

Redesigning home care

Citation for published version (APA):

Peeters, T. H. G. A. (2015). *Redesigning home care: From a bureaucratic to a sociotechnical type of provider organisation*. [Doctoral Thesis, Maastricht University]. Datawyse / Universitaire Pers Maastricht. <https://doi.org/10.26481/dis.20151126tp>

Document status and date:

Published: 01/01/2015

DOI:

[10.26481/dis.20151126tp](https://doi.org/10.26481/dis.20151126tp)

Document Version:

Publisher's PDF, also known as Version of record

Please check the document version of this publication:

- A submitted manuscript is the version of the article upon submission and before peer-review. There can be important differences between the submitted version and the official published version of record. People interested in the research are advised to contact the author for the final version of the publication, or visit the DOI to the publisher's website.
- The final author version and the galley proof are versions of the publication after peer review.
- The final published version features the final layout of the paper including the volume, issue and page numbers.

[Link to publication](#)

General rights

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the public portal.

If the publication is distributed under the terms of Article 25fa of the Dutch Copyright Act, indicated by the "Taverne" license above, please follow below link for the End User Agreement:

www.umlib.nl/taverne-license

Take down policy

If you believe that this document breaches copyright please contact us at:

repository@maastrichtuniversity.nl

providing details and we will investigate your claim.

Valorisation

Valorisation

This thesis describes the effectiveness of initiatives of Dutch homecare provider organisations to change their organisation from a bureaucratic to a socio-technical type of organisation. It also addresses the wider question of whether the intended change can be successful at all in the turbulent environment provider organisations must respond to. In this addendum we briefly indicate how this study could be beneficial for society by exploring its social value.

We address the social relevance of the most important research findings and argue why they are of interest to policymakers within and outside provider organisations. We focus on the strategic management of provider organisations, because they hold the key to effective organisational change. If they succeed in bringing about the conditions for effective change, homecare clients, professionals and the society as a whole will benefit in terms of improvements in the quality and efficiency of the care provided, the clients' appreciation of the care and the quality of the work carried out by care professionals.

The results of our study justify the conclusion that provider organisations see themselves locked in a 'double hold': they struggle with a self-reinforcing internal vicious circle of bureaucracy while being squeezed by an external world also featuring the characteristics of a similar vicious circle of bureaucracy. In addition to internal bureaucratic mechanisms, homecare provision is increasingly affected by external factors including accountability mechanisms, regulatory changes and expenditure cuts. The impact of the external world indicates an interesting situation: whereas their turbulent environment necessitates provider organisations to change to a socio-technical type of design, a change to a 'full' socio-technical design requires the condition that the environment is not 'too turbulent'. However, our findings suggest that the current homecare environment is turbulent, which makes that the external world severely hinders provider organisations in achieving a socio-technical type of design.

The situation of the double hold has several implications for policy officers *within* provider organisations. It requires them to find ways to break the internal vicious circle of bureaucracy while simultaneously exploring new ways to cope with external bureaucratisation. With regard to breaking the internal vicious circle of bureaucracy, our study yields several recommendations regarding the actions that could be taken. First, policy officers should not underestimate the importance of a change strategy in accordance with the socio-technical principles. The results of our study suggest that an effective change from a bureaucratic to a socio-technical type of design requires a change strategy which follows the socio-technical design principles, embraces the

preparation and involvement of employees, and invests in team development. In addition, policy officers should not underestimate the influence of the organisation's historical context. An unfavourable point of departure, for instance in terms of a difficult merger or negative financial results in the past, may have a persistent negative influence on the change process. Policy officers must find ways to deal with a turbulent historical context, confronting them with a dilemma: their organisation must change to respond to a changing environment, but actually suffers from change fatigue hindering effective change.

Second, policy officers must understand that a change from a bureaucratic to a socio-technical type of design can only succeed if they are willing to consider the necessary reorganisation from an integral perspective. Partial improvements do not work. By following the socio-technical design sequence, they should outline a new architecture which entails optimal regulatory capacity at the level of teams. It is not sufficient and even ineffective to make the teams responsible for only part of the primary activities.

Third, with regard to the influence of the external world, policy officers must realise that an effective change to a socio-technical type of design requires that the change process is not considered solely from the internal, organisational perspective. To enhance the effectiveness of change, policy officers must be aware of the strong influence of the external environment on it. They should realise that their organisation is squeezed by the external world, which hinders them in achieving the design aspired to. As a consequence, they must find ways to get out of the double hold, thereby acknowledging that any initiative to realise flexibilisation is a better alternative in a turbulent environment than maintaining a bureaucratic architecture. As explained in chapter 8, policy officers may explore an exploitative route, which assumes that provider organisations focus on improving their current way of homecare provision within the external world in which they operate. They take their bureaucratic environment as a given and could seek ways to dampen the impact of external influences. Policy officers may also follow an explorative route to explore new 'business models' in addition to their current way of homecare provision. For instance, they might think of potential groups of clients in the private market to avoid bureaucratisation in the public sector. This route is also relevant now that the government is reducing the public funding of formal homecare services, creating room for private initiatives. The situation of the double hold also necessitates more radical trajectories to be explored. As a third option, policy officers may follow an entrepreneurial route of investing in new 'business' opportunities while leaving the current way of homecare provision. As stated in chapter 8, they might draw inspiration from *Buurtzorg Nederland*, which started the entrepreneurial route a few years ago. There are several news stories suggesting that the government is encouraging the new organisation's innovative approach, which suggests that the organisation has found a

way to stay out of the double hold. However, it takes courage to stray off the beaten track and develop an out-of-the-box attitude.

Policy officers within provider organisations must critically consider the aforementioned recommendations before initiating a change to a socio-technical type of design. There is always the risk of starting a reorganisation without sufficiently considering the conditions required to accomplish an effective change. This may lead to a halfway implementation of the new design without achieving its proposed benefits.

Our study also includes some recommendations regarding the actions that could be taken by policymakers *outside* provider organisations. Policymakers in the field of homecare should become more aware of the implications of their policies for provider organisations. They must learn to understand that their attitude is to respond on problems and challenges in a bureaucratic way, by introducing more and more accountability mechanisms, performance indicators and regulations. They should set a step aside and think about ways to create more flexibility instead of complexity. In other words, they must consider on how to break the external vicious circle of bureaucracy. Just as provider organisations have started to consider their traditional type of design, policymakers in the homecare environment must explore ways to reduce complexity. However, it remains to be seen if policymakers can fundamentally change the system into a flexible system which does no longer lock provider organisations in a double hold. News stories on the current reform of long-term care do not speak of decreasing complexity. On the contrary, they suggest even more complexity and uncertainty. However, ever more bureaucratic responses from the homecare environment will inevitably lead to a system that becomes overly complex and, as a consequence, structurally 'out-of-control'.