



RESEARCH TO PRACTICE NETWORK

Does the Organization Matter? An Examination of the Link Between Organizational Management Practices and Client Outcomes

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Does the Organization Matter?

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Introduction

The critical role that the management context of organizations can play in determining client outcomes is gaining increased recognition in the human services (Yoo, Brooks, & Patti, 2007). The evidence gathered to date suggests that organizational variables are a significant factor in determining client outcome (Glisson, 2007; Yoo, Brooks & Patti, 2007). This paper will review the human services literature regarding the relationship between organizational or management variables and client outcomes as well as point to some promising practices for the management of human services organizations.

Research on Organizational Variables & Client Outcomes

Yoo and Brooks (2005) studied the relationship between client outcomes and a number of organizational variables that included workplace conditions (e.g., leadership and workplace support), worker responses (e.g., satisfaction and organizational commitment) and worker characteristics. While worker responses

did not predict client outcomes, workplace conditions were a strong predictor of client outcome. In their final model, a workplace characterized by leaders with more transformational qualities and greater workplace support by supervisors and co-workers accounted for 40% of the variance in client outcomes measured as fewer out-of-home placements following Family Preservation services.

Holland and his colleagues looked at the impact of a number of organizational variables on client outcomes in residential mental health settings (1981). They found that residential management practices and job satisfaction accounted for 49% of the variance in client outcomes measured as treatment gains. They also found that staff participation in treatment planning was a strong predictor of job satisfaction.

In one of the few studies to examine the relationship between leadership and client level variables, Corrigan and his colleagues (2000) looked at how leadership styles of mental health team leaders impacted consumer ratings of satisfaction and quality of life. They found that consumers in programs where the leaders rated themselves as laissez-faire reported lower satisfaction and quality of life. Leadership accounted for 40% of the variance in consumer satisfaction in their study. While this study was unique in linking leadership to client level variables, there are important limitations. The client outcome variables used were satisfaction with services and self-report of quality of life. While these are measures of service outcome, they are only indirect or proxy measures of the intended benefit of the program for the client. Being satisfied with services is not equivalent to experiencing change in relation to a problem or condition. A general rating of quality of life is likely influenced by many variables other than the program.

There have been relatively few qualitative studies exploring the impact of organizational characteristics on client level outcomes. Crook (2001) explored the impact of the level of bureaucracy in organizations and client's responses to programs. She utilized grounded theory methods to identify categories and content analysis to classify occurrences of significant events with a sample of three transitional housing programs for homeless persons. She concluded that programs characterized by higher levels of bureaucracy were associated with more negative responses by clients to the program.

Yoo (2002) looked at the relationship between organizational variables and client outcomes in a case study involving child welfare organizations. She was specifically interested in exploring the relationship between worker perceptions of organizational characteristics and outcomes for the clients they served. Yoo concludes that organizational characteristics have a complex and multi-faceted impact on workers and on client outcomes.

Research on Worker Level Organizational Characteristics

It makes sense that the impact of broad organizational or management variables on client outcomes would be mediated by other variables at the worker or team level. The most studied and best articulated of the variables proposed to mediate that relationship is organizational climate. It is a multi-faceted variable composed of several constructs including fairness, role clarity, role overload, role conflict, cooperation, growth and advancement, job satisfaction, emotional exhaustion, personal accomplishment and depersonalization (Schoenwald, et al., 2003). Organizational climate is contrasted with organizational culture, which is thought to operate at the macro level in organizations and to be more stable over time.

Glisson and Hemmelgarn (1998) found that organizational climate was the primary predictor of positive service outcomes for children served by a State child welfare system (measured as children's improved psychosocial functioning). In a later study, Glisson and Green (2006) looked at the effects of organizational climate and culture on access to mental health care in child welfare and juvenile justice systems. They found that children served by work units with more constructive organizational cultures and climates were more likely to receive needed mental health care (Glisson & Green, 2006). Schoenwald and her colleagues (2003) looked at the impact of organizational climate and organizational structure on the effectiveness of Multi-Systemic Therapy (MST) in a community-based setting. They were particularly interested in how organizational variables might influence the transportability of a University tested and validated mental health treatment (MST) in a community-based setting. The findings confirmed that organizational climate had a direct impact on client outcomes.

Summary of the Findings

From the review above, it is increasingly apparent that the organizational context within which services are delivered is highly influential in determining the outcome of those services. In short, organizations with certain characteristics or management practices appear to deliver more effective services. But what are those characteristics and practices and how do they operate?

Some of the characteristics that appear to be influential operate at a very macro level in the organization. This includes leadership, the level of bureaucracy, and organizational culture. Organizations where leadership is characterized as transformational rather than transactional appear to be more successful in helping clients to achieve their outcomes. Transformational leaders "... attempt and succeed in raising colleagues, subordinates, followers, clients or constituents to a greater awareness about the issues of consequence." (Bass, 1985: 17). In contrast, transactional leadership is often referred to in the literature as focusing primarily on managing activities rather than on leading people. Similarly, those organizations that are characterized as less bureaucratic also appear to be more successful in terms of client outcomes. Finally, more positive organizational cultures are associated with improved client outcomes. The cultures that appear to be most conducive to improved outcomes are those that engender a strong sense of belonging and inclusiveness as well as focus on innovation and learning.

In addition to those characteristics that operate at the macro level in organizations, there are characteristics that appear to operate at a unit or team level. This includes the climate within the team, the responsiveness of the supervisor, the support from other workers, and inclusion or involvement in client planning. All of these elements, along with the importance of transformational styles of leadership, point to the critical importance of relationships within working groups in influencing outcomes. Team members that are well lead, well supervised, supportive of one another, and perceive themselves to be working within a positive work climate appear to be more successful at facilitating positive client outcomes.

Practice Implications

There are a number of potential practice implications stemming from the review above. Perhaps first and foremost is the recognition that aspects of program

delivery that have traditionally been the focus of efforts to improve outcomes (e.g., worker qualifications, skills or qualities, specifics of the intervention or therapeutic approach) only account for part of the picture. Efforts to improve services that fail to recognize the influence of organizational and management variables will have significant limitations. In fact, a focus on the organizational context may have a greater impact in improving service delivery than a focus on specific client interventions or the mode of service delivery. Measuring for leadership, climate and culture within a program or agency might be just as critical to recognizing opportunities for quality improvement as measurement of pre and post client service impact. By measuring and benchmarking these aspects of organizational performance, managers and leaders can put in place specific strategies intended to improve practice and then monitor the results.

Looking beyond the organization, there are also implications for funder procurement processes. Criteria for choosing an organization to deliver a service generally focus on how well the organization can articulate its intentions around the technical or logistical aspects of service delivery. This includes the qualities of those they will hire and how many will be hired, the type of intervention and the manner in which it will be delivered, the predicted outcomes of the service and how they will be measured, and the organization's experience and history in delivering similar services. Very little is asked about the organizational context beyond legal and financial status, contracting history and basic structure. If a significant portion of the variance in outcome is accounted for by organizational context variables that reflect management practices, funding applications or requests for proposals could put more emphasis on the leadership and culture of the organization. In describing how the program or service would be delivered, there could be increased focus on how the organization would build and sustain a positive and supportive work environment and ensure that the program receives appropriate leadership. This view of organizational context contrasts sharply with a traditional and often held view that administrative structures in contracted organizations were necessary but largely irrelevant to the delivery of services beyond providing basic instrumental support (i.e., paying staff and keeping the lights on) (Austin, 2000).

Can the Organizational Context Be Changed?

Many organizations can cite examples of efforts they have made to improve their

management practices or their social context. Those examples include having staff involved in leadership development activities, providing training on supervisory practices, and efforts to improve the general health and well being of employees. All of these have the potential to positively impact both the working climate of an organization and the outcomes of the services being delivered. Perhaps the missing element in maximizing the value of these activities is measuring the impact that these efforts are having, both for staff and for clients of the organization.

An example of an intervention specifically targeted towards impacting organizational characteristics is the Availability-Responsiveness-Continuity (ARC) intervention (Glisson & Schoenwald, 2005). ARC's guiding principles describe effective service systems as (1) mission-driven—all actions and decisions contribute to the wellbeing of children, (2) results-oriented—measure individual, team, and organizational performance by improvements in the well-being of children, (3) improvement-directed—continually seek to be more effective in improving the well-being of children, (4) relationship-centered—focus on the network of relationships (e.g., families, schools, community) that are most important to children's well-being, and (5) participation-based—include service providers and stakeholders in forming policies, designing strategies, and adopting technologies for improving the well-being of children (Glisson, et al., 2006). The ARC Intervention applies these principles in implementing an intervention approach with twelve elements over two phases. The first phase (called Collaboration) includes supporting the organization's leadership to use the model and setting a clear vision, cultivating personal relationships with key internal stakeholders, and accessing or developing networks among those key stakeholders. The second phase (called Participation) includes building teamwork, providing information and training about the model, establishing a feedback systems to provide performance information to work teams and management, implement participatory decision making, resolving interpersonal conflicts, developing goal setting procedures for short term and long term performance goals, using continuous quality improvement techniques for changing organizational policies and practices, redesign job descriptions to eliminate service barriers by revising job responsibilities, and ensuring self-regulation and stabilization within the organization (Glisson, et al., 2006). In a study of 26 child welfare and juvenile justice settings where the intervention was applied with pre and post measurement, the ARC organizational intervention reduced the probability of caseworker turnover by two-thirds and improved organizational climate by reducing role conflict, role overload, emotional

exhaustion, and depersonalization in both urban and rural case management teams (Glisson, et al., 2006). While the use of this specific strategy may or may not be of value for an organization, it points to a process and practices specifically intended to maximize the potential benefit of having a strong organizational context that supports better client outcomes.

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