

Organizing Professional Leadership Hierarchies

- *How a union agreement reshuffled the status of different modes of professional conduct in Danish hospitals*

Public management reforms worldwide have led to reconfigurations of professional work and the organizations in which it takes place (Adams 2020). Often installing managerial hierarchies parallel to professional hierarchies, these reforms have stratified what it means to be a good professional leader, creating 'hybrid' positions at the intersection between professions and organizations (Kirkpatrick et al 2023, Waring 2014). While multiple studies have focused on hybrid professional leaders and changes in their identities, practices and career aspirations (i.e. McGivern et al. 2015), we know far less about the implications of management reforms for intra-professional status hierarchies (Kirkpatrick et al. 2023). In response, this study investigates the question: How does a management structure reform come to alter the status and co-existence of (what I refer to as) 'modes of professional conduct'?

This paper reports from an illustrative case, namely a reform of the managerial structure for doctors employed at public hospitals in Denmark. Adopted through a union agreement in 2021, this reform entailed a mandatory change of the hierarchical structure for doctors at Danish hospitals, involving the introduction of a new managerial position between the level of senior consultants [Da: overlæger] and clinical directors [Da: Cheflæger]. This change resulted in intra-professional conflicts and negotiations over the status of what Friedson (1980) would refer to as 'knowledge elites', i.e. the professionals who work to retain professional control over the *content* of expert knowledge (Waring 2014 p 690) and the 'administrative elites', i.e. the professionals who engaged in bureaucratic activities that framed the *context* of the work reflected professional interests (ibid.).

Theoretically, the paper combines sociological literature on professional (re)stratification (Waring 2014, Adams 2020, Friedson 1985) with pragmatic studies of valuation (Dussauge et al 2015, Hauge 2016), to arrive at an approach that sheds light on the dynamics of establishing the professional jurisdictions of a new managerial position, while also attending to the value conflicts this process generated in terms of defining the social status of different professional modes. This approach responds on calls to enrich the sociology of professions by using new theories and concepts to analyse and understand boundary struggles between professionals (Schuurmans et al 2023, Noordegraaf, 2011). Sociological studies of professional re-stratification provides insights into the processes, mechanisms, and implications of professional re-stratification and shed light on the changing dynamics of professional work and the reconfiguration of professional boundaries in response to broader social, economic, and organizational changes. Pragmatic studies of valuation, then, shed light on how values are constructed, negotiated, and enacted in social contexts. They provide insights into the complex interplay between individuals, communities, and broader sociocultural dynamics in the attribution and negotiation of value.

Based on a comprehensive qualitative data material generated through group interviews with doctor-managers from different hierarchical positions at three Danish hospitals conducted in 2021 and 2023, this paper will result in new knowledge on how the reform of a public management structure can alter professional leader roles and revalue the organizational status of co-existing modes of professional conduct.

Literature

- Adams, T. L. (2020). Professional employees and professional managers: conflicting logics, hybridity, and restratification. *Journal of Professions and Organization*, 7(1), 101-115.
- Dussauge, I., Helgesson, C. F., & Lee, F. (Eds.). (2015). *Value practices in the life sciences and medicine*. Oxford University Press (UK).
- Freidson, E. 1985. 'The Reorganization of the Medical Profession.' *Medical Care Review* 42: 11–35
- Hauge, A. M. (2016). The organizational valuation of valuation devices: Putting lean whiteboard management to work in a hospital department. *Valuation Studies*, 4(2), 125-151.
- Kirkpatrick, I., Zardini, A., & Veronesi, G. (2023). Management reforms, re-stratification and the adaptation of professional status hierarchies: The case of medicine in publicly owned hospitals. *Public Management Review*, 1-24.
- McGivern, G., G. Currie, E. Ferlie, L. Fitzgerald, and J. Waring. 2015. "Hybrid Manager-professionals' Identity Work: The Maintenance and Hybridization of Medical Professionalism in Managerial Contexts." *Public Administration* 93 (2): 412–432. Available at. doi: 10.1111/padm.12119.
- Noordegraaf, M. (2011). Risky business: How professionals and professional fields (must) deal with organizational issues. *Organization Studies*, 32(10), 1349–1371. <https://doi.org/10.1177/0170840611416748>
- Schuurmans, J., Stalenhoef, H., Bal, R., & Wallenburg, I. (2023). All the good care: Valuation and task differentiation in older person care. *Sociology of Health & Illness*.
- Waring, J. (2014). Restratisation, hybridity and professional elites: questions of power, identity and relational contingency at the points of 'professional–organisational intersection'. *Sociology Compass*, 8(6), 688-704.

Institutionalizing flexibility:

Leading the transformation towards hybrid work systems

Claudia Manca, University of Bologna, Bologna, claudia.manca@unibo.it

Louise Harder Fischer, IT-University, Copenhagen, louf@itu.dk

Christine Ipsen, Technical University of Denmark, Kongens Lyngby, chip@dtu.dk

Extended Abstract

Hybrid work is becoming increasingly prevalent. As the COVID-19 pandemic has indelibly altered the norms related to being physically present at the office, companies worldwide have started allowing employees to work from alternative locations, including home. Hybrid work holds the potential to enhance autonomy through flexibility, letting people adjust working conditions to individual preferences and needs (Halford, 2005). The transition towards hybrid work, hence, places employees on a trajectory of individualization; it allows them to overcome the social norms that have previously governed the workplaces in a way to ensure the system's adaptability (cf. Gonsalves, 2020).

However, the rise of hybrid work has prompted many organizations and managers to question whether this increased autonomy comes at odds with the socialization dynamics needed to carry out collective work (Fischer and Grunnet, 2021). With this regard, it is emblematic the case of Elon Musk, who has recently advocated the way back to a traditional "office-centric" work system, withdrawing the flexibility option for Twitter's employees¹. This choice's rationale lies in the documented challenges of sustaining relationships and collective processes in hybrid work, including coordination, communication, creativity, and culture (Mortensen and Haas, 2021; Schinoff et al., 2020). These challenges disclose how difficult it is to keep the hybrid work system individualized, adaptable, and yet socialized and organized for a common purpose, prompting us to wonder: *how can organizations reconnect individualization and socialization while leading the transformation towards hybrid work?*

Our study addresses this question by unveiling how organizations reconnect individualization and socialization trajectories while changing the work system, focusing on the role of first and second-line managers. These managers, indeed, have been found to play a

¹ <https://www.theguardian.com/technology/2022/jun/01/elon-musk-return-to-office-pretend-to-work-somewhere-else>

crucial role in hybrid settings for keeping the group organized while sustaining individual flexibility (e.g., Fischer and Grunnet, 2021; Ipsen et al., 2022).

To unveil the process through which managers reconnect trajectories, we propose drawing on theories on sociotechnical change, particularly the one of unstable equilibrium by Fischer and Baskerville (2022). Sociotechnical change entails the co-evolving alterations of work systems' social and technical aspects as interconnected parts combined into complex structures (Savaget et al., 2019). Bringing this perspective into the study of hybrid work allows us to explain how the alterations of a system's technical and material aspects trigger a change in its social constituents, including practices and relationships, and *vice versa*. This process unfolds until the work system reaches a new equilibrium between its components. Yet, the unstable equilibrium perspective advocates this equilibrium can only be temporary as the balancing forces also push the system forward, maintaining it flexible and adaptable, although socialized (Empson and Alvehus, 2020; Fischer and Baskerville, 2022). As we illustrate, by adopting an unstable equilibrium lens, we can explain the creation and maintenance of hybrid work systems through a generative mechanism that arises as managers enact a pattern of actions to reconnect individualization and socialization (Fischer and Baskerville, 2022). This reconnection keeps the system flexible and adaptable but also going and organized, avoiding a recession to the previous “office-centric” system.

Drawing on an in-depth, longitudinal study of a leading global healthcare organization in the Nordics facing the transformation towards hybrid work, we investigate how managers actively reconnect these two trajectories to institutionalize change while favoring adaptability. From our data, we derive two patterns of individualization and socialization that arise in hybrid work systems – respectively, at the level of individuals and social relations. The investigation enables us to identify a generative pattern of managerial actions that reconnect the two trajectories, answering our research question. These actions include *individualizing*, *synchronizing*, *norming*, and *engaging*. Our results suggest this pattern is activated when managers work to recreate the common good (Hofkirchner, 2014; Fischer, 2020) by treating information and affect as shared group resources. By disclosing this pattern, we contribute to the ongoing discussion on effective management and leadership in hybrid settings (cf. Fischer and Grunnet, 2021; Ipsen et al., 2022; Kossek et al., 2015), highlighting how managerial actions shape trajectories and their connections. We also posit these actions as work that seeks to institutionalize local practices and discourses of flexibility, contributing to the literature on institutional work (e.g., Lawrence and Dover, 2015).

References

- Empson, L. and Alvehus, J. (2020). 'Collective leadership dynamics among professional peers: Co-constructing an unstable equilibrium'. *Organization Studies*, 41(9), 1234–1256.
- Fischer, L.H. (2020). 'Theorizing Universal Socio-Technical Mechanism'. *Proceedings of the 6th International Workshop on Socio-Technical Perspective in IS Development (STPIS 2020)*, Virtual conference in Grenoble, France, June 8-9, 2020. Volume 2789 of CEUR Workshop Proceedings, pages 14-18, CEUR-WS.org, 2020
- Fischer, L.H. and Baskerville, R. (2022). 'Explaining sociotechnical change: an unstable equilibrium perspective', *European Journal of Information Systems*, DOI: 10.1080/0960085X.2021.2023669.
- Fischer, L.H. and Grunnet, F. (2021). 'Effective leadership approaches in sociotechnical change. *ECIS 2021 Research Papers*. 132. https://aisel.aisnet.org/ecis2021_rp/132
- Gonsalves, L. (2020). From face time to flex time: The role of physical space in worker temporal flexibility. *Administrative Science Quarterly*, 65(4), 1058-1091.
- Halford, S. (2005). 'Hybrid workspace: Re-spatialisations of work, organisation and management', *New Technology, Work and Employment*, 20(1), 19–33.
- Hofkirchner, W. (2014). 'On the validity of describing 'morphogenic society' as a system and justifiability of thinking about it as a social formation'. In M.M. Archer (ed.), *Late modernity: Trajectories towards morphogenic society, social morphogenesis*: 119–141. Springer International Publishing.
- Ipsen, C., Kirchner, K., Andersone, N., and Karanika-Murray, M. (2022). 'Becoming a Distance Manager: Managerial Experiences, Perceived Organizational Support, and Job Satisfaction During the COVID-19 Pandemic.' *Front. Psychol*, 13:916234, DOI: 10.3389/fpsyg.2022.916234.
- Kossek, E.E., Rebecca J.T. and Lautsch, B.A. (2015). 'Balanced workplace flexibility: Avoiding the traps'. *California Management Review*, 57(4), 5–25.
- Lawrence, T.B. and Dover, G. (2015). 'Place and Institutional Work: Creating Housing for the Hard-to-house'. *Administrative Science Quarterly*, 2015, 60(3), 371–410.
- Mortensen, M. and Haas, M. (2021). Making the hybrid workplace fair. *Harvard Business Review*, 24, 1–6.
- Schinoff, B. S., Ashforth, B. E., and Corley, K. G. (2020). Virtually (in) separable: The centrality of relational cadence in the formation of virtual multiplex relationships. *Academy of Management Journal*, 63(5), 1395-1424.

The Leadership Dynamics of Systems Change
The 21st International Studying Leadership Conference
10th-12th December 2023

Leadership challenges in the face of work automation

Jette Ernst, PhD, Associate Professor, Roskilde University

The automation of work with new technology represents an ongoing profound change of work and the organization of work in the hospital sector. Technologies such as robots carry potential transformative effects that are often described as ‘disruptive’ (Fleming, 2019; Vesa & Tienari, 2020). It has thus been demonstrated that rather than fitting into already established work processes, technology actively transforms them by changing the structural and systemic relations of work (Barrett et al., 2012; Orlikowski, 2010), which present new complexities in the leadership of automated professional work. This paper thus focuses on the challenges to leadership and leaders in the face of automation with robots.

A predominant motivation for introducing automation is the improvement of work efficiency in terms of throughput and costs. Concerns for efficiency and productivity have been a dominant concern for the hospital sector through decades (Andersen & Jensen, 2010; Figueras et al., 1998). A salient question concerns how such attempts influence work and the quality of it and which challenges leaders face in this regard. Leaders of hospital departments in Denmark are, almost without exception, trained as nurses and doctors (Kirkpatrick et al., 2011). Commentators have noted a split between professional and corporate interests of such ‘hybrid managers’, as they are often termed (Kirkpatrick et al., 2021; Noordegraaf & Schinkel, 2011). These leaders’ formal authority is issued by the hospital management and the hospital board and ultimately by regional and national politicians. Simultaneously they are under pressure to reconcile political interests with the interests of the professionals in their departments, which makes leadership susceptible to several influences and pressures inside and outside the individual hospital. Hospital leadership has thus been described as a ‘contested terrain’ (Ernst, in press; Kirkpatrick et al., 2011, p. 490). The following excerpt from the author’s (unpublished) empirical work by a leader of a hospital laboratory could indicate that automation challenges professional measures of good quality in the pursuit of expanded throughput.

I would like some statistics for how many samples with errors we run. Where do these samples come from? And I would like statistics for how many samples are filled properly. Who decides what filled properly is – is it the company [the vendor] or me? [...] We need an all-time transparency in the system because there is no doubt that this practice is less and less transparent. (Interview).

The hospital field is characterized institutionalized role hierarchies and boundaries (Currie et al., 2009; Ernst, 2020), and another question concerns how robot technology may change professional roles, status, collaboration and the boundaries between professions (Barrett et al., 2012; Beane & Orlikowski, 2015). While robots and automation are often constructed as benefits to staff in relieving them from trivial tasks and thereby freeing time for more complicated work (Hentout et al., 2019), commentators have raised concerns that professions may change in significant and unanticipated ways in the context of emerging technologies. It was, for example, demonstrated that advanced surgical robots, while relying on human action, may simultaneously replace some staff and change the social collaboration of the remaining staff (Beane, 2019; Wasen, 2010). New relational configurations in the shape of collaborative constellations and interdependencies are likely to occur while others will disappear, and new professionalization struggles are likely to emerge (Barrett et al., 2012; Susskind & Susskind, 2015).

Leaders in the hospital sector must thus navigate the concerns of the professions with regards to how automation influences their work and professional relations and status, including efforts to gain their acceptance of the robots entering their workspaces in conjunction with the more operational concerns of hospital managements and politicians. A leader of the aforementioned hospital laboratory explains:

How well it is received has to do with what you promise your staff. [Robot X] has to a lesser extent been welcomed because people have been promised that it could do everything and they should do almost nothing in return. But the robot actually demands quite some manual handling. So, you must be aware of what you promise people and what they can expect from these machines. (Interview).

The leadership of automation in professional contexts stands with a few exceptions unexplored. Drawing on approaches that see leadership and organizational power dynamics as relationally

constituted (Cunliffe & Eriksen, 2011; Fleming & Spicer, 2014; Knights & Roberts, 1982; Uhl-Bien & Ospina, 2012) this research explores this new leadership terrain.

References

- Andersen, P. T., & Jensen, J.-J. (2010). Healthcare reform in Denmark. *Scandinavian Journal of Public Health*, 38(3), 246-252. <https://doi.org/http://dx.doi.org/10.1177/1403494809350521>
- Barrett, M., Oborn, E., Orlikowski, W. J., & Yates, J. (2012). Reconfiguring Boundary Relations: Robotic Innovations in Pharmacy Work. *Organization Science*, 23(5), 1448-1466.
- Beane, M. (2019). Shadow Learning: Building Robotic Surgical Skill When Approved Means Fail. *Administrative Science Quarterly*, 64(1), 87-123. <https://doi.org/10.1177/0001839217751692>
- Beane, M., & Orlikowski, W. J. (2015). What difference does a robot make? The material enactment of distributed coordination. *Organization Science*, 26(6), 1553-1573.
- Cunliffe, A. L., & Eriksen, M. (2011). Relational leadership. *Human Relations*, 64(11), 1425-1449. <https://doi.org/10.1177/0018726711418388>
- Currie, G., Koteyko, N., & Nerlich, B. (2009). The dynamics of professions and development of new roles in public services organizations: the case of modern matrons in the english NHS. *Public Administration*, 87(2), 295-311. <https://doi.org/10.1111/j.1467-9299.2009.01755.x>
- Ernst, J. (2020). Professional boundary struggles in the context of healthcare change: the relational and symbolic constitution of nursing ethos in the space of possible professionalisation. *Sociology of Health & Illness*, 42(7), 1727 - 1741. <https://doi.org/10.1111/1467-9566.13161>
- Ernst, J. (in press). Transformational change in a hospital: How time and history constitute leadership agency. *Public management review*, 0(0).
- Figueras, J., Saltman, R. B., & Sakellarides, C. (1998). Introduction. In *Critical challenges for health care reform in Europe*. Open University Press.
- Fleming, P. (2019). Robots and Organization Studies: Why Robots Might Not Want to Steal Your Job. *Organization Studies*, 40(1), 23-38. <https://doi.org/10.1177/0170840618765568>
- Fleming, P., & Spicer, A. (2014). Power in Management and Organization Science. *The Academy of Management Annals*, 8(1), 237-298. <https://doi.org/10.1080/19416520.2014.875671>
- Hentout, A., Aouache, M., Maoudj, A., & Akli, I. (2019). Human–robot interaction in industrial collaborative robotics: a literature review of the decade 2008–2017. *Advanced robotics*, 33(15-16), 764-799. <https://doi.org/10.1080/01691864.2019.1636714>

- Kirkpatrick, I., Altanlar, A., & Veronesi, G. (2021). Hybrid professional managers in healthcare: an expanding or thwarted occupational interest? *Public management review*, 1-20. <https://doi.org/10.1080/14719037.2021.1996777>
- Kirkpatrick, I., Dent, M., & Jespersen, P. K. (2011). The contested terrain of hospital management: Professional projects and healthcare reforms in Denmark. *Current Sociology*, 59(4), 489-506. <https://doi.org/http://dx.doi.org/10.1177/0011392111402718>
- Knights, D., & Roberts, J. (1982). The Power of Organization or the Organization of Power? *Organization Studies*, 3(1), 47-63. <https://doi.org/10.1177/017084068200300103>
- Noordegraaf, M., & Schinkel, W. (2011). Professional Capital Contested: A Bourdieusian Analysis of Conflicts between Professionals and Managers. *Comparative Sociology*, 10(1), 97-125.
- Orlikowski, W. J. (2010). The sociomateriality of organisational life: considering technology in management research. *Cambridge journal of economics*, 34(1), 125-141.
- Susskind, R., & Susskind, D. (2015). *The Future of The Professions: How Technology Will Transform the Work of Human Experts*. Oxford University Press.
- Uhl-Bien, M., & Ospina, S. (2012). *Advancing relational leadership research : a dialogue among perspectives*. Information Age Publishing.
- Vesa, M., & Tienari, J. (2020). Artificial intelligence and rationalized unaccountability: Ideology of the elites? *Organization*, 0(0), 1350508420963872. <https://doi.org/10.1177/1350508420963872>
- Wasen, K. (2010). Replacement of Highly Educated Surgical Assistants by Robot Technology in Working Life: Paradigm Shift in the Service Sector. *International Journal of Social Robotics*, 2(4), 431-438. <https://doi.org/http://dx.doi.org/10.1007/s12369-010-0062-y>

Word count excl references: 721