. *Journal of Management & Organization*, 18(5), 608–624.

ORDER FORM

HEALTHCARE MANAGEMENT: PROGRESS, PROBLEMS AND SOLUTIONS

Editors: Kate Shacklock, Yvonne Brunetto, Rod Farr-Wharton and Cary L. Cooper; ISBN 978-1-921348-98-3
A special issue of *Journal of Management & Organization* (Volume 18, Issue 5, September 2012)

Prices include airmail freight on all orders and GST (for Australian customers)

Australia, New Zealand and Pacific: Institutions AU\$180.00; Individuals AU\$88.00.

ROW: Institutions US\$180.00; Individuals US\$88.00.

Students receive a 20% discount on the respective individual price against proof of student identity.

Number of copies: _____ Total: AU\$ _____ Total: US\$ _____

- A PayPal transfer has been made to subscriptions@e-contentmanagement.com
- A bank cheque/money order to the address below
- A Direct Deposit / SWIFT transfer has been made to BSB 803-140 Acct 14073170
- Please charge this purchase to my MasterCard/Visa (a 4% service charge applies for bank fees)

My full card number is: _____ / _____ / _____ / _____ Expiry date: _____ / _____

Cardholder Name: _____ Signature: _____

Please send this order to the address below by airmail:

Name of Institution: _____ Name of Individual: _____

Street address (or PO Box): _____

City: _____ State: _____ Zipcode: _____ Country: _____

Tel. (with area code): _____ Fax (with area code): _____

Email: _____ Your reference: _____

Fax the completed order form to +61-7-5430-2299, use PayPal, Direct Deposit OR post with cheque to:
eContent Management Pty Ltd, Innovation Centre Sunshine Coast, 90 Sippy Downs Drive, Unit IC 1.20,
SIPPY DOWNS, QLD 4556, Australia; Tel.: +61-7-5430-2290; PayPal – Email: services@e-contentmanagement.com;
www.e-contentmanagement.com