

A New Dawn is Breaking in Medical Service

Supports and hinders for change in professional organisation

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Abstract

Implementation of decisions in professional organisations is characterized by the board making decisions for the professions to perform. In this thesis a decision concerning how *process directed method of working* in medical service is studied. The implementation was studied at two hospitals and units with similar medical alignment.

Earlier research shows that medical service is hard to change. The aim with this study is to identify what supports and what hinders the professions' implementation of a new working method and to explain why. The professions are registered nurses and physicians. They have good knowledge of the medical service and a great interest in good performance for patients as well as themselves. Characteristic is that they carry out decisions if they correspond with their norms and values which describe how medical service is to be performed, i.e. the institutions of medical service.

Process directed method of working diverts from the traditional working methods in medical service. The activities in medical service are synchronized into a logical chain without repetitions. It gives a standardized medical service for all the patients included in one group of patients or one diagnosis. The new way of working changes what medical service is offered, where it is performed and by whom. The working method gives medical, as well as administrative, changes. Medically, questioning and changing alters the contents of medical service. Administratively, the medical service directing and organisation is changed. The overall view on medical service is developed with this working method, whether it is performed in one or several units.

Established facts for the implementation of the working method is development of the dialogue, which is held between the professions, by real enthusiasts and offers from each hospital management respectively about education and stimuli. The professions' satisfaction with the new working method also supports the change. Hindering the implementation of the method are activities such as rounds, reports and documentation and they are hard to adapt into the processes since they have developed into ceremonies that could wear traces of path dependence. On top of this there is a general expressed conception of lack of time, which also has developed into a ceremony.

Despite that the study showed that existing institutions agree with the decided working method and the implementation is strong when it comes to available bases, the grade of implementation varies and problems of implementation are identified. If the organisation is marked by contentment, the existing working method will be preserved. If the decision is forced upon the professions they will re-form it or re-interpret it.

If path dependent activities exist, only parts of the working method are changed which the professions' experience as frustrating. However, if the professions participate in the implementation of process directed working method through dialogue, real enthusiasts and education and stimuli, the traditional working method will change.

Keywords

Public sector, reform, health care, health facilities, medical service, implementation, institutional theory, process oriented, standardization, routines, searchers, quality insurance, quality models, interview, professions, dialogue, real enthusiasts, satisfaction, rounds, reporting and documentation.