

## STAVOVI ZAPOSLENIH O NAČINU UPRAVLJANJA I ORGANIZOVANJA PROCESA RADA U ZAVODU ZA ANTIRABIČNU ZAŠTITU - PASTEROV ZAVOD, NOVI SAD

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### SAŽETAK

**Uvod/Cilj:** Menadžment u zdravstvu igra ključnu ulogu u unapređenju poslovanja zdravstvenih ustanova, integraciji tehnologije i razvoju ljudskih resursa. Cilj našeg istraživanja je bio da se ispituju stavovi zaposlenih u Zavodu za antirabičnu zaštitu - Pasterov zavod, Novi Sad (ZARZ Pasterov zavod, Novi Sad) o samoj organizaciji, organizacionoj klimi (tj. atmosferi i odnosima koji vladaju u organizaciji među zaposlenima, prvenstveno između rukovodilaca i ostalih članova kolektiva) i rukovođenju.

**Metode:** Sprovedeno je istraživanje među 19 zaposlenih, na platformi *Google form*, koristeći modifikovanu verziju upitnika *The Work Design Questionnaire* koji sadrži 8 demografskih pitanja o ispitaniku i 26 pitanja (tvrdnji) koja se odnose na predmet istraživanja. Respondenti, koji su činili 86,4% od ukupno 22 zaposlena, iskazali su nivo saglasnosti sa tvrdnjom koristeći skalu sa ocenama od 1 do 5.

**Rezultati:** Većina ispitanika smatra da su funkcije, ciljevi i odgovornosti unutar Pasterovog zavoda-Novog Sada, jasno definisani. Stav zaposlenih je da postoji prostor za povećanje učešća zaposlenih u donošenju odluka.

**Zaključak:** Neophodno je uvođenje participativnijeg pristupa u procesu donošenja odluka u ustanovi i implementacija mera usmerenih ka maksimalnom korišćenju sposobnosti zaposlenih, unapređenju komunikacije i informisanja zaposlenih, uključivanje zaposlenih u proces odlučivanja, jačanje međusobnog poverenja i razvoju timskog duha kako bi se unapredila efikasnost ustanove i postiglo održivo poboljšanje organizacione klime i rada rukovodstva u Pasterovom zavodu-Novog Sada.

**Ključne reči:** upravljanje u zdravstvu, organizaciona struktura, angažovanost zaposlenih, organizaciona klima

### Uvod

Menadžment u zdravstvu predstavlja instrument za unapređenje poslovanja zdravstvenih ustanova i značajan je faktor za podsticaj i primenu tehnologije, znanja i veština. Zadatak zdravstvenog menadžmenta je razumevanje zahteva i potreba i praćenje teorijskih i praktičnih trendova u ovoj oblasti, kao i pronalaženje modela za implementaciju dostignuća iz oblasti menadžmenta u delatnost zdravstvenih ustanova (1).

Organizovanje je aktivnost menadžmenta koja obezbeđuje skladno povezivanje ljudi koji pribavl-

jaju, raspoređuju i koriste sredstva za rad i materijal u cilju uspešnog poslovanja preduzeća (2). Zasniva se na podeli rada između učesnika u procesu poslovanja sa ciljem stvaranja organizacione strukture koja obuhvata aktivnosti i odnose zaposlenih i upravlja ljudskim resursima u cilju uspešnog poslovanja na duže staze (3).

Sve organizacije obuhvataju tri ključna elementa, i to: ciljeve, strukturu i ljude (4). Kada se analizira celokupna problematika organizacije, može se zaključiti da ona predstavlja namerno

## EMPLOYEES' VIEWS ON THE WAYS OF MANAGING AND ORGANIZING WORK PROCESSES IN THE INSTITUTE FOR ANTI-RABIES PROTECTION - THE PASTEUR INSTITUTE, NOVI SAD

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### SUMMARY

**Introduction/Aim:** Management in healthcare plays a pivotal role in enhancing the operations of healthcare institutions, integrating technology, and developing human resources. The aim of our research was to examine the attitudes of employees in the Institute for anti-rabies protection - The Pasteur Institute, Novi Sad towards the organization itself, organizational climate (atmosphere and relations between employees, primarily managers and other members of the collective) and management.

**Methods:** A survey was conducted among 19 employees, using the GoogleForms platform, employing a modified version of The Work Design Questionnaire, which includes 8 demographic questions about the respondent and 26 questions related to the research topic. Respondents, constituting 86.4% of the total of 22 employees, expressed their agreement with the statements using a scale with grades from 1 to 5.

**Results:** The majority of respondents believe that functions, goals, and responsibilities within the Pasteur Institute, Novi Sad are clearly defined. The position of the employees is that there is room for increasing the participation of employees in decision-making.

**Conclusion:** It is necessary to introduce a more participatory approach in the decision-making process in the institution and implement measures aimed at the maximum use of employees' abilities, improvement of communication and information of employees, involvement of employees in the decision-making process, strengthening of mutual trust and development of team spirit in order to improve the efficiency of the institution and achieve sustainable improvement of organizational climate and leadership work in the Pasteur Institute, Novi Sad.

**Keywords:** Healthcare Management; Organizational Structure; Employee Engagement; Organizational Climate

### Introduction

Management in healthcare represents an instrument for improving the business operations of health institutions and it is an important factor for the encouragement and application of technology, knowledge and skills. The task of health management is to understand the requirements and needs and to follow theoretical and practical trends in this field, as well as to find models for the

implementation of achievements from the field of management in the field of health institutions (1).

Organization is the management activity that ensures the harmonious connection of people who acquire, distribute and use resources and materials, which is aimed at successful business operations (2). It is based on the division of labor between the participants in the business process

konstruisani i veštački dizajniran entitet. Osnovne razlike između savremenih i tradicionalnih organizacija se mogu sagledati na osnovu više postulata, u zavisnosti koliki je fokus na podeli rada, centralizaciji i rasponu kontrole. Sam izbor organizacionog modela nije jednostavan i na njega utiču mnogi faktori poput veličine organizacije, delatnosti kojom se preduzeće bavi, kao i geografska rasprostranjenost preduzeća (5).

U Pasterovom zavodu zastupljen je participativni stil upravljanja. Ovaj stil primenjuju šefovi službi koji prikupljaju ideje od zaposlenih u svojim službama. S druge strane, zaposleni učestvuju u donošenju odluka, ali samo delimično, u granicama koje postavlja lider. Pored participativnog stila upravljanja, Pasterov zavod odlikuje linijska organizaciona struktura, koja potpada pod tradicionalne modele organizacionih struktura.

Takva organizaciona struktura predstavlja bazu za sve ostale modele koji svoje funkcionisanje zasnivaju na hijerarhiji odnosa i odgovornosti položaja unutar organizacije. Osnovu ovog modela čini hijerarhijski odnos svake pozicije u organizaciji, gde je svaki hijerarhijski nivo pod kontrolom višeg. Ova karakteristika pojednostavljuje komunikacione linije i lanac upravljanja, jer su za sve pozicije jasno određene odgovornosti. Ipak, ne postoji detaljna podela rada pa jedna osoba može raditi više različitih poslova. U skladu s time, za poslove izvan ovlašćenja pojedinca je odgovoran nadređeni na istoj liniji rukovođenja.

Utvrđivanje stila upravljanja, kao i adekvatnost odnosa rukovodstva sa zaposlenima u zdravstvenim ustanovama je od strateške važnosti za poslovanje same ustanove (5). Funkcija organizovanja je važna za svako preduzeće i ona se ne završava definisanjem organizacione strukture, već je neophodna tokom čitavog postojanja preduzeća zbog dinamike savremenog poslovanja.

Cilj našeg istraživanja je bio da se ispituju stavovi zaposlenih u Zavodu za antirabičnu zaštitu - Pasterov zavod, Novi Sad (ZARZ Pasterov zavod, Novi Sad) o samoj organizaciji, organizacionoj klimi (tj. atmosferi i odnosima koji vladaju u organizaciji među zaposlenima, prvenstveno između rukovodioca i ostalih članova kolektiva) i rukovođenju.

## Metode

Istraživanje je sprovedeno u periodu 21–28.03.2023. godine u vidu anonimne ankete na platformi *Google form*, gde je zaposlenima data

mogućnost da se izjasne odgovaranjem na pitanja na temu samoprocene o načinu upravljanja i organizovanja u zdravstvenoj ustanovi, u vidu deskriptivne studije. Anketni upitnik je modifikovana verzija upitnika *The Work Design Questionnaire* (6) i sadrži 8 pitanja koja se odnose na osnovne demografske podatke o zaposlenom i 26 pitanja (tvrdnji) koja se odnose na predmet istraživanja (Prilog 1). Pored svake stavke nalazi se skala sa ocenama (Likertova skala) od 1 do 5, koje treba zaokružiti u skladu sa stepenom u kojem se ispitanik slaže sa navedenim tvrdnjama: 1 – uopšte se ne slažem; 2 – ne slažem se; 3 – niti se slažem, niti se ne slažem; 4 – slažem se; 5 – potpuno se slažem.

Istraživanje je sprovedeno u zdravstvenoj ustanovi kombinovane zdravstvene zaštite ZARZ Pasterov zavod, Novi Sad. Uzorak se sastojao od 19 ispitanika, što je predstavljalo reprezentativan uzorak od ukupno 22 zaposlena (19/22; 86,4%). Upitnici su podeljeni među zaposlenim radnicima ustanove i u cilju dobijanja što objektivnijih rezultata, istraživanje je obuhvatilo zaposlene iz različitih sektora, odnosno radnih jedinica i različitih nivoa organizacione strukture od rukovodioca do izvršioca. Odgovarali su na pitanja zdravstveni radnici svih profila stručnosti raznih medicinskih specijalnosti (lekari-specijalisti, na specijalizaciji, lekari opšte medicine, viši medicinski kadrovi, srednji medicinski kadrovi), zaposleni iz upravljačkog menadžmenta, tehničko osoblje ZARZ Pasterov zavod, Novi Sad i ostali koji obavljaju poslove koji nisu iz oblasti medicine. Izbor anketiranih radnika nije formiran prema određenom kriterijumu, već je istraživanje sprovedeno po principu slučajnog uzorka.

Kompletna statistička analiza podataka je urađena u programu za statističku analizu *GraphPad Prism* verzija 8.0.1 (*GraphPad Software Inc., La Jolla, Kalifornija, Sjedinjene Američke Države*). Sve atributivne varijable su predstavljene u obliku frekvencija pojedinih kategorija, a statistička značajnost učestalosti između pojedinih kategorija je testirana kombinovanim  $\chi^2$  testom sa post hoc analizom. *Yates*-ova korekcija je korišćena uslučaju da je zapojedinu varijablu zabeleženo 5 ili manje unosa.

Ovo istraživanje je izvršeno u skladu sa Helsinškom deklaracijom i odobreno od strane Etičkog odbora ZARZ Pasterov zavod Novi Sad (odobrenje broj 10-110/1 od 17.03.2023. godine).

with the aim of creating an organizational structure, which includes activities and relations between employees and manages human resources aimed at successful business operations on a long-term basis (3).

All organizations include three key elements: goals, structure and people (4). When the issue of organization is analyzed as a whole, it can be concluded that it represents a deliberately constructed and artificially designed entity. The basic differences between modern and traditional organizations can be perceived based on several postulates, depending on how much they focus on division of labor, centralization and span of control. The choice of the organizational model itself is not simple and it is influenced by numerous factors such as the size of the organization, the activities it is engaged in, as well as the geographical span of the organization (5).

The participatory management style is present in the Pasteur Institute. This style is applied by heads of departments who collect ideas from employees in their departments. On the other hand, employees participate in decision-making, but only partially, within the limits set by the leader. In addition to the participatory style of management, the linear organizational structure is characteristic of the Pasteur Institute, and it falls under the traditional models of organizational structures.

Such an organizational structure is the basis for all other models that base their operations on the hierarchy of relationships and responsibilities of positions within that organization. The basis of this model is the hierarchical relationship of each position within the organization, where each hierarchical level is under the control of a higher one. This characteristic facilitates communication lines and the chain of management, because all positions have clearly defined responsibilities. However, there is no detailed division of labor, and therefore, one person can do several different jobs. Accordingly, the superior on the same line of management is responsible for tasks beyond the authority of an individual.

Determining the management style, as well as the adequacy of relations between management and employees in healthcare institutions is of strategic importance for the operations of the institution itself (5). The organizing function is important for every company and it does not end

with the definition of organizational structure, but it is necessary throughout the entire existence of the company due to the dynamics of modern business.

The aim of our study was to examine the attitudes of employees at the Institute for Anti-Rabies Protection – Pasteur Institute, Novi Sad towards the organization itself, organizational climate (atmosphere and relations that prevail in the organization among employees, primarily between managers and other members of the collective) and management.

## Methods

The research was conducted as a descriptive study in the period March 21<sup>st</sup> - March 28<sup>th</sup>, 2023 using the anonymous survey on the platform Google form, where the employees were given the opportunity to answer self-assessment questions about management and organization in the healthcare institution. The survey questionnaire is a modified version of the questionnaire The Work Design Questionnaire (6) and it includes 8 questions related to the basic demographic data about the employee and 26 questions (statements) related to the subject of the study (Appendix 1). Next to each item there is a scale with marks (Likert scale) from 1 to 5, which should be circled according to the degree to which the respondent agrees with the given statements: 1 – Strongly disagree; 2 – Disagree; 3 – Neither agree nor disagree; 4 – Agree; 5 – Strongly agree.

The study was conducted in the health institution of combined healthcare, the Pasteur Institute in Novi Sad. Of the total of 22 employees, the sample included 19 respondents, which was a representative sample (19/22; 82.4%). The questionnaires were handed out among the employees of the institution and in order to obtain as objective results as possible, the study included different sectors, that is, work units and different levels of organizational structure, from managers to employees. Health workers of all profiles belonging to different medical specialties (doctors-specialists, doing specialization, general practitioners, medical staff who graduated from vocational academies, and medical staff with secondary education), employees from the management sector, technical staff from the Pasteur Institute, Novi Sad and other non-medical staff answered the questions. The selection of

## Rezultati

Većinu ispitanika su činile osobe ženskog pola (13/19; 68,4%). Ipak, statistički značajna razlika u učestalosti ženskog naspram muškog pola nije uočena ( $\chi^2(1) = 1,30$ ;  $p > 0,05$ ). Najviše ispitanika je pripadalo starosnim kategorijama 28-37 godina (7/19; 36,8%) i 38-47 godina (7/19; 36,8%). Uočena je statistički značajna razlika u učestalosti starosnih kategorija ( $\chi^2(4) = 11,3$ ;  $p < 0,05$ ).

Prosečna dužina radnog staža zaposlenih je bila 16,2 godina (95%CI: 14,8-17,6 godina). Najviše zaposlenih je imalo dužinu radnog staža od 11 do 15 godina (6/19; 31,6%) i 6-10 godina (5/19; 26,32%). Iako nije uočena značajna razlika u dužini radnog staža među zaposlenima ( $\chi^2(5) = 10,1$ ;  $p > 0,05$ ).

Najviše zaposlenih je imaloo obrazovanje na nivou srednje škole (7/19; 36,8%) i visoke škole (6/19; 31,6%), dok su prirodne nauke bile najučestalija klasifikacija (10/19; 52,6%). Većina ispitanika (11/19; 57,9%) se izjasnila da je tokom rada u ZARZ Pasterov zavod, Novi Sad napredovala. Nije uočena značajna razlika u učestalosti pojedinih kategorija nivoa obrazovanja ( $\chi^2(3) = 4,36$ ;  $p > 0,05$ ), pripadnosti kategoriji zanimanja ( $\chi^2(3) = 2,11$ ;  $p > 0,05$ ), kao ni u učestalosti napredovanja među zaposlenima ( $\chi^2(1) = 0,47$ ;  $p > 0,05$ ).

Najviše zaposlenih je bilo u kategoriji radnika (13/19; 68,4%), dok su po 2 ispitanika imala niži, srednji i viši nivo organizacione strukture (2/19; 10,5%). Posledično uočena je značajna razlika u distribuciji zaposlenih prema nivou organizacione strukture ( $\chi^2(3) = 17,4$ ;  $p < 0,05$ ). Svi ispitanici su se izjasnili da rade u državnom tipu organizacije ili javnom preduzeću (19/19; 100%).

Od ukupno 26 tvrdnji ponuđenih u upitniku, značajna razlika u distribuciji odgovora je identifikovana u 16 tvrdnji (Tabela 1). Najučestaliji stavovi zaposlenih kod svih tvrdnji su bili afirmativni (tj. „Potpuno se slažem” i/ili „Slažem se”), osim kod tvrdnje „Imamo poverenja jedni u druge” gde se podjednak broj ispitanika ( $n = 6$ ) izjasnio sa „Slažem se” i „Ne slažem se”.

## Diskusija

Većina zaposlenih je smatrala da u organizaciji ZARZ Pasterov zavod, Novi Sad postoje jasno definisane funkcije zaposlenih. Ta tvrdnja je jedina u kojoj je stav kolektiva izuzetno homogen, te je posledično uočena i visoko značajna razlika u učestalosti stava „Slažem se” i „Potpuno se slažem”

naspram svih drugih opcija. Definisane funkcije zaposlenih je rezultat administrativnog delovanja i može se smatrati faktorom koji na zaposlenog deluje spolja i nije pod uticajem pojedinca, već celokupnog rukovodstva (7). Stavovi zaposlenih ukazuju da je rukovodstvo ZARZ Pasterov zavod, Novi Sad adekvatno izvršilo procenu karakteristika pojedinaca i u skladu s time definisalo njihove funkcije. U prilog poziciji da je rukovodstvo ZARZ Pasterov zavod, Novi Sad izvršilo primerenu procenu zaposlenih je i najučestaliji stav da su njihovi ciljevi konkretni, da imaju efikasan sistem rada, kao i da su im odgovornosti precizno definisane.

S druge strane, nije uočena značajna razlika u učestalosti specifičnog stava po pitanju tvrdnji da se sposobnosti ljudi koriste do maksimuma, kao i da je svaki korak njihovog radnog procesa neophodan. Izostanak homogenosti u stavovima prema ovim tvrdnjama indikuje da postoji prostor za poboljšanje rada rukovodstva u ovim poljima, te da treba razmotriti postojanje potrebe za reevaluacijom korišćenja radnih kapaciteta pojedinaca, kao i identifikacija faza rada koje zaposleni smatraju suvišnim, nakon čega treba izvršiti analizu potrebe za uklanjanjem istih.

Izostanak homogenosti u stavu kolektiva je uočen i kod tvrdnje da svi zaposleni imaju mogućnost da utiču na odluke. Takav nalaz traži pažnju rukovodstva, s obzirom da ograničenje zaposlenih u okvirima odlučivanja dovodi do osećaja nedostatka kontrole nad radnom sredinom, čineći pojedinca osetljivim na stresore koji indukuju sindrom sagorevanja (8,9). Učestvovanje zaposlenih u odlučivanju o pitanjima koja se tiču radnog okruženja igra važnu ulogu u prevenciji sindroma sagorevanja i osećaja opterećenja (8,9). Protektivni efekat sposobnosti odlučivanja o svom radu je jasno prikazan na modelu četiri obrazovne bolnice u Ardabilu (Islamska Republika Iran) (10), gde je uočeno da su medicinske sestre znatno zadovoljnije svojim poslom u poređenju sa administrativnim radnicima. Iako je mentalno opterećenje medicinskih sestara značajno veće u odnosu na administrativne radnike, one takođe ostvaruju i veću kontrolu nad svojim poslom u poređenju sa kohortom iz administracije (10).

Jedno od mogućih rešenja za poboljšanje zahtevne situacije je revizija organizacione strukture ustanove po službama, kao i kontrolisanje da li se održavaju redovni sastanci šefova sa zaposlenima u službama. Uzevši u obzir veličinu kolektiva, postoji

surveyed employees was not based on a certain criterion, however, the study was conducted according to the principle of random sampling.

The complete statistical analysis of data was carried out in the program for statistical analysis GraphPad Prism version 8.0.1 (GraphPad Software Inc., La Jolla, California, the United States of America). All attribute variables were presented in the form of frequencies of certain categories, while the statistical significance of the frequency between certain categories is tested with a  $\chi^2$  test with post hoc analysis. Yates's correction was used when 5 or fewer entries were recorded for a particular variable. The existence of trends between certain groups of variables was examined using the correlation method. The analysis of the frequency of parameters was estimated at the level of statistical significance of  $p < 0.05$ .

This study was conducted in accordance with the Helsinki Declaration and approved by the Ethics Committee of the Pasteur Institute Novi Sad (number 10-110/1, March 17<sup>th</sup>, 2023).

## Results

The majority of respondents were female (13/19; 68.4%). However, statistically significant difference between the frequency of female and male gender was not noticed ( $\chi^2(1) = 1.30$ ;  $p > 0.05$ ). The majority of respondents belonged to the age groups 28-37 years (7/19; 36.8%) and 38-47 years (7/19; 36.84%). Statistically significant difference was observed in the frequency of age groups ( $\chi^2(4) = 11.3$ ;  $p < 0.05$ ).

The average length of service was 16.21 years (95% CI: 14.8 – 17.6 years). The majority of employees worked from 11 to 15 years (6/19; 31.6%) and 6-10 years (5/19; 26.3%). Although there was no significant difference regarding the length of service between the employees ( $\chi^2(5) = 10.12$ ;  $p > 0.05$ ).

The majority of employees had secondary school (7/19; 36.8%) and university education (6/19; 31.6%), while natural sciences were the most frequent classification (10/19; 52.6%). The majority of respondents (11/19; 57.9%) stated that they were promoted during their work at the Pasteur Institute in Novi Sad. There was no significant difference in the frequency of certain categories of educational levels ( $\chi^2(3) = 4.36$ ;  $p > 0.05$ ), category of occupation ( $\chi^2(3) = 2.11$ ;  $p > 0.05$ ), as well as in the frequency of advancement ( $\chi^2(1) = 0.47$ ;  $p > 0.05$ ) among the employees.

The majority of employees were in the category of workers (13/19; 68.4%), whereas 2 respondents had a lower, middle and higher level of organizational structure (2/19; 10.5%). As a result, a significant difference was observed in the distribution of employees according to the level of organizational structure ( $\chi^2(3) = 17.4$ ;  $p < 0.05$ ). All respondents stated that they worked in state organizations or public companies (19/19; 100%).

Out of the total of 26 statements offered in the questionnaire, a significant difference in the distribution of responses was identified in 16 cases (Table 1). The most frequent views of employees for all statements were affirmative (I strongly agree and/or I agree), except for the statement "We trust each other", where the equal number of respondents ( $n = 6$ ) chose "I agree" and "I disagree".

## Discussion

The majority of employees think that employees' functions are clearly defined in the organization of the Pasteur Institute in Novi Sad. This is the only statement in which the attitude of the collective is extremely homogenous, and consequently, a highly significant difference was observed in the frequency of the attitude "I agree" and "I strongly agree" compared to all other options. Defining the employees' function is the result of administrative actions and can be a factor that has influence on the employee from outside and is not under the influence of an individual, but the entire management (7). The employees' views indicate that the management of the Pasteur Institute in Novi Sad made adequate estimates of the individual characteristics and in accordance with that defined their functions. The position that the management of the Pasteur Institute in Novi Sad made adequate estimates of employees is supported by the most frequent views that their goals are concrete, that they have an efficient system of work and that their responsibilities are precisely defined.

On the other hand, there was no significant difference in the frequency of specific attitude regarding the statements that people's abilities are used to the maximum, as well as that every step of their work process is necessary. The absence of homogeneity of attitudes towards these statements indicates that there is room

**Tabela 1.** Najučestaliji stavovi zaposlenih (n=19) o načinu upravljanja i organizovanja procesa rada u Zavodu za antirabičnu zaštitu - Pasterov zavod, Novi Sad

Redni broj	Tvrđnja	Najučestaliji stav	Hi-kvadrat test
1.	Naši radni zadaci su jasno definisani	Slažem se (9/19; 47,4%) Potpuno se slažem (8/19; 42,1%)	$\chi^2(4) = 19,68$ ; $p < 0,001$ **
2.	Naši ciljevi su konkretni	Potpuno se slažem (11/19; 57,9%)	$\chi^2(4) = 12,9$ ; $p < 0,05$ *
3.	Naše odgovornosti su precizno definisane	Potpuno se slažem (11/19; 57,9%)	$\chi^2(4) = 12,9$ ; $p < 0,05$ *
4.	Sposobnosti ljudi se koriste do maksimuma	Potpuno se slažem (7/19; 36,8%) Slažem se (7/19; 36,8%)	$\chi^2(4) = 7,83$ ; $p > 0,05$
5.	Držimo sastanke koji su produktivni	Slažem se (9/19; 47,4%)	$\chi^2(4) = 11,75$ ; $p < 0,05$ *
6.	Zadatke obavljamo u predviđenom roku	Potpuno se slažem (10/19; 52,6%)	$\chi^2(4) = 26,25$ ; $p < 0,05$ *
7.	Imamo efikasan sistem rada	Slažem se (9/19; 47,4%)	$\chi^2(4) = 11,75$ ; $p < 0,05$ *
8.	Svesni smo faza u kojima dolazi do najdužih astoja u radnom procesu	Potpuno se slažem (8/19; 42,1%) Slažem se (8/19; 42,1%)	$\chi^2(4) = 15,25$ ; $p < 0,05$ *
9.	Posao se obavlja logičnim tokom	Slažem se (11/19; 57,9%)	$\chi^2(4) = 21,25$ ; $p < 0,05$ *
10.	Svaki korak našeg radnog procesa je neophodan	Slažem se (8/19; 42,1%)	$\chi^2(4) = 9,25$ ; $p > 0,05$
11.	Ljudi koji rade na međusobno povezanim poslovima smešteni su blizu jedno drugom	Potpuno se slažem (9/19; 47,4%)	$\chi^2(4) = 18,25$ ; $p < 0,05$ *
12.	Sjajno je raditi u firmi kao aktivan član: zato što nam je zabavno	Potpuno se slažem (7/19; 36,8%) Slažem se (7/19; 47,4%)	$\chi^2(4) = 9,75$ ; $p < 0,05$ *
13.	Sjajno je raditi u firmi kao aktivan član: proslavljamo uspehe	Slažem se (10/19; 52,6%)	$\chi^2(4) = 12,58$ ; $p < 0,05$ *
14.	Sjajno je raditi u firmi kao aktivan član: jedni druge tretiramo kao ljude, a ne samo kao brojeke	Slažem se (8/19; 52,63%)	$\chi^2(4) = 8,83$ ; $p > 0,05$ *
15.	Sjajno je raditi u firmi kao aktivan član: svi imaju mogućnost da utiču na odluke	Slažem se (6/19; 31,6%)	$\chi^2(4) = 4,08$ ; $p > 0,05$
16.	Sjajno je raditi u firmi kao aktivan član: imamo pravila ponašanja kojih se pridržavamo	Slažem se (10/19; 52,6%)	$\chi^2(4) = 14,75$ ; $p < 0,05$ *
17.	Sjajno je raditi u firmi kao aktivan član: imamo poverenja jedni u druge	Slažem se (6/19; 31,6%) Ne slažem se (6/19; 31,6%)	$\chi^2(4) = 4,33$ ; $p > 0,05$
18.	Rukovodstvo naše firme: zainteresovano je za ono što mi imamo da kažemo	Slažem se (10/19; 52,6%)	$\chi^2(4) = 22,25$ ; $p < 0,05$ *
19.	Rukovodstvo naše firme: konsultuje nas pre nego što se odluči za neku promenu koja će direktno uticati na naš rad	Potpuno se slažem (7/19; 36,8%) Slažem se (7/19; 36,8%)	$\chi^2(4) = 9,5$ ; $p < 0,05$ *
20.	Rukovodstvo naše firme: vodi računa o tome da nam prepusti i interesantne poslove	Slažem se (7/19; 36,8%)	$\chi^2(4) = 6,83$ ; $p > 0,05$
21.	Rukovodstvo naše firme: podstiče timski rad	Potpuno se slažem (8/19; 42,1%)	$\chi^2(4) = 6,83$ ; $p > 0,05$
22.	Rukovodstvo naše firme: ponaša se kao trener (posvećuje dovoljno vremena da bi nas obučilo za neke ključne operacije)	Potpuno se slažem (7/19; 36,8%)	$\chi^2(4) = 6,52$ ; $p > 0,05$
23.	Rukovodstvo naše firme: brine o našem profesionalnom razvoju u okviru firme	U potpunosti se slažem (10/19; 52,6%)	$\chi^2(4) = 19,25$ ; $p < 0,05$ (*)
24.	Rukovodstvo naše firme: rado sa nama deli važne informacije	U potpunosti se slažem (7/19; 47,4%) Slažem se (7/19; 36,8%)	$\chi^2(4) = 9,08$ ; $p > 0,05$
25.	Rukovodstvo naše firme: osobe su koje poštujem	U potpunosti se slažem (14/19; 73,7%)	$\chi^2(4) = 34,25$ ; $p < 0,05$ (*)

\*razlika u učestalosti stavova je značajna; \*\*razlika u učestalosti stavova je visoko značajna.

**Table 1.** The most frequent views of employees (n = 19) regarding the ways of managing and organizing the work process in the Institute for Anti-Rabies Protection – Pasteur Institute, Novi Sad

Ordinal number	Statement	The most frequent view	chi-squared test
1.	Our work tasks are clearly defined	I agree (9/19; 47.4%) I strongly agree (8/19; 42.1%)	$\chi^2(4) = 19.68$ ; $p < 0.001$ **
2.	Our goals are specific	I strongly agree (11/19; 57.9%)	$\chi^2(4) = 12.9$ ; $p < 0.05$ *
3.	Our responsibilities are clearly defined	I strongly agree (11/19; 57.9%)	$\chi^2(4) = 12.9$ ; $p < 0.05$ *
4.	People's abilities are used to the maximum	I strongly agree (7/19; 36.8%) I agree (7/19; 36.8%)	$\chi^2(4) = 7.83$ ; $p > 0.05$
5.	We hold meetings that are productive	I agree (9/19; 47.4%)	$\chi^2(4) = 11.75$ ; $p < 0.05$ *
6.	We perform tasks within the scheduled deadline	I strongly agree (10/19; 52.6%)	$\chi^2(4) = 26.25$ ; $p < 0.05$ *
7.	We have an efficient system of work	I agree (9/19; 47.37%)	$\chi^2(4) = 11.75$ ; $p < 0.05$ *
8.	We are aware of the phases with the longest delays in the work process	I strongly agree (8/19; 42.1%) I agree (8/19; 42.11%)	$\chi^2(4) = 15.25$ ; $p < 0.05$ *
9.	The work is done in a logical way	I agree (11/19; 57.9%)	$\chi^2(4) = 21.25$ ; $p < 0.05$ *
10.	Each step of our work process is necessary	I agree (8/19; 42.1%)	$\chi^2(4) = 9.25$ ; $p > 0.05$
11.	People working in interrelated jobs are located close to each other	I strongly agree (9/19; 47.4%)	$\chi^2(4) = 18.25$ ; $p < 0.05$ *
12.	It is great to work in the company as an active member: because it is fun	I strongly agree (7/19; 36.8%) I agree (7/19; 47.4%)	$\chi^2(4) = 9.75$ ; $p < 0.05$ *
13.	It is great to work in the company as an active member: we celebrate success	I agree (10/19; 52.6%)	$\chi^2(4) = 12.58$ ; $p < 0.05$ *
14.	It is great to work in the company as an active member: we treat each other as people, not just numbers	I agree (8/19; 52,63%)	$\chi^2(4) = 8,83$ ; $p > 0,05$ *
15.	It is great to work in the company as an active member: everyone is given the opportunity to influence decision	I agree (6/19; 31.6%)	$\chi^2(4) = 4.08$ ; $p > 0.05$
16.	It is great to work in the company as an active member: we have rules that we adhere to	I agree (10/19; 52.6%)	$\chi^2(4) = 14.75$ ; $p < 0.05$ *
17.	It is great to work in the company as an active member: we trust each other	I agree (6/19; 31.6%) I disagree (6/19; 31.6%)	$\chi^2(4) = 4.33$ ; $p > 0.05$
18.	Management of our company: is interested in what we have to say	I agree (10/19; 52.6%)	$\chi^2(4) = 22.25$ ; $p < 0.05$ *
19.	Management of our company: consults us before deciding on a change that will directly affect our work	I strongly agree (7/19; 36.8%) I agree (7/19; 36.8%)	$\chi^2(4) = 9.5$ ; $p < 0.05$ *
20.	Management of our company: takes care to leave interesting jobs to us	I agree (7/19; 36.8%)	$\chi^2(4) = 6.83$ ; $p > 0.05$
21.	Management of our company encourages teamwork	I strongly agree (8/19; 42.1%)	$\chi^2(4) = 6.83$ ; $p > 0.05$
22.	Management of our company: acts like a coach (dedicates enough time to train us for some key operations)	I strongly agree (7/19; 36.8%)	$\chi^2(4) = 6.52$ ; $p > 0.05$
23.	Management of our company: takes care of our professional development within the company	I strongly agree (10/19; 52.6%)	$\chi^2(4) = 19.25$ ; $p < 0.05$ (*)
24.	Management of our company: is happy to share important information with us	I strongly agree (7/19; 47.4%) I agree (7/19; 36.8%)	$\chi^2(4) = 9.08$ ; $p > 0.05$
25.	I respect the management of our company	I strongly agree (14/19; 73.7%)	$\chi^2(4) = 34.25$ ; $p < 0.05$ (*)

\*difference in the frequency of views is significant; \*\*difference in the frequency of views is highly significant.



mogućnost da je problem u komunikaciji i izjašnjava vanju vezan za samo jednu službu, a ne celokupnu organizaciju, te je dalja analiza neophodna radi utvrđivanja koje su prepreke kod pojedinih zaposlenih da iskažu svoje mišljenje zašto smatraju da se njihovo mišljenje ne uvažava u toku odlučivanja.

Uključivanje zdravstvenog osoblja u planiranje i implementaciju inovacija u tehnološkim i drugim organizacionim promenama ustanove je izuzetno važno. Iz perspektive zadovoljstva poslom, informisanje zaposlenih o predstojećim promenama najkorisnije je u ranijim fazama promene. Oni zdravstveni radnici koji su dobili informacije o organizacionim promenama u fazi planiranja promene osećali su se više poštovanim, imali su jači kolegijski kapital, bili su zadovoljniji uticajem na radnom mestu i bili su zadovoljniji svojim menadžerima (11,12).

Analizom rezultata iz oblasti klime u organizaciji većinom odgovora ispitanika utvrđujemo da u organizaciji preovladava podsticajna atmosfera. Ipak, rezultati samoprocene ukazuju da je potrebno raditi na povećanju poverenja među zaposlenima. To se može postići projektovanjem svakog zaposlenog pojedinačno da se razvija u pravcu profesionalca, i da se razvija timski duh u svakoj službi, gde bi zajednički cilj i interes bili glavna preokupacija zaposlenih.

Da bi se poboljšao protok informacija potrebno je uticati na brzinu, kompletnost i jasnoću tokova informacija među zaposlenima, uzevši u obzir veliku mogućnost uticaja komunikacije na organizaciono ponašanje (13).

Globalizacija i napredak u informacionim tehnologijama i komunikacijama postavljaju izazove pred tradicionalne modele centralizovanog upravljanja. Evidentna je potreba za decentralizacijom u upravljanju zdravstvenim uslugama, gde se kao rešenje nudi model holokratije (14).

U kontekstu COVID-19 pandemije, nameće se pitanje o koristima autonomije u upravljanju zdravstvenim sistemima, koje naglašava značaj decentralizacije u rešavanju hitnih situacija. Prednosti primene holokratije u zdravstvenoj ustanovi su višestruke. Holokratija omogućava distribuirano donošenje odluka, omogućavajući zdravstvenim radnicima na različitim nivoima da donesu pravovremene odluke u okviru svojih uloga (14). Ovo može poboljšati odgovor na potrebe pacijenata i poboljšati ukupnu zdravstvenu zaštitu. Fleksibilnost i prilagodljivost holokratije mogu

pomoći zdravstvenim ustanovama da se brzo prilagode situacijama koje se razvijaju, kao što su krize javnog zdravlja ili promene u demografiji pacijenata. Sa jasnim ulogama i odgovornostima, zdravstveni timovi mogu pojednostaviti komunikaciju i koordinaciju, što dovodi do efikasnije nege pacijenata. Naglasak holokratije na stalnom poboljšanju može doprineti unapređenju procesa zdravstvene zaštite (15). Krugovi u holokratiji olakšavaju kolaborativne napore među zdravstvenim timovima. Poboljšana komunikacija i zajedničke odgovornosti mogu podstaći kulturu timskog rada, što dovodi do zdravstvenih ishoda pacijenata (16). Autonomija koju daje holokratija može podstaći zdravstvene radnike da istraže inovativna rešenja za izazove nege pacijenata. Ovo može rezultirati implementacijom novih i efikasnih zdravstvenih usluga.

Pored toga, eksplicitna definicija uloga i odgovornosti holokratije obezbeđuje jasnu odgovornost, što je ključno za održavanje standarda bezbednosti pacijenata, te može pomoći u sprečavanju grešaka i poboljšanju kvaliteta nege (17). S druge strane, kod zdravstvenih radnika koji su navikli na tradicionalne hijerarhijske strukture prelazak na holokratiju mogao bi naići na otpor. Prevazilaženje ovog otpora zahteva efikasne strategije upravljanja promenama, a tranzicija može biti složena i može zahtevati značajno vreme i resurse za obuku i adaptaciju. Ako uloge i odgovornosti nisu dobro definisane ili ako je prisutan nedostatak komunikacije, postoji rizik od nastajanja nedosledne nege pacijenata. Zdravstvene ustanove moraju osigurati da se standardi nege pacijenata održavaju tokom tranzicije. Integracija holokratije u zdravstvenu ustanovu može predstavljati izazove u koegzistenciji sa postojećim hijerarhijskim strukturama. Balansiranje novog pristupa sa tradicionalnim linijama izveštavanja zahteva pažljivo razmatranje od strane menadžmenta.

Ograničenja sprovedene studije su ta da je u anketi učestvovao mali broj ispitanika, zaposlenih u ZARZ Pasterov zavod, Novi Sad.

## Zaključak

Na osnovu sprovedenog istraživanja o stavovima zaposlenih u ZARZ Pasterov zavod, Novi Sad o samoj organizaciji, klimi u organizaciji i rukovođenju može se zaključiti da većina zaposlenih smatra da su njihove funkcije jasno definisane, ciljevi konkretni, odgovornosti zaposlenih u organizaciji precizno definisane, kao i da je atmosfera u orga-

for improving the management's work in these fields, and that the existence of need for the re-evaluation of individual work capacities should be considered, as well as the identification of work phases that are thought to be redundant by the employees, after which the analysis of the need to remove them should be carried out.

The absence of homogeneity in the attitude of the collective was also observed for the statement that all employees have the opportunity to influence decisions. This finding requires the attention of the management, considering that the limitation of employees in decision-making processes leads to the feeling of lack of control over the work environment, thus making an individual sensitive to stressors that induce burnout syndrome (8,9). The participation of employees in making decisions about questions related to the work environment plays an important role in the prevention of burnout syndrome and feeling of a heavy workload (8,9). The protective effect of the ability to make decisions about one's work is clearly shown in the model of four educational hospitals in Ardabil (Islamic Republic of Iran) (10), where it was found that nurses were significantly more satisfied with their work compared to administrative workers. Although the mental workload is significantly higher compared to administrative workers, they also exercise more control over their work compared to the administrative cohort (10).

One of the possible solutions to improve the existing situation is the revision of organizational structure of the institution by departments, as well as controlling whether regular meetings of heads with employees in departments are held. Taking into consideration the size of the collective, there is a possibility that the problem in communicating and expressing one's opinion is related only to one service and not the entire organization, and further analysis is necessary in order to determine what the obstacles for individual employees to express their opinions are and why they think that their opinion is not taken into consideration when decisions are made.

The inclusion of health personnel in the planning and implementation of innovations in technological and other organizational changes in the institution is extremely important. As far as job satisfaction is concerned, informing the employees about upcoming changes is most useful in the earlier phases of change. Those

healthcare workers who received information about organizational changes in the phase of planning of that change felt more respected, had a stronger collegial capital, were more satisfied with their influence in the workplace, and were more satisfied with their managers (11,12).

The analysis of results in the field of organizational climate showed, in the majority of respondents' answers, that a stimulating atmosphere prevails in the organization. Nevertheless, the results of self-assessment indicate that work is needed to increase trust among employees. This can be achieved by supporting each employee to develop professionally, while team spirit should be developed in each department, where common goals and interests would be the employees' main concern.

In order to improve the flow of information, it is necessary to influence the speed, completeness and clarity of the flow of information among employees, considering the great possibility of influence of communication on organizational behavior (13).

Globalization and progress in information technologies and communications pose challenges to traditional models of centralized management. The need for decentralization in managing healthcare services is evident, where the holacracy model is offered as a solution (14).

In the context of Covid-19 pandemic, the question arises about the benefits of autonomy in the management of health systems, which emphasizes the importance of decentralization in solving emergency situations. The advantages of applying holacracy in healthcare institutions are multiple. Holacracy enables distributed decision-making, allowing health workers at different levels to make timely decisions within their roles (14). This can improve the response to patients' needs and improve the overall healthcare. The flexibility and adaptability of holacracy can help health care institutions to adapt quickly to evolving situations, such as public health crises or changes in patients' demography. With clear roles and responsibilities, health care teams can facilitate communication, which leads to more efficient patient care. The emphasis of holacracy on constant improvement can contribute to the improvement of healthcare process (15). Circles in holacracy facilitate collaborative efforts in healthcare teams. The improved communication

nizaciji podsticajna. Medjutim, postoji nedostatak homogenosti u stavovima zaposlenih po pitanjima korišćenja njihovih sposobnosti do maksimuma, neophodnosti svakog koraka njihovog radnog procesa, postojanja mogućnosti da svi zaposleni utiču na odluke u ustanovi, postojanja poverenja jednih u druge, kao i po pitanjima informisanja zaposlenih od strane rukovodstva i komunikacije.

Neophodno je uvođenje participativnijeg pristupa u procesu donošenja odluka u ustanovi i implementacija mera usmerenih ka korišćenju sposobnosti zaposlenih do maksimuma, uključivanju svih zaposlenih u proces odlučivanja u ustanovi, jačanju međusobnog poverenja i razvoju timskog rada, informisanja zaposlenih od strane rukovodstva i komunikacije, kako bi se unapredila efikasnost ustanove i postiglo održivo poboljšanje organizacione klime i rada rukovodstava u ZARZ Pasterov zavod, Novi Sad.

### Konflikt interesa

Autori su izjavili da nema konflikta interesa.

### Reference

1. Ingþórsson ÁH, Alfirević N, Pavičić J, Vican D, editors. *Educational Leadership in Policy: Challenges and Implementation Within Europe*. Cham: Springer International Publishing; 2019. doi: 10.1007/978-3-319-99677-6
2. Ramadani V, Kjosev S, Sergi BS. *Entrepreneurship Development in the Balkans: Perspective from Diverse Contexts*. Emerald Publishing Limited; 2023.
3. McWilliams A, Williams C. *MGMT*. Cengage Learning; 2014.
4. Axelrod RH. *Terms of Engagement: changing the way we change organizations*. Berrett-Koehler Publishers; 2002.
5. Marić B, Bagarić I, Tot V. Axiological movements in management technologies of our organizations in the process of transition and globalization. *Strategijski Menadžment*. 2003;7(1–2):129–31.
6. Morgeson FP, Humphrey SE. The Work Design Questionnaire (WDQ): developing and validating a comprehensive measure for assessing job design and the nature of work. *J Appl Psychol*. 2006;91(6):1321–39. doi:10.1037/0021-9010.91.6.1321.
7. Wang H, Tang C, Zhao S, Meng Q, Liu X. Job Satisfaction among health-care staff in township health centers in rural China: results from a Latent Class Analysis. *Int J Environ Res Public Health*. 2017;14(10):1101. doi:10.3390/ijerph14101101
8. Leiter MP, Maslach C. Six areas of worklife: a model of the organizational context of burnout. *J Health Hum Serv Adm*. 1999;21(4):472–89.
9. Portoghese I, Galletta M, Coppola RC, Finco G, Campagna M. Burnout and workload among health care workers: the moderating role of job control. *Saf Health Work*. 2014;5(3):152–7. doi:10.1016/j.shaw.2014.05.004.
10. Rostami F, Babaei-Pouya A, Teimori-Boghsani G, Jahangirimehr A, Mehri Z, Feiz-Arefi M. Mental workload and job satisfaction in healthcare workers: the moderating role of job control. *Front Public Health*. 2021;9:683388. doi: 10.3389/fpubh.2021.683388.
11. Turja T. Rather sooner than later: participatory change management associated with greater job satisfaction in healthcare. *J Adv Nurs*. 2022;78(3):e49–51. doi: 10.1111/jan.15133.
12. Jakobsen MD, Clausen T, Andersen LL. Can a participatory organizational intervention improve social capital and organizational readiness to change? Cluster randomized controlled trial at five Danish hospitals. *J Adv Nurs*. 2020;76(10):2685–95. doi: 10.1111/jan.14441.
13. Elving WJL. The role of communication in organisational change. *Corporate Communications: An International Journal*. 2005;10(2):129–38. doi: 10.1108/13563280510596943.
14. Krasulja N, Radojević I, Janjušić D. Holacracy-The new management system. *I International Scientific Conference 2017*;47(1):187-96
15. Weirauch L, Galliker S, Elfering A. Holacracy, a modern form of organizational governance predictors for person-organization-fit and job satisfaction. *Front Psychol*. 2023;13:1021545. doi: 10.3389/fpsyg.2022.1021545.
16. Saleh MO, Eshah NF, Rayan AH. Empowerment predicting nurses' work motivation and occupational mental health. *SAGE Open Nurs*. 2022;8:23779608221076812. doi: 10.1177/23779608221076811.
17. Donnelly AL, Ackerman L, Hall R, Choder B, DeWilde C, Ley J, et al. Hospital Considerations. In: *Pet-Specific Care for the Veterinary Team* [Internet]. John Wiley & Sons, Ltd; 2021.p. 477–541. doi:10.1002/9781119540687.ch7

and shared responsibilities can foster a culture of teamwork, which leads to better health outcomes of patients (16). The autonomy provided by holacracy can encourage healthcare professionals to explore innovative solutions to challenges related to patient care. This can result in the implementation of new and efficient health services.

In addition, the explicit definition of roles and responsibilities of holacracy ensures clear accountability, which is crucial for maintaining standards of patient safety, and therefore, it can help prevent errors and improve the quality of care (17). On the other hand, the transition to holacracy could be met with resistance by healthcare workers who are used to traditional hierarchical structures. Efficient strategies of managing changes are necessary to overcome this resistance, and the transition can be complex and may require significant time and resources for training and adaptation. If roles and responsibilities are not well defined or if there is a lack of communication, there is a risk of inconsistent patient care. Health care institutions must ensure that standards of patient care are maintained during the transition. Integrating holacracy into a health care institution may be challenging in coexistence with existing hierarchical structures. Balancing the new approach with traditional reporting lines requires careful consideration by management.

The limitations of the conducted study are that a small number of respondents, employees of the Pasteur Institute in Novi Sad, participated in the study.

## Conclusion

Based on the conducted research on the attitudes of the employees of the Pasteur Institute in Novi Sad towards the organization itself, organizational climate and management, it can be concluded that the majority of employees believe that their functions are clearly defined, their goals are concrete, the employees' responsibilities in the organization are precisely defined, as well as that the atmosphere in the organization is stimulating. However, there is a lack of homogeneity of employees' attitudes towards issues related to the use of their abilities to the maximum, necessity of each step of their work process, the existence of the possibility that all employees participate in decision-making processes in the institution, the existence of trust in each other, as well as towards

issues related to information provided by the management and communication.

It is necessary to introduce a more participatory approach in the decision-making process within the institution and implement measures aimed at using employees' abilities to the maximum, involving all employees in the decision-making process in the institution, strengthening mutual trust and developing teamwork, informing the employees and improving communication, in order to improve the efficiency of the institution and achieve the sustainable improvement of organizational climate and managers' work in the Pasteur Institute in Novi Sad.

## Competing interests

The authors declared no competing interests.

## References

1. Ingbórrsson ÁH, Alfirević N, Pavičić J, Vican D, editors. *Educational Leadership in Policy: Challenges and Implementation Within Europe*. Cham: Springer International Publishing; 2019. doi: 10.1007/978-3-319-99677-6
2. Ramadani V, Kjosev S, Sergi BS. *Entrepreneurship Development in the Balkans: Perspective from Diverse Contexts*. Emerald Publishing Limited; 2023.
3. McWilliams A, Williams C. *MGMT*. Cengage Learning; 2014.
4. Axelrod RH. *Terms of Engagement: changing the way we change organizations*. Berrett-Koehler Publishers; 2002.
5. Marić B, Bagarić I, Tot V. Axiological movements in management technologies of our organizations in the process of transition and globalization. *Strategijski Menadžment*. 2003;7(1–2):129–31.
6. Morgeson FP, Humphrey SE. The Work Design Questionnaire (WDQ): developing and validating a comprehensive measure for assessing job design and the nature of work. *J Appl Psychol*. 2006;91(6):1321–39. doi:10.1037/0021-9010.91.6.1321.
7. Wang H, Tang C, Zhao S, Meng Q, Liu X. Job Satisfaction among health-care staff in township health centers in rural China: results from a Latent Class Analysis. *Int J Environ Res Public Health*. 2017;14(10):1101. doi:10.3390/ijerph14101101
8. Leiter MP, Maslach C. Six areas of worklife: a model of the organizational context of burnout. *J Health Hum Serv Adm*. 1999;21(4):472–89.
9. Portoghese I, Galletta M, Coppola RC, Finco G, Campagna M. Burnout and workload among health care workers: the moderating role of job control. *Saf Health Work*. 2014;5(3):152–7. doi:10.1016/j.shaw.2014.05.004.
10. Rostami F, Babaei-Pouya A, Teimori-Boghsani G, Jahangirimehr A, Mehri Z, Feiz-Arefi M. Mental workload and job satisfaction in healthcare workers: the moderating role of job control. *Front Public Health*. 2021;9:683388. doi: 10.3389/fpubh.2021.683388.



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11. Turja T. Rather sooner than later: participatory change management associated with greater job satisfaction in healthcare. *J Adv Nurs.* 2022;78(3):e49–51. doi: 10.1111/jan.15133.
12. Jakobsen MD, Clausen T, Andersen LL. Can a participatory organizational intervention improve social capital and organizational readiness to change? Cluster randomized controlled trial at five Danish hospitals. *J Adv Nurs.* 2020;76(10):2685–95. doi: 10.1111/jan.14441.
13. Elving WJL. The role of communication in organisational change. *Corporate Communications: An International Journal.* 2005;10(2):129–38. doi: 10.1108/13563280510596943.
14. Krasulja N, Radojević I, Janjušić D, Holacracy-The new management system. *I International Scientific Conference* 2017;47(1):187-96
15. Weirauch L, Galliker S, Elfering A. Holacracy, a modern form of organizational governance predictors for person-organization-fit and job satisfaction. *Front Psychol.* 2023;13:1021545. doi: 10.3389/fpsyg.2022.1021545.
16. Saleh MO, Eshah NF, Rayan AH. Empowerment predicting nurses' work motivation and occupational mental health. *SAGE Open Nurs.* 2022;8:23779608221076812. doi: 10.1177/23779608221076811.
17. Donnelly AL, Ackerman L, Hall R, Choder B, DeWilde C, Ley J, et al. Hospital Considerations. In: *Pet-Specific Care for the Veterinary Team* [Internet]. John Wiley & Sons, Ltd; 2021.p. 477–541. doi:10.1002/9781119540687.ch7



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