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Appreciative Inquiry based organization development intervention process on satisfaction and engagement of senior patients and sustainability of Sukavet Institution: a case study of nursing home

*Piya HIRUNWAT**

Abstract

Thailand had a large family with the culture of collectivism in the past history. Currently, the family group has changed from large family to single family. Many elder family members are left alone and nobody takes care of them. Additionally, the Thai health care system has not fully developed like the other developed countries. Thailand has begun the development of elderly care system starting from low to high income social status. Sukavet Nursing Home is the hospice for the elderly patients. The main needs were to increase the satisfaction and engagement of senior patients and create the sustainability of the institution. The final results were that there was a significantly positive increase of the satisfaction and engagement of senior patients/family members and there was a positively increased sustainable business development of the institution.

Keywords: Appreciative Inquiry; Organization Development Intervention (ODI); Senior Patient; Satisfaction; Engagement; Nursing Home Sustainability.

Introduction

This action research intended to study the satisfaction and engagement of senior patients and Sukavet Nursing Home's sustainability utilizing the appreciative inquiry-based ODI process. In the past, Thailand had a large family with the culture of collectivism. Due to the economic situation, the family members

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work harder and longer hours. Additionally, the family group has changed from large family to single family.

The life expectancy of both Thai males and females has increased from the introduction of health care awareness for the last ten years and the continuous improvement of advance medical care. The focal system was the Nursing Home. Sukavet Nursing Home was founded as a hospice in May 1998 by a group of retired medical doctors from many hospitals. The founders thought of helping the senior patients who are suffering from Alzheimer, chronic disease, paralysis, disability or final stage of cancer, palliative care needed or unable to take care of themselves, and the family members who do not have time to take care of them. The purpose of founders is to help the society by supporting the senior patients who are unable to take care of themselves to live healthy for their remaining life. The company background is that the shareholders of Sukavet Nursing Home want to help the society by registering as the private organization, instead of a non-for-profit organization, because the private institution can operate the business in the most effective and efficient ways in decision-making. As a result, Sukavet Nursing Home emphasizes on the quality care more than monetary profitability basis and supports unprivileged senior patients by offering high quality senior patient care services but the institution charges 30% lower cost of care, when compared with other nursing homes that provide the same level of quality care services.

Sukavet Nursing Home has the maximum capacity of 40 patient beds fully occupied by the senior patients aging from 50 to 90 years old and offers the senior care services both inside and outside the facility either home care or hospital care. Currently, Sukavet Nursing Home has more off-facility senior patients than in-facility senior patients because of its limited patient beds of the facility. Furthermore, the number of female senior patients using nursing home services at Sukavet is more than the number of male senior patients.

This research was limited by the financial support, research location, and dissertation timeframe. The access of financial resources support affected the major improvements or implementations of the organization development intervention process. With the research location of senior patients and family members, the senior patient data was limited to the observation and discussion of senior patients/family members and staff members who were only in the institution. The researcher did not go outside of the institution at either home care or hospital care. In addition, the researcher received only the permission to conduct the research within the limited timeframe of the dissertation from April 2009 to June 2010.

Organization Assessment

In the company situation analysis for senior patients/family members and staff members/institution, the researcher used SWOT (Strengths, Weaknesses, Opportunities and Threats) analysis to identify the initial situations of past and present for the institution. Afterward, the SOAR (Strengths, Opportunities, Aspirations and Results) analysis was used for the projection reference of the future potential change and development. The SWOT of senior patients/family members presented the current situation analysis related to the senior patients and family members that they were cared by the staff members and the medical equipment was sufficient for the senior patient care. The weak point was that they were only treated for physical rehabilitation. Once they recovered, they had an opportunity to go home and they might have to purchase their own necessary medical equipment that might be expensive. The SOAR of Senior Patients/Family Members was the company analysis of future projection for senior patients and family members that they wanted the inexpensive cost of care and the senior patients also needed both physical and mental rehabilitation. Once they recovered, they wanted to leave the institution and requested continuing senior care service at their home to make them more satisfied. The SWOT of Staff Members in the institution was the initial company situation analysis related to the dedicated staff members who were exhausted of work repetition. Their only opportunities were the training of senior care knowledge and technique. In the worst case, the good employees resigned from the institution to work in other nursing homes that provided the higher compensation and fringe benefit. The SOAR of Staff Members was the company situation analysis related to the good performance staff members expecting an additional compensation. At the same time, the staff members expected the company to provide more motivation and lessen their work repetition. The staff members also expected to receive more fringe benefits and other monetary rewards, and the good performance employees wanted to be promoted to the higher position.

Theories Related to the Key Variables

Organization System

The organization is the integration of many functions from the human systems to provide a collaborative environment that will help increase the effectiveness and efficiency and presents the system of organization for purposes, structure, relationship, rewards, leadership and helpful mechanism (Weisbord, 1978). In purposes, the organization members clearly understand the organization mission, purpose and goal agreements and the people support the organization purposes.

The structure is about how to allocate tasks, assign works and measure the adequate fit between the purpose and internal structure of organization. The relationships between individuals, units, departments and functions are required to the tasks. The rewards are diagnosed the formal/informal rewards and disciplinary rewards. The leaderships of people in the organization are balanced and help the organization to achieve the planning, controlling, budgeting and information systems.

Organization Development

The organization development is a professional field action and scientific inquiry. The practice of organization development has a wide spectrum of activities. It was the concept of organization development is an effort of organization problem-solving and renewal processes for effective and collaborative management of organization culture. The organization development is a long-term plan process of change to improve the organization problem-solving with a perspective of organization wide plan and system wide process used the assistance of a change agent or catalyst and the theory and technology of applied behavioral science. It is also interdisciplinary in nature and draws on sociology, psychology, motivation, learning and personality (Cummings and Worley, 2005; Cojocaru, 2006).

Action Researcher Organization Development Process

The action research organization development process is a long-range cyclical and self-correcting mechanism of the effectiveness of client system for self-analysis and self-renewal. (Lewin, 1947) As shown in the Figure 2.1, the organization development action research process is a cyclical process of change. The process begins with input or unfreezing when the client and change agent work together with the plan actions. The main elements include a preliminary diagnosis, data gathering, feedback of results and joint action planning. The communication systems are the language system theory. The second step is the transformation or changing phase. The learning process of role analysis is planned and executed the behavioral changes. The feedback in this phase moves via Feedback Loop A and has the effect of altering previous planning for better alignment with change objectives. The third or last stage is the output or results phase. This step includes the actual changes in behavior resulting from the corrective action steps taken following the second stage of transformation. Minor adjustments can be made in the learning activities through Feedback Loop B. The major adjustments and reevaluations return of Feedback Loop C to the organization development process to the first stage of input.

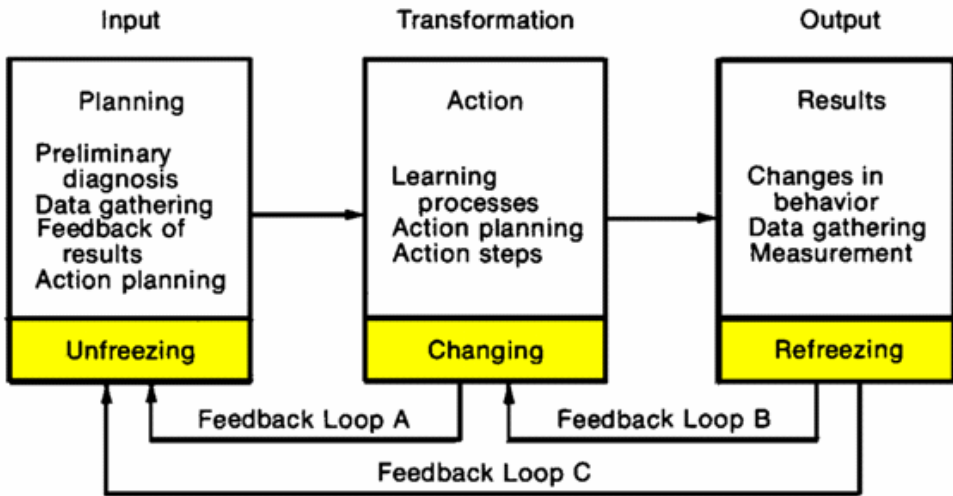


Figure 2.1: Action Research Process of Organization Development

Source: Wikipedia Online Encyclopedia (www.wikipedia.org)

Review of Literature on Related Topics

Appreciative Inquiry (AI)

AI is the study and exploration of what gives life to human systems when they function at their best. This approach to personal change and organization change is based on the assumption that questions and dialogs about strengths, successes, values, hopes and dreams are themselves transformational (Cooperider and Srivastva, 1980). The results are more than rendering the positive problem-solving since the inspiration and appreciation of individual are implemented. Practicing AI is based on the eight principles of Constructionist, Simultaneity, Poetic, Anticipatory, Positive, Wholeness, Enactment and Free Choice. AI utilizes the Four-D cycle processes on the discover to identify and appreciate what is, dream to envision of process that works in the future, design to plan and prioritize process that works well, and destiny or deliver to implement or execute of the proposed design. The concept of building the organization of what works, rather than trying to fix what does not. AI is focused on how to create more the exceptional performance occurring when the core strengths are aligned. It opens the doors to the new opportunities or possibilities. AI has been used extensively to foster change in the business and health care systems (Sandu, Ciuchi, 2010). The main criticism of AI is that it is not enough to implement agreed actions, but to incorporate time and opportunity for reflection, evaluation and celebration. Sharing what has

changed, what is going to be better and/or what could do more to reach our desire future. All these factors help sustain the energy for positive change. The critical step is how to have a continuous improvement cycle of AI.

Customer Satisfaction and Engagement

The customer satisfaction is the feeling of contentment when the customers have achieved their needs or desires. The measurement of customer satisfaction occurred in the early 1980s and was involved assessing the driver of satisfaction. Early works done by Oliver (1980), Churchill and Surprenant (1982), and Bearden and Teel (1983) tended to focus on the operationalization of customer satisfaction. By mid 1980s, the focus of both applied and academic research had shifted to construct refinement and implementation of strategies designed to optimize customer satisfaction according to Zeithaml, Berry and Parasuraman (1996). Rigorous scientific inquiry and the development of a general service quality theory can be attributed to Parasuraman, Berry and Zeithaml (1985). The customer satisfaction, service quality and customer expectations represent one of the first attempts to operationalize satisfaction in the theoretical context. Parasuraman, Berry and Zeithaml proposed the ratio of perceived performance to customer expectation was a key to maintaining satisfied customers. No business or individual can succeed without developing the customer satisfaction management as known as the customer relationship management that leads to the customer loyalty. The cost of lost customers can be many times the simple reduction of their sales and the ripple effects expand the loss dramatically. The displeased customers who do not complain are the most serious ones than ones that complain. In contradiction, the customer dissatisfaction or complaint is also a new opportunity to cement relationship and create new customer royalty because the business is realized the feeling of the customers and feels their pains.

For the interpretation of senior patient care, the customers measure the exchange of values that moves them toward deeper relationships and increased loyalty. Advertising is a less-cost effective way of getting new customers than a word-of-mouth recommendation from the existing satisfied customers. The main criticism of the customer satisfaction is that it is just simply the foundation and the minimum requirement for a continuing relationship with customers. Once the business has fulfilled the customer satisfaction, it can move forward to the next level of the customer engagement that extends beyond the satisfaction. Customer Engagement is an engagement of customers with a company or brand. The engagement leads by either customer or company. The engagement places on the longer term and more strategic context, aiming to encourage the customer loyalty and advocacy through word-of-mouth. The relationship between customer satisfaction and customer engagement is that, in most cases, the customer satisfaction is a necessary but not sufficient condition for customer engagement. Therefore, the customer

satisfaction and customer engagement are different but they are related to each other since the customer engagement is also derived from the customer satisfaction. The customer satisfaction is directed specifically at service attributes and may be a relatively more dynamic measure. In contrast, the customer engagement is broader and more static attitude toward loyalty with both rational and emotional elements. The criticism is that it is subjective on measuring both customer satisfaction and engagement.

Conceptual Framework and Research Methodology

Conceptual Framework

Based on the theoretical framework philosophy of quality senior patient care, the body is related to physical strength of senior patients, the mind is related to the mentally strength of positive thinking as well as sustainable satisfaction/engagement and the soul and spirit are related to the spiritual development of unworried life, unattached to substances and living good life. These three aspects of body, mind and soul/spirit are interrelated the total human system as the whole system and developed to the conceptual framework. The development of physical, mental and soul/spirit are developed all together and have a substantial influence on the quality of senior care services. The conceptual framework as shown in Figure 4.1 had two layers. The inner layer had four dependent variables (DV) of satisfaction and engagement of senior patients/family members (DV1,2), satisfaction staff members (medical doctors, nurses, caretakers and administrators) (DV3), and sustainability of institution (DV4). The outer layer had four independent variables (IV) of patient care (IV1), personal relations development (IV2), staff work commitment (IV3), and management & financial support (IV4).

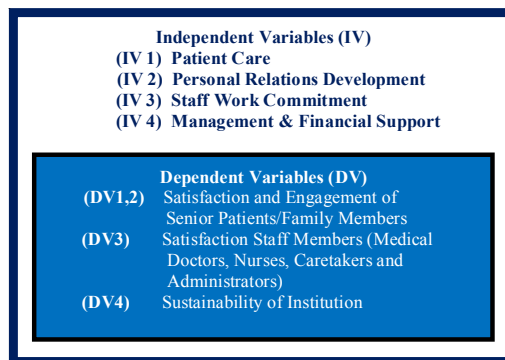


Figure 4.1: Conceptual Framework

Source: Created by the researcher for this paper

Research Methodology

Qualitative Methodology.

The tools of qualitative methodology were the observation of researcher guided by the inspection list. The researcher ensured that the senior patients/family members and staff members directly involved in the qualitative data in the appreciative inquiry-based focus group discussion by asking the open-end questions. The appreciative inquiry questions were the value, peak and miracle questions. The value questions brought the valuable answers from the respondents, the peak questions were the storytelling method of the most impressive events and the miracle questions aimed the future expectation. All research respondents were encouraged to initiate their ideas for productive contribution to the institution. Later, the researcher proposed to the management for the quality improvement.

Quantitative Methodology.

The quantitative measurement was from the surveys distributed to the senior patients/family members and staff members to measure their satisfaction before and after the appreciative inquiry-based organization development intervention. The anticipation of response rate was 100% from the total surveys distributed.

Triangulation.

In triangulation, the researcher used both qualitative and quantitative results. If the conclusions of both methods were in the same trend, the study was consistent and valid. Both qualitative and quantitative data analysis outcomes were consistent; the data-gathering conducted was valid and reliable.

Bottom-up Research Method.

The research started from the bottom level of the institution from the individual level of senior patients, family members and staff members, group level to institution level. Later, the researcher gathered the data, provided the useful suggestions and proposed the management level. The data collected from the individual level of the staff members, including medical doctors, nurses, caretakers and administrators were useful for the institution development.

Organization Development Intervention (ODI)

The focus group discussion of quality patient care and staff work commitment was conducted by the researcher. The researcher suggested the two-way communication process by encouraging the individual staff members to initiate and suggesting their ideas to their direct supervisor because it is impossible to gather all staff members at one time and have a large focus group discussion. Additionally, the staff members had to provide the attentive care to the senior patients during working hours and it was an unproductive time management to gather a

large number of participants in the focus group discussion. The direct suggestions from the individual staff members to their direct supervisor created the leadership skills of the supervisor. Later, the supervisor would summarize their ideas to the director of each department. This process developed the sense of belonging and improved a good communication and relationship among staff members. The researcher also utilized the same method to the senior patients and family members to develop the communication skills and relationships improvement among themselves. The actual focus group discussion was organized by the researcher in the recreation room with the director of caretaker and the representatives of senior patients/family members. During the focus group discussion session, the researcher asked the appreciative inquiry-based questions. At the same time, the researcher transferred the appreciative inquiry approach knowledge to the staff members as well as the family members when they conducted their own preliminary focus group discussion among themselves before they sent the representative of each group to summarize their ideas to the team leader (supervisor/department director). With the implementation of two-way communication approach and appreciative inquiry method knowledge transfer increased the positive contributions including efficiency and effectiveness. The appreciative inquiry-based did not disregard the problems but it turned the current identified problems into challenges, the current identified strengths into sustainable competitive advantages/competencies, the current identified opportunities into new aspirations, and the current identified weaknesses/threats into new potential opportunities.

Tools for Analysis

The qualitative data-gathering technique was the bottom-up approach starting from individual, group to organization and the research instruments were focus group discussions utilizing appreciative inquiry-based protocol of value, peak and miracle, and, additionally, the researcher proposed and consulted the Managing Director. During observation, the researcher used the inspection checklist to support the data-gathering. Lastly, the questionnaires of senior patients/family members and staff members were used in the quantitative data-gathering.

Research Findings, Conclusion and Recommendations

Pre-ODI Data

According to the Summary of Actual Pre-ODI Observation Inspection and Actual Pre-ODI Focus Group Discussion of Senior Patients/Family Members, the most important aspect of each focus group discussion and observation utilizing the inspection checklist was the quality care service. The senior patients and family members needed the quality care services in the rehabilitation of senior

patients who were discharged from the hospital and later moved to have a continuing care at Sukavet Nursing Home. The development of physical rehabilitation was on-time medication, physical therapy and acute care in case of emergency. They also would like the senior patients to live comfortable. The good point was that the staff members were trained for the ethical senior care procedure. Therefore, they did not get angry but forgave the senior patients who had the most aggressive behaviors. All senior patients and family member were satisfied with the life-supported equipment and acute care in case of emergency. In case of acute illness, the Sukavet Nursing Home ambulance transported the senior patients to the nearest hospital or other hospitals that the senior patients used to have the treatment. As the researcher inquired from the senior patients who stayed in the VIP rooms, they were very satisfied with their VIP rooms since the rooms were for the private use. However, the VIP rooms needed the improvement of furniture and room colors that were old painted. Due to the aging facility, the building also needed the improvement.

The researcher found many things to be improved or developed. From the observation of researcher, some family members had the financial problems that needed to arrange with the administrative staff members. Sometimes, there were some disputes of monthly payment(s) or additional care expenses. Besides, the staff members infrequently informed the rehabilitation progress of senior patients to the family members. The physical therapy was not enough for physical rehabilitation. Most activities were only watching the television because there was no recreation room. When the visitors or family members came to visit the senior patients, there was no living room for the senior patients and family members to meet in the assigned area. Additionally, the garden outside the building was not maintained or organized. Therefore, there was no outside activity. Furthermore, the prospective customers who visited the institution did not have the formal reception area. In the patient care service, there was no information system development since the staff members used the paper-based information system management. At the same time, the promotion of the institution was only from the paper brochure. The researcher had a focus group discussion with the financial officer and found that the institution had a problem of cash collection from monthly senior patient care service invoices. This problem led to the insufficient cash flows or illiquidity of the institution. In the observation, the financial officer also informed the managing director many times about the overdue customer invoices. In addition, the researcher had a focus group discussion with the managing director.

The managing director wanted to provide the high quality senior care service, need the good financial sustainability and create the business sustainability of the institution. The researcher discussed with the managing director that the researcher previously formed the focus group discussions with the senior patients, family members and staff members. The senior patients and family members requested

the development of the recreation room, living room for senior patients and family member meeting, inside senior patient activities, outside senior patient activities, and the reception room for the visitors and the family members to meet and discuss with the financial officer or administrator. From the data-gathering of the focus group discussion between the researcher and staff members, they wanted to create a good reputation of the institution. At the same time, they want the job security, effective job evaluation and good compensation.

Post-ODI Data

The senior patient care was improved when the staff members contacted the family members and provided the current health progress report of senior patients in the institution. The staff members started using the computerized system of medical information management system to create effectiveness and efficiency data management system. The ambulance(s) of the institution was always ready for 24 hours in case of emergency. The quality senior patient care was not only the physical rehabilitation but also improved the mental rehabilitation. The physical rehabilitation schedule was created to provide an equal chance of all senior patients to improve their physical strength. The mental rehabilitation was the spiritual and soul one of senior patients improved by praying and meditating in the religious chapel. The caretakers rotated taking care of each senior patient to increase their satisfaction. Sometimes, the caretakers or family members took the senior patients to walk or wheelchair in the garden of the institution. As suggested by the researcher, the managing director built the recreational room for senior patients to do the supplementary indoor activities because they would have more opportunities to exercise besides the regular physical therapy.

The family members requested the arrangement of living room for the family members and senior patients to privately use when they visited the senior patients at the institution. The nutrition enrichment was fully implemented to properly prepare the solid or liquid food of each senior patient's illness and symptoms, and the nutritionists were regularly sent to attend the seminars organized by the Ministry of Public Health. The family members could bring the supplementary food and pass to the nurses to give to the senior patients. The staff members organized the senior patient care seminar to the family members who were interested to attend. Additionally, the staff members prepared the brochures or CDs of senior care knowledge. The family members requested the reception room when the visitors or family members came to meet with the financial officers or administrators. For the sustainable business development promotion and advertisement, the institution website of www.sukavet.com was created and launched in February 2010, finishing at the same time of the completion of reception room. Since the launch of the website, many visitors have been visited the website and are interested in using the senior patient care service of the institution. In addition, the

outside activities as suggested by the researcher were in process of implementation because there were many factors taken into consideration of the cost calculation and the place(s) that would match with the preference of both senior patients and family members.

The staff members agreed with the suggestions of researcher because they also had the common vision to see the sustainable growth in reputation of the institution. Since the researcher provided the appreciative inquiry-based organization development interventions, the staff members dedicated their efforts in patient care tasks and were more encouraged to achieve the best senior patient care and ethical practices. However, the growth of the institution depended on the management policy and financial strength. The medical records were gradually changed from the paper-based to the electronic database. The new implementation of the medical records yielded the most benefits to the senior patients and family members for the high quality care and, at the same time, the staff members could expedite the work flows processes. From the job commitment analysis, the staff members wanted the job security, fair job evaluation and good compensation. The non-monetary rewards were implemented as well as the special monetary rewards. Lastly, the staff members wanted to have a good career path and they were encouraged to suggest their ideas to their direct supervisor.

The relationships development of senior patients, family members and staff members developed a good relationship by having more verbal and non-verbal communications. By calling the senior patients and family members as their direct family members, the staff members improved their good relationships development with the senior patients as well as the family members. However, there were some obstacles of relationships between the family members and staff members about the overdue invoices. The researcher suggested the family members not to avoid the problems but meet with the financial officer to solve the problem together. Therefore, the family members were encouraged to regularly visit the senior patients and could do the activities together on the weekend.

The institution sustainability was the management and financial support. The institution had a financial problem that some family members were unable to pay their monthly invoices. The researcher suggested the financial officer to implement the short-term and long-term solutions. The family members who had financial problems in the short-term period could discuss the new payment plan while the family members having a long-term financial problem were suggested to consult with the financial institution(s) to obtain a personal loan or life insurance saving. These overdue invoices led to the unstable cash flows of the institution. The financial officer was suggested to prepare the statement of actual cash flows and cash flows forecast to summarize the current cash flows situation, and the managing director was encouraged to regularly review these statements. The cash reserve of at least three months was in process of implementation since the managing director needed to propose to the shareholders.

With the proposed facility implementation of the interior and exterior building improvement, recreation room, living room, outside activities and reception room, the institution needed a substantial amount of capital investment. In the first place, the researcher suggested the institution to obtain a capital loan from the financial institution(s). After the researcher proposed this idea to the managing director, the managing director later proposed to the shareholders. The result was that the shareholders did not have a policy to borrow the capital from the financial institution(s) because there were many risks of high interest rates, default payment leading to the business repossession and ultimate impacts of senior patients in the institution. The shareholders approved using their dividends to complete the proposed facility implementation without borrowing money from the bank(s). Currently, the improvement of interior and exterior building and the creation of recreation room, living room and reception room had been finished. These rooms are currently used by the senior patients, family members and staff members. As proposed by the researcher, the managing director agreed to offer more job security of social security and retirement fund as well as the effective and fair job evaluation and compensation. The reputation of the institution was improved by the facility improvement and the institution website creation. The reputation of the institution depended on the staff members and they were cooperating to achieve the good reputation of high quality senior health care and sustainable growth of the institution. The management also supported the two-way communication management approach by encouraging the staff members to providing their productive suggestions. With the financial constraints, the organization development interventions could be done immediately if the interventions were not required the capital investments. As suggested by the researcher, the market share expansion of home/hospital care, maximized utilization of ambulance(s) and spare senior patient beds were immediately approved since they did not require any initial capital investment.

Research Hypotheses

The Sustainability of Senior Patient Care.

The researcher accepted “H1: There is a difference of the satisfaction and engagement of senior patients.” because there was a significant difference between pre and post-organization development intervention in the marital status of senior patients since both qualitative and quantitative data analysis showed a positive increase of the difference between pre and post-organization development intervention with Appreciative Inquiry-based.

The Sustainability of Institution.

The researcher accepted “H1: There is a sustainable business development of the institution.” since there was a business sustainability between pre and post-organization development intervention of the staff members since the qualitative

and quantitative data analysis showed a positive increase of the difference between pre and post-organization development intervention with Appreciative Inquiry-based.

Recommendations

To maintain the good cash flows position, Sukavet Nursing Home was recommended to request for the credit line from the financial institution(s) to use as the cash reserved and the contingency financial backup. Sukavet Nursing Home management was recommended to have a future in-depth ODI study for the current and prospect staff members to continuously motivate the vision of “Working Everyday is Like Doing Daily Good Merit.”

The continued ODI of appreciative inquiry method was recommended because this method was focused on increasing the positive factors including efficiency and effectiveness. Due to the physical and aging limitation of senior patients to answer the quantitative data collections of questionnaire; the qualitative ODI analysis of observation with inspection list and focus group discussion were more important and useful to the sustainable business development.

The researcher recommended the future ODI of expanding their senior patient care services to the off-facility care that included providing care at patient’s residence and major hospitals. The senior patients admitted in the institution (in-facility senior patients) would be firstly prioritized or reserved for the most needed in terms of critical illness senior patients. On the other hand, the institution could generate additional revenue and profit from care services outside the facility. The researcher also recommended the staff members to continue updating and adding new features of interactive system on the institution website of www.sukavet.com as a part of the future ODI. The future ODI recommendation was the customer-based expansion that institution could expand its market share and develop into the large nursing home.

Implications for Future Research

The researcher recommended the future research to continue the sustainable development research yielding the win/win or win/win-plus benefits not just only for the senior patients and institution, but also for the staff members including the stakeholders in the society. The future students who choose to work on this topic are not only having a chance to apply the study of management and organization development but they are going to make a difference in their every day’s life and the society.

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