

# **Employee Participation in Health: Three Victorian Case Studies**

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# Definition of Employee Participation

**Markey and Hodgkinson (2003)** “... any workplace process that allows employees to exert some influence over their work and the conditions under which they work”

**Activity Types** - a dual typology of participation is used:

**Direct:** informal, task -focused, ad hoc groups, semi-autonomous groups, suggestion schemes

**Indirect:** joint consultative committees (Lansbury and Prideaux 1980)

# Why Health?

- Limited research in public health field - “little of this [employee participation] research has been conducted in hospital settings.” (West et al 2002)
- Important industry - international concern with health service design (Locock 2003)
- High adoption of technology and low uptake of improved methods (Bartram, Stanton, Leggat, Casimir and Fraser 2007)

# EP in Health Research Project: The Journey So Far

- Literature research and identification of research model
- Survey -Executive Management & HRM  
132 health services and 536 surveys
- Key Health Informant Interviews
- Case Studies (3) – Senior management interviews and employee focus groups

# Research Literature

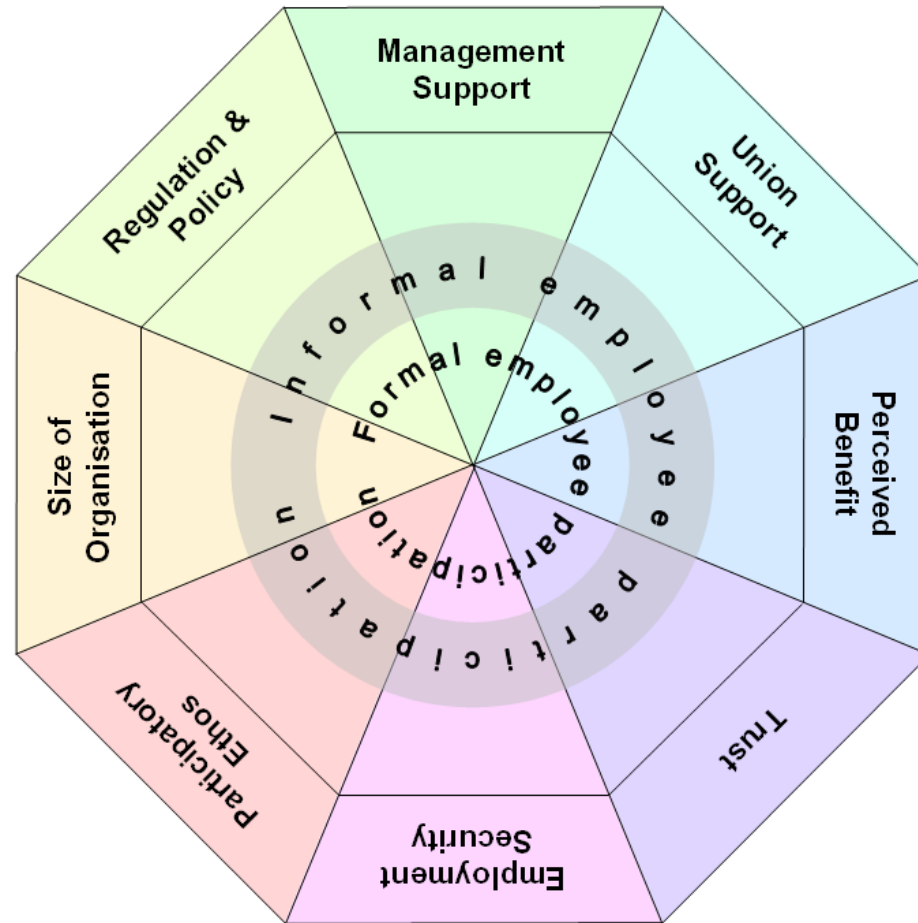
## Preconditions to Participation

- **Management Support** (Poutsma et al 2003; Cully et al 1999; Lawler 1987)
- **Union Presence** (Brown and Oxenbridge 2004; Hodgkinson 2001; Cooke 1994)
- **Perceived Benefit** (Poutsma et al. 2003; Appelbaum et al 2000; Walters and Frick 2000)
- **Public Policy Context** (Dundon et al 2004)

# Research literature Preconditions to Participation

- **Job Security** (Pruess & Lautsch 2002; Appelbaum et al 2000; Levine 1990)
- **Trust** (Appelbaum et al 2000; Brown & Oxenbridge 2003)
- **Size of Organisation** (Brown et al 2007; Bartram 2005)
- **Participatory Ethos** (Leggat, Bartram, and Stanton 2006; Swerisson 2006)

### Pre-conditions of Employee Participation



# EP in Public Health: Industry Observations

- Unionised
- Employment security high
- Management and union support for EP
- Trust - considered important, but mostly regarded as absent
- Public Policy Context - limited knowledge of policy
- Size - divergent views
- Support for informal channels evident
- Little evidence of continuous EP



# Case Studies (3)

## 1 – **Community Health Service** (Hillside)

- Outer Metropolitan on two sites
- \$AUS 4 million, 90 employees
- CEO interview
- 2 employee focus groups – 1 per site

## 2 – **Regional Hospital** (Regional)

- \$AUS 30 million, 550 employees
- CEO & HRD interviews
- 2 focus groups:
  - » non-management employees,
  - » workplace union reps (members of Consultative Committee)

## 3 – **Emergency Department** (MetroED)

- Part of large metropolitan health service
- Approximately 200 staff
- Health Service HRD and ED Director and ED Nurse Manager interviews
- 1 employee focus group

# Case Study One

## Community Health Service

Employee involvement - informal and broad

- Management Style
  - open & encouraging
  - support for EP
- Unions
  - no presence
- Benefits
  - tangible outcomes
- Trust
  - positive work environment
- Public Policy
  - some management recognition
- Size
  - Smallness beneficial
- Participatory Ethos
  - well entrenched

# Community Health Service Facilitators & Impediments

## **Facilitators**

- Management (CEO) support
- Recognition of need for time
- High trust & management genuineness
- Small size

## **Impediments**

- Time and workload
- Hierarchical organisation (CEO view)
- Communication diminished (2 sites)
- Employee cynicism (limited)

# Regional Hospital

Employee involvement - formal committees:  
Joint Consultative and OH&S Committees;  
- informal activity

- Management Style - formal support for EP  
- autocratic
- Unions - local representatives active  
- some union/management aggravation
- Policy - acknowledged by management
- Benefits - outcomes limited
- Trust - low in Executive, cynicism
- Size - medium sized, conducive to interaction

# Regional Hospital Facilitators & Impediments

## **Facilitators**

- CEO & HRD formal support
- Engagement of union
- Constructive industrial environment
- Small size permits personal contact

## **Impediments**

- Time related problems
- Lack of trust in CEO & Executive
- Formal committees moribund, mainly information sharing
- Inter union rivalry
- Lack of regular & timely feedback

# MetroED

Employee involvement - formal Employee User Groups  
- informal meetings

- Management Style - support for EP  
- lacks commitment
- Unions - adversarial intervention  
- no ongoing involvement
- Benefits - outcomes positive
- Policy - no acknowledgment
- Trust - partial evidence, cynicism
- Size - small sized, conducive to interaction

# MetroED

## Facilitators & Impediments

- Facilitators**
- Management support
  - Willingness to contribute, reservations
  - Small size permits personal contact

- Impediments**
- Genuineness of management questioned
  - Low level of trust
  - Absence of budgeted time
  - Lack of regular & timely feedback from management

# Summary

- Mix of pre-conditions in case studies, majority evident
- Predict formal EP in 3 cases – outcomes different
- **CHS**
  - informal processes entrenched & valued
  - CEO support viewed as genuine
- **Regional Hospital**
  - processes formal, but not valued
  - EO viewed as autocratic and trust with senior management low
  - Employees cynical and management support questioned
- **MetroED**
  - mix of formal and informal during major redevelopment
  - management commitment low
  - employees critical of management, but acknowledge benefit of their input

**Management support critical, most likely if strategic benefit perceived**



