

# Organisational Culture in Paediatric Intensive Care Units (PICUs)

## Researchers

Karen Tosh, Centre for Public Policy and Management, University of St Andrews  
Huw Davies, Professor of Health Care Policy & Management, Director of Centre for Public Policy & Management (University of St Andrews), and Associate Director of Social Dimensions of Health Institute (Universities of Dundee and St Andrews).  
Dr Gareth Parry, School of Health and Related Research, University of Sheffield

## Background

Currently there exists considerable variation in care delivery in acute care services across the UK in terms of structures, processes and outcomes. Sophisticated patient case mix adjustment methods for intensive care can account for some of that variation. However, data produced by the Intensive Care National Audit and Research Centre (ICNARC) suggests this is as little as one fifth.

If such sophisticated risk adjustment tools are unable to account for the majority of service variations, it seems increasingly obvious, that other factors are responsible. Organisational culture is thought to be an influencing factor in the quality of health care delivered and performance outcomes. Yet detailed quantitative studies investigating the effects of organisational and managerial factors on patient outcomes in intensive care have been inconclusive.

This study has been exploring the nature of organisational culture using both quantitative and qualitative measures in paediatric intensive care units, to establish whether any relationship with patient outcomes can be identified (i.e. can particular patterns of values and behaviours be identified that have the potential to affect patient care and in turn be beneficial or detrimental to patients outcomes).

The particular area of PICU culture this research is concerned with are the occupational sub-groups that constitute the majority interests in delivering care in PICUs, namely management, medicine and nursing. There is considerable evidence to support the view that these groups have different histories and ideologies. The aim of this research is to identify the contexts/cultures in which those differences may interact positively or negatively in terms of patient outcomes.

The basis on which the data from this study can be linked to patient outcomes is via collaboration with the MRC funded UK Paediatric Intensive Care Outcomes Study (UK PICOS), which set out to assess tools for calculating risk adjusted patient mortality rates in order to enable fair comparisons of outcome across units.

## Aims of Study

1. To investigate the nature of organisational culture in Paediatric Intensive Care, specifically the interactions that occur around issues of patient care between

professional sub cultures

2. To attempt to identify the contextual/cultural factors influencing cross occupational relations and what (if any) distinct patterns of values and behaviours emerge in relation to those factors.

3. To establish whether there is any relationship, beneficial or detrimental between contextual/cultural factors, emergent patterns and in turn patient outcomes (as represented by the Standardised Mortality Ratings provided by UK PICOS).

### **Methods of Working**

There are two parts to the research. The first involved staff from 15 PICUs completing a questionnaire called the Competing Values Framework (CVF) this provided data about prevailing cultural patterns as perceived by the doctors, nurses and managers working there. The second part focused on 3 of the original 15 units for in depth case studies. These were selected based on a combination of the CVF results and standardised mortality scores provided by UKPICOS.

The case studies involved on site non-participant observation of staff interactions and in-depth interviews. Data collected focused on issues/processes common to all PICUs namely communication structures, procedural etiquette, response to organisational crisis (e.g. bed/staff shortages), and perceptions of cross-occupational support.

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For more information about this project contact [Karen Tosh](#)