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METHODOLOGY OF ASSESSMENT OF THE CORPORATE IDENTITY MANAGEMENT IN HEALTH CARE

Didzis Rutitis[1], Anda Batraga[2], Kristofers Ritovs[1]
[1]BA School of Business and Finance, Latvia, Riga, [2]University of Latvia, Latvia, Riga

Annotation
Corporate identity as a strategic managerial concept was first distinguished in 1970s in relation to design and visual identity research. Explicit management of various corporate identity dimensions was found to facilitate achieving and strengthening of competitive advantage for individual corporations (Melewar and Karaosmanoglu 2006, Suvatjis et al 2012). However, little effort has been devoted to research corporate identity management within public sector enterprises (Mohamad et al 2007, Melewar 2012), and there has been no research accomplished on corporate identity management in health care.
Methodology of assessment of the corporate identity management in the health care is introduced, including the following four parts: theoretical review, industry analysis, qualitative research, and quantitative research. Theoretical review discusses definitions of corporate identity and its management and provides the conceptual framework for corporate identity management taking into specifics of the health care industry. Industry analysis provides insights into the specifics of the health care industry, highlighting the major differences from other industries in order to provide input for further decision-making regarding the research design. The chosen research design relates to the sequential-exploratory strategy (a mixed method), which includes expert interviews and surveys as qualitative research methods, and industry participant surveying as a quantitative research method. Expert interviews are used for obtaining informed opinions from the health care industry experts and expert surveys are used to clarify expert understanding of the corporate identity concept. Meanwhile, the conceptual model is adjusted to the informed judgement of industry experts (Brown 1968). Survey of industry participants is implemented to expand on the qualitative findings and conceptualization of the framework for the management of corporate identity dimensions in the health care industry (Creswell 2003). It is concluded that the proposed methodology can serve as basis for the empirical research of corporate identity management in a particular health care services market with a specific health care system.
KEY WORDS: corporate identity, research design, methodology, health care, services marketing.

Introduction

Corporate identity is a cross-disciplinary concept that has been introduced in management sciences and scientific literature by separating it apart from the corporate image concept in relation to the graphic design paradigm. It was first identified by marketing and management practitioners in 1970s (Selame and Selame 1975, Van Riel and Balmer 1997).

Explicit management of various corporate identity dimensions is considered to facilitate achieving and strengthening of competitive advantage for individual corporations (Melewar 2003). Review of research papers reflects numerous studies and related research papers on general healthcare management topics (Porter and Teisberg 2006), but there is very limited research aimed to explore corporate identity management in public companies, and none in relation to corporate identity management within the health care industry. Among few available, corporate identity research papers relate only to research of university corporate identity (Melewar and Akel 2005) or educational system in general (Mohamad et al. 2007). Hospital marketing research papers mainly focus on behavioural, organizational or human resource issues – e.g. some papers are more focused on hospital personnel social identity issues (Russell et al, 2010), employer image within recruitment process (Heilmann, 2010), job organization in the operation room (Bleakley, 2006), social dynamics and behaviour in elderly house environment (Bland and Bland, 1983), but there were none found regarding general health care corporate identity management. Therefore, new research approach and new methodology is needed to fill the gap for the assessment of corporate identity management in health care, and new research design should be introduced to achieve this goal taking into account health care industry specifics.

The aim of this conceptual paper is to develop the methodology for assessment of corporate identity management in the health care, which can serve as basis for further empirical research of corporate identity management in a health care industry of a selected country.

Chapter 2 surveys the conceptual background of corporate identity and the theoretical background of corporate identity management. Chapter 3 describes the industry specifics. In Chapter 4 the overall methodology and research design is introduced, and the assessment of the available research methods for analyzing corporate identity management is also introduced. Chapter 5 discusses applicability of the methodology and research design for the analysis of corporate identity within the health care industry and provides suggestions for further research.

Conceptual background

Corporate identity as a separate managerial concept and a strategic tool was first distinguished in 1970s by marketing practitioners mainly in relation to design and visual identity research (Melewar 2003). The

understanding of the concept was gradually broadened and received attention of academic researchers as a managerial concept (Van Riel and Balmer 1997). Correspondingly, there have been introduced various definitions to describe the essence of the corporate identity and each of them relates to different mix of the organizational structure elements and management approach practices (Melewar and Jenkins, 2002). One of the first definitions of corporate identity proposed by Dowling (1986) is "the set of meanings by which a company allows itself to be known and through which it allows people to describe, remember and relate to it" (Olins, 1989; Melewar, 2003). Balmer and Soenen (1998) assume corporate identity to be "mix as being composed of the mind, soul, and voice. The mind consists of managerial vision, corporate philosophy, strategy, performance, brand architecture, nature of corporate ownership, and organizational history. The soul consists of the subjective elements including the distinct values, mix of sub-cultures, employee a□nities, and internal images. The 'voice' is the total corporate communication and consists of its uncontrolled communication, controllable communication, symbolism, employee and corporate behavior, and indirect external/third party) communication". This also relates to definition by Olins (1995) who assumes corporate identity management to be "the explicit management of all the ways in which the organization presents itself through experiences and perceptions to all its audiences".

In 1995 corporate identity researchers realized that defining corporate identity is problematic and came up with a statement, which communicates the multidisciplinary nature of the corporate identity and its difference from brand management. It was formulated in the "Strathclyde Statement" by International Corporate Identity Group (ICIG) that included academics from Strathclyde, Erasmus and Harvard Business Schools, together with leading practitioners and consultants (Van Riel & Balmer, 1997): "Every organization has an identity. It articulates the corporate ethos, aims and values and presents a sense of individuality that can help in differentiating the organization within its competitive environment. When well managed corporate identity can be a powerful means of integrating the many disciplines and activities essential to an organization's success. It can also provide the visual cohesion necessary for ensuring that all corporate communications are coherent with each other and result in an image consistent with the organization's defining ethos and character. By managing its corporate identity effectively an organization can build understanding and commitment among its diverse stakeholders. This can be manifested in an ability to attract and retain customers and employees, achieve strategic alliances, gain the support of financial markets and generate a sense of direction and purpose. Corporate identity is a strategic issue. Corporate identity differs from traditional brand marketing since it is concerned with all of an organization's stakeholders and the multifaceted ways in which an organization communicates." This statement also to large extent reflects the essence of findings by Alessandri (2001) on corporate identity definitions.

Further research on corporate identity relates to cross-disciplinary examination of the identity concept and thus concludes that corporate identity should be analyzed broader than simple marketing concept. For instance, Cornelissen et al. (2007) explore issues of social, organizational and corporate identity indicating differences in the form and focus of research into these three topics. According to their findings, the social identity work generally examines issues of cognitive process and structure; organizational identity research tends to address the patterning of shared meanings; studies of corporate identity tend to focus on products that communicate a specific image. Nonetheless, across these areas there is general consensus that collective identities are (a) made viable by their positivity and distinctiveness, (b) fluid, (c) a basis for shared perceptions and action, (d) strategically created and managed, (e) qualitatively different from individual identities and (f) the basis for material outcomes and products. According to Bouchikhi and Kimberly (2008), "any aspect that key stakeholders (employees, owners, suppliers, customers, bankers, shareholders) view as core, enduring, and distinctive about an organization is part of its identity."

The review of corporate identity definitions suggests that there is no single corporate identity definition accepted as a standard among corporate identity researchers. This is also noted by leading corporate identity researchers (Melewar 2008, He 2012). Therefore, a generalized statement by the International Corporate Identity Group would be used as reference for corporate identity concept.

Corporate identity management as a managerial process has been reviewed by several researchers. Stuart (1999) summarized main findings from the initial attempts to propose corporate identity management models by Kennedy (1977), Dowling (1986), Abratt (1989), Marwick and Fill (1997), van Riel and Balmer (1997).

As noted by Olins (1995), corporate identity management is "the explicit management of all the ways in which the organization presents itself through experiences and perceptions to all its audiences".

The initial research by Stuart (1999) resulted in a generalized theoretical framework bringing together such factors as symbolism, behavior and communication as main components of corporate identity, and defining organizational culture as a general environment for corporate identity formation, not an input factor for its formation. This model was later further developed by Melewar and Jenkins (2002) to distinguish among individual corporate identity dimensions and shaped within the Corporate Identity Model.

Abratt and Kleyn (2012) provide the most suitable integration framework with a systemic nature that can be further analyzed to clarify those corporate identity dimensions that are of managerial accessibility and importance from the health care industry perspective.

ACID test for corporate identity framework by Balmer (2012) is criticized for its general nature and over-simplicity. As noted by Cornelissen et al. (2012, p.1096), "its validity is questionable, not only because of its lack of specificity but also because is suggest a broad,

over-simplified and insufficiently operational theory. ...Effectively, the ACID model is logically incoherent, shaped by both ontological and epistemological difficulties and inconsistencies".

Consequently, frameworks by Melewar and Jenkins (2002), and Abratt and Kleyn (2012), are used to provide input for developing conceptual proposal of the corporate identity model in the health care industry. In addition, some insights from the 6-station corporate identity model by Suvatjis et al. (2012) are introduced in relation to the corporate identity dimension of digital communication to reflect the importance of the Internet environment within the corporate identity management processes.

Authors conclude that the corporate identity theory review provides sufficient input of the conceptual framework of corporate identity management in health care, and the health care industry review should follow in order to support the theoretical assumptions and acknowledge the industry specifics for obtaining relevant input for the further empirical research.

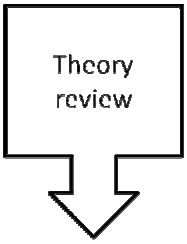

Fig. 1. The first stage of research – Theory review

Therefore, theory review should be regarded as the first stage of methodology for the assessment of corporate identity management in health care (see Fig. 1.).

Health care industry specifics

History of hospitals is dated back to ancient Egypt and Greece (Risse, 1999). The first documented recordings about organised approach for curing people using systematic approach are dated around year 400-300 BC (McGrew 1985). Nowadays hospital is perceived as a health care institution providing patient treatment by specialized staff and equipment either for free or as a paid service, depending on the status of the hospital (State-owned or private), or eligibility of patient's insurance plan as well as type of treatment required.

According to organizational management theory, hospital can be best described as close to "ideal bureaucracy" (Weber 1905) due to its formal hierarchy within the organizational structure, performance rationality, and strict internal culture governed by set of rules and regulations. While often criticized for lack of flexibility and inability to implement prompt changes, the main advantage of hierarchy is that it provides opportunity effectively coordinate mass of people in order to achieve goals actual for general public. In contrast, voluntary organizations are usually not related to either State or municipality (Sills 2010), while total organizations are described as specific form of bureaucratic organizations that aim to maintain public interest and where individuals are isolated for long-term from general public – in order to obtain principally new behavior norms (e.g. army), implement re-education (e.g. drug-addict rehab), prevent society from possibly deviant behavior (prisons, psychiatric hospitals), or take care of those who cannot do it themselves (e.g. homes for elderly people or those with special needs, shelters) (Goffman 1961).

Table 1. Differences between regular and health care enterprises (Batraga and Rutitis, 2012)

Managerial aspects	Regular business enterprise	Health care enterprise
Founders	Individuals with specific business vision	Individuals with vision regarding delivery of social function
Resources	Product or service	A human
Mission	Related to personal goals of founders	Related to specific values, norms, ideology, environmental requirements
Performance efficiency	Depends on personnel professionalism	Depends on personnel professionalism, know-how
Utilized technology	Specified	Unspecified, unique mix of available procedures
Staff-customer relationships	Approach for promoting product or service	Basis for all activities
Managerial efficiency	Determined by company management	Determined by customer (patient) satisfaction
Responsibility	Responsibilities related to positions and management levels	General responsibility of an organization towards public
Performance dynamics	Determined by management vision and strategic priorities	Determined by public demand, demographics
External factors that may leave impact on daily management	Innovations, shortage of stock or inability to deliver enough services, creative approach, legislation	Legislation, improvement of society well-being

Neugeborgen and Slavin (1991) define the main difference between health care institution and Weber's bureaucracy in terms of input resource – in case of health care organizations, primary "input" resource is a human being with specific characteristics, and "output", correspondingly, the same human being with adjusted characteristics. Hasenfeld and English (1999) define social institutions, including hospitals, as organizations established with aim to improve well-being of a human, taking into account relevance of services provided and their compliance with solving individual needs of a customer.

Batraga and Rutitis (2012) have summarized main findings from researches on social institutions (Goffman 1961; Billingsley 1964; Perrow 1967; Warner and Havens 1968; Harris 1996) to highlight general differences between regular business organizations and health care enterprises (i.e. hospitals providing daily and stationery care paid services) in Table 1.

In addition to the review of health care industry specifics, which provides researchers with insights into those managerial aspects that may influence formation and dynamics of the corporate identity dimensions in the health care industry, additonal statistical data and general indices proposed by the World Health Organisation (WHO) describing the local health care system should be gathered. This would reflect the overall industry trends (e.g. total expenditure on health care as % of GDP, health care expenditure per capita, etc.). The main managerial performance indicators describing the health care industry in the selected country should be explicitly stated in order to relate the corporate identity management principles to the general management framework within the health care industry.

Correspondingly, the review of industry specifics provides the initial input for the discussion and further approbation of the conceptual framework for management of corporate identity dimensions in the health care, while the analysis of management performance indicators should reflect measurable indices to relate corporate identity management principles to the general health care management framework.

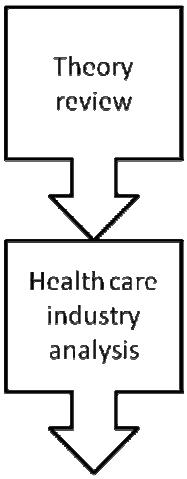

Fig. 2. The second stage of research – Health care industry analysis

Analysis of the health care industry should be regarded as the second stage (see Fig. 2.) of research to provide methodology for the assessment of corporate identity management in health care by contributing industry insights to the initial conceptual framework.

Choice of the research design

There are two general types of research methods – the quantitative methods and qualitative methods – which can be combined or used separately depending on the intended research purpose. Each research method has its advantages and specific areas of applicability, but generally quantitative methods are used to collect quantitative data (in form of numbers) and analyse this data using statistical methods, while qualitative research methods are aimed to collect qualitative data (text, images, sounds, etc.) using such qualitative research methods as observations, experts, interviews, document analysis, and analyzed using qualitative data analysis methods.

Qualitative research methods, such as in-depth interviews, focus groups, participatory observations, document analysis, quality content analysis and case studies are more appropriate for early stages of the research and development of new theories, while quantitative research methods are more relevant for testing the developed frameworks and search for its improvement. In practice, each research method is not purely quantitative or qualitative as it contains some elements of both (Miles 1994).

More recent literature on research methods distinguishes the third type of research method – mixed research method, which includes both types of research methods.

A mixed methods approach is one in which the researcher tends to base knowledge claims on pragmatic grounds (e.g., consequence-oriented, problem-centred). The approach employs strategies of inquiry which involve collecting data either simultaneously or sequentially to best understand the research problem. The data collection also involves gathering both numeric information and text information so that the final database represents both quantitative and qualitative information (Creswell 2003).

The authors suggest using such mixed method – a mix of qualitative and quantitative research methods, to achieve the intended goal of developing relevant methodology for assessment of corporate identity management in health care. Particular qualitative methods and a particular quantitative method are chosen to complement each other within different research stages in the most appropriate sequence to develop the proper methodology and achieve the research purpose.

Qualitative research methods

Qualitative methods such as expert interviews and expert surveying are used to research to obtain industry expert or the „insider" views, validate the assumptions made earlier during the corporate identity theory review and health care industry analysis research stages. These methods are also used to clarify expert understanding of

the corporate identity concept and their perception of the conceptual framework for management of corporate identity dimensions in the health care.

A qualitative approach is one in which the inquirer often makes knowledge claims based primarily on constructivist perspectives and the multiple meanings of individual experiences meanings socially and historically constructed, with an intent of developing a theory or pattern or advocacy/participatory perspectives, which in practice means political, issue-oriented, collaborative, or change oriented nature or both. It also relates to the strategies of inquiry (i.e. narratives, phenomenologies, ethnographies, grounded theory studies, or case studies). The researcher collect open-ended, emerging data with the primary intent of developing themes from the data (Creswell 2003).

The choice of qualitative research methods is supported by the leading corporate identity researchers who suggest using mainly qualitative research methods (i.e. expert method) to research expression of the corporate identity dimensions within particular industry (Melewar 2012, Balmer 2012).

Expert methods are the research method mainly used with aim of drawing out informed opinion and elicitation of knowledge. There exist several kinds of expert methods, like interviews, Delphi method, expert panels, brainstorming, road mapping, scenario analysis, SWOT analysis.

One of the most commonly used expert methods is a Delphi method, developed in 1950s at the RAND Corporation in Santa Monica, California, U.S. "Project Delphi" was the original name for an Air Force-sponsored RAND Corporation study, starting in the early 1950's, concerning the use of expert opinion in defence-related research (Dalkey and Helmer 1963). Delphi method is considered to be combination of qualitative and quantitative processes and is based mainly upon the opinions and judgments of selected experts. According to Brown (1968), “the technique puts the emphasis on informed judgment. It attempts to improve the panel or committee approach by subjecting the views of individual experts to each other’s criticism in ways that avoid face to face confrontation and provide anonymity of opinion and of arguments advanced in defence of those opinions.”

Authors suggest that a modified Delphi method – interviews followed by the expert surveys should be used to clarify the understanding of the conceptual framework by the industry experts (enterprise representatives, State officials, opinion leaders, etc.). As the aim of this research stage is to obtain critical expert opinion on the relevance existing corporate identity models to the current business environment of the selected health care market, the assessment of the conceptual framework by experts should take place in two rounds to align subjective interpretations and reach a common viewpoint on status quo.

Therefore, expert interviews should be carried out to obtain insider views on the actual managerial trends in the health care industry. Then the following expert survey is used to clarify expert understanding of the corporate identity concept and their attitude towards assumptions included within the conceptual model for the management of corporate identity dimensions.

Expert interviews and surveying form the qualitative research part and correspondingly the third stage of the research (see Fig. 3.)

Fig. 3. The third stage of research – Qualitative research

Quantitative research methods

As for quantitative research, quantitative data reflect the quantitative trend of particular process or event. According to Creswell (2003), the deductive approach typically used in quantitative research evolves in the following sequence:

- Researcher Tests or Verifies a Theory;
- Researcher Tests Hypotheses or Research Questions from the Theory;
- Researcher Defines and Operationalizes Variables derived from the Theory;
- Researcher Measures or Observes Variables.

Generally, a quantitative approach is one in which the investigatory primarily uses postpositive claims for developing knowledge (cause and effect thinking, reduction to specific variables and hypotheses and questions, use of measurement and observation, and the test of theories), employs strategies of inquiry such as surveys, and collect data on predetermined instruments that yield statistics data.

Taking into account the limitations of qualitative research methods, the quantitative research method in form of survey should be utilized to determine and assess the degree of actual corporate identity management in the chosen health care services market and general business environment.

Therefore, quantitative research should be regarded as the fourth stage (see Fig. 4.) of research to provide the methodology for the assessment of corporate identity management in health care by reflecting on the actual degree and implication of the corporate identity

management among the health care industry participants (not stakeholders!).

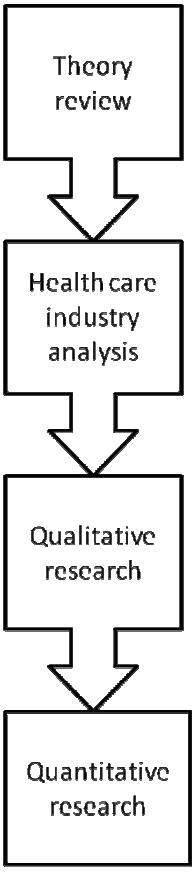

Fig. 4. The fourth stage of research – Quantitative research

Research strategy

According to classification by Creswell (2003), the research design suggested by the authors can be regarded as the sequential exploratory strategy. Such kind of strategy is conducted in two phases with the priority generally given to the first phase, and it may or may not be implemented within a prescribed theoretical perspective. In contrast to the sequential explanatory approach, where first quantitative data is collected, this model is characterized by an initial phase of qualitative data collocation and analysis. The priority is given to the qualitative aspect of the study and the findings of these two phases are then integrated during the interpretation phase.

The purpose of this strategy is to use quantitative data and results to assist in the interpretation of qualitative findings. Unlike the sequential explanatory approach, which is better suited to explaining and interpreting relationships, the primary focus of this model is to explore a phenomenon. Morgan (1998) suggested that this design is appropriate to use when testing elements of an emergent theory resulting from the qualitative phase and that it can also be used to generalize qualitative findings to different samples. Therefore, the chosen strategy is relevant in the given case due to necessity to test the assumptions included in the initial version of the conceptual framework for the management of corporate identity dimensions. The sequential exploratory strategy is also suggested when researchers develop and test an instrument (Creswell, 2003).

The sequential exploratory strategy has similar or few of the advantages from sequential explanatory model. Its two-phase approach makes it easy to implement and straightforward to describe and report. It is useful for exploring a phenomenon but also expanding on the qualitative findings. As for disadvantages, the sequential exploratory model requires a substantial length of time to complete both data collection phases, which can be a drawback for some research situations (Creswell 2003).

Conclusions

The purpose of the article was to develop methodology for assessment of the corporate identity management in the health care. Authors reached the stated research purpose by bringing together the four research stages and suggesting that these stages should be implemented in the following order: theory review, health care industry analysis, qualitative research and quantitative research. The theoretical discussion of corporate identity concept provides researchers with definition of the corporate identity generic concept. The review of corporate identity management models introduces the conceptual model for the management of corporate identity dimensions. The health care industry analysis provides insights regarding the health care industry specifics and need to adjust the conceptual corporate identity management framework taking into account the nature of the industry.

The sequential exploratory research strategy, combining qualitative (expert interviews and expert surveys) and quantitative research methods (health care company surveys), is suggested to research applicability of the conceptual framework for assessment of the actual degree of corporate identity management in the health care industry within the particular market conditions.

Therefore, authors have successfully introduced methodological framework and specified a ready-to-use research design for assessment of the corporate identity management in the health care industry, thus, contributing to the research of corporate identity management problems in relation to health care industry and public sector enterprises as such.

Future research should be aimed for the empirical approbation of the introduced methodology for assessment of the corporate identity management in the health care within selected health care industry environment.

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Didzis Rutitis. Degree: MBA, PhD Student at BA School of Business and Finance, Riga, Latvia. Workplace (-s): MFD Healthcare Group. Position: project manager. Publications: 8 publications, co-author of a book “Business across the borders”. Research interests include: corporate identity, healthcare services. Address: K.Valdemara 161, LV-1013, Riga, Latvia, E-mail address: didzisr@gmail.com.

Anda Batraga. Degree: Dr.oec. Workplace (-s): University of Latvia. Position: Associate professor. Publications: 15 publications. Research interests include: marketing management. Address: Aspazijas bulvaris 5, LV-1001, Riga, Latvia, E-mail address: anda.batraga@lu.lv.

Kristofers Ritovs. Degree: Mg.man.sc., PhD Student at BA School of Business and Finance, Riga, Latvia. Workplace (-s): Kontaktu Vestnieciba Ltd. Position: Director. Publications: 3 publications. Research interests include: international trade and external markets. Address: Unijas 47, LV-1039, Riga, Latvia, E-mail address: kristofers@vestnieciba.com.