

The relationship between social capital and organizational learning from the perspective of hospital managers

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ABSTRACT

Introduction: The capital invested among group members is the formation of group and consequently the accumulation of knowledge into knowledge transfer and the transfer of knowledge and organizational learning. Therefore, this study aimed to investigate the relationship between social capital and organizational learning from the perspective of hospital managers. **Methods:** This is a descriptive-analytic study carried out in 2020. The statistical population of this study included 120 managers of university hospitals of Ahvaz Jundishapur University of Medical Sciences. This was done by two questionnaires of social capital ($\alpha = 0.83$) and organizational learning questionnaire ($\alpha = 0.93$). The sample included the entire statistical population. Spearman correlation tests were used for data analysis in SPSS 22 software. **Results:** Organizational learning placement (3.4 ± 1.3) and social capital (3.7 ± 1.8) managers of "Ahvaz" educational workplaces were "relatively appropriate." There was a direct and significant statistical relationship between social capital and organizational learning of hospital managers in Ahvaz Jundishapur University of Medical Sciences. That is, with the increase of social capital, organizational learning increased in the managers of Ahvaz Jundishapur University of Medical Sciences hospitals. **Conclusion:** Given that the status of the two components of social capital and organizational learning were estimated at a relatively appropriate level. In this regard, the development of social capital and the development of organizational learning in the hospitals under study can be achieved through the creation of working teams, greater delegation of staff, the creation of appropriate working relationships between employees and job enrichment.

Keywords: Social Capital, Organizational Learning, Hospital Managers, Ahvaz Jundishapur University of Medical Sciences.

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Introduction

Managers today need social capital more than they need physical and human capital to achieve development ^[1]. Social capital is defined by the ability of individuals to work together to achieve common goals in groups and organizations ^[2]. Social capital can affect access to social support and a sense of security and belonging. So awareness of public issues and factors is the first factor affecting social relations; in the case of social justice and

the right distribution of information among the general public, the first factor of social capital will in fact be realized [3]. Social relationships and relationships are an integral part of one's social capital and wealth, so the extent and nature of these relationships is important. The people in the community are not the same in terms of quantity, quality, and quality, and there are important differences between them [4].

On the other hand, in different areas of the business or knowledge era, organizations are seen as bases for better knowledge management and competitiveness [5]. In addition, the ontology of the ontology has increased the number of communications and made organizations more responsive to the needs of their clients. Therefore, humanitarian organizations such as their humanitarian partners need to adapt themselves to tools that are capable of dealing with the effects of corruption [6].

Organizational learning through each of the organizational competitiveness and innovation human beings has had a significant impact on mega-individuals [7]. My most interactive work environment includes care for patients and patients, nurses, and patients and patients. Which can become a learning and human resource for human beings [8, 9]; however, it is also the goal of self-help, self-promotion, and a kind of learning organization. for the sake of being close to me, he is fully engaged in the production of new knowledge, and is able to communicate it in a way that is easy to read or easy to read [10].

In this respect, Petrou and his et al have pointed to the importance of investing in the group and the way in which organizational learning is delivered. they report in their paper that capital is raised among the members of the group; the formation of the group and the performance and work among the members, and by groups. data and data flow faster in their own right, and the flow of knowledge and experience, and consequently the communication of information and knowledge, creates and delivers knowledge and knowledge [11]. Considering what was and is not the purpose of the present study, the relationship between social capital and organizational learning was studied from the perspective of hospital managers.

Methods:

The present study is a descriptive research in which the cross-sectional method was used for data collection. The population consisted of 120 directors of educational hospitals Ahvaz Jundishapur University of Medical Sciences including Golestan, Shafa, Imam Khomeini, Razi, Abuzar and Taleghani. Sampling was not done due to the limited statistical population. The respondents of the study were directors and administrators of hospitals and managers of all the related sections and wards.

The required data were collected using three questionnaires of demographic characteristics, social capital and Organizational Learning. The validity of the data collection tool was confirmed by five professors and experts. The managers' demographic

characteristics questionnaire included age, sex, education and work experience.

Social capital questionnaire had 6 dimensions of organizational trust, organizational networks, organizational cooperation, organizational solidarity, empathy and organizational assistance [12]. Cronbach's alpha was 0.83% for this questionnaire. This part of the tool consists of 26 items.

Questionnaire on Organizational Learning (Gomez) has 4 dimensions of Outdoor and experimental, management commitment, system vision and knowledge transfer and integration. This questionnaire consisted of 14 items [13]. Cronbach alpha was calculated 0.93 for the questionnaire on Organizational Learning. Rating was done for the questionnaires on social capital and Organizational Learning based on the Likert scale (Strongly disagree: 1, Disagree: 2, No idea: 3, Agree: 4, Strongly agree: 5).

In interpreting the results, mean of scores between 4 and 5, between 3 and 4, between 2 and 3, 1 and 2, was respectively assessed as appropriate, relatively appropriate, relatively inappropriate and inappropriate.

The data were not normally distributed. For data analysis Spearman correlation were used in SPSS-22 software. In addition, descriptive statistics and mean and standard deviation indices were used to demonstrate the findings.

Results:

There were 36 (30%) men and 84 (70%) female participant. there were a total of 52.5% of respondents between 25 and 35 years, 40% between 36 to 45 years and 7.5% over 45 years. There were 30% male 70% female respondents. There were also 20% single and 80% married participant. The percentage of respondents who had MA, Bachelor and Associate Degree was 21.8%, 66.7% and 11.8%, respectively. Furthermore, the percentage of respondents who had years of service lower tha10 years, between 11 to 20 years and above 20 years was 44.2 percent, 43.3 percent band 12.5% over, respectively.

From the perspective of managers, the organizational assistance was assessed relatively inappropriate with the score of lower than 3, but other components of the social capital and the total social capital has been estimated appropriate with a score of more than 3. The organizational empathy and the organizational assistance had the highest score of (3.47) and lowest score of (2.65), respectively. Table 1 shows the mean and standard deviation of Organizational Learning dimensions.

Table 1: The mean and standard deviation of .Organizational Learning dimensions

Mean	Standard Deviation	Dimensions	Variables
3.6 ± 1.7		Management commitment	
3.8 ±1/7		System vision	
3.4 ± 1.8		Outdoor and Experimental	Organizational Learning
4.2 ± 1.9		Knowledge transfer and integration	

3.7 ± 1.8

Total

Table 1 shows the average Organizational Learning of the managers of university hospitals in Ahvaz (3.7 ± 1.8) estimated relatively appropriate. The knowledge transfer and integration

and the organizational assistance had the highest score of (4.5 ± 0.7) and lowest score of (3.4 ± 1.8), Outdoor and Experimental. Table 2 shows the correlation between social capital and Organizational Learning.

Table 2: Correlation of social capital with Organizational Learning Dimensions

Organizational Learning	statistical Indicator	social capital						Total
		Organizational Trust	Corporate Networks	Institutional Cooperation	Organizational Solidarity	Organizational Empathy	Institutional Cooperation	
Management commitment	Spearman corr.	.263**	.266**	.255**	.243**	.240**	.245**	.240**
System vision	p value.	.004	.004	.005	.006	.007	.006	.008
Outdoor and Experimental	Spearman corr.	.241**	.251**	.241**	.253**	.261**	.261**	.250**
	p value.	.006	.007	.006	.005	.004	.004	.007
Management commitment	Spearman corr.	.264**	.265**	.251**	.243**	.239**	.252**	.251**
System vision	p value.	.004	.005	.006	.007	.002	.005	.007
Outdoor and Experimental	Spearman corr.	.259**	.258**	.259**	.254**	.239**	.247**	.242**
	p value.	.006	.002	.004	.008	.008	.007	.008
Total	Spearman corr.	.248**	.260**	.244**	.251**	.244**	.255**	.239**
	p value.	.007	.005	.008	.007	.008	.005	.009

Table 2 shows that there was a direct and significant statistical relationship between social capital and organizational learning in the managers of Ahvaz Jundishapur University of Medical Sciences. That is, with the increase of social capital, organizational learning increased in the hospital managers of Ahvaz Jundishapur University of Medical Sciences. Given that all dimensions of social capital have a significant and direct relationship with organizational learning. Thus, in general, as each dimension of social capital increases, organizational learning of Ahvaz Jundishapur University of Medical Sciences Hospital Managers increases.

Discussion:

The social capital was assessed relatively appropriate from the perspective of managers of educational hospitals in Ahvaz city, which is consistent with the results of study conducted by Sorkhkalaei et al. In the healthcare networks of Rey City. The social capital relies on the development of relations among people to access resources, as result of which people achieve beneficial results [14]. Recent discussions on the social capital emphasize its role and trust in facilitating coordination between team performances, which enhances intra-individual coordination to achieve organizational goals. Trust means understanding of the relationship, which is usually between individuals, individuals and organizations, individuals and events and self-confidence. Trust includes barriers that prevent the coordinated behaviors [15].

In the present study, among the components of organizational learning, the highest and the lowest scores, respectively, were related to the dimensions of donor transfer and integration, and outdoor and experimentation. In the study of Abbasi Moghaddam et al [16] the results were similar to those of the present study; but the results of the Heidari et al study showed

that the organizational learning status of nurses was moderate so that the highest score was related to management commitment and the lowest score was to systemic vision [17]. The hospital environment is one of the most active working environments and includes interactions between nurses, patients, their family members, physicians, and other categories of work. all of these interactions can lead to learning provided the environment in this environment moves towards learning; therefore, special attention should be paid to the development of organizational learning and its dimensions in order to sustain hospitals and compete in today's turbulent environments.

According to the findings of this study, there was a significant direct relationship between social capital and organizational learning and its components, so that as social capital increased, organizational learning capacity increased. the study of Farhang and et al also showed that there was a significant statistical relationship between organizational learning variables and employee development and organizational trust as one of the components of social capital and this is in line with the present study [18]. In Ghanbari and Hemmati's study, there was a positive and significant relationship between social capital and job performance [19]. Also, a study by Faraji-Khiavi and et al at Ahvaz Jundishapur University of Medical Sciences among hospitals managers proved the relationship between social capital and effective dash management processes [1]. These results suggest that social capital as a competitive advantage and one of the important and influential dimensions in an organization can affect many other dimensions therefore, managers and authorities should strive to create and enhance it. in this regard, increasing the number of public institutions in hospitals can be very slow.

Since the majority of managers in the study population, had university education and the necessary talent to use teaching aids for the acquisition, transfer of, ability to apply the

knowledge, planners and policy makers in the field of healthcare services can provide the necessary conditions for the development of these skills in their efforts. Planners and policy makers not only ensure the quality of service, but also service providers will ensure the public health by improving the quality of services; therefore they are more satisfied in their efforts to secure and promote the public health.

Conclusion:

Given that the status of the two components of social capital and organizational learning were estimated at a relatively appropriate level. Therefore, there is a need to create an appropriate context for improving and enhancing social capital. It is also necessary to consider organizational learning as a vital component of organizations' survival in the hospitals studied. In this regard, the development of social capital and the development of organizational learning in the hospitals under study can be achieved through the creation of working teams, greater delegation of staff, the creation of appropriate working relationships between employees and job enrichment.

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