# Octapace: A Culture Of Growth In The Health Care Sector In J&K

S. A. Mufeed,  Qurrat.A Hamdani,  Prof. (Dr.) S. A Mufeed
University of Kashmir, Srinagar (190006) J&K- India. 01942426058(R) 9419017721 (Cell)

E-mail: mufeedku@yahoo.com

## ABSTRACT

Culture is a basic attribute of society, a familiar concept, yet difficult to define. It is the subject of prodigious research and millions of words by insightful and expressive people. Cultures exist at multiple levels in a society. They can be regional, national, societal, ethnic, organizational, or group. The researches reveal that the organizational culture has an impact on the behaviour, performance, knowledge management of the employees. Culture effects feedback strategy, organizational effectiveness, learned helplessness, total productive maintenance and organization dynamism of the employees. Learning organizations excel when the culture is conducive. Research reveals a limited study on the hospital sector. The research on hospitals, in the area of Human Resource Development system and practices so far has been on a very micro level. No research so far has been conducted exclusively on General Climate, OCTAPACE Culture and HRD Mechanisms with special reference to hospitals, within and outside the state of J&K on comparative basis. In view of the present study was undertaken in hospital sector in J&K, with SKIMS and SMHS to know need and relevance to OCTAPACE Culture in health sector.

**Keywords:** HRD Climate, Culture, Openness, Confrontation Trust, Pro-activity, Autonomy, Authenticity, Collaboration and Experimentation.

## INTRODUCTION

Every organization needs to develop its human resource over a period of time and the only choice the organizations are left with is to develop them if they cannot get them readily available. The continuous development of the human resources, enhancement of their skills, knowledge and overall personality development and keeping them abreast of the changing technology falls under human resource development. Human Resource Development (HRD) is a framework for the expansion of human capital within an organization. It is three pronged, focusing on: people-the 'human' aspect where people are seen as having skills, having potential and the ability to grow, change and develop; the 'resource' aspect where individuals are considered resources rather than problems; and the 'development' aspect, where there is emphasis on the discovery and nurturing of their potentials. The elements of HRD climate can be grouped into three broad categories-general climate, OCTAPACE culture and HRD mechanisms. One of the important dimensions of HRD is the Organizational Climate. It is the process of quantifying the "culture" of an organization. It is a set of properties of the work environment, perceived directly or indirectly by the employees, that is assumed to be a major force in influencing employee behaviour.

One of the dimensions of HRD climate is the culture.In the fast changing environment,the organizations have to develop and maintain an enabling culture to become dynamic and growth assumptions, values, norms and tangible signs (artifacts) of organization members and their behaviours. Culture is one of those terms that is difficult to express distinctly, but everyone knows it when they sense it. Culture is extremely important to every profit/non-profit organization in achieving their goals and planned outcomes. The reasons why culture is so important are: Overview of entire organization – The culture of an organization is decided by the personalities, policies and procedures of an organization. Internal balance – For an organization to be successful, its culture must have internal balance. That means that the policies, procedures and people involved should not lean too much one way or another, but complement what the goals of the organization are. Defines relationships – An organization's culture includes how they (the staff) work with clients, other community groups, agencies and funders. Impacts communication – Each organization, depending on its culture, creates its own jargon that is unique to their organization. This means that the way the organization communicates internally and externally is impacted by its culture. The purpose of HRD is to facilitate development of such a culture in the organization.

An enabling culture is one where employees use their initiative, risk, experiment, innovate and make things happen.

HRD culture is characterized by openness, confrontation, trust, autonomy, proactivity, authenticity, collaboration and experimentation represented by the term "OCTAPACE"

**Openness** is the degree of freedom present in the organization for the employees. Unless the organization has an open environment, effective work is not possible and when the work is a team effort. Without this component all the efforts done, go in vain. Openness can be defined as a spontaneous expression of feelings and thoughts, and the sharing of these without defensiveness. Openness is in both directions, receiving and giving. Both these may relate to ideas (including suggestions), feedback (including criticism), and feelings. This willingness to share and this openness results in greater clarity of objectives and free interaction among people. As a result of openness, there should be more unbiased performance feedback.

**Confrontation** is the element stressing on the conflict, dispute settlement in the organization. For the smooth working of the organization all the problems in the firm whether small or grave should be immediately encountered rather than avoided. Confrontation can be defined as facing rather than shying away from problems. It also implies deeper analysis of interpersonal problems. All this involves taking up challenges. The term confrontation is being used with some reservation and means putting up a front as contrasted with putting ones back to the problem.

**Trust** is the extent of faith and belief present in the organization. Trust is something which can't be ordered to be had. It comes of its own as a result of experience. By having this component in the organization, employees can freely talk and share their feelings etc with each other thus adding to the smooth working of the organization. It is reflected in maintaining the confidentiality of information shared by others, and in not misusing it. It is also reflected in a sense of assurance that others will help, when such help is needed and will honour mutual commitments and obligations.

**Autonomy** is the freedom given to the employees of the organization. The superiors should make sure that individuals and groups should be given the freedom to work in the organization in their own way as each person has his own pattern of doing things. This concept will enhance the creativity and innovation in the organization. Autonomy is using and giving freedom to plan and act in one's own sphere. It means respecting and encouraging individual and role autonomy. It develops mutual respect and is likely to result in willingness to take on responsibility, individual initiative, better succession planning.

**Proactivity** is the forward thinking. It is said that "prevention is better than cure" so the organization should not only think of the next step to be taken but the coming four steps for the organization to be on the safer side. Proaction means taking the initiative, preplanning and taking preventive action, and calculating the payoffs of an alternative course before taking action. Pro activity gives initiative' to the person to start a new process or set a new pattern of behaviour. Pro activity involves unusual behaviour. In this sense pro activity means freeing oneself from, and taking action beyond immediate concerns. **Authenticity** focuses on the ethical and lawful processes used in the organization. According to this component, the organizations no doubt should focus on the attainment of the goals of the organization but what is most important is the way, the procedure through which the goals are attained. Authenticity is the congruence between what one feels, says and does. Authenticity is closer to openness. The outcome of authenticity in an organization is reduced distortion in communication. This can be seen in the correspondence between members in an organization.

**Collaboration** is the extent of team work in the organization. Unless and until the employees of the organization work in collaboration with each other the effectiveness and efficiency of the organization is not possible. Collaboration is giving help to, and asking for help from, others. It means working together (individuals and groups) to solve problems and team spirit. The outcome of collaboration includes timely help, team work, sharing of experiences, improved communication and improved resource sharing. The indication could be productivity reports, more meetings, and involvement of staff, more joint decisions, better resource utilization and higher quality of meetings. Collaboration is to accept interdependencies, to be helpful to each other, and work as teams.

**Experimentation** is the application of the learned skill and knowledge. In the organization the employees should be given the opportunity to apply and experiment whatever they have learnt because it gives vent to new ideas, innovations thus benefiting the organization as a whole. Experimenting means using and encouraging innovative approaches to solve problems; using feedback for improving, taking a fresh look at things, and encouraging

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creativity. Creativity is reflected in new suggestions generated by employees, attempts at improving upon previous ways of working, trying out a new idea to which one has been exposed, innovating new methods, and thinking about a problem while ignoring so called constraints.

## REVIEW OF RELATED LITERATURE

The review reflects that HRD influences the performance in the organization. Development is dependent on the prevailing culture of the organization as it plays a vital role in the development of a learning organization. Culture provides the organization employees with a sense of direction and creative thinking. Anu, Janos, Ajay & Nisha (2010), compared the organizational culture of the selected companies in the manufacturing sector and identified and measured the perceived organizational culture and its various dimensions. The results showed that the executives and non executives perceived the culture differently. Navigating Complexity: The Dynamics of Organizational Culture during a Merger by Kandy Dayaram (2005), revealed that people carry 'cultural baggage' to the workplace, which inhibits the transformation processes. The research findings demonstrated strong indications that past institutional practices influenced current and future transformation initiatives. Shay & Amit (2007) conducted a survey on HRM Practices and Perceived Service Quality: The Role of Trust as a Mediator. The study, which was undertaken within an Israeli HCO that provides health services in the community, evaluated data from 411 employees and managers. The findings suggested that trust in management affected perceived SQ directly, but also mediated the relationship between employee's perceptions of feedback and SQ. The present research focused on examining the mediation effect of trust on the relationship between employees' perceptions of HRM practices and perceived SQ. The results of the investigation partially supported the prediction.

A research identified significant differences in the dimensions of culture among managerial groups categorized by sector (international, public and private), education and age. Nazir A Nazir (2005) surveyed Person-Culture Fit and Employee Commitment in Banks. The main findings of the study showed moderate to strong person-culture fit score was found in one private and two foreign banks and weak to moderate person-culture fit score was found in rest of the banks studied. Two foreign and one private bank scored high to moderate on socialization practices respectively. The other two public and one private bank scored low on this dimension. Banks high on value congruency and socialization scores showed significant correlation between person-culture fit and normative commitment. Banks low on value congruency and socialization practices exhibited insignificant correlation between person-culture fit and normative and instrumental commitment. On the whole, the study indicated the need for firms, especially public sector, service-oriented firms, to pay attention to socialization practices which would result in strong cultures and employee commitment. These results suggested that OCP can provide a reasonable mapping of organizational culture.

Research on OCTAPACE culture for marketing personnel in selected IT companies of India by showed that the sample organizations differed significantly in their OCTAPACE Culture & were having varying level of OCTAPACE culture. Effect of Organizational Culture on Creating Learned Helplessness Attributions in R&D Professionals: A Canonical Correlation Analysis conducted by Sharad & Hardik (2008),attempted to explore the relationship among different dimensions of organizational culture and learned helplessness attributions for R&D professionals of pharmaceutical industry of India. The study revealed that the organizational culture variables were negatively related to the learned helplessness attributions, the role of organizational culture was significant in order to create or remove learned helplessness, the attributions played an important role in causing depression and vulnerability situations that eventually resulted in learned helplessness, all learned helplessness attributions were quite closely related and created a well-defined dimension for representing LH attributions, the outcome dimension of learned helplessness was fairly well predicted by the set of organizational culture profile variables when acting as a set, learned helplessness was brought on by a handful of uncontrollable, stress-creating factors including time and performance pressures, lack of free time, the competitive and demanding nature of research projects, and lack of opportunity to socialize or engage in recreation. Anil, Pankaj & Bhumija (2011), surveyed Organization Culture In Management Institutions with special reference to Jaipur, Rajasthan. This research threw light on organization culture and its impact on management education of Rajasthan employee's affectivity and efficiency. The findings showed that the faculty members at management institutions in Jaipur City thought that sharing of information was the major variable which affected the organization culture; along with sharing of information involvement of commitment does also play a vital role in formation of organization culture. The relationship was very clear that if information would travel properly from top to bottom then the commitment level increases and brings a positive working environment in the organization as it make the employees feel the feeling the part of organization.

A study of Organizational Culture in a Women College by Sandhya & Sandeep (2007), revealed the facts that the teaching members were trust worthier, proactive, more authentic than the non-teaching members as a whole, while as comparison on the basis of experience showed that juniors in teaching compared with juniors in non teaching had lack of trust and authenticity while as seniors of teaching staff were more authentic, experimenting, autonomous as compared to seniors of non teaching. Among teaching members seniors showed more trust, collaboration than that to juniors, but scenario was different in non teaching there was no question of any difference among seniors and juniors on different parameters. Research by Kavita (2010), identified the relationship between the organization culture and the learning organization in Indian business organizations and concluded that the organization culture played a vital role in the development of a learning organization. It further contended that three major constructs of organization culture, i.e., openness, proaction and experimentation tended to provide the members of an organization with a sense of direction and creative thinking which in turn enhanced organizational learning in turbulent environment.

Learning culture and performance Outcomes: evidence from Malaysian Organizations, a study by, Raduan, Arfah &Naresh (2006), aimed to explore relationships between learning Organization dimensions and perceived performance improvement within Malaysian owned MSC status organizations. Based on the results of this study, it could be concluded that a culture of inquiry, feedback and experimentation perhaps had been created and in progress within the Malaysian MSC status organizations. The findings of this study proposed that financial performance of ICT based organizations could be improved if these organizations were effectively connected to their environment. Organizational culture in Indian organizations a study by Rakesh & Archana (2010),explored the nature of organizational ethos prevalent in different sectors of Indian economy using the OCTAPACE profile. Analysis of data collected from employees of 16 different organizations belonging to consulting, manufacturing, services and IT/ITES sectors indicated that significant differences existed in the cultures of organizations in the different sectors. Authenticity and autonomy were more valued in consulting as compared to the manufacturing and services industries. Openness and confrontation were higher in the IT/ITES sectors, while collaboration was higher in the manufacturing sector. Private sectors had an open and a trusting culture as compared to the public sector. Results also revealed that employees who were professionally qualified rated confrontation, authenticity and autonomy higher than those who were not professionally qualified. However, no significant difference existed between males and females in their evaluation of organizational culture. This study mapped out the ethos/values present in the culture of Indian organizations along eight dimensions. The analyses indicated that the cultures differed along public and private sectors and amongst services, manufacturing, consulting and IT/ITES sectors. The relationship between trust, HRM practices and firm performance a study by Shay (2005), evaluated the trust mechanism and the way HRM practices mediated on improving organizational performance.

Organizational culture and its impact on organizational effectiveness a study of selected textile units of Northern India by Sanjeev & Aditi (2008), undertaken on a textile industry in the states of Himachal Pradesh and Punjab through a sample of one hundred eighty employees was taken for the study. Findings revealed that organizational culture did not have a positive impact on the organizational effectiveness of an organization. Renae, Nerina & Andrew (2005), studied the impact of organizational culture and reshaping capabilities on change implementation success: The mediating role of readiness for change, in the context of an information system implementation. There was evidence to suggest that readiness for change acted as a mediator in the relationship between employees' perceptions of a human relations culture orientation and their subsequent usage of the new computing system. Emmanuel & Barry (2003), study aimed to explore the perceptions and responses of managers to organizational culture change initiatives. Analysis suggested that managers were not wholly 'taken in', that a 'strong culture' did not exist within the middle management ranks-from departmental managers through to regional managers.

Culture and ambiguity within a knowledge intensive firm, Maxine & Jacky (2003), explored the distinctive culture that existed within a Knowledge Intensive Firm (KIF). Sakthivel (2009), study on organizational culture and its impact on the performance of IT employees in Chennai, revealed that organizational culture influencing performance among the employees in the IT industry depended on the major factors such as organizational culture, work environment, safety and negotiation. It was concluded that the employees realized a conducive organizational culture influencing organizational performance in the IT industry. Profiling the OCTAPACE culture: An empirical study of banking and IT sector in India, Feza & Richa (2007), inferred that no significant differences existed between the IT and banking sector on all the dimensions of OCTAPACE, thus implying similarities in the prevalent organizational culture in the two sectors. Influence of firm size on organizational culture and employee morale, Julia (2001), conducted a study in six Australian workplaces and found that organizational size affected a number of variables. Organizational culture within the three small firms

investigated was more positive: management was more consultative and employee morale was higher than in the three large firms investigated. As a result, the findings from this study indicated that in relation to a number of factors explained in the paper, larger firms may wish to emulate that in relation to a number of factors explained in the paper, larger firms may wish to emulate their smaller counterparts in order to achieve higher employee morale and hence organizational effectiveness. It was concluded from the study that small company employees were more likely to be positive about their work and enjoyed higher morale than large company employees. Trust in the workplace, Julia, Natalie & Tony (2003), the paper reported on the findings of the study on trust in the workplace. The study was undertaken within a large local government organization. The authors recognized that it would be foolish to believe that any organization could enjoy complete trust amongst its workforce; this paper argued that the presence of certain interpersonal and organizational characteristics results in greater levels of trust, even within the context of organizational constraints. Regardless of hierarchical level, interpersonal support must be demonstrated to engender trust.

Simon & John (2002), surveyed how similarity to peers and supervisors influences organizational advancement in different cultures. Behavioral integration between candidates and their peers and supervisors partially mediated the influence of personality similarity on promotion. Rajesh(2006),conducted research to understand the current state of organizational culture for knowledge management in the selected sectors of software, pharmaceuticals and petroleum marketing, taking into account both macro and micro aspects in both private and public sectors. The findings were not very encouraging as they revealed that there was a lack of organizational culture for knowledge creation, sharing and dissemination which had serious implications for the competitiveness of the firms, industry and the country. Organizational culture and organizational citizenship behaviour (OCB), study by Naachimuthu (2006), attempted to identify whether there existed such relationship between the organizational culture and organizational citizenship behaviours (OCB).Results revealed that there existed a strong relationship between organizational culture and organizational citizenship behaviour.

## SAMPLE ORGANIZATIONS AT A GLANCE

Since hospitals are a widespread and an important sector of the society and this sector continuously deals with both, its own human resource and humans from outside the organization, to be managed and handled tactfully. So the study on this sector is important. The sample organizations include; 1) SKIMS Soura Srinagar & 2) SMHS Hospital Srinagar.

Sher-i-Kashmir Institute of Medical Sciences Srinagar. The Institute was partially commissioned on 5th December 1982.Sher-i-Kashmir Institute of Medical Sciences is a post graduate Institute for training, research and patient care. With this objective, various committees appointed by the Government of Jammu and Kashmir identified the specialties in which postgraduate and post doctoral courses would be undertaken. By an act of Legislature on 19th August 1983, Institute of Medical Sciences was granted a deemed University status. Sher-i-Kashmir Institute of Medical Sciences was conceived with the following objectives: To provide facilities of specialized medical care and particularly develop super specialties that would provide tertiary health-care. To provide need oriented education in medical sciences and clinical research. To develop a referral linkage between the primary, secondary and tertiary health-care Institutions of the State to achieve an optimum health delivery system. The State Government under the 5th and 6th plan grants earmarked for the Institute, as the planning commission approved of it as a plan project, provided the funds for construction and equipping the Institute.

Shri Maharaja Hari Singh (S.M.H.S) Hospital, Srinagar. The S.M.H.S Hospital was established in 1948 at Karan Nagar in the heart of Srinagar city as a Government-owned General Hospital to provide patient care to needy patients. Primary and secondary medical care in the major specialties of Medicine, Surgery and Gynecology was made available to the general public on OPD and Inpatient basis. In 1959, after the inauguration of Government Medical College on the same campus, S.M.H.S hospital became a major teaching institution imparting undergraduate and postgraduate medical training in all allied specialties of Medicine, Surgery and Gynaecology. In the 1970's, as medical services became more specialized and differentiated, separate hospitals were established for specialties like Obstetrics and Gynaecology and Orthopaedics etc. The shifting of the concerned departments coincided with the expansion and differentiation of the major specialties of Medicine and Surgery. Currently patient care services are offered in the specialties of Medicine, Surgery, Anaesthesiology, Radio diagnosis and Imaging, Ophthalmology, ENT, Dermatology and Radiotherapy. Facilities also exist for the Super specialties of Cardiology, Gastroenterology, Neurology, Urology, Cardiothoracic surgery and Paediatric surgery. These are supported by well organized and fully equipped diagnostic, therapeutic and support service departments. There is a separate Laboratory services block which undertakes routine, specialized and super specialized investigation.

## OBJECTIVES OF THE PRESENT STUDY

1) To study the existing status of HRD Climate in the sample study organizations i.e. (a) SKIMS Soura Srinagar (b) SMHS Srinagar.
2) to analyze the impact of existing OCTAPACE culture in the sample study hospitals,
3) to examine the perceptual difference in the opinion of Medical, paramedical and ministerial/supporting staff and
4) to draw conclusions and to provide result oriented guidelines and suggestions to the sample study hospitals for improvement of their existing Organizational Culture.

**Hypothesis**

In consonance to the above objectives, the hypotheses formulated for the present research are as under:

1) OCTAPACE Culture in the hospitals is not satisfactory.
2) There is a difference in the perception of medical and Para medical staff towards OCTAPACE Culture in the two organizations.

## RESEARCH APPROACH AND DESIGN

The tool used for obtaining the information was a 'Structured Non Disguised Questionnaire', a questionnaire was designed keeping in view both major and minor objectives of study. A close format questionnaire was used. Closed format questions offer many advantages in time and money. Questionnaire was used to measure the organizational ethos. This questionnaire is proposed by Dr. Udai Pareek. It consisted of two Sections and 39 statements. Sec "A" consisted of 38 statements, the rating for each to be done on a scale from 5 to 1,(5)=Almost always true,(4)=Mostly true,(3)=Sometimes true,(2)=Rarely true,(1)=Not at all true. Sec "B" sought for suggestions and name, gender, age, pay scale, designation of the respondent.

Simple Random Sampling Method (SRSM) was used to cover employees from Medical, Administrative, Supportive and Technical cadres in the sample selected organizations. A sample of 100-125 was targeted from each organization covering -**Doctors** including HOD's, Professors, Associate Professors, Asst Professors, Lecturers-**Officers** including Administrative Section ,Materials Management, Library etc-**Engineers** including Civil, Electric, Mechanic, Architect-**Nurses** covering Superintendents, Nursing aids-**Others** covering Operators, Attendants, Technicians, Technologists, Drivers, Gardeners and other fourth class employees. Thus the total sample for the study was 200-250.

## DATA ANALYSIS AND INTERPRETATION

Existing status of OCTAPACE Culture in the sample study organizations.

Table I reveals that the mean score for OCTAPACE Culture falls below satisfactory range for SKIMS (M.S=2.74, 43.5%) and above satisfactory level for SMHS (M.S=3.09, 52.5%). Collaboration scores the largest mean score of 3.32(58%) and 3.60(65%) for SKIMS and SMHS. It shows that the organizations have a satisfactory environment for collaboration followed by autonomy with a mean score of 3.30(57.5%) and 3.40(60%) for SKIMS and SMHS respectively. Trust finds the next place in SMHS with a mean score of 3.20(55%), while in SKIMS the environment of trust falls below the level of satisfaction with a mean of 2.94(48.5%). The same follows for the element of authenticity where SMHS is found more authentic in work with a mean score of 3.17(54.25%) in comparison to SKIMS which has a satisfactory level of authenticity i.e. 3.04(51%) but not more than SKIMS. Openness is at a satisfactory level in SKIMS with an overall mean of 3.03(50.75%) and in SKIMS the element of Openness falls below satisfactory level of 2.958(48.95%). Confrontation again falls in a satisfactory range in SMHS with a mean of 3.07(51.75%) and it falls in a dissatisfactory range in SKIMS with 2.84(46%) mean score. Proactivity falls in an unsatisfactory level in both the organizations with a mean of 40% and experimentation is not entertained in SKIMS and SMHS with a mean of 2.86(46.5%) and 2.65%) respectively.

Statements 1,4,8,9,12 and 13 score a mean of >50 for SKIMS while as statements 1, 4, 7, 8, 9, 11, 12, 13 and 14 score a mean >50 for SMHS revealin1 that SMHS has a satisfactory OCTAPACE Culture in comparison to SKIMS.

**Table I: Existing status of OCTAPACE Culture in the sample study organizations.**

| St. No | Statements | SKIMS (No. 104) | | | SMHS (No. 121) | | |
|---|---|---|---|---|---|---|---|
| | | M.S | S.D | *%age* | M.S | S.D | *%age* |
| 1 | People in this organization are helpful to each other | 3.21 | 1.07 | 55.2 | 3.47 | 1.14 | 61.7 |
| 2 | Employees in the health care sector are very informal and do not hesitate to discuss their personal problems with their supervisors | 2.93 | 1.22 | 48.2 | 2.94 | 1.22 | 48.5 |
| 3 | The psychological climate of the health care sector is very conducive for any employee interested in developing himself by acquiring new knowledge and skills. | 2.92 | 1.08 | 48 | 2.94 | 1.28 | 48.5 |
| 4 | People in health care sector do not have any fixed mental impressions about each other. | 3.04 | 1.13 | 51 | 3.17 | 1.26 | 54.2 |
| 5 | Employees in this organization are encouraged to experiment with new methods and try out creative ideas. | 2.86 | 1.29 | 46.5 | 2.65 | 1.34 | 41.2 |
| 6 | Weaknesses of employees in this organization are communicated to them in a non threatening way. | 2.89 | 1.08 | 47.2 | 2.90 | 1.26 | 47.5 |
| 7 | People trust each other in this organization. | 2.94 | 1.14 | 48.5 | 3.20 | 1.10 | 55 |
| 8 | Employees in health care sector are not afraid to discuss or express their feelings with their supervisors. | 3.11 | 1.18 | 52.7 | 3.12 | 1.12 | 53 |
| 9 | Employees in health care sector are not afraid to discuss or express their feelings with their subordinates | 3.02 | 1.13 | 50.5 | 3.12 | 1.11 | 53 |
| 10 | Employees in health care sector are encouraged to take initiative and do things on their own without having to wait for instructions from their supervisors | 2.41 | 1.20 | 35.2 | 2.72 | 1.09 | 43 |
| 11 | Delegation of authority to encourage juniors to develop and handle higher responsibilities is quiet common in this organization | 2.58 | 1.10 | 39.5 | 3.06 | 0.95 | 51.5 |
| 12 | When seniors in health care sector delegate authority to juniors use it as an opportunity for development. | 3.30 | 0.95 | 57.5 | 3.40 | 0.98 | 60 |
| 13 | Team spirit is of high order in this organization. | 3.32 | 1.26 | 58 | 3.60 | 1.17 | 65 |
| 14 | When problems arise in health care sector, people discuss these problems openly and try to solve them rather than keep accusing each other behind their backs | 2.84 | 1.16 | 46 | 3.07 | 1.28 | 51.75 |
| | **Total** | **2.74** | **1.14** | **43.5** | **3.09** | **1.16** | **52.2** |

Notes

1. Scoring Scale : same as in table 1
2. M.S: mean score, S.D: standard deviation, M.S diff: difference between mean scores.
3. Statements: - Openness= 2, 6,8, 9,14. Confrontation=14. Trust=7. Authenticity=4. Proactivity=3, 5, 10. Autonomy=11, 12. Collaboration=1, 13 and Experimentation=5.

**Figure I: Statement wise existing status of OCTAPACE Culture in the sample study organizations.**
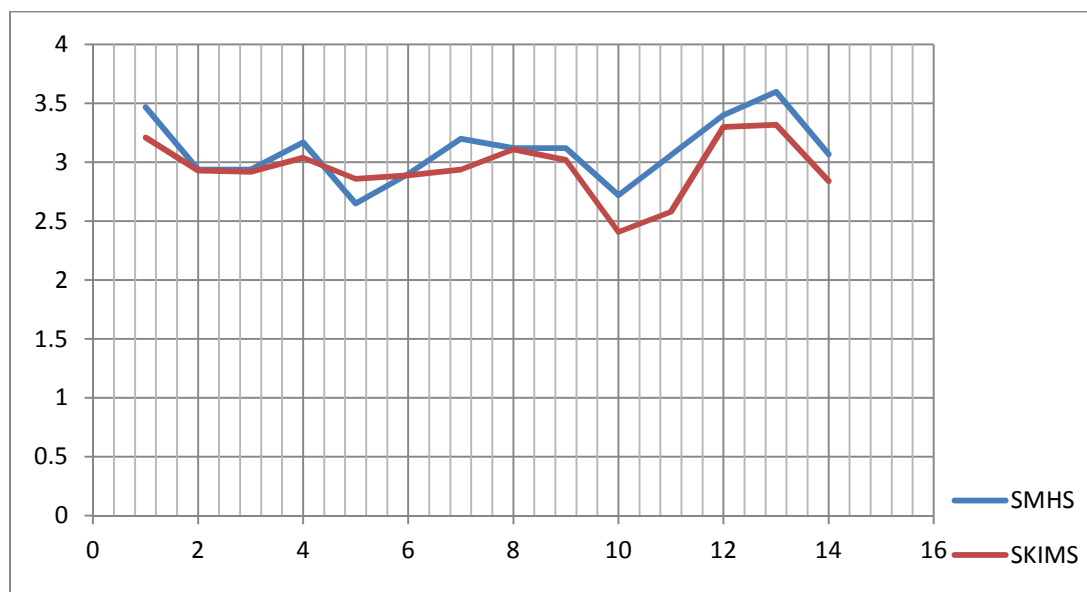


Table II reveals the status of OCTAPACE Culture in the sample study organizations using Z values for evaluating the significance level. It is inferred from the table 1, that OCTAPACE Culture in SKIMS falls under dissatisfactory level (M.S= 2.94) in comparison to SMHS where in it falls under a satisfactory level (M.S= 3.07). Z test reveals that Ho i.e. "OCTAPACE Culture is dissatisfactory in the sample study organizations" is accepted at 5% level of significance for Openness, Confrontation, Trust, Authenticity, Proactivity and Experimentation. While as Ha i.e. "OCTAPACE Culture is satisfactory in the sample study organizations" is accepted for dimension of Autonomy and Collaboration.

**TABLE II: Existing status of OCTAPACE Culture in the sample study organizations with Z values.**

| Variables | SKIMS N. 106 | | SMHS N. 121 | | M.S Diff | T Value | P value |
|---|---|---|---|---|---|---|---|
| | M.S | S.D | M.S | S.D | | | |
| Openness | 2.96 | 0.80 | 3.02 | 0.79 | -0.06 | -0.63 | **0.52*** |
| Confrontation | 2.83 | 1.15 | 3.06 | 1.28 | -0.23 | -1.39 | **0.16*** |
| Trust | 2.94 | 1.13 | 3.19 | 1.10 | -0.25 | -1.71 | **0.08*** |
| Authenticity | 3.02 | 1.12 | 3.16 | 1.26 | -0.14 | -0.85 | **0.39*** |
| Proactivity | 2.74 | 0.86 | 2.77 | 0.83 | -0.03 | -0.25 | **0.79*** |
| Autonomy | 2.94 | 0.83 | 3.23 | 0.74 | -0.29 | -2.71 | **0.00**** |
| Collaboration | 3.27 | 1.02 | 3.53 | 0.91 | -0.26 | -2.04 | **0.04**** |
| Experimentation | 2.83 | 1.29 | 2.65 | 1.34 | 0.18 | 1.06 | **0.29*** |
| **TOTAL** | **2.94** | **1.02** | **3.07** | **1.03** | **-0.13** | | |

Notes

1. Scoring Scale : same as in table 1

2. M.S: mean score, S.D: standard deviation, M.S diff: difference between mean scores.
3. *P Value >0.05= statement is accepted at 5% level of significance.
4. **Ha is accepted at 5% level of significance.

**Figure II: Statement wise existing status of OCTAPACE Culture in the sample study organizations with Z values.**
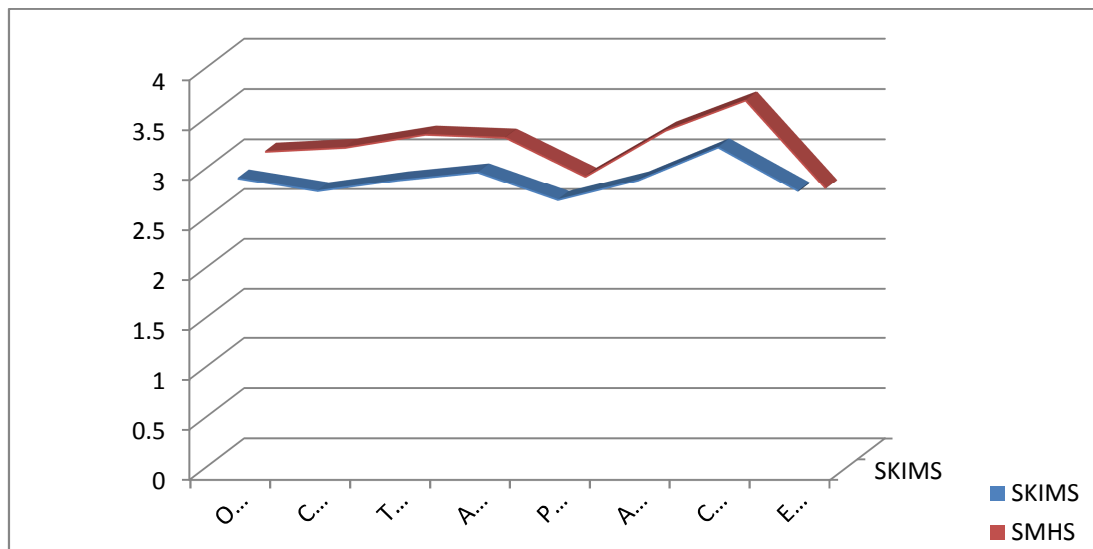


Perception of Medical and Para Medical staff towards OCTAPACE Culture.

Table III, represents the OCTAPACE Culture, with respect to medical and Para medical staff in the sample study organizations. The table represents that the perception of medical and Para- medical staff towards OCTAPACE culture in SKIMS, falls under satisfactory level whiles the opposite holds true for SMHS. The overall mean values for Medical group in SKIMS is <50 as revealed from table 3, which falls under dissatisfactory range of scale. The table also reveals that the overall mean values of Para-medical staff in SKIMS also falls under a dissatisfactory level with the mean score of <50. The mean score of medical staff in SMHS is >50 which falls in a satisfactory range of scale and the same applies for the Para-medical staff of SMHS with a mean score of >50. SKIMS scored the highest mean score of 3.26(56.5%) for statement 12 i.e. "When seniors in health care sector delegate authority to juniors use it as an opportunity for development" and statement 13 i.e. "Team spirit is of high order in this organization", scored the highest value of 3.70(67.5%) and 3.54(63.5%) for medical and Para-medical staff in SMHS and a mean value of 3.52(58.2%) for the Para medical staff of SKIMS. On the other hand, least score of 2.24(31%) and 2.84(46%) was scored by the medical staff of SKIMS for statement 10 i.e. "Employees in health care sector are encouraged to take initiative and do things on their own without having to wait for instructions from their supervisors". While as the Para-medical staff of SKIMS seems to be dissatisfied with statement 11 i.e. "Delegation of authority to encourage juniors to develop and handle higher responsibilities is quiet common in this organization", scoring a mean score value of 2.54(38.5%). Statement 5 i.e. "Employees in this organization are encouraged to experiment with new methods and try out creative ideas" scores the least mean score of 2.46(36.5%) for the Para medical staff of SMHS.

**Table III: Perception of Medical and Para medical staff towards OCTAPACE Culture.**

| St. No | SKIMS | | | | | | SMHS | | | | | |
| | Medical(No.50) | | | Par Medical(No.54) | | | Medical(No.50) | | | Para Medical(No.71) | | |
| | M.S | S.D | %age | M.S | S.D | %age | M.S | S.D | %age | M.S | S.D | %age |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 3.20 | 0.99 | 55 | 3.22 | 1.16 | 55.5 | 3.52 | 1.03 | 63 | 3.44 | 1.22 | 61 |
| 2 | 2.90 | 1.28 | 47.5 | 2.96 | 1.18 | 49 | 2.96 | 1.16 | 49 | 2.93 | 1.28 | 48.25 |
| 3 | 3.04 | 1.16 | 51 | 2.81 | 1.01 | 45.2 | 3.08 | 1.27 | 52 | 2.85 | 1.28 | 46.25 |
| 4 | 2.94 | 1.20 | 48.5 | 3.13 | 1.06 | 53.2 | 3.32 | 1.23 | 58 | 3.06 | 1.28 | 51.5 |
| 5 | 2.90 | 1.34 | 47.5 | 2.81 | 1.26 | 45.2 | 2.92 | 1.35 | 48 | 2.46 | 1.31 | 36.5 |
| 6 | 2.88 | 0.84 | 47 | 2.91 | 1.27 | 47.7 | 3.10 | 1.05 | 52.5 | 2.76 | 1.37 | 44 |
| 7 | 3.02 | 1.16 | 50.5 | 2.87 | 1.13 | 46.7 | 3.28 | 0.99 | 57 | 3.14 | 1.17 | 53.5 |
| 8 | 3.02 | 1.25 | 50.5 | 3.19 | 1.11 | 54.7 | 3.30 | 1.07 | 57.5 | 2.99 | 1.15 | 49.75 |
| 9 | 2.94 | 1.15 | 48.5 | 3.09 | 1.12 | 52.5 | 3.20 | 0.99 | 55 | 3.06 | 1.19 | 51.5 |
| 10 | 2.24 | 1.23 | 31 | 2.57 | 1.15 | 39.2 | 2.84 | 1.25 | 46 | 2.63 | 0.97 | 40.75 |
| 11 | 2.62 | 1.14 | 40.5 | 2.54 | 1.07 | 38.5 | 3.14 | 0.90 | 53.5 | 3.00 | 0.98 | 50.0 |
| 12 | 3.26 | 0.94 | 56.5 | 3.33 | 0.97 | 58.2 | 3.50 | 0.97 | 62.5 | 3.34 | 0.99 | 58.5 |
| 13 | 3.10 | 1.31 | 52.5 | 3.52 | 1.19 | 63 | 3.70 | 1.16 | 67.5 | 3.54 | 1.18 | 63.5 |
| 14 | 2.86 | 1.19 | 46.5 | 2.81 | 1.15 | 45.2 | 3.34 | 1.23 | 58.5 | 2.87 | 1.28 | 46.75 |
| **Total** | **2.92** | **1.11** | **46.08** | **2.98** | **1.13** | **49.5** | **3.22** | **1.11** | **55.5** | **3.00** | **1.18** | **50** |

Notes

1. Scoring Scale : same as in table 1
2. M.S: mean score, S.D: standard deviation, M.S diff: difference between mean scores.

**Figure III: Statement wise existing status of OCTAPACE Culture in sample study organizations.**
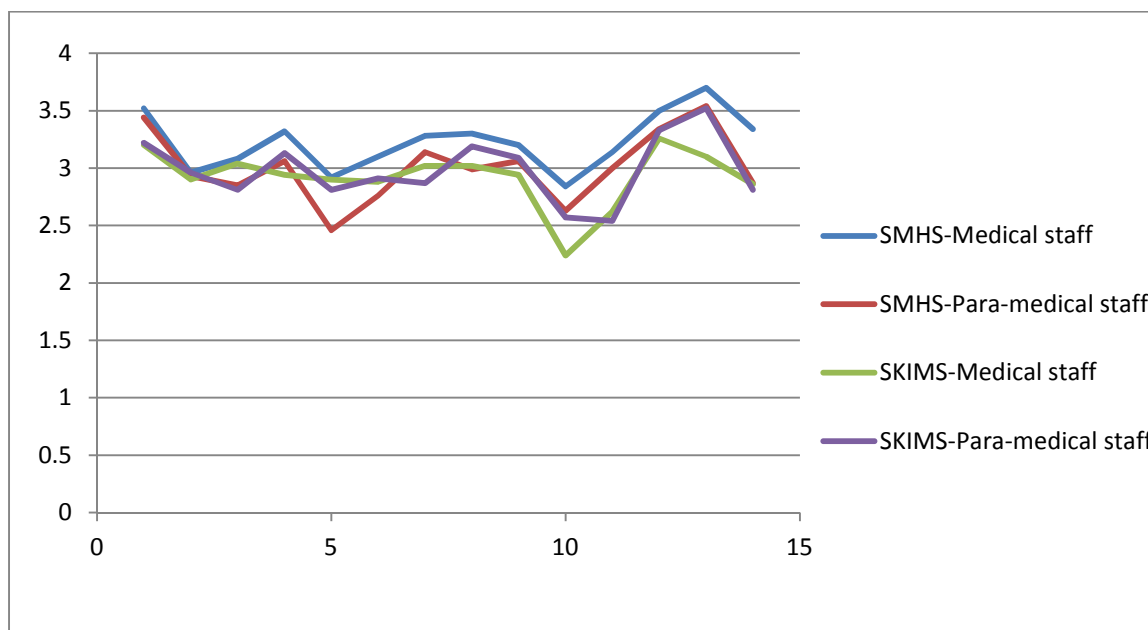


Table IV reveals the perception of Medical staff towards OCTAPACE Culture. Medical staff of SKIMS shows a dissatisfactory response towards OCTAPACE Culture with a mean score of (M.S=2.92, 48%) in comparison to SMHS wherein the Medical staff shows satisfaction towards OCTAPACE Culture (M.S=3.22, 55.5%). Medical staff of SKIMS are highly satisfied with the fact that when seniors in their organization delegate authority to juniors, use it as an opportunity for development (Statement 12, M.S=3.26, S.D=0.94, 56.5%). Medical staff of SMHS believe in team spirit of high order in their hospital (statement 13, M.S=3.70. S.D=1.16, 67.5%). Medical staffs of both the organizations, (SKIMS M.S=2.24, S.D=1.23, 31% & SMHS M.S=2.84, S.D=1.25, 46%) are least satisfied that employees in their health care are not allowed to take initiative and do things on their own and have to wait for instructions from their supervisors (statement 10).

**Table IV:- Perception of Medical staff towards OCTAPACE Culture.**

| St. No | Medical Staff | | | | | |
| | SKIMS N. 50 | | | SMHS N. 50 | | |
| | M.S | S.D | %age | M.S | S.D | %age |
| 1 | 3.20 | 0.990 | 55 | 3.52 | 1.035 | 63.0 |
| 2 | 2.90 | 1.282 | 47.5 | 2.96 | 1.160 | 49.0 |
| 3 | 3.04 | 1.160 | 51 | 3.08 | 1.275 | 52.0. |
| 4 | 2.94 | 1.202 | 48.5 | 3.32 | 1.236 | 58.0 |
| 5 | 2.90 | 1.344 | 47.5 | 2.92 | 1.353 | 48.0 |
| 6 | 2.88 | 0.849 | 47 | 3.10 | 1.055 | 52.5 |
| 7 | 3.02 | 1.169 | 50.5 | 3.28 | 0.991 | 57.0 |
| 8 | 3.02 | 1.253 | 50.5 | 3.30 | 1.074 | 57.5 |

| 9 | 2.94 | 1.150 | 48.5 | 3.20 | 0.990 | 55.0 |
|---|------|-------|------|------|-------|------|
| 10 | 2.24 | 1.238 | 31 | 2.84 | 1.251 | 46.0 |
| 11 | 2.62 | 1.141 | 40.5 | 3.14 | 0.904 | 53.5 |
| 12 | 3.26 | 0.944 | 56.5 | 3.50 | 0.974 | 62.5 |
| 13 | 3.10 | 1.313 | 52.5 | 3.70 | 1.165 | 67.5 |
| 14 | 2.86 | 1.195 | 46.5 | 3.34 | 1.239 | 58.5 |
| **Total** | **2.92** | **1.15** | **48** | **3.22** | **1.11** | **55.5** |

Notes

1. Scoring Scale : same as in table 1
2. M.S: mean score, S.D: standard deviation, M.S diff: difference between mean scores.

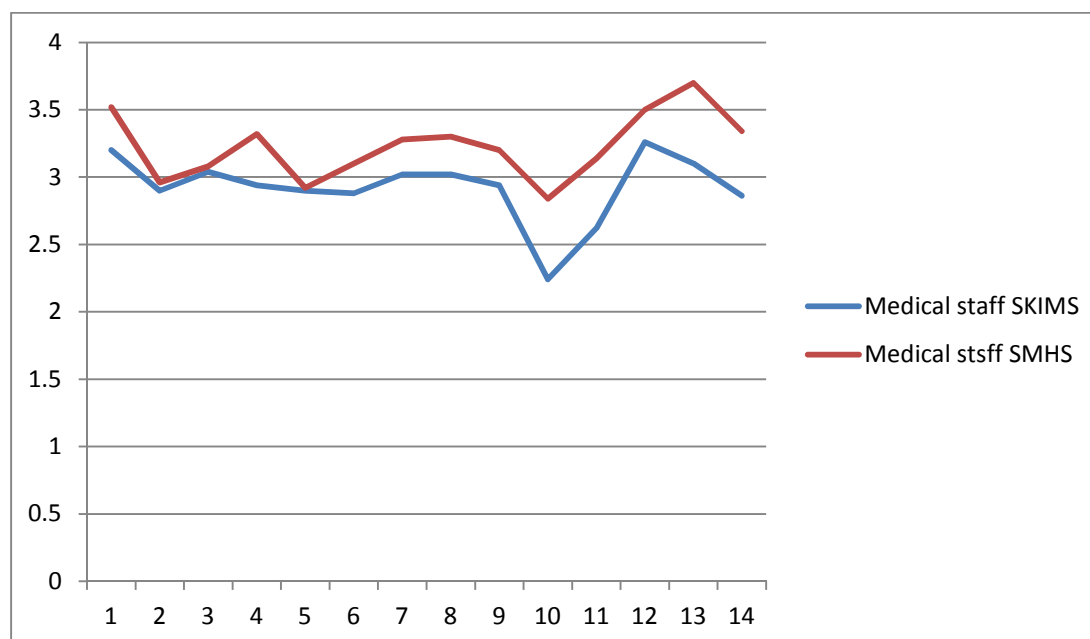**Figure IV:- Perception of Medical staff towards OCTAPACE Culture.**



Table V reveals the perception of Para Medical staff towards OCTAPACE Culture. Para Medical staff of SKIMS again shows a dissatisfactory response towards OCTAPACE Culture with a mean score of (M.S=2.98, 49.5%) in comparison to SMHS wherein the Para Medical staff shows satisfaction towards OCTAPACE Culture (M.S=3, 50%). Para Medical staff of SKIMS (M.S= 3.52, S.D= 1.19, 63%) and SMHS (M.S=3.54, S.D=1.18, 63.5%) is highly satisfied that the employees work as team which is of high order in the hospitals, (statement 13). Para Medical staff of SKIMS is least satisfied with statement 11 i.e. "Delegation of authority to encourage juniors to develop and handle higher responsibilities is quiet common in this organization". Statement 5 i.e. "Employees in this organization are encouraged to experiment with new methods and try out creative ideas" scores the minimum mean (M.S=2.46, S.D= 1.31, 36.6%) for the Para Medical staff of SMHS.

**Table V:- Perception of Para Medical staff towards OCTAPACE Culture.**

| St. No | Para Medical Staff | | | | | |
|---|---|---|---|---|---|---|
| | SKIMS N.54 | | | SMHS N.71 | | |
| | M.S | S.D | %age | M.S | S.D | %age |
| 1 | 3.22 | 1.160 | 55.5 | 3.44 | 1.227 | 61 |
| 2 | 2.96 | 1.181 | 49 | 2.93 | 1.280 | 48.25 |
| 3 | 2.81 | 1.011 | 45.25 | 2.85 | 1.283 | 46.25 |
| 4 | 3.13 | 1.065 | 53.25 | 3.06 | 1.286 | 51.5 |
| 5 | 2.81 | 1.260 | 45.25 | 2.46 | 1.318 | 36.5 |
| 6 | 2.91 | 1.278 | 47.75 | 2.76 | 1.378 | 44 |
| 7 | 2.87 | 1.133 | 46.75 | 3.14 | 1.175 | 53.5 |
| 8 | 3.19 | 1.117 | 54.75 | 2.99 | 1.153 | 49.75 |
| 9 | 3.09 | 1.120 | 52.25 | 3.06 | 1.194 | 51.5 |
| 10 | 2.57 | 1.159 | 39.25 | 2.63 | 0.975 | 40.75 |
| 11 | 2.54 | 1.077 | 38.5 | 3 | 0.986 | 50 |
| 12 | 3.33 | 0.971 | 58.25 | 3.34 | 0.999 | 58.5 |
| 13 | 3.52 | 1.193 | 63 | 3.54 | 1.181 | 63.5 |
| 14 | 2.81 | 1.150 | 45.25 | 2.87 | 1.287 | 46.75 |
| **Total** | **2.98** | **1.13** | **49.5** | **3** | **1.18** | **50** |

Notes

1. Scoring Scale : same as in table 1
2. M.S: mean score, S.D: standard deviation, M.S diff: difference between mean scores.

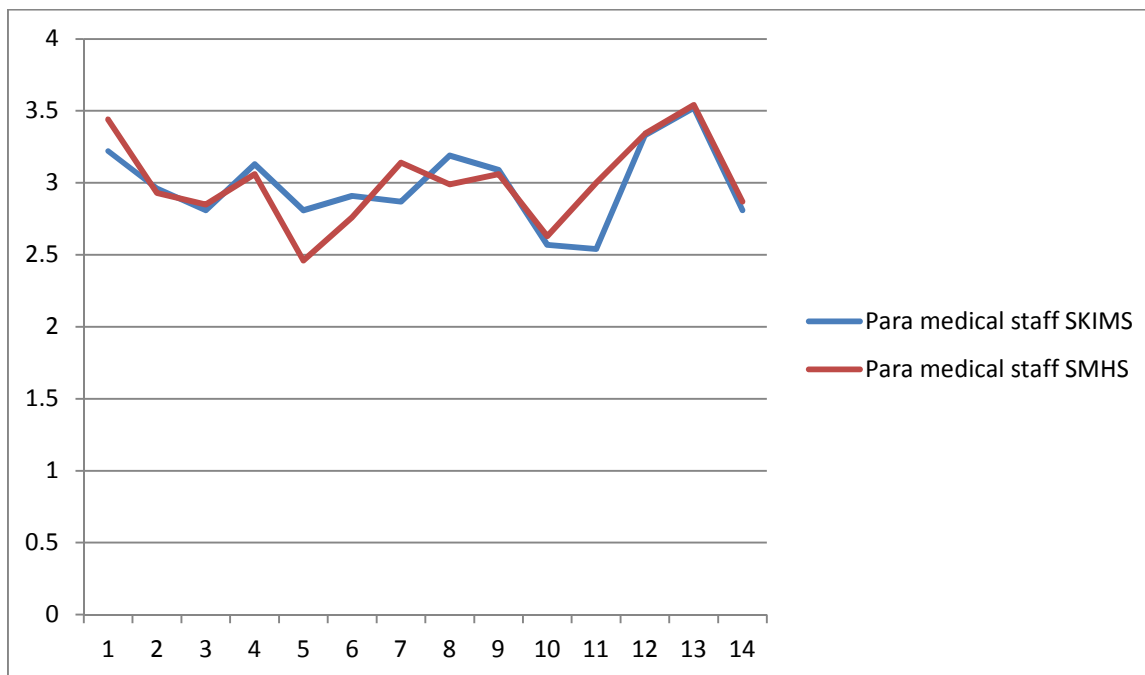**Figure V:- Perception of Para Medical staff towards OCTAPACE Culture.**



Table VI reveals that Collaboration scores the maximum mean score for both Medical (M.S=3.38) and Para Medical staff (3.44). Next highest score was scored by the dimension of Trust for the medical staff (M.S=3.15) and Authenticity and Autonomy score the second highest score for Para Medical staff (M.S=3.07) and occupies third place for the medical staff (M.S=3.13). Least satisfaction is seen for the dimension of Proactivity (M.S=2.83) for the Medical staff whiles the dimension of Experimentation scores the least score (M.S=2.60) for the Para Medical staff.

Application of T Test revealed that all the dimensions scored the P Value> 0.05 hence the hypothesis the "there lies a perceptual difference among the Medical and Par medical staff towards OCTAPACE Culture is accepted".

**Table VI: Difference in the Perception of Medical and Para Medical staff towards OCTAPACE Culture in the sample study organizations with Z values.**

| Variables | Medical Staff N. 100 | | Para Medical Staff N. 127 | | M.S Diff | T Value | P value |
|---|---|---|---|---|---|---|---|
| | M.S | S.D | M.S | S.D | | | |
| Openness | 3.05 | 0.76 | 2.95 | 0.82 | 0.10 | 0.08 | **0.37** |
| Confrontation | 3.10 | 1.23 | 2.85 | 1.21 | 0.25 | 1.52 | **0.12** |
| Trust | 3.15 | 1.08 | 3.02 | 1.15 | 0.13 | 0.84 | **0.40** |
| Authenticity | 3.13 | 1.22 | 3.07 | 1.18 | 0.06 | 0.31 | **0.75** |
| Proactivity | 2.83 | 0.85 | 2.69 | 0.84 | 0.14 | 1.24 | **0.21** |
| Autonomy | 3.13 | 0.84 | 3.07 | 0.76 | 0.06 | 0.55 | **0.58** |
| Collaboration | 3.38 | 1.00 | 3.44 | 0.95 | -0.06 | -0.46 | **0.64** |

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Experimentation | 2.91 | 1.34 | 2.60 | 1.29 | 0.31 | 1.72 | **0.08** |
| **TOTAL** | **3.08** | **1.04** | **2.96** | **1.02** | **0.12** | | |

Notes

1. Scoring Scale : same as in table 1
2. M.S: mean score, S.D: standard deviation, M.S diff: difference between mean scores.
3. T Value= T Test, P Value= Significance level.

**Figure VI: Statement wise existing status of OCTAPACE Culture within Medical and Para Medical staff in the sample study organizations with Z values**
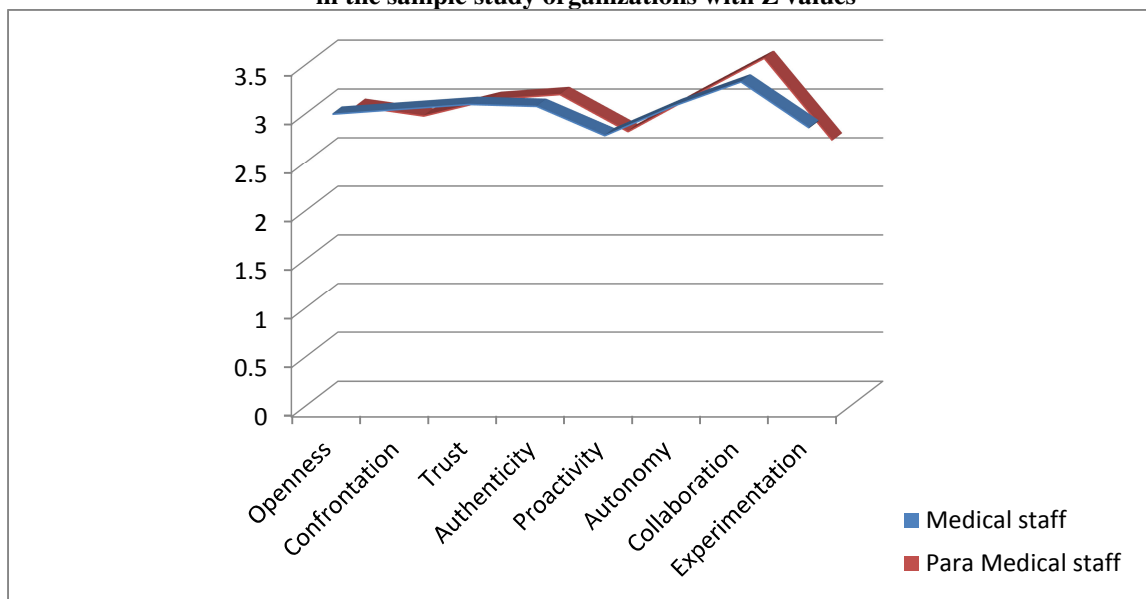


**CONCLUSIONS AND SUGGESTIONS**

An overview of the study is that,

- SMHS has a satisfactory OCTAPACE Culture in comparison to SKIMS.
- Both the organizations have a satisfactory environment of Collaboration followed by Autonomy.
- SKIMS has the environment of Trust falling below the level of satisfaction.
- SMHS is found more Authentic in work in comparison to SKIMS.
- Element of Openness falls below satisfactory level in SKIMS.
- Confrontation falls in a satisfactory range in SMHS and it falls in a dissatisfactory range in SKIMS.
- Proactivity and Experimentation fall in an unsatisfactory level for both the organizations.
- Perception of Medical and Para- medical staff towards OCTAPACE culture in SKIMS, falls under satisfactory level whiles the opposite holds true for SMHS.
- Medical staff of SKIMS shows a dissatisfactory response towards OCTAPACE Culture in comparison to Medical staff of SMHS.
- Medical staff of SKIMS are highly satisfied with the fact that when seniors in their organization delegate authority to juniors, use it as an opportunity for development.
- Medical staff of SMHS believes in team spirit.
- Medical staffs of both the organizations, are not allowed to take initiative and do things on their own and have to wait for instructions from their supervisors.
- Para Medical staff of SKIMS shows a dissatisfactory response towards OCTAPACE Culture in comparison to SMHS

- Para Medical staff of SKIMS is highly satisfied that the employees work as team.
- There is no delegation of authority among Para medical staff to encourage develop and handle higher responsibilities.
- Para Medical staff of SMHS is not encouraged to experiment with new methods and try out creative ideas.

OCTAPACE Culture should be encouraged in both the organizations as it forms a prime element of the culture of any organization. SKIMS and SMHS should focus more a good culture in the organization to ensure satisfaction of their HR so that the effectiveness and productivity of the organizations is enhanced. Being involved in health care, environment of trust, confrontation and openness should be improved, as health care continuously deals with the HR. Para medical staff should be encouraged and realized as an important HR of the organizations. HR should be allowed to experiment with new ideas and an environment of Proactivity with a view to encourage employees at each level of organizational context.

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