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LEADING PEOPLE THE MODERN WAY:
A CASE STUDY ON SHARED LEADERSHIP IN THE GERMAN HEALTHCARE SECTOR

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<tr>
<td>AP</td>
<td>Attending Physician</td>
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<tr>
<td>CP</td>
<td>Chief Physician</td>
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<tr>
<td>PT</td>
<td>Physiotherapy, Physiotherapist</td>
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<tr>
<td>SP</td>
<td>Senior Physician</td>
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<td>WP</td>
<td>Ward Physician</td>
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This thesis discusses leadership in team settings in the context of the German healthcare sector. The exploration of modern leadership styles answers the needs of today’s working force and the implications of the globalizing world. Consequently, the aim of the thesis is to elaborate a comprehensible leadership framework for team settings. Therefore, dimensions affecting leadership need to be explored and evaluated and their relationships assessed. An extensive literature review is conducted including the shared leadership, co-leadership and team leadership theory to build a preliminary framework. The dimensions are divided in enablers and facilitators. Since research is pretty scarce so far in this combined area a qualitative in-depth case study is used to answer the research question. The case study is composed out of interview data conducted at a healthcare company in Germany complemented by documentary data. Semi-structured interview type is used answering the needs of the study purpose. The analysis of the case study is supported by the data gathered during the study process. Firstly, the enablers’ impact on the leadership style are evaluated and their relationships towards each other. Secondly, the facilitators’ impact on the enablers is assessed. The analysis shows that sharing responsibility, autonomy, collaboration and commitment affect the leadership behaviour significantly. Furthermore, trust and communication are able to promote or decrease the efficiency of the identified enablers. In addition, personality is identified as a third facilitator impacting all other dimensions. In general it is shown that leadership behaviour in team settings is complex and the relationships between the influencing factors are closer than expected. Therefore, the study contributes to the general research by laying the groundwork for a more holistic approach to leadership. Moreover, it introduces personality as one of the most important factors influencing leadership behaviour. Closing the thesis pathways for future research and managerial as well as theoretical implications are given.

KEYWORDS: Shared Leadership, Co-Leadership, Team Leadership, Healthcare, Germany
1. Introduction

The introductory part of the study gives an overview on the background, the aim and the structure of the study. Furthermore, the research question and objectives are derived and definitions are given.

1.1 The Study’s Background

The study’s background is subdivided in the discussion of the leadership background first and the healthcare sector second.

Leadership

Leadership is a widely discussed topic not only in the business world. Consequently, existent leadership theories are challenged continuously and changing in an on-going manner. The 20th century of leadership studies was dominated by a view on the leader as “the strong man” in the company deciding and being widely unquestioned. However, this changed in the last decades of the last century, since the new generation of employees demand another leadership style. The “Generation Y”-employees are more independent, confident and goal-oriented than their predecessors and consequently ask for more freedom in work and a good work-life-balance (Meier & Crocker 2010: 69). Furthermore, working needs to be fun and is not the centre of life anymore. Nowadays, a good leader needs to develop an atmosphere, in which the workers can achieve their personal goals to be able to attract, hire and retain the best possible staff (Lawler III. 2003: 205). In addition, leadership style is one of the most important factors influencing the employee’s well-being (Meier & Crocker 2010: 71). Consequently, new types of leadership need to be developed and implemented to meet the needs of the current generation.

Although most theory development was done several decades ago, they have remained unheard. In the late 1990’s this situation changed and theories like co-leadership, team
leadership and shared leadership became more important in literature. The reason for that might be the changing challenges businesses face nowadays. Due to the globalization and the fast moving technological development, leadership needs to be more flexible nowadays. Moreover, due to the higher complexity in most businesses the workload which needs to be accomplished is not manageable for one individual anymore. Consequently, teams are the most used entities carrying the workload nowadays (Pearce & Conger 2003b: 2 in Pearce & Conger 2003a; Yukl 2013: 356). However, leading a team is more complex than the traditional leader-follower-relationship. Moreover, sometimes it is not only about leading a team but leading as a team enlarging the complexity even more.

*The Healthcare Sector*

Healthcare is a very complex business and managing or leading it is maybe even more challenging than other businesses. That is because of the complexity of service delivery and the demand of the whole population that healthcare institutions can heal everything (Barr & Dowding 2008: 7). Today’s healthcare facilities comprise different professions on different levels in the hierarchy with different educational background striving for the same goal to cure the patients’ diseases. Effectively leading this heterogeneous group of people is challenging but necessary for company’s success (Lipley 2011: 4). Moreover, there are special phenomena in the healthcare sector which complicate the situation. One of these is the so called “silo thinking” meaning that all professions or all specializations first care about their own part without pursuing the common goal. Silo thinking evolves if the staff is not cohesive and feels mutually accountable for the outcome of the process (Tiffan 2011: 78). However, the best process delivery is only possible with teamwork, where the teams are composed of all professions. Yet, physicians are not trained to act in teams and are firstly confronted with teamwork on the job (Tiffan 2011: 78).

Besides the team problematic, influence on the procedures is exerted by very diverse stakeholders complicating the situation, since the institutions are subject to on-going change. As this thesis focuses on the German healthcare sector these influencing factors
would be: new technologies, politics, health insurances, pension insurances, clinics management, employee representatives and many more. Due to this complex structure of stakeholders good management skills are needed to ensure the quality in the process delivery without neglecting the economic success of the business (Lipley 2011: 4).

Combining the needs of the business and the present workforce, there is a need to evaluate new possibilities of leadership in the healthcare sector. Both parts request more flexibility and openness to change and traditional leadership styles seem to be hardly able to succeed in that purpose and context (Vandewaerde, Voordeckers, Lambrechts & Bammens 2011: 406). Since the emphasis is less on the leader-follower-relationship than on the performing team, a modern approach needs to be used. The following part introduces the research question based on the research gap.

1.2 Development of the Research Question

The short introduction to the background of the thesis shows the necessity of further research in that particular area. Though, several authors called for further research in that field. Pearce and Conger (2003b: 13 in Pearce & Conger 2003a) state that the empirical examination of modern leadership styles is pretty scarce and needs to be extended. Furthermore, they argue that shared leadership needs to be studied in a wide range of team settings to lay a profound groundwork for the theory. This view is supported by Carson, Tesluk and Marrone (2007: 1230) when they state that more details of the development and the nature of shared leadership is needed. Other authors call for more research in the field examining leadership as a team-level property (Day, Gronn & Salas 2004: 876) or more general focusing on a broader array of leadership structures (Margeson, DeRue & Karam 2010: 6). In addition, Day, Gronn and Salas (2006: 213) state that there is a need for studies being sound methodologically, theoretically-driven and going to the core of team leadership.

Consequently, this thesis strives to contribute to the understanding of modern leadership theories in team settings. Accordingly the aim of this study is:
“The development of a leadership framework in team settings.”

This research aim is operationalized by two objectives being derived from the research question. These help to achieve the purpose of the study, since they highlight the main factors in the research question. The objectives are:

“Which dimensions affect leadership in team settings and how are they related?”

“How do the facilitators impact the identified enablers and their relationships?”

Firstly, enablers affecting the leadership are explored and interrelationships between them will be shown demonstrating the phenomenon’s complexity. Secondly, facilitators are explored having an influencing character on the enablers and their relationships. Furthermore, the relations between the facilitators are evaluated to complete the picture.

1.3 Important Definitions

Extrinsic Motivation

Osterloh and Frey (2000: 539) define extrinsic motivation as the indirect satisfaction of people’s needs through monetary compensation. They state, that firms should strive to link the personal monetary motives to the company’s goal, in which a system of pay-per-performance is seen as ideal. Kouzes and Posner (2002: 112) add that extrinsic motivation is related to external control, rewards and punishment and the general feeling of being forced to do something.

Intrinsic Motivation

Intrinsic motivation is defined as the engagement in a task for its enjoyment value (Bumpus, Olbeter & Glover 1998: 451). The pure participation in the activity is seen as
satisfaction or pleasure (Wong-On-Wing, Guo & Lui 2010: 135) and the people want to do the activities (Kouzes & Posner 2002: 112). Consequently, the possibilities of management’s influence are limited.

Accountability vs. Responsibility

Jackson (2000: 169) distinguishes between accountability and responsibility in the way that responsibility can be given to someone and can be seen as an obligation. Accountability is more intrinsic in nature and depends on the individual’s feelings.

Enabler vs. Facilitator

The term enabler is used as the basic feature of the theories being simultaneously prerequisite, process and outcome of the leadership style. Facilitators are used as the supporting underlying for the enablers impacting their effectiveness and efficiency.

1.4 The Structure of the Thesis

Firstly, a short introduction gives a brief overview of the study’s context, followed by the literature review. This review comprises the evaluation of three different theories: team leadership, co-leadership and shared leadership. Out of this evaluation seven dimensions are derived forming the research framework. The dimensions are divided in enablers and facilitators. After discussing both shortly the research framework is developed. Subsequently, the research methodology will be introduced and the case study is presented. The following part analyses the case study based on the study’s data and further sources of interest. The analysis is structured according to the research framework. Consequently, first the enablers and second the facilitators are evaluated. In the end of this part a third facilitator is introduced and the research framework is adapted accordingly. The thesis closes with a summary of the findings, its implications and suggestions for future research.
2. Theoretical Background

After this short introduction a deeper insight into the theoretical background is given. This part is subdivided in four paragraphs each discussing one theory and finally the development of the research framework. The first part evaluates the theory of team leadership, the second focuses on co-leadership and the third on shared leadership. All parts give an introduction to the theory with facilitators and obstacles at the end of each subparagraph. The dimensions for the research framework built in the last subparagraph are derived out of these three theories.

2.1 Leading the Team or Leading as a Team?

The theory of team leadership is studied in different manners so far. Many scholars argue that team leadership is a cycling process in which leadership is not only input but also output (see e.g. Day et al. 2004; Morgeson et al. 2010). Although some argue that it is underestimated in research so far, the intention of team leadership is to build team leadership capacity (Day et al. 2004: 859; Day et al. 2006: 213; Morgeson et al. 2010: 27). Building it happens in two different phases: the transition phase and the action phase (Morgeson et al. 2010: 7). Leadership actions and functions differ in both phases, but both have the aim to build up and develop a strong team leadership capacity. Interacting team members striving to achieve a common goal builds team leadership capacity. Therefore, the work will be shared and responsibilities divided across the team. To achieve common goals or purposes it is essential to establish a collective social identity helping the members to participate in leadership functions (Day et al. 2004: 860).

According to Day et al. (2004: 860) the collective structure is built by the development of social capital meaning that there is a network of tight relationships between the members of the team. These relationships help to achieve a higher degree of efficiency in the team through more collaboration. This collaboration leads consequently to the support of others and a more efficient resource allocation. The members of a team strive
to achieve the goals in a “we”-manner instead of “I”. Therefore they will help and assist each other and focus on the outcomes of the team not of the individual’s. Fostering this thinking needs the development of a shared social identity and shared mental models helping the team to align the members’ preferences according to the common goal. Decision-making process on the common goals plays an important role in that context. The reason behind it is that all members of the team should be involved in the process. This participative decision-making process enables the team members to understand the purpose behind their work motivating them and due to the participation it will become possible, that they experience a sense of autonomy (Burke, Stagl, Klein, Goodwin, Salas & Halpin 2006: 289). Furthermore, if the members own the goals, they will be more willing to support the decisions and will hold one another accountable for the accomplishment for the task (Tiffan 2011: 78).

Giving the feeling of being necessary and important for the team improves the likelihood of motivation and engagement of each individual (Banutu-Gomez & Rohrer 2011: 55). This engagement might lead to emergent leadership and therefore multiple sources of leadership. Traditional theories assume teams having a formal assigned internal leader who is responsible for the accomplishment of the critical tasks (Burke et al. 2006: 289). New theories propose other sources of leadership like external and informal leader types besides the traditional leader (Morgeson et al. 2010: 8). This multiple structure leads to sharing of responsibility and workload which becomes increasingly important in today’s fast changing business environments. Therefore, teams become more adaptable to challenges (Day et al. 2004: 858) and even more sustainable, since there is no need for the presence of a formal assigned leader. Team leadership capacity can be seen as a substitute for a formal assigned leader (Day et al. 2006: 213).

Besides the empowerment to participate in the team leadership processes and the development of a social identity in the team, there is a third component of a successful teamwork: learning. A learning attitude is seen as critical for the success by many scholars (see e.g. Day et al. 2004; Burke et al. 2006). Learning is not only focused on the development of the individual knowledge but also on interpersonal skills. Each
individual should simultaneously be aware of the own tasks and the other’s tasks to be able to support and assist or to shift workload from one to another (Day et al. 2004: 864). Especially in contexts where task interdependence exists, it becomes essential for the team success, that members are able and willing to support each other. The higher the degree of task interdependence, the more coordination is needed and therefore more leadership qualities are needed as well to ensure effective working (Burke et al. 2006: 294).

2.1.1 Facilitators

Facilitators of team leadership are mainly based in the complexity of today’s working processes. Since most processes are far too complex to be performed by one individual, sharing of responsibilities and workloads might be beneficial. The expertise needed especially in high technology contexts supports this behaviour. Moreover, the willingness and ability to establish and maintain a common vision is essential (Day et al. 2004: 864). Besides this the willingness to support colleagues in a collaborative manner helps teams to get more efficient in working (Day et al. 2004: 863). Furthermore, the empowerment of employees and consequently their commitment have a direct influence on the perceived team effectiveness (Burke et al. 2006: 300).

2.1.2 Obstacles

Obstacles for the development of team leadership capacity arise in the individuals themselves and in the processes. As written above there should be a participative manner of decision-making in the team. However, the members have to be willing to engage in these processes. This will only happen, if the members feel committed and they experience a certain degree of trust. Trust is needed, because otherwise there is no possibility for a healthy debate being essential for successful decision-making (Tiffany 2011: 80). Communication plays an important role for building trust in the team. It is crucial that the members operate an open two-way communication (Burke et al. 2006:...
where all individuals can establish their own degree of comfort level (Tiffan 2011: 80). Only through this process, it will be possible that the members understand each other, develop a common understanding and consequently act collectively towards a common goal. Prerequisite is the empowerment of the team members (Burke et al. 2006: 293).

2.2 Leading in Pairs

The phenomenon of co-leadership is a very old one and it is studied a lot starting in the 1950’s. Research in the 50’s focused mostly on co-leaders in vertical leadership styles meaning mentor and protégé situations (Pearce & Conger 2003b: 8 in Pearce & Conger 2003a). Though, the view on that phenomenon changed over the time, as it became a leadership style of two equal cooperating leaders to perform the tasks of leading the company. Although this view emerged in the literature not until the last two decades the phenomenon is much older as Sally (2002) shows with his comparison to the ancient Rome. He argues that co-leaders are a team of two people leading the organization in a unique manner (Sally 2002: 85). Although the term co-leaders often implies that there are only two people acting as leaders, there is the notion that it might be more but at least two (Paré, Menzies, Filiom & Brenner 2008: 55).

The composition of the leadership pair is discussed pretty well in theory and the different scholars have similar views on the needs such a pair has. Paré et al. (2008: 55) argue, that the members should have complementary skills and share management responsibility. These points are supported and enhanced by other scholars. Alvarez, Svejenova and Vives (2007: 10) state that the design of the partnership is essential as it affects the enabling of sharing responsibilities. Furthermore, they argue that the design depends on the complementarity, compatibility and the commitment of the leading team (Alvarez et al. 2007: 11). Complementarity is needed, because the leaders have to have complementary skills and knowledge to support each other in the complex business environment. Paré et al. (2008: 55) enhances this statement by saying, that if the leaders complement each other, the possibility for creating synergy increases. Compatibility
means that the assigned leaders have to get along with each other and align their work for the success of the company. Related to that commitment is needed, because the leaders have to feel committed to the construct and they need to be willing to share the leadership. Striving to become the sole leader will decrease the stability of the partnership. In addition to these prerequisites other supporting factors identified by different scholars exist.

2.2.1 Facilitators

Sally (2002: 86) identified the organizational structure as benefitting, if it suits the co-leadership concept. Furthermore, alignment of the vision and way of working is needed between the different individuals at the top (Alvarez et al. 2007: 14; Arnone & Stumpf 2010: 20; Sally 2002: 86). That does not mean that the individual leadership style has to be changed, since always assuming compatibility multiple styles might be beneficial in certain situations (Alvarez et al. 2007: 10; Arnone & Stumpf 2010: 19). A very important point in co-leadership situations, which is raised by many scholars, is the personality of the individuals. As already mentioned there is a need that both get along with each other. However, that is not enough to perform continuously and successful. The relationship between the leading team members has to be developed and maintained (Alvarez et al. 2007: 12; Sally 2002: 94). The partners need to get to know each other’s skills and abilities and need to implement mechanisms for dealing with certain circumstances (Alvarez et al 2007: 13; Sally 2002: 87).

According to Arnone and Stumpf (2010: 16) developing a sole leader into a co-leader is not easy and it very much depends on the attitudes of the individual. Therefore, the aim has to be, that the mindsets of both leaders develop towards an open-minded and non-competitive manner, where the former “strong men” become self-aware of their strengths, but more important of their weaknesses (Arnone & Stumpf 2010: 17 – 18). Sally (2002: 95 – 96) supports this point when he states, that the leaders should practice a certain degree of self-denial and humility and there is a need for a relative indifference to individual glory. Leader’s first priority should always be the team interest and
solving their problems (Arnone & Stumpf 2010: 18) and consequently the success of the company. Combined with the alignment of aims and visions these mental mindsets will help to establish trust between the partners being crucial for the leader’s relationship (Alvarez et al. 2007: 12; Arnone & Stumpf 2010: 18; Paré et al. 2008: 68).

In general, there are more factors influencing the partnerships. Sally (2002: 87, 96) state that structures, norms and behaviours support co-leaders and power asymmetries between the leaders affect their partnership. Therefore, the combination of the individuals should be planned carefully and an open flat structure to support the top management team should exist. Besides these factors many scholars emphasize the importance of an efficient communication (see e.g. Alvarez et al. 2007; Arnone & Stumpf 2010; Sally 2002). Arnone and Stumpf (2010: 20) state, that communication is essential at every stage and in every situation. It has an impact on the relationship, since both individuals have to agree on a common strategy and vision to lead the organization. Furthermore, problems can only be solved by communicating with each other. Co-leaders should always negotiate problems and strategies behind closed doors and the appearance towards others should always be in unity without criticizing the partner (Alvarez et al. 2007: 13; Sally 2002: 93). The more alignment in the aims and visions is achieved by negotiation beforehand, the more stable and continuous the partnership will be (Arnone & Stumpf 2010: 20). Negotiations can be supported by strategies agreed beforehand. Sally (2002: 92 – 93) emphasizes the power of veto and the willingness to sacrifice to enhance productive dialogue. Especially in situations where expertise is commonly divided these mechanisms can help to establish a dialogue, since there different points of view might exist. A combination of this expertise might become beneficial for the success of the organization later on.

2.2.2 Obstacles

Arnone and Stumpf (2010: 19) listed common pitfalls in co-leadership agreements. Many of them are related to problems in communication, for example the disagreement on issues due to personal experience. Others are related to the mental mindset for
example the lack of respect for the partner or the fear of unfair recognition. However, the authors argue that the more experience the co-leaders have, the lower the likelihood of the mentioned pitfalls will be due to the increased confidence (Arnone & Stumpf 2010: 19 – 20).

In conclusion co-leadership is a concept of sharing executive leadership and power (Dennis, Ramsey & Turner 2009: 1, 23) and due to this sharing it might be beneficial in today’s fast changing and complex business environment. Although the benefits are on hand, co-CEOs are a rather rare form in organizational structure in companies and non-profit organizations (Dennis et al. 2009: 1).

2.3 The Dispersion of Leadership Responsibility

Over the last decades more and more emphasis was placed on the development of new leadership models. The reasoning behind that is the complexity and fast-changing business environment. Therefore traditional leadership styles seem to be outdated. New styles of leading companies and the people working for them are needed. The increasing emergence of team work is essential as well, since team-based work is different from the known structures. Nowadays, teams and especially cross-functional teams are the fastest growing organizational units (Pearce & Conger 2003b: 2 in Pearce & Conger 2003a). Leading teams is quite often discussed in academic literature in the last two decades (see e.g. Kozlowski & Ilgen 2006, Vandewaerde et al. 2011, Wood & Fields 2007).

The shared leadership model increasingly finds its way into the context of team leadership. Pearce and Conger (2003b: 2 in Pearce & Conger 2003a) give three reasons for the appearance of this particular model. Firstly, they state that due to the new structure of more team-based work senior leaders have less information to perform leadership. Secondly, the response speed in the new business environment needs to be faster than in traditional leadership styles and thirdly they mention that especially top management is hardly possible to be done by only one individual due to the complexity
of today’s business. Although the topic is very important at this time, the research is pretty scarce until now. The research on shared leadership started already in the 1920s and mid-1960s, but the empirical examination remained relatively unexplored so far (Pearce & Conger 2003b: 3, 13 in Pearce & Conger 2003a). With their book “Shared Leadership” Pearce and Conger (2003a) give a good overview of what was already considered in research and what has to be done in the next years of research. For that they give a short introduction to the different groundwork contributing to the understanding of shared leadership (e.g. Co-Leadership, which is discussed in one of the previous parts) while emphasizing the need for more empirical data.

Discussing the shared leadership approach means handling a dispersed amount of definitions. Pearce and Conger (2003b: 1 in Pearce & Conger 2003a) define shared leadership as

“a dynamic and interactive influence process among individuals in groups, for which the objective is to lead one another to the achievement of group or organizational goals or both”.

Furthermore, they state that it involves peer influence as well as upward and downward hierarchical influence. In contrast, traditional leadership theories include mostly downward influence and other directions of influence are neglected. Therefore Oosterhoff and Rowell (2004: 301) state, that there is a need for a paradigm shift from the hierarchical management towards a collaborative management style. Nowadays, employees work in a context of partnership where the tasks of the former hierarchical leaders, like the strategic planning, implementation and evaluation, becomes the task of the group (Oosterhoff & Rowell 2004: 301). That confirms the aforementioned finding that team work becomes more and more important. This evidence is also supported by Kozlowski and Ilgen (2006: 79) when they say that

“teams are two or more individuals who socially interact, possess one or more common goals, are brought together to perform organizationally relevant tasks, exhibit interdependencies with respect to workflow, goals, and outcomes, have different roles and responsibilities and are together embedded in an
The emergence of leadership is a very important aspect to be considered in that relation. The view increasingly shifts from leadership in the individual towards leadership as a socially constructed phenomenon not being dependent on a formal or assigned leader (Uhl-Bien 2006: 667). This collective approach to leadership is facilitated by the heterogeneity of teams’ human capital (Vandewaerde et al. 2011: 407). Traditional leadership is seen as a suboptimal solution in team settings (Gronn 2002; Pearce & Conger 2003b in Pearce & Conger 2003a) and the strategy of sharing leadership seems to be more appropriate and effective (Vandewaerde et al. 2011: 414). Other scholars support the relational aspect of shared leadership, as it is seen as a phenomenon, in which every team member leads and follows and therefore a team property is developed through the distributed influence of various team members (Carson et al. 2007: 1218 – 1220). The authors also emphasize its collective structure through negotiation and sharing the leadership responsibility as well as its effects on team and individual activities and outcomes (Carson et al. 2007: 1219). The collective structure includes an emphasis on peer-to-peer influence where nobody is completely responsible or exonerated and therefore unique leadership situations are built in the company (Wood & Fields 2007: 254).

Other authors focus on the collaborative and collective aspect in shared leadership as well and argue that this approach leads to trust among team members (Judge & Ryman 2001: 75). Trust is seen as one facilitator of effective shared leadership. Jackson (2000: 168) refers to the shared governance philosophy, which is extensively discussed by Porter-O’Grady (1992) and relies on an accountability-based approach to structure. In that context the author names four characteristics of shared leadership, which refer to the organizational structure, the environment, a shared vision as well as the balance of autonomy, guidance, collaboration and accountability (Coluccio & Havlick 1998; Jackson 2000: 168). These characteristics are operationalized by four constructs by the authors: accountability, partnership, equity and ownership, which will be discussed and referred to in the following part.
The first construct is accountability, which is used by many authors (see e.g. Coluccio & Havlick 1998; Jackson 2000; Oosterhoff & Rowell 2004; Wood 2005). Jackson (2000: 169) defines this term as the inherent responsibility in the members’ role. Carson et al. (2007: 1219) argue that sharing of leadership responsibility is an essential part to develop a collective structure in the organization. Moreover, Wood (2005: 66) states that an increase in accountability will lead to more acceptance of responsibility for the decisions’ consequences. Connected to that, he emphasizes the need for a balance between responsibility and autonomy. The interplay between responsibility and autonomy or freedom of the workers is a crucial part in the concept of shared leadership (see also Seers, Keller & Wilkerson 2003 in Pearce & Conger 2003a; Wood & Fields 2007). Especially Wood and Fields (2007: 254 – 255) emphasize that shared leadership encourages members to act more autonomously, which leads to an increased sense of empowerment. However, there is a need for balancing the freedom of autonomously acting members and taking responsibility (Wood 2005: 66; see also Seers et al. 2003 in Pearce & Conger 2003a, Coluccio & Havlick 1998).

As in the previous paragraph mentioned autonomy plays an important role as well and is seen as another characteristic of the shared leadership theory. The construct of autonomy is closely related to the paradigm shift from dependency to interdependency in the shared leadership concept. Whereas in hierarchical leadership styles the emphasis is placed on giving and receiving orders, the emphasis in shared leadership is given to the independent work and the interdependent support by other members. Therefore, Jackson (2000) translates autonomy in the constructs of ownership and partly equity and partnership. She refers to the straightforwardness in people’s behaviour when she states, that there is a focus on work and not on the authority being allowed to do the work (Jackson 2000: 169). Many scholars relate the autonomy construct to the decision making process as well. Carson et al. (2007: 1222) refer in that relation to the concept of voice. Voice is needed to participate in the decision-making processes and taking part in the organization’s development process. These two steps will lead to the fulfilling of purpose and consequently to an increase in engagement and involvement. Wood and Fields (2007: 255) tie the autonomous behaviour of team members to an increased sense of empowerment, consequently leading to more autonomy in everyday work. This circle
is seen as the most important factor by the authors. Combining empowerment with the participation in the decision-making process can lead to a higher response speed in the work (Pearce & Conger 2003b: 2 in Pearce & Conger 2003a) being crucial in today’s fast changing environment.

The third construct is partnership. Many scholars name it as collaboration, cooperation or social support as well. Nevertheless, it means that different individuals or units work for the same goal in a partnership, where every party supports each other. This definition includes already the prerequisite of collaboration, as there is a need for a shared purpose and furthermore member’s input has to be valued and appreciated (Carson et al. 2007: 1222). The authors argue, that if this type of behaviour is promoted through appreciation, it will result in an active participation, feeling supported and consequently to more cooperation. Jackson (2000: 169) refers to the partnership construct as a collaborative relationship of individuals. That means that there has to be an inherent drive to first connect and then help each other. There is no space for opportunistic behaviour, because the outcomes of the organization come always first. Wood (2005: 72) defines in his article several shared leadership dimensions connected to collaboration. He emphasizes the joint task completion which includes the existence of a shared purpose and goal being achieved collectively. Furthermore, there is a decentralized interaction among personnel which comprises forming relationships among each other without restrictions given by the organizational structure. The third dimension he refers to is emotional support, which means that others are not only supported by actions but also by appreciation and giving respect for the things they do. This point of view is also supported by Jackson (2000: 169) with her construct of equity. This construct also reflects the shift from an independent individual towards an interdependent individual proposed by Fletcher & Käufer (2003).

The equity construct relates to the respect for other’s contribution (Jackson 2000: 169). It means that others have to be appreciated for what they do and there should not be a sense of downgrading other’s work because of its relevancy. In the hospital context the differences between the work of nursing science and physicians are one of the best examples in that case. Both disciplines have to respect their work, because delivering a
good health care is not possible without one of the disciplines. Respecting people will also facilitate the emergence of empowerment, relationships and motivation among all members of the organization.

Implementing the shared leadership theory is very complex and needs time to develop. It can be seen as a long-term process in a dynamic environment, where a continuing education is needed (Jackson 2000: 170). The aim has to be, that every single individual in the organization understands the bigger picture, because only through that a channelling of energy to collaboratively serve the customer is possible (Judge & Ryman 2001: 74). Nevertheless, there are some facilitators and barriers for implementing the theory at hand. These will be discussed in the following two paragraphs.

2.3.1 Facilitators

The facilitators are closely connected to the constructs discussed in the previous paragraph. They can be divided in individual traits and organizational characteristics. The internal environment is a crucial factor, since there is a need for a shared purpose, social support and voice (Carson et al. 2007: 1222). According to the authors, these factors produce the context in which the members are willing to seek for influence and rely on multiple leaders. Defining a shared purpose will lead to a higher level of motivation, empowerment and commitment and consequently to a higher willingness to share leadership responsibilities (Carson et al. 2007: 1222). Social support means that the input of every member of the organization is valued and therefore a higher degree of active participation and sense of feeling supported will lead to the development of cooperation in the organization. The third part named voice by Carson et al. (2007: 1222) will lead to a higher degree of participation in general and more input in the decision-making process. These actions will consequently lead to more engagement and involvement and helps to develop a sense of mutual leadership (Carson et al. 2007: 1222). Empowerment is also crucial to develop a sense of leadership in every individual, since the members have to feel, that they can be the leader. Furthermore, Wood (2005: 67) states that an empowering behaviour promotes task development,
increases contribution, leads to feel greater sense of investment and members will be active and strive to familiarize with other’s tasks. Another driver for sharing leadership is trust. Trust is needed in the beginning but is also an outcome of the concept. Although it is difficult to build and maintain (Judge & Ryman 2001: 75) it is essential for success. Trust is needed, because it helps in sharing information, personal and professional cooperation and more general in building relationships (Stichler 1984: 8 in Porter-O’Grady 1992).

Regarding the organizational characteristics there are different opinions on the relevance of hierarchical structure available in previous research. Carson et al. (2007: 1229) argue that a vertical leadership structure does not necessarily have to be abandoned for implementing shared leadership. Wood (2005: 73) mentions that a more horizontal structure is not significantly related to the emergence of shared leadership. Whereas others speak of the importance of a decentralized structure in the organization (Coluccio & Havlick 1998: 36) and a general importance of the structure in the implementation process (Jackson 2000: 170). Vandewaerde et al. (2011: 406 – 407) emphasize the composition of the teams in an organization. There is a need for heterogeneity in functional teams according to the authors. Moreover, effective communication, physician’s support and involvement, staff’s commitment, attitude and motivation to be involved act as drivers for the implementation of shared leadership (Jackson 2000: 172 – 173).

2.3.2 Obstacles

Nevertheless, there are potential obstacles and barriers regarding the implementation of shared leadership, too. These are supported by the paradoxes in the concept itself which are brought up by Fletcher and Käufer (2003). They discuss three paradoxes (Fletcher & Käufer 2003: 24 – 26 in Pearce & Conger 2003a) in which the first one deals with the aspect that hierarchical leaders have to create a less hierarchical organization. The second is about the practical implementation of the shared leadership processes where many of the sharing aspects disappear due to bad appreciation and valuation of them.
The third paradox is the so-called “That’s not how I got here” paradox (p. 26). It discusses the fact that becoming a leader needs other skills and qualities than being a leader.

Moreover, there are barriers in each individual as well. The mental mindset of the individual is seen as the biggest barrier for implementing this new style of leadership (Jackson 2000: 170). The author refers to the job description everyone has and maybe everyone developed for oneself. Leading functions are not in line with a not leading role and therefore leading is seen as time wasting for example. Furthermore, every member of the organization has its own career goals which might not be congruent with the goal of the company and furthermore it is supported by the third paradox introduced above. Moreover, a lack of appropriate resources changing mental models, ineffective communication, communication which does not value or promote information sharing, physicians being unable to develop commitment and the staff’s desire for job security are further examples of barriers (Jackson 2000: 173 – 174). In general, the biggest risks are not cooperating members of the organization, large time consumption for implementation and the individuals feeling not comfortable with the new situation (Oosterhoff & Rowell 2004: 302).

2.4 Theoretical Framework

After the literature review and discussing the main points of the used theories – co-leadership, team leadership and shared leadership – the theoretical framework is developed in the following part. As one can see out of the literature review there are some enablers which at least two of the theories have in common. Out of these the framework is developed in two steps. The enablers are therefore: (1) sharing responsibility, (2) collaboration, (3) autonomy and (4) commitment. In a second step facilitators will be added to the framework.

The development of the research framework is the first step to answer the research question of developing a leadership framework in team settings. Besides the
identification of the key enablers, there are relationships between them (see Figure 1) which are discussed in the following.

**Figure 1.** Relationships between the enablers.

Firstly, the relationships of sharing responsibility are manifold. Through sharing responsibilities the members of the team feel empowered to participate in decision making processes for example. Therefore, they will show initiative and engagement for improving their work and consequently the business. One can state that sharing responsibilities will lead to higher commitment among employees. The second relation is towards autonomy, where the members feel freer in their work, because they are personally responsible. Collaboration will only be possible, if the members of the team are willing to share their work and therefore the responsibility for that.
Secondly, autonomy is related to sharing responsibilities as already mentioned, but moreover to collaboration and commitment as well. The relationship to collaboration is of another kind, because in today’s fast changing and complex business environment autonomously working individuals need to collaborate to perform successfully. Therefore, these two concepts are important for the success of the company only in combination. The relationship to commitment is cyclical, since employees working autonomously feel more empowered and therefore committed to their work. Consequently, they might strive to improve there working processes and therefore the business of the company. The inverse relationship is that committed people do not ask for the authority of doing a task but just perform the task. Therefore, working practices will become more autonomous.

Thirdly, collaboration is linked to sharing responsibilities in a very obvious way, since without employee’s collaboration a sharing of work and responsibilities would not be possible. The second relation to commitment is not that obvious. Employees working in a collective manner will be more engaged in supporting each other than they would if the task is done autonomously. That is supported by the interdependency of different tasks. Members of a team will feel motivated to help each other, since they know that if the other tasks are performed better, their tasks will be done more efficiently as well due to its interdependency.

As already mentioned there is a cyclical relationship between commitment and autonomy. Furthermore, committed employees might engage in a way that they are more willing to share their work, because they know that performing on their own will not be the most efficient way. The third link is towards collaboration, where one can assume that engaged team members are more willing to support others for the benefit of the company than not committed people. Therefore, one can see that this relationship is cyclical as well.

In a second step of the development of the theoretical framework two facilitators will be introduced. The first facilitator is trust. Trust is seen as the essential glue in the organization which is crucial for the success (Judge & Ryman 2001: 75). Trust can be
seen out of two angles. The first one is trust in oneself, which primarily relates to the concepts of commitment and autonomy. It is needed to feel certain about the tasks oneself performs either in daily work or in engaging in decision making. The second one is the trust between the employees of the organization, which primarily relates to sharing responsibilities and collaboration. Without trust in others no employee would ever share responsibilities and work, because the sharing person has to be sure that the task is completed appropriately. The second point about that is that no colleague would support another one. The supporting member seeks for appreciation and respect for the support provided. The trust in the others that one gets this appreciation and respect is the trigger which makes the support possible.

The second facilitator is communication as it is seen as one of the most important features in today’s working environment. Without good communication skills the possibility of working efficiently and consequently successful will be diminished a lot. Therefore, an open two-way communication fosters the sharing of responsibilities, since everybody in the organization needs to know what the responsibilities are and who the person in charge is. Although autonomy of work does not seem to have any obvious relation to communication, it is needed as well. That is the case, because the most businesses are too complex and the different tasks are interdependent what makes communication between the autonomous acting employees essential. Communication skills play also an important role in collaboration and commitment. In collaboration the communication between the people when supporting each other is sought after. In commitment there is a need for good communication skills, since if an employee wants to engage in decision making processes for example, the communication of people’s wishes needs to be done accurately. Furthermore, negotiation skills help in that context as well, which are related to communication skills.

Developing a relationship between the two facilitators, one sees that building trust depends on the communication of the team members. Communication is the basis for interaction between people and consequently the basis for building trust. Nevertheless, the relationship is circular as well, since trust has an impact on the communication
between people. People tend to communicate more open if they trust each other leading to a more efficient communication in general.

For an overview on the relationships between the enablers and the facilitators see Figure 2 below.

*Figure 2.* Theoretical framework.
3. Research Methodology

Starting a research always means defining the objectives of the project first. Therefore, the researcher has to be sure what is the aim of the study and out of which point of view this phenomenon will be investigated. Research philosophy helps the researcher to define the way being appropriate for the study’s purpose. The epistemological way of subjectivism is used in this study, since it focuses on humans acting in a social context. Subjectivism means in that context, that reality is socially constructed (Eriksson & Kovalainen 2008: 15). This assumption of a socially constructed reality is related to the question of how people interpret and understand social settings and events being concluded as an interpretivistic view on research (Eriksson & Kovalainen 2008: 19). This approach helps to understand the human as a social actor in a complex world and the world out of their point of view (Saunders, Lewis & Thornhill 2009: 115 – 116). Studying business environments and especially leadership situations, as it is done in this study, demands an understanding and interpretation of a unique situation.

3.1 The Abductive Approach

Since the studied field is very complex and hardly no theory is well established so far, the study will be processed in an abductive manner. Abduction is a combination of deduction and induction, which are the two basic aspects of inquiry (Eriksson & Kovalainen 2008: 22 – 23). That means that the research framework will be first developed from the existing theory and later on it will be enhanced by the data gathered. Therefore, the theory will be enhanced and a more comprehensive understanding of the phenomenon should be achieved. By going this way of research it will be possible to develop an understanding of human’s interpretations of the world, since the knowledge is gathered from data and not from theory (Saunders et al. 2009: 126). Therefore, a small sample will be studied as Saunders et al. (2009: 126) suggested it.
3.2 The Case Study Method

Combining the philosophical approach and the abductive manner the research has to rely on qualitative data. Qualitative data is used to get a deep insight into the phenomenon and the context. The study is therefore processed with a case study design, since that design enables the researcher to explain a complex phenomenon in its real-life contexts (Yin 2009: 18). Moreover, case studies are able to explain causal relationships which are to complex for survey or experimental strategies (Yin 2009: 19). Besides explaining causalities, case studies help to develop new insights into a phenomenon and are therefore explorative in its character as well. Since phenomena are related to their contexts, researchers need a strategy to evaluate this relationship as well. Case study research is able to analyse the phenomenon in relation to its historical, technological, social, economical and cultural context (Eriksson & Kovalainen 2008: 115). Leadership situations in healthcare organisations might be hard to understand and therefore a case study is used, since it enables the description and analysis of the case in a down-to-earth format (Eriksson & Kovalainen 2008: 116). Furthermore, the differentiation between intensive and extensive case studies can be made. This study will use the intensive method, because the interpretation of data will be based on the interconnections between the people within its particular setting (Stoecker 1991: 95). It tries to understand the perspectives of the people involved (Eriksson & Kovalainen 2008: 119). Regarding the aim of the study, an intensive case study is able to develop theory as Dyer Jr. and Wilkins (1991: 615) argue.

3.3 Data Gathering

Gathering data to construct a comprehensive case study should be done with different sources. Therefore, data is used from the company’s homepage as well as from their annual report of 2011. Besides these two sources semi-structured interviews are used as the main source of information. The interviews were conducted with three employees of the case company in August 2012.
3.3.1 Interviews

Regarding the structure and processing of the interviews a researcher has to take into account the need for flexibility and the questions’ style. As the study explores a phenomenon with a less strong literature background flexibility is needed, since new aspects might evolve within the interviews. Enabling the possibility of getting new insights is done by using mostly open-ended questions. The combination of the need for flexibility and an open-ended question type asks for semi-structured interviews (Gillham 2000: 63). Semi-structured interviews are used, because they enable the researcher to gather in-depth information in an efficient way related to time and resources (Silverman 2006:113). Furthermore, it gives the possibility to combine a preplanned structure of topics with the flexibility to probe and dig deeper in upcoming topics. The structure provides the opportunity to classify the data for later analysis which makes the process more efficient. Moreover, it helps to collect unpublished information and reveals the people’s point of view (Kovalainen & Eriksson 2008: 80 – 81). Gillham (2000: 62) gives certain aspects for situations when interviews should be used. First he mentions that there are a small number of accessible person involved in the case. In this study that is the case, since the leading personal consists of two people supported by a little number of other leading employees being all at the same location. They are the key informants and data is needed from both leaders. A third interviewee was found by using the snowball strategy by asking one of the first to provide contacts to other potential interviewees. According to Creswell (2007: 127) that is a feasible approach to access interviewees. The second point raised by Gillham (2000: 63) is that the data which has to be gathered is sensitive in its character, so that the interviewees would not provide these information in questionnaires. As this is a study on leadership the data which needs to be gathered is sensitive. Related to that, the interviewer has to take care of a good atmosphere within the interview to get the most out of it. Therefore different aspects have to be considered. First of all, the language is essential, since the interviewee has to feel comfortable with it. Otherwise there would be the problem that answers cannot be given due to a lack of knowledge in the language. The interviews for this study were all done in German as it is the mothertongue of both the interviewees and the interviewer. Later for analysis the interview protocols (see Appendix 2) were
translated to form the case study out of the data. The second point is, that the interviewer should avoid leading questions to assure that the actual view of the respondent can be gathered. This threat was countered by discussing the questions with an external person beforehand. In general, mainly “how”-questions were used (see Appendix 1). This enables the interviewee to speak fluently giving in-depth information and furthermore this type is considered to be more friendly than “why”-questions (Becker 1997: 58 – 60).

3.3.2 Documentary Data

Besides the interviews as the primary source of data other documentary data is used. These might include for example reports, organisational databases, company’s websites or other journals and newspapers (Saunders et al. 2009: 258 – 259). In this thesis the company’s website as well as the annual report of 2011 is used. A combination of documentary data and interview data enables the researcher to form a better in-depth case study.

3.4 Research Quality

To improve research quality several concepts are available in business research. Depending on the research approach one should use different concepts. As this study is an interpretative case study the concepts of credibility, transferability, dependability and confirmability are used and in the end the research process is described in detail to enhance the transparency. The more common criteria validity, reliability and generalizability are dismissed, because they are more feasible in the positivist or postpositivist research approach (Farquhar 2012: 105).
3.4.1 Credibility

The first criterion is credibility and it is used for establishing trustworthiness through the use of appropriate and well-recognized research methods (Farquhar 2012: 105). Triangulation is one method to improve the credibility of research. Triangulation does not only mean that the data itself should come from different sources (Yin 2009: 114), but also the methods for data gathering and the theoretical perspectives in the interpretation should be different (Farquhar 2012: 44). Triangulating the data can lead to a convergence or divergence of the data. If convergence exists, the opportunity will be given, that the data sources validate each other (Farquhar 2012: 80). Divergence opens the possibility to enrich the explanation in a study (Jick 1979: 607). In this study data is triangulated by using different sources as interviews, company’s homepage and annual report. Within the interviews different interviewees are asked about similar topics and the analysis of data gathered found some sort of divergence and convergence in the data. Convergence of data was used to strengthen different arguments and divergence was used to enhance the analysis. The interpretation of the data was built on the theoretical framework consisting of dimensions of three different theories. This approach triangulates the data interpretation as well.

3.4.2 Transferability

The second criterion is transferability. Transferability is comparable to generalizability or external validity within the more common criteria. Since this study is not aiming at being generalizable, the focus does not lie on that point. Nevertheless, transferability can be reached if the study lies within the appropriate theory and tries to develop it further (Farquhar 2012: 106). According to Creswell (2007: 207) this criterion can be met by giving an extensive background of the study and giving a “thick description”. This particular study gives deep insights to the context and business environment to enhance the transferability.
3.4.3 Dependability

The third criterion is dependability where it is argued that the researcher is dependent on several factors within the study itself (Farquhar 2012: 106 – 107). Facing this threat, the researcher strives to be as independent as possible from the studied organization and the key informants. Gaining information from different individuals decreased the dependency on a sole informant. Nevertheless, as the third interviewee was approached through the snowball strategy, the researcher highly depended on the other interviewees in that point.

3.4.4 Confirmability

The last criterion is confirmability. This criterion means that the analysis is done out of different points of view, alternative explanations are considered and the analysis is not influenced too much by the researchers assumptions (Farquhar 2012: 108). In this study the confirmation criterion is met by being as transparent as possible regarding the whole process of research. That means that sources of data are triangulated, the researcher’s assumptions are questioned and the analysis and interpretation is done out of different theoretical points of view. Moreover, the basis for analysis – the case study – is reviewed by the interviewees to trace potential misunderstandings and if possible are included for further interpretation. Furthermore, limitations of the study are listed in the end to enhance the transparency. This approach is also recommended by Farquhar (2012: 108) to improve confirmability.

3.4.5 The Study Execution Process

The execution of this study can be subdivided into three different parts. First, the theoretical background was laid. Therefore, an extensive literature review was done using different scientific databases as well as different scientific books. Consequently, the area of interest was narrowed down as well as the research question and objectives
were developed. Furthermore, the findings of this review enabled the researcher to develop an interview plot (see Appendix 1). This plot consists of different topics to be discussed in the later interviews. A set of preliminary questions was developed and peer-reviewed by another student from the university being familiar with the interview technique. After the review process the questions were adapted and a pilot interview with a student was conducted. During this process the case company was contacted personally and after a second telephone call two interviews with the top management of the company were approved.

The second part of the study was the data gathering phase, in which the interviews took place and further documentary data was evaluated. The source for documentary data was the company’s website. During the interviews the developed questions were used to guide the interview through the plot of topics. All interviews were about one hour long, in German and conducted in the company’s facilities. The third interviewee was found by asking the first one to provide further volunteers. The interview data was recorded by using interview protocols. Since tape recording was prohibited by the case company the main arguments were recorded during the interview. Shortly after the interviews the protocols were completed by writing them from the memory. After the protocols were finished, they were sent to the interviewees for reviewing. One of three interviewees made slight adjustments due to the researcher’s misunderstandings, one confirmed the data and one was not responding.

In the third phase the adapted protocols and the documentary data was used to write the case study. After completion it was send to the interviewees to review it and comments made on it by two of them were implemented in the case study. After that the analysis of the case study began with the help of the research framework developed before. One enabler (authority) found in the literature review and being part of the interview plot was dismissed and integrated in one facilitator due to the findings in the interviews. The other enablers were analysed and based on the findings and its interrelationships evaluated. After the influence of the facilitators was assessed, the research framework was adapted according to the findings. In the end the findings were concluded and a path for future research was provided.
4. Case Study

A good leadership style in an organization is a big challenge and depends on many different factors. The following case of a healthcare company shows exemplarily the complexity of leadership and the necessity of an extensive analysis. First, the case study gives a short overview on the company and its business environment, followed by the introduction of the treatment processes. After that the employee participation and the general working atmosphere is presented. In the end questions for analysis and a pathway for further examinations is given.

The Company and its Business Environment

The German healthcare system consists of many different types of organizations. Besides hospitals there are other care facilities and physical rehabilitation centres in the system. The researched company is a physical rehabilitation centre. The centre was incorporated into a communal group of companies consisting of two hospitals and different other care facilities in 2012. The bath has a tradition of over three centuries and is situated in the oldest spa town of the region. It was refounded in 1994 and consists of seven wards with altogether 220 treatment places nowadays. The catchment area is the whole federal state and the southern parts of one bordering federal state. Rehabilitation for orthopaedic and rheumatologic diseases is the main cause for patients coming to the clinic. According to the annual report 2011 the aim is:

“... the best treatment for every single patient”.

The patient’s reintegation in working and social life should be facilitated. In contrast, the clinic’s administration aims at:

“Maximizing the degree of capacity utilization, whereat 90 per cent are targeted and necessary. Furthermore, costs should be minimized.”
The clinic employs 125 wage earners in different professions and on several hierarchical levels. The company is led by the director of administration being responsible for the business management and the chief physician (CP) being responsible for the patients’ rehabilitation. A more detailed description of the company’s structure provides Exhibit 1 (see Appendix 3). The medical department is divided in several divisions, which consist of different occupational groups. Among others there is a division for health professionals, therapist and nursing. Each division is led by one single person except the physician’s being divided according to the specialization. The biggest division is the physiotherapy (PT) with 35 employees in different professions. The company-wide personnel planning is done by the CP being supported by the administration. The personnel placement planning is done in each division autonomously. In general, employee turnover is low and overall a good working atmosphere exists. Open communication and a steady exchange of information are facilitated in the company. Exchanging information is not only done between the hierarchical levels but also between the different occupational groups. The interchange between physicians, therapists and nurses should be emphasized, since it enables the best possible patients’ treatment. Moreover, the exchange of information between the levels of hierarchy acts as a control mechanism. Particularly the highly hierarchy-affected group of physicians (see Exhibit 2 in Appendix 3) uses the control possibilities, since in the end they are responsible for the efficient patient’s treatment. Furthermore, some physicians are appointed while training on the job.

In general, the training and qualification of the staff is seen as the core of the company’s success and is therefore treated very carefully. That is why all employees should continuously strive for the development of their skills and knowledge. Thereby, they are supported by purposive training courses provided by the company. Furthermore, they also have the possibility to visit other divisions to get a better understanding of the work being done there. This system allows for a holistic approach to treatment. That is why the recruiting process of new employees emphasizes the willingness to acquire new skills and advance one’s knowledge. According to the company’s self-image, organization’s leaders look out for humanity, partnership and contentedness besides individual competency. The individuality of each person is appreciated and cooperation
as well as open communication are supported and fostered. Transparency, acknowledgement and honesty should improve collaboration and enable a trustworthy working atmosphere.

*Patient’s Treatment*

All occupational groups are involved in the patient treatment process (see Exhibit 3 in Appendix 3). The upcoming tasks are divided according to the qualification and the availability of personnel. The process itself can be done in a more or less autonomous manner, though the treatment is controlled by employees positioned higher in the hierarchy. Furthermore, treatments have to be approved by the attending ward physician (WP). The responsibilities are divided according to the clinical picture of the patient. Each therapy plan will be developed together with the patient. Physicians and PTs process, record and adjust the plan. Adjustments during the treatment can be initiated by all participants of the process. It is remarkable, that adjustments initiated by patients are mostly communicated towards the PTs and less the attending physicians (APs). To get a holistic view of the situation of the patient the divisions exchange information of the process continuously. If there is a need for changing the treating personnel during the healing process, all important information will be handed over to the new therapists and physicians.

Due to the complex system of influence diverging opinions on the healing process are possible. Yet, the attending WP is primarily responsible for the treatments and the therapists primarily process them.

“In general therapists try to enhance the patient’s well-being by giving proposals. “

Though, therapists have a more direct contact to the patient, since they might work each day with them. In situations where different opinions conflict
“... senior physicians (SP) can change the therapy plan due to hints from the therapists.“

The treating WP will be informed about the changes.

Participation

There are daily meetings of the physicians led by the CP. The different specializations are present in these meetings through the SPs. Once a week special disease patterns are discussed. Moreover, other external persons (pharmaceutical company’s representatives) have the chance to attend the meetings to provide additional information.

Additionally, there are meetings of all division leaders once a month, where all different occupational groups are present. In these meetings there is also the possibility to discuss problematic cases to develop an interdisciplinary solution.

Every two weeks the SPs and CP meet to discuss the strategic development of the company. If needed other disciplines might attend as well. The aim is to develop strategies for the short- to midterm improvement of the clinic. Proposals for the improvement should be presented and discussed collectively. The aim is to improve the whole working system and therefore proposals will only be processed if this aim is reached. Hereby, the reallocation of workload towards single divisions should be avoided. Proposals to increase the efficiency within a division can be suggested as well; unless it affects others. Nevertheless, an intra-divisional change might request the approval by the CP. In general, every employee is encouraged to hand in proposals for development. The aim should be that each member is motivated to improve the everyday working process and as a result the whole process delivery will be enhanced. Processed proposals will be rewarded. The implementation of the compiled changes (e.g. IT-changeover) need the approval of the administration since this department
finances the changes. Though, the development process is done mainly without contributions of the administrative staff.

Changes often influence the whole company and therefore might lead to conflicts. This potential for conflict is grounded in the fear of change by the staff. The uncertainty should be minimized by an efficient information flow to all employees. Generally, organizational changes are communicated by the leading staff of the company. Though, in single change-processes in the history (e.g. IT-changeover) the communication was not done by the leading staff. In cases like these, the communication was delegated towards trusted personnel in lower levels of the hierarchy.

*Company’s Working Atmosphere*

An open two-way communication is intended and occurs to the greatest possible extent. A continuous exchange is fostered across all disciplines and between all levels of the hierarchy. Moreover, the aim is to establish a binding communication towards each patient. If questions cannot be answered by single employees, they are supposed to refer the patient to a more competent employee. For exchanging information several different channels are used (email, meetings, personal conversations, etc.). The style of communication depends pretty much on the situation at hand.

The German language other than the English one includes the possibility of addressing someone either formally or informally. There is not an official guideline about this topic in the company except some socially accepted rules. Due to reasons of respect the proposal of addressing someone informally should always be done by the higher level in the hierarchy. Consequently, there are some advantages and disadvantages of using the informal communication style. On the one hand, the communication is seen as more open and therefore an easier conflict solution might become possible. On the other hand, the probability of conflicts may rise while using the informal addressing, since the authority of leaders decreases while using it. Additionally, some employees have the opinion that too likable leaders are not taken seriously.
In general, authority plays an important role in everyday life and it depends on the respective person. Most physicians have a natural authority, which is reflected in the respect towards them. Nevertheless, the respect does not depend on the educational background but more on the position in the hierarchy. There are different views on authority within the company. On the one hand, it is said, that

“… superiors do not try their authority too far and an authoritarian communication style is only used in exceptional cases like disciplinary issues. “

On the other hand, there is the opinion, that

“… some want to show their ability to lead through authoritarian behaviour”.

Yet, authoritarian leadership style has advantages, too. In times of change authoritarian employees tend to be pioneers and try to convince their colleagues of the change’s advantages. Therefore, authority helps the company to develop.

Besides respect and authority the factor of trust among the employees has a big influence on the collaboration and working atmosphere. For improving the trust between the staff’s members there are events like company Christmas parties and company outings. Nevertheless, mutual trust should be developed not only within the staff but also towards the patients.

“A higher degree of trust supports an open communication which is very important. “

Therefore, a higher degree of trust helps in the process of information transfer and conflict resolution, which mostly happens ad hoc within the division. Though, there is the view, that

“Trust plays an important role among the employees although there is a reasonable degree of mistrust.”
Building up trust and maintaining it very much depends on the respective individual and its behaviour.

Personality has a strong impact on the individual’s appearance in the team. It affects the communication as well as the shown respect and the natural authority. Consequently, the leadership style is affected by the personality as well. Management styles might be on a continuum from authoritarian, energetic and charismatic to cautious, deliberate and subtle. In addition, there is the opinion, that

“... completely open-minded leadership styles are very scarce.”

In contrast there is the statement, that

“... open-minded leadership styles are positive for the company.”

Questions

Concluding, several different questions come up while discussing efficient leadership in the context of the case study. Therefore, the status quo has to be analysed to detect potential weaknesses. Furthermore, the question should be raised who should lead in situations where several disciplines work on the same task. In contexts of different points of view there should be clarified who is responsible for decision making to prevent conflicts and displeasure. To improve processes and reduce uncertainty among the employees the implementation of modern leadership styles might be checked. Consequently, the well-being of the patients will be improved, since the staff has a clearly defined leadership system at hand without uncertainties. In light of the implementation there is a need for the analysis of the influencing factors on leadership.
5. Analysis

The following part analyses the case study based on the research framework developed above. In consequence, the analysis is subdivided according to the dimensions being identified in the literature review (see Table 1). Firstly, each enabler is analysed and secondly, the interrelationships of the enablers will be investigated. Furthermore, the two facilitators of trust and communication will be assessed and their impact on the model will be shown. In a last step the model will be extended by an additional facilitator named personality and the framework will be adapted accordingly. The analysis is always performed in a general way first and case-related second. The case-related analysis is based on the interview protocols (see Appendix 2), the annual report 2011 and the company’s homepage.

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5.1 Enabler Analysis

The following four parts discuss the enablers identified in the literature review. Each subparagraph has the same structure. Firstly, a general analysis is given, in which the impact on business is highlighted. Secondly, each enabler is evaluated in relation to the case company. Thirdly, the interdependencies between the enablers are shown and their impact on each other is assessed. The last part of each subparagraph summarizes the findings.
5.1.1 Sharing Responsibilities

This discussion part is divided in several subparagraphs. Firstly, a short introduction to the need of sharing responsibilities especially in the healthcare sector is given and assessed. Secondly, the evaluation is performed in different steps. In a first step the patient’s treatment is evaluated on the different levels of the healing process. In a second step the clinic’s management is assessed. Finally, the supportive functions are included in the assessment to show the sharing behaviour in that part as well. Before the importance of sharing responsibilities is summarized in the last subparagraph, the interconnections to the other concepts are evaluated.

The Necessity of Sharing Responsibilities...

Sharing responsibilities always starts with the ability, willingness or necessity of dividing workload among a team. The workload division is very common in today’s business environment, as it is much too complex to be handled by a single person. The complexity has an impact on the needed skills and the time to execute a certain process. The first constraint is that different skills and consequently different professions are needed to achieve a certain goal. The second constraint is time, where a work or a project has to be finished in a certain period and that might not be manageable by one individual. Both ways will lead to the emergence of workload division, since otherwise the scope of a process cannot be achieved. Under certain circumstances the dispersion of workload can lead to the sharing of responsibilities. That is especially the case if the team working on a project does not have an assigned leader or the leader is not able to control due to the absence of the needed skills. Therefore, the responsibility of delivering quality work will be shifted with the workload.

In the healthcare sector the division of workload is definitely needed as one needs different professions to deliver a good quality service. Especially in the above introduced case study there is always the need for teamwork including different specializations and professions. According to one interviewee there are medical staff, nursing staff, therapists and administrative staff involved in the patient treatment. All
these different people are needed to achieve the common aim of reintegrate the patient in social and working life (Case Company 2012b).

... in Patient’s Treatment

The necessity of dividing workload in the healthcare sector and especially in organizations as the case company is unquestioned. Yet, there is still the question whether the responsibilities are shared as well or if they remain centralized. Answering this question has to be done manifold to get a clear picture. The division between responsibility and accountability has to be emphasized in this context. Responsibility can be seen as more formal than accountability. Furthermore, the level of responsibility plays an important role, since there is a need for the division of being responsible for the patient’s healing process or for a single task within that process. Consequently, the owner of accountability and responsibility might differ on the different levels.

In a first step the responsibility and accountability of the successful achievement of the final aim is evaluated. The responsibility for healing the patient is owned by the AP. The physician decides after the examination which approaches will be used to achieve the ultimate goal. Each step of treatment has to be approved and the process has to be monitored by the physician according to one interviewee. In most cases this function is done by the WP. Moreover, the AP is not only responsible but also accountable for the successful process. Due to the wide range of influence on the therapy plan, there might be other members of the team feeling accountable for the successful treatment. SPs as well as PTs can give hints for an improvement of the treatment. This is done consistently and helps to improve the whole process.

The second step to be evaluated is the single treatment level. Most of the treatments are performed by the therapists, but which treatment is given to the patient is decided by the physician. Due to the shift of the work, the responsibility for the successful treatment shifts towards the therapist as well. Furthermore, they feel accountable for the efficient and effective treatment giving. That is indicated for example by their efforts to improve the process for the patient’s well-being. Therapists might even feel more accountable,
because one interviewee states that they are closer to the patient and get to know the patient better than the physician. The closer a relationship to a person is, the higher the degree of feeling accountable will be.

... in Clinic’s Management

The sharing of responsibilities is not only part of the everyday work in patient care but also in the general management. The expertise needed to perform the different tasks in managing such a clinic differs a lot. That is why the organization is led by two individuals with different knowledge and accordingly differing areas of responsibility (see Exhibit 1 in Appendix 3). The CP is responsible for the medical divisions, whereas the director of administration is responsible for the general administration. Both functions are needed for delivering a high quality service. Furthermore, the fields of activities are partly overlapping, why both individuals have to have the same view of the common aim. For example, the CP needs to do administrative tasks to manage the people working in the divisions and the director of administration has influence on the patient care process, since acquiring and financing new equipment is in that field of work. Consequently, both individuals are partly responsible for the other’s tasks.

Feeling accountable has to be reviewed out of two different points of view. The first one is that both leaders feel accountable for the success of the organization. They show the effort needed to succeed with the organization in everyday work. Furthermore, they always strive to improve service delivery to maintain their competitiveness in the market. The regular strategic meetings and the organizational support of employee’s proposals for process improvement are only two of the factors emphasizing the leaders’ efforts. The second point of view is the divisional accountability. Each of the co-leaders feels accountable for the respective division(s). The CP is not only accountable for the general process delivery but also for the well-being of the patients. The director of administration is accountable for the smooth processing of the supportive functions. Nevertheless, as discussed earlier there are overlaps. Consequently, each of them feels accountable for parts of the other’s area of responsibility and therefore both care about the whole system.
... with the Support Functions

Closely related to the division of responsibilities in clinic’s management is the division of responsibilities between the administration and medical part. As one can see from Exhibit 3 of the case study (see Appendix 3) the administrational personnel is involved in each patient care process. But moreover, the support function has a general influence on the service delivery by providing a functioning working environment, financing, hiring staff and many more. Although there is a strong influence on the patient’s treatment process the administration is not responsible for it, since it is allocated to the medical divisions. In particular, the provision and maintenance of clinic’s infrastructure including the personnel is the responsibility of the administration. Therefore, funding is an integral part of their work and possibly the biggest responsibility. That is also the point where administration has an influence on the daily work, since they are responsible for the acquiring of payments for the patients’ treatments.

In the administration the accountability and responsibility are mostly overlapping. Administrative staff has to feel accountable for the smooth operating of the organization, since otherwise it might affect the success of the company. In the patients’ care process the points of contact might lead to feeling accountable for certain patients. A good example for it is the allocation of rooms when checking in. However, that is only a minor part of the administrative and support functions, and their accountability is more focused on the support of the medical divisions.

The Interrelationships towards the other Concepts

Sharing responsibilities impact the other enablers of the research framework. Relationships towards autonomy, collaboration and commitment are assessed.

The first relationship to autonomy is easy to evaluate. Sharing responsibilities gives the performing employees the power to act autonomously. Sharing workload being a prerequisite for autonomous working empowers the employees to work independently.
Collaboration is affected, since the treatment process is divided in single activities and these have to work together for the same aim. Therefore, sharing responsibility without collaboration affects the whole process delivery. Managing the team and aligning the aim is crucial in that circumstance, since otherwise sharing might lead to diverging approaches and consequently to a decrease in the process’ quality. In consequence, sharing responsibilities enables collaboration and acts as the basis for collaborative behaviours. The reason for it is, that without sharing workload there is no need to act collaboratively, since the bigger picture is likely to be overlooked due to the easy process structure.

Sharing responsibilities has a big impact on employees’ commitment. The employees will be empowered to perform tasks autonomously and therefore motivation will rise as the interviews showed. A higher degree of motivation consequently includes better performance and a higher degree of service quality, since work is done with more effort.

The Importance of Sharing Responsibility

Sharing responsibilities becomes increasingly important in today’s business. Due to the higher complexity of the processes in service delivery, more task sharing is needed. Too many different skills and knowledge as well as time are needed to perform the processes appropriately. Moreover, sharing responsibilities can act as a basis for autonomous working as well as collaboration. Furthermore, it positively affects the motivation and consequently the commitment of each employee developing the whole business.

5.1.2 Autonomy

The second part evaluates the enabler of autonomy. Therefore, first autonomy in general is assessed and after that in different contexts. Compared to the sharing of responsibilities the subjects of analysis are the individual, divisions and the team caring for the patient. In the end the interrelationships are shown and the importance of this enabler is summarized.
Independent Work in Team Settings

Working autonomously is demanded by several employers today. It comprises the ability to perform a task on one’s own without being continuously assisted and supervised by others. With the sharing of workload the team, division or in the end the company has to be sure, that the activity is done in time and at the demanded degree of quality. Autonomously acting employees help the company to act more efficiently since less assistance and support is needed. Both are time-consuming and consequently impact the budget. However, independent work does not mean, that support of other team members is prohibited. In general, it is about the ability and the permission to perform the task without the support of others. This is closely connected to the responsibility for the particular task.

Nevertheless, the company needs to supervise the working entities to ensure a certain degree of quality in service delivery. Through the separation of working processes the possibility for every individual employee to overlook the whole process becomes increasingly difficult if not completely impossible. In consequence, a management of the different parts is needed to align the work packages heading for the same goal. In most cases managing the process delivery is monitored by using protocol technique to follow up which task is already done and which one has to be done. The interviews show that treatment protocols are used for that purpose. If not monitored carefully, issues might arise due to missing activities or activities processed several times. Both are not desirable, since they either cost money or affect the quality of service delivery.

Due to the need of managing the different actors the question might be raised how the process should be split up. The trade-off between the manageability of the single tasks and the need for supervision with rising task numbers has to be handled carefully. How deep the structuring is, has to be decided company- and process-related. Experience in process delivery helps in optimizing the number of tasks due to manageability and supervision needs. Interviewee 4 argues, that the leading staff of the case company has a huge amount of experience with the service delivery and consequently the processes are adjusted efficiently according to the two mentioned factor.
Individual Autonomy in Healthcare

The individual employee is enabled to act independently in most cases of everyday work. The autonomy is always connected to the core competency of each member of the organization. Therefore, the core competencies have to be defined. Physician’s competencies are primarily the examination, the ward round and the decision which treatments are given to the patient. In all of these work packages the physician can act autonomously and is not dependent on other members of the organization. In the case of the therapists the core competency lies in the treatment itself. Consequently, the treatments are performed by the caring therapist without any assistance. Yet, the therapist depends on the decision of the treating physician which treatment should be given to the patient. Though, therapists can also assist the physicians in the development of the treatment process.

Division’s Autonomy

The autonomy of divisions in the healthcare sector has to be reviewed out of different points of view. One has to distinguish between the service delivery on the one hand and the administrational tasks on the other hand. The analysis is done for the PT division.

Regarding the administrational tasks the possibilities for acting autonomously are very restricted. The interviews show, that divisions are enabled to organize the personnel by themselves. Furthermore, minor changes in the processes are possible as well. Yet, changes might need the approval of the CP. Organizing the personnel is only partly done autonomously, since the division depends on the company’s decision how many staff is allocated. According to the interview data the recruitment and dismissal are done by the company’s administration and not in the division itself. Dividing the workload among the personnel is done independently and no approval is needed unless the targeted degree of quality is reached.
The service delivery needs the dispersion of workload. Each division is enabled to perform their part of the treatment process autonomously. One can see the division as the aggregation of the individuals working in it. Therefore, the processing of the treatment is done in autonomy, but they depend on the decision of the medical department which treatment should be given.

*Autonomy of Caring Teams*

Assessing the autonomy of the caring teams needs a definition of the team itself first. The caring team or patient-centred team consists of all employees involved in the treatment of the patient. That means physicians, therapists and nurses are grouped as a team to deliver the best possible care. Since the team is composed of members of different departments and divisions, the autonomy is not anymore affected. Nevertheless, there is still a dependence of the existence of free staff in the different departments. Once composed, the team can act completely independently. Each individual will be responsible for its core competency and therefore each step of the treatment process can be done autonomously by the team.

*Interrelationships towards the other Concepts*

As sharing responsibility autonomy is interrelated towards the other enablers in the framework as well. One part of these relationships is already discussed in the previous paragraph. Nevertheless, the reversed relationship of sharing responsibility and autonomy will be discussed in the following part as well as its impact on collaboration and commitment.

Autonomous behaviour is strongly related to the sharing of responsibilities and workload. Being able to share responsibilities depends on the ability of performing a task independently in the process. If that would not be possible the sharing would not have made any sense. A good example is the division of deciding which treatment is given and the actual processing of the treatment between the physician and the therapist.
The physician has to be sure that the therapist is able and willing to give the treatment accurately, since the doctor can only monitor the process via the treatment protocol.

Individual autonomy can be seen as a prerequisite for collaborative behaviour. That is the case, because if the individuals or divisions respectively the departments would not act autonomously, there would not be the necessity of collaboration. Service delivery processes are too complex to be performed by only one part of the organization in healthcare. There is always the need for supporting each other due to the skills needed to deliver a high quality service.

The relationship towards commitment can only be evaluated on the individual level, since the aggregation of commitment in divisions or departments is hard to assess. Being allowed to act on one's own motivates people in different ways. Firstly, acting independently develops a certain degree of pride in each individual. The reason for that is that the employee feels valued by the supervisor’s decision of delegating the task. Secondly, by delegating the task the employee feels responsible for that one. Consequently, the staff member sees its position in the delivery process. The value of the task in the process can be evaluated easier and therefore the reason behind the activity is seen. Knowing the reason for doing something increases the motivation and in the end the quality of task completion. Thirdly, being motivated in the task completion process can lead to the attempt to improve the process itself. Furthermore, a general attitude towards improving the business might evolve. In the end, autonomy helps the single employee to feel committed to the work and the company.

The Importance of Autonomy

Autonomy in the healthcare processes have to be handled with care. The processes are very complex and depend on different skills. Therefore, solely acting autonomously on individual level will not succeed. Furthermore, on divisional or departmental level autonomy affects the processes as well. A certain degree of independent working disburdens the top management in administration. Moreover, each division might have better insights in their work than the top management and therefore decide more
effectively. In contrast, the autonomy is harmful if stressed too much, since the process delivery always includes different divisions and departments. Nevertheless, a sense of autonomous behaviour is important for the other enablers and for the success of the company as well. It helps to maintain a certain degree of motivation among the members of the organization. The company is enabled to succeed in delivering high quality services and consequently in the competitive business environment.

5.1.3 Collaboration

The third part of the analysis evaluates collaboration. The assessment has the same structure as the assessment of autonomy. Therefore, first the enabler in general is evaluated and after that on the different levels. In the end the interrelationships towards the other enablers as well as a short conclusion are given.

Collaboration Solving the Problems of Autonomy

Collaboration in business is getting increasingly important. Especially in team settings collaborative behaviour is a key ingredient to success (Forman 2011: 15 – 41). Teams performing without the members supporting each other are likely to fail in their purpose. In healthcare sector this is especially true, since the nature of the process delivery demands collaborative behaviour. The interdependency of tasks requests collaboration, since each activity affects another one. Therefore, the support and cooperation in the process improves the procedure. In contrast, changing one part of the task execution might affect another one. A good example for this is shifting the administrational work from the managing department towards the medical department. The reason for the shifting would be that the medical department knows better what happened and which treatment has to be paid by the insurance or patient. However, the medical department needs additional time for performing these tasks and assuming the same manpower they will have less time for their core competency – patient care.
Furthermore, the structure of the company affects the collaborative behaviour as well. The flatter the hierarchy the more collaboration occurs in a company. Regarding the therapeutic division in the case company one interviewee states that the hierarchy is very flat and interpersonal support is well established in everyday work. However, support is needed not only within divisions, but also between divisions and departments. For this, the duties and responsibilities have to be clearly defined. In an organization the administrative department is supportive by nature. The management has to ensure, that the value-creating parts of the company are able to deliver the product or service at the targeted quality and time. In the case company this means that the administration has to ensure that enough skilled personal is available, the needed equipment is financed and procured as well as payments from the insurances or patients are obtained. Although there are many more supportive activities performed by the management, this listing shows already the necessity of these activities, since without them service delivery would not be possible. Either personnel and/ or equipment would be missing or in the end the financing of the whole company is not secured.

Besides the structure of the company norms and values impact the collaboration. There should be a code of conduct which supports collaboration between the individuals and the departments and divisions. Operationalizing these norms and behaviours can be done by giving incentives. Yet, this will lead only towards extrinsic and not intrinsic motivation. However, the aim should be to develop a mindset of supporting and collaboration in each of the organization’s employee. The annual report shows an example of this operationalization through which this open supportive atmosphere becomes possible.

In general collaborative behaviour helps the company to deliver the services or products in a better quality and maintain a smooth value creation process. Due to the complexity of the processes, the tasks have to be divided, but the single performer has to care about the impact of the specific task on others. Furthermore, due to collaboration a higher degree of specialization becomes possible, since each employee can focus on its core competency and develop that further. For these reasons collaboration has to be evaluated on different levels of the organization.
**Interpersonal Collaboration**

Collaboration between the single individuals is the basis for effective teamwork. Team members have to support each other to achieve the common aim efficiently and effectively. Contexts are manifold where collaborative behaviour might occur. In the case company this is shown in the treatment plan development process for example.

“Proposals by therapists and patients for developing the treatment plan are possible.”

The support of other physicians is mainly done by discussing difficult cases in the daily meetings. In these meetings therapists can support the finding of an optimal therapy plan as well. The interviews show that support is given in the daily work mostly by discussing issues bilateral. An example of these agreements is if the treating personal has to change. In these cases all relevant information will be handed over to the colleague. Therefore, collaborative behaviour helps to ensure the quality of the service delivery.

A second point is that the processes will run smoother, if collaborative behaviour exists. That is the case, because the processes are very complex and the single tasks are interrelated. With collaborative behaviour the single task completion can be eased. An example would be the assistance of the administration in billing the treatments. If the medical staff would have to do these tasks too, the main field of activity would be affected negatively.

Thirdly, the adjustment to the new job of new colleagues is eased a lot. This process is supported by some organizational arrangements but should be done in daily work as well. One of these arrangements is the mentorship program applied in the case company. The interview data shows that a SP assists the new colleague by giving valuable hints and consequently helps him to learn the job while doing it. Furthermore, observations in other divisions and departments help to develop the knowledge, too.
Making this process efficient requests the collaboration of the employees in the other divisions. Support is given by and towards everyone in daily work. All interviewees state, that questions or issues in the learning process are mainly solved by bilateral discussions.

**Collaboration between Divisions**

Collaborative behaviour between divisions is as important as collaboration between the individuals. The tendency of silo thinking in the healthcare sector needs to be overcome to ensure a high quality service delivery. Silo thinking is mainly based on the high specialization in the physicians’ divisions and the physicians’ perception towards other professions. The case company faces this problem not that much, since each individual’s contribution is appreciated by the others (see Case Company 2012b). Furthermore, the aim of each division is the same: delivering the best possible patient’s treatment. Therefore, each division knows that the support of others is needed to achieve this common goal.

As an additional point the learning process of new colleagues needs collaboration between the divisions, too. Since each new physician should have an observation period in other parts of the organization, the respective parts have to organize these periods.

Besides everyday work the decision-making and process development are interdivisional, too. This means members of the different parts of the organization strive to improve the business together. That can especially be seen in the strategic development meetings.

> “The strategic meetings help in the development process by enabling everybody in the company to propose betterments. Furthermore, the discussion of the proposals is done by every stakeholder to improve the entire system.”
Each participant’s point of view is discussed and the proposals are optimized in an iterative manner. Individual aims are regularly the basis for improvement but never the outcome, since that is always the collective aim.

**Collaboration in Caring Teams**

Collaboration in the caring teams is highly related to the individual collaboration. As discussed earlier the teams consist of all professions needed for an efficient patient treatment process. To improve the treatments the members of the team support each other by giving hints and propose betterments.

The supportive roles can be divided according to the professions. Physicians support the therapists and nurses with information which is captured in the examinations. Conversely, therapists and nurses support the physicians by forwarding information about the patient’s well-being and the treatment process in general. That is possible, since the patients more likely discuss their problems with the therapists and nurses.

>“Patient’s proposals are mostly communicated towards the therapists, since the physicians are ‘demigods in white’.”

Additionally, the whole team supports the administrative staff in the billing process by giving valuable information which treatments are given. If that would not be the case, the administration would always need to examine the data by themselves being costly and time-consuming.

**The Interrelationships towards the other Concepts**

The framework shows, that collaboration influences the other enablers except autonomy. As discussed in the previous paragraph autonomy is the basis for collaborative behaviour. In reverse, it seems reasonable to assume that collaboration promotes autonomous behaviour through the individual tendency to get rid of the
dependency of others. Yet, the interview data cannot prove this assumption. Thus, no reverse relationship can be identified.

The relationship towards sharing responsibilities and consequently workload is quite obvious. Collaborative behaviour is the basis for sharing responsibility. That is the case, because if the employees would not collaborate to achieve the common goal, the leaders would have to assume that the assigned work and responsibilities are not performed well enough or not at all. The alignment of each individual’s aims with the corporate goal is crucial in that case. If the individual internalized the common goal and adjusted the personal goals accordingly, each employee will be more willing to support others achieving the overall goal more efficiently.

Collaborative behaviour affects the individual commitment in the company. The effect can either be positive or negative. If an employee perceives collaborative behaviour as positive, the individual will be motivated to support others as well. In reverse, if the person does not feel supported and appreciated for the work and support given, the commitment will shrink. That is the case, because the reasoning behind this behaviour is not existent anymore and therefore the employee does not see the sense in behaving collaboratively. Furthermore, the commitment of others towards supportive behaviour is affected. If the leader of a division or the company shows collaborative behaviour, other members of the organization are more likely motivated to act the same way. This behaviour is named leading by example which is very important and possesses a huge influence potential on the business.

**The Necessity of Collaboration**

As discussed in this paragraph collaboration is one of the most important enablers in daily working life, especially in the healthcare sector as shown by the findings in the case company. The complexity of the work processes makes support in all facets necessary to develop and maintain a high quality service delivery.
Collaborative behaviour has to be performed on the individual, divisional and departmental level as well as in the caring teams. It helps to smooth the working processes and the adjustment to the new job of new colleagues. Achieving this demands the alignment of the individual’s vision with the corporate one and a sense of motivation. Motivation can either be achieved by giving incentives being the less desired way, since it promotes only the extrinsic motivation or by establishing and living norms and values to promote intrinsic motivation. Both is done in the case company (see Case Company 2012b; Interview Protocols in Appendix 2). The ultimate goal should be to develop a mental mindset, where the collective’s achievements enjoy first priority. Ensuring this can be done by establishing a code of conduct and leading by example and will consequently lead to the betterment of process delivery and a higher success of the company.

5.1.4 Commitment

The last but not less important factor is commitment. To clarify, the term commitment includes individual motivation and the willingness to participate actively in the company. Participation is not limited towards the daily work, but the participative decision-making processes and off-the-job activities are comprised.

The analysis of this enabler is not divided according to the levels but according to activities. Therefore, the first part will discuss commitment in the context of the daily service delivery process. The second part evaluates the decision-making and company’s development processes. The third part analyses the impact of off-the-job activities followed by the interrelationships towards the other enablers and a short summary.

*Daily Working Life Commitment*

In daily working life the most important factor is motivation. If one is motivated, one will perform as good as possible based on the skills and knowledge one possesses. Therefore, business leaders should ensure that the employees have a certain degree of
motivation for the everyday work to deploy the full potential. Commitment includes several factors affecting the working process being analysed in the following.

The most obvious one is the commitment towards the tasks to be done. Each employee has its own job description, from which one knows, what the obligations are. The description should fit the employee’s vision of the job. If that is the case, each organizational member will perform the task with a high degree of motivation and consequently will strive to achieve the best. Accordingly, the quality of service delivery will have a high standard and might even be improved. In the case company each job description is detailed and the future employee can easily see what is expected and can elaborate whether that fits the own intentions or not.

The second factor is the commitment towards the company itself. The aim is to get the employee to identify with the company. Achieving this goal is even harder than the first one, since it depends on different factors. Firstly, the business is crucial for the development of that particular feeling. The healthcare business has a very good reputation and therefore the possibility is higher, than it might be in other businesses. For example, in the last years one could have questioned whether employees of corporations dealing with hedge funds would have been willing to state that they work for this company. Secondly, the overall reputation of the organization impacts the potential for identification. If the reputation is good in the business environment, the employee will be proud to say that one is a member of that company. The last point is the individual attitude. Here, factors like extroversion and the mental mindset play a crucial role. If the employee likes the work and likes to speak about the job, it is more likely that the employee identifies with the company. The mental mindset supports this factor, if the general attitude towards work is good and not perceived as a burden. The first two factors can hardly be influenced by the leaders of the company, but the last one can. Leaders should strive to develop a sense of proudness for the company in each employee. Nevertheless, this is a development process and consequently takes time. A low turnover rate is beneficial in this context as the staff has the time to get used to the company, its values and norms. The case company has this prerequisite and consequently a sense of identification with the company exists shown in each interview.
Furthermore, there is the commitment towards colleagues and leaders. Being committed to the colleagues means establishing and maintaining good relationships to them. This aim cannot always be achieved, but it is desirable, since it affects the whole working process. Having good relationships among the staff enables smoother working processes and consequently more efficiency. The relationship with the leading staff is important as well, since only if the followers are committed, they will follow the leader and align their vision with the company’s goals. Nevertheless, that does not mean that employees follow blindly, but they question decisions if needed. This process will be discussed in the following part.

*Commitment to the Business Development Process*

Commitment towards the business development process is somehow related to the second point in the previous part. That is the case, because being committed to the company is the prerequisite for the engagement in the development process. However, that is not the only point being discussed in that part.

The basis for participation in the development process is the individual engagement for the betterment of the everyday work. This might have different reasons. In many cases the working instructions are provided by the management and the fit between the instructions and the reality is only given partly sometimes. Therefore, employees strive to develop these processes to ease their work and to improve the general service delivery.

The second point being considered is the personal aim to safeguard employment. Being proactive and helping to develop the processes can lead to a better reputation in the company and therefore job security might be enhanced. Furthermore, besides the increased security other benefits for the particular employee might occur. According to the interviewees, these benefits are for example bonuses after successful implementation of the proposal.
The third reason for engagement in the development process is the aspiration to implement the personal knowledge. This is an iterative process, since the knowledge should increase continuously and consequently the processes need adaptation in an ongoing manner. Since the healthcare sector is based on the development of knowledge and the case company strives to implement continuous learning among its members, processes are always subject to change.

Additionally, the aim of developing the processes is to improve the quality of the delivery and to make the company more successful. With bigger success the possibility to survive in the competition will increase. That can be achieved by being more efficient through better processes. Furthermore, company’s reputation is enriched by improved quality in the service delivery. Thus, this might lead to more customers and a bigger success in the competition. Especially in healthcare the reputation plays a crucial role, since patients look for clinics with a good standing.

All of the mentioned aims of process development need the motivation of the individual in the company. Without being motivated to improve the work, the staff will not strive to do it. Therefore, there should be an open working atmosphere, where entrepreneurial behaviour is supported. That means each employee needs to have the feeling to be able to change something in the company.

“The possibility of influence improves the individual’s motivation.”

Appreciation of work by colleagues and leaders is the basis for such behaviour. Employees feel motivated to do more than the employment contract expects. This is particularly true for employees on lower levels of the hierarchy, since regularly they are only obliged to perform the task and decision making is not in their scope.

“Mutual respect and appreciation of achievements [...] are the basis for our collective action.”
Interrelationships towards the other Concepts

This part shows the impact of commitment on the previous discussed enablers. Circular relationships exist to sharing responsibility, autonomy and collaboration.

Being committed to a task implies the willingness to perform that task. That is the case, since one wants to ensure, that the activity is processed as intended. Consequently, autonomous behaviour is favoured by the employee to achieve that goal. Otherwise, a strict control would have been necessary but for example due to the level in the hierarchy not possible.

Being committed to the company implies the aim of achieving the company’s goals as good as possible. Therefore, the staff and especially the leading staff see the necessity of sharing workload to achieve the company goals. Moreover, committed leaders might strive to improve the commitment of their followers by sharing responsibilities. That is the case, since motivated working staff improves the possibility to realize the set goals and to enhance the business.

The relation towards collaboration is based on the relationships among the members of the company. Support of other team members needs the commitment and motivation of the helping employees. Only if the supporters are motivated to help, collaborative behaviour will take place. Reasons for this motivation might be their personal relationships or their striving for business success. Forming a collective always needs the commitment of the single parts being engaged in it.

The Impact of Commitment

As shown before commitment is very important for business success in general. The division between commitment towards daily working life and the decision-making process has to be made, since the latter goes beyond the expectations towards the
majority of the employees. Participation in decision-making processes and developing the company is mainly part of the management team or leading staffs.

In daily working life commitment is needed towards the performed task, as it ensures quality and company’s success. Moreover, committed employees are more likely to strive for knowledge and skill improvement to secure the company’s success in the future. Furthermore, commitment can be shown towards the company itself, for example by being proud to work at the company, and towards the colleagues and leaders. Latter is important to maintain a good working atmosphere and to act in concert for the common goal.

In decision-making processes commitment is needed for either individual and/ or company reasons. Individual reasons are striving for more convenience in the working processes, secure one’s employment and implement one’s knowledge. These reasons consequently lead to effects on company level, as for example a higher reputation, higher quality and accordingly a bigger economic success.

In conclusion commitment can be seen as the basement for present and future success. Present success is ensured by performing the tasks at hand as good as possible and future success will be achieved by continuously improving the efficiency and effectiveness in the service delivery. Motivated and committed people are needed to be successful and to answer the challenges of the business environment with adaptability and quality.

5.2 Facilitator Analysis

The following three parts show the impact of each facilitator on the enablers discussed previously. Therefore, first the influence is shown on sharing responsibility, autonomy, collaboration and commitment. Each evaluation is firstly done in a general way and after that case-related. Furthermore, the interdependencies between the facilitators are assessed. The first two parts discuss the facilitators found in the literature review,
whereas the third part introduces the new facilitator of personality to the framework. In a last step the research framework is adapted according to the findings.

5.2.1 Trust

Trust is a highly valued good in a company. However, building trust is not easily done and maintaining trust is a tough challenge. Trust can be seen from two points of view. Firstly, the trust in oneself or self-confidence needs to be reviewed. Secondly, the trust between individuals has to be evaluated and its impact on the cooperation especially in team situations.

Everybody has a certain degree of self-esteem and it is necessary to perform tasks on one’s own or raise one’s voice in discussions. Consequently, it influences not only the succession in the daily working life but also life in general. In business it is needed to act autonomously, since the employee needs to be sure that what one is doing is right. Otherwise the staff would always need supervision by its leaders being very inefficient. A second point comes up in the decision-making process of the company. Confident employees will raise their voice and try to improve the business by giving hints, but members without enough self-esteem would not strive to improve the business by raising voice. This behaviour is independent of the knowledge and skills an employee has. Therefore, it might harm the company in two ways. First, unskilled people might raise their voice and the developments do not work and second, skilled people do not speak up and the company cannot develop at all. Self-confidence will mainly be discussed in relation to autonomy and commitment.

The second field of inquiry is the trust between the people and this point is essential for the later evaluation of the impact on the enablers. By building trust between the employees a company can build strong social capital. As shown earlier strong social capital leads to bigger success in business and as trust is part of it, it should be developed and maintained in the company every day. Especially in businesses where teamwork is the rule and not the exception, a trusting working atmosphere is highly
beneficial. The healthcare sector with its interdependencies between different activities is a very good example for such a business. Building trust between people is a complex process and cannot be discussed in detail here. But, it is widely known that the most important resource for building a trustworthy working environment is time. The interviews show that a low turnover rate improves the likeliness of such an atmosphere. That is the case, because the colleagues need to know each other and get used to the other’s behaviour and style of working. Colleagues trusting each other will know how and what the other one is doing. Therefore, the processes are smoothed, since the participants can be sure, that the work needed is done or if issues arise, these will be communicated. Consequently, trust between the people influences the sharing of responsibilities and workload. Furthermore, collaboration and commitment are affected.

*Trust Improving the Sharing of Responsibility*

Complex processes demand sharing of workload and responsibilities as discussed above. Especially in procedures with highly interrelated activities each part of the process depends on another one. Therefore, employees need to know the style of working of their colleagues to implement a smooth processing. Trust in the colleagues and their work is needed, as everyone needs to be sure that the related tasks are performed as planned. The analysis of trust in this context needs to be done out of two points of view. Firstly, the leader sharing the responsibility will be evaluated. After that as a second step the follower receiving the orders to perform a certain task will be assessed.

*The Leader’s Point of View*

Every company member striving to share responsibilities needs to trust its colleagues. It is a prerequisite for the evolvement of sharing behaviour. A leader needs to know the abilities of its followers and has to rely on them, so that the activity is processed in time, budget and at the targeted degree of quality. If a leader would not have this confidence in them, the likelihood would rise, that either everything is done by the leader or a big controlling mechanism is needed. The first choice is usually not applicable, since the
tasks are too complex to be performed by a single person. The second choice causes immense additional costs. The more control is needed the higher, the costs will become, since the staff on higher levels of the hierarchy will have to perform this control. Consequently, they will not have enough time for their actual duties anymore. Therefore, either more personal is needed which costs money or the processes in the company will not be performed in the targeted quality and quantity. Both alternatives lead to inefficient work, although the sharing of responsibilities should enhance the efficiency.

The case company as every other company in the healthcare sector has to deal with this dilemma. It has to decide how much control is necessary to ensure the quality of the service delivery, and what the maximum of control is to ensure the efficiency of the process delivery. The decision has to be done out of an evaluation of the context, since not every task needs the same amount of control. The difference between standard activities and extraordinary activities should be made and furthermore a link to the impact of activity failure should be done. The data shows, that treatment protocols for the supervision of the basic treatments given to a patient are used. This protocol gives an overview for all treating staff members what was done and what has to be done. Furthermore, in situations, where the patient’s disease pattern is extraordinary, the company uses the dialogue between different specializations to get the best possible treatment. This is not a formal control mechanism, but discussions among all colleagues can improve the point of view of the treating physician to be able to decide on a better therapy. In situations where new colleagues being on qualification are involved, the mentor acts as helping hand but as a control mechanism as well, according to the statements of one interviewee.

The relationship between the leader or the person giving responsibility and the receiving staff member is characterized by the interplay between trust and control. The objective is to find the optimal point on the continuum with trust in the people on one end and control the people on the other end. Building trust towards colleagues helps to share responsibilities, since the sharing individual can rely on the fact that the tasks are performed as intended.
The Follower’s Point of View

Regarding the relationship between the receiving individual and the sharing person the reason for trust benefitting sharing behaviour is slightly different. The first point to consider is the trust in the leader, that the shared tasks are meaningful for the common goal of the company. As the receiving persons might not always overlook the bigger picture, they need to trust the leader’s judgement. This trust is necessary, since motivation will improve, if the people see the logic or sense behind the task. Identifying the reason behind the task is in most cases not possible for the common employee. Therefore, the sharing person has to give sense to the task and the employee needs to believe the reasoning. Although challenging decisions can be beneficial, as it enables an open dialogue, it can harm the processing if it is carried to excess.

The second point is related to the trust in oneself. Sharing responsibility includes the permission to perform an activity in an independent way. The processing staff needs to have enough self-esteem to feel up to the task. Otherwise, if the team member feels overstrained, the responsibility sharing might not only harm the business but also the employee. The business is harmed, since the task might not be performed as intended and therefore quality can be diminished or it becomes more costly, since more time is needed. The employee’s self-esteem might be decreased further due to not accomplish the obligation being problematic for future tasks. In contrast, if the individual has enough self-confidence and performs the task well, it will help him to further strengthen its trust. Giving responsibilities to someone shows appreciation and consequently values the work one is performing. Therefore, higher trust in oneself can lead to more engagement in the job, since one seeks for acknowledgement. Participation in decision-making and in general raising voice might follow.

The structure of the case company is long grown and especially the leading staff has a lot of experience. Since the procedures are well elaborated, it is easier to see the sense behind single tasks. In consequence, it becomes easier for followers to assume a sense behind the leader’s decisions. Therefore, the trust in them is increased. In context of daily work the situations can be divided in normal patients, where standard procedures
are applicable, and in extraordinary patients, where special treatments have to be used. The first case is met by standard procedures for different kinds of diseases. Since these procedures are developed with the help of an association specialized on physical rehabilitation (Case Company 2012b), the sense behind the treatments can be assumed easily. Situations demanding non-standardized procedures are mainly discussed among the treating personal to find the best possible solution. Furthermore, the annual report states, that all staff is requested to have on-going training to stay up-to-date with the current knowledge. Due to these two complementing approaches to find the best possible therapy, the follower can be sure, that the decreed treatment is helpful in the particular situation. Consequently, the degree of trust in the decisions is increased. The case company strives to enable its staff members to take responsibility. However, especially for new colleagues and physicians on qualification the first aim is to prepare them for the upcoming tasks. Therefore, the mentorship program was launched and the interviewees state that the contact with the patient is increasing in the first time. This stepwise approach helps the employees to get used to their obligations and consequently, they can rise with their tasks. The adjustment to the new job helps to feel more comfortable with the former unknown and consequently increases self-esteem. Moreover, on-the-job training gives support to the new colleagues, since they know that they do not have to be perfect from the beginning and can ask more experienced employees for help. The “trainee”-status takes pressure from the new ones enabling a freer working and making own experiences to enhance self-confidence.

*Trust as the Basis for Autonomy*

As discussed earlier the processes in today’s business become increasingly complex. Therefore, solely autonomous working is hardly possible, especially in the healthcare sector, where the service delivery is always performed by teams. However, the single tasks in the processes can be performed independently, although they are interrelated to other tasks.

Trust is influencing the appearance of autonomous working. The more trust the management has, the freer an activity can be performed without permanent supervision.
That is possible, since the leading staff knows the performing parties and its work, and consequently the uncertainty about the outcomes is reduced. Certainty is a prerequisite and the leaders need to rely on the steady quality and quantity of the work performed. Furthermore, if the trust in certain parties is big enough, the possibility will be given, that they make decisions related to their work on their own. The benefits are quite obvious, since the necessity of supervision is reduced, the processes are smoothed and consequently the costs are reduced due to higher efficiency.

Although, a minimum degree of trust is needed to allow autonomous working, trust is also affected by working independently. Firstly, the leader allowing a follower to act freely shows trust. Therefore, the follower’s self-esteem is strengthened, the motivation is increased and the productivity might be enhanced as well. Secondly, the trust between the people is affected. If the work performed autonomously is done well, the leader sees that one can rely on the particular worker, since quality and quantity is delivered without permanent supervision. Consequently, the trust in the performing individual will increase and the permission to act independently might be broadened. Although this is an iterative process being able to gain huge benefits, supervision should not be abandoned completely. A certain degree of control is necessary to keep the company on the track especially in times of change. The management needs to find the best possible mixture between autonomy and control. The more trust the management has towards its employees, the more emphasis can be placed on autonomous working.

In the case company the relationship between trust and autonomy can be evaluated when looking at the introduction of new colleagues. In the physicians’ case it is expected, that the new colleague gathers information about the procedures of the clinic in the beginning of the employment. Support is given by mentors giving practical hints and generally helping in the introduction phase. Although there is contact to the patient, the activities are supervised in the beginning.

“The introduction of new colleagues is done stepwise.”
This period works as a trial period, where trust can be gained and the better the performance is, the faster the supervision will be reduced. Consequently, the new team member will be allowed to act more independently in the daily working life. One interviewee states, that the introduction is characterized by “look and learn” first followed by little and easy therapies and later on, if the new therapists delivers quality, the possibilities for working independently increases until full autonomy in performing the treatments.

**Collaborative behaviour through trust**

As with autonomy, trust acts as prerequisite for collaborative behaviour. Collaboration among team members will only be possible, if the individuals know each other and trust each other. Otherwise collaborative working would not be as efficient as it could be. The problem is not that each employee does not know that working together is necessary to achieve the common goal, but the potential threats arising from collaborative behaviour are. In collective settings the possibility for opportunism is always present. This kind of behaviour is more likely, if the employees do not know each other that much, do not have that much respect for each other and the processes are complex and the individual contribution is not visible. In general, employees try to avoid opportunistic behaviour, since it might harm them. An example would be the accomplishment of a task performed by a team and a single team member claims for all appreciation. In the following time the other team members would not be willing to support this individual anymore, since they would not have any direct benefits from it. Another potential problem is moral hazard, where an individual has more information than the rest and consequently uses this knowledge for its own benefit and not for the team. These potential problems can be overcome by knowing each other better. Therefore, uncertainty would be reduced being another prerequisite for efficient collaboration. In addition, as the employees work with each other and know each individual’s behaviours a certain degree of trust is established within the team. Thus, a certain degree of trust is needed to start working in collaboration, but it will be improved by acting collectively.
A further issue to consider is the ability of performing a task by an individual. Team members need to be sure, that the certain individual is capable to process the task which is assigned. Therefore, there should be transparency about the knowledge and skills of each team member. Only if the team knows who is able to do which kind of work, an efficient allocation of activities will become possible. Accordingly, full transparency reduces uncertainty and therefore trust is established, since each member can rely on the proper task accomplishment by the other members. Knowing that other members deliver quality and quantity has an impact on the motivation of the whole team and acting in concert becomes possible. Furthermore, after the successful accomplishment of the process each member trusts the team even more, since one knows that the procedures work. Consequently, the team might be assigned to more complicated and complex tasks in future which gives additional trust from the management towards the whole team.

All interviews show, that the case company’s procedures are mainly based on collaborative behaviour. The allocation of work packages is not only based on personal restrictions but also on the knowledge and skills and consequently trust in the treating personal. In the PT division the allocation of work is mainly performed by its leader. Therefore, the leader needs to know the capabilities of each member of its division to assign the treatments in an efficient way. This procedure is even more complex according to one interviewee, since the level of knowledge differs among the therapists due to different professions and specializations. The leader needs to rely on the abilities of each member and therefore trust in the individual is necessary. Due to the leader’s long experience and the low turnover rate trust is well established. Furthermore, since sometimes more than one therapist treats a patient, supporting each other is necessary. Trust helps to improve efficiency in collaboration due to the exchange of information and the enabling of an increase in treatment quality.

“Trust to patients and colleagues is very important.”
Commitment is influenced by trust as well. The analysis of the impact needs to be done out of two points of view being applied in previous paragraphs as well. First the impact of self-confidence on commitment is evaluated and in a second step the trust towards other participants in the decision-making process is assessed.

In general, self-confidence is needed to actively participate in decision-making processes. Being sure about one’s own capabilities enables poise in everything one does. If an individual feels confident with its regular work, the possibility will be given, that the motivation to participate actively in the development process will increase. One needs to be sure about the own skills and knowledge to raise the voice, since it not only affects oneself but also colleagues. Therefore, self-esteem is needed to take the responsibility of change. Although making proposals does not mean, that they have to be approved, one has to be aware, that they might be implemented. In this process the individual might have to defend the proposal, which needs self-confidence as well. One has to be able to argue with colleagues and even the management of the company.

Though, trust is not only the prerequisite for raising voice, but it is also affected by it. If a proposal is approved and implemented the self-esteem increases, since one knows that it was good and helps the company to achieve the common goals. Nevertheless, the reverse case might become true as well. If the suggestion made is not approved for whatever reason, it might harm the confidence in oneself. One needs to be strong enough to stand this situation as well.

The case company encourages its employees to actively participate in the business process. It is not a necessity to make proposals and to get involved in the development process, but commitment to the regular work is expected (Case Company 2012b). Due to the stepwise introduction to the job of new people, the on-going education and the low turnover rate the employees become experts in their job. This is a prerequisite to develop self-esteem being beneficial in the whole process. Moreover, all employees are encouraged to raise their voice in the treatment process and in the strategic
development. In daily work help is always appreciated giving a good feeling to the supporter and consequently strengthening its self-confidence. If a proposal is implemented successfully, the proposing individual will be rewarded having an impact on the self-esteem as well.

The second point to consider is the trust between the people. A certain degree of trust among the team is necessary for smooth processing and should be developed over time. The development is closely connected with knowing the other team members. The more trust between the people is, the more likely interpersonal support will become. The reason behind that is, that the supporting staff member knows the behaviour of the supported and therefore can estimate whether support will be appreciated or not. This is the prerequisite for support, since without it the helping person would not have any incentive to behave like that. Moreover, when engaging in the development process the proposer needs to trust the decision makers. The decision making process should be transparent to be followed and moreover the management needs to appreciate successful proposers. Furthermore, the employee needs to be sure that the proposal made is considered seriously and if it is successful, no other individual will get the appreciation through opportunistic behaviour. The worst case which could happen is that the employee is bilked of the benefits for the successful proposal. Consequently, trust in the people is needed to enable efficient suggestion-making.

In the case company two main features need to be considered in that context. First, the low turnover rate which enables getting to know the colleagues and their behaviour. The interviewees state that the staff knows each other very well and there are certain activities besides the work, as for example Christmas parties and barbecue evenings improving the team building. Consequently, the possibility of opportunistic behaviour and regret of appreciation might be minimized. Furthermore, the decision-making processes for strategic development are transparent and performed by several people.

“...comprehensible decision-making processes are crucial...” (Case Company 2012b)
Therefore, the likelihood of interpersonal problems affecting the decision-making is reduced. The reward system for successful proposals acts as a facilitator as well. Nevertheless, it is questionable, whether this financial reimbursement includes not only positive but also negative effects. Firstly, monetary rewards promote only the extrinsic motivation although the aim should be to develop the intrinsic motivation. Secondly, the amount of compensation might be an issue, since the proposing employee might feel that it is too low and consequently the willingness to do more proposals will be diminished in future.

"Trust is very important, but a certain degree of mistrust exists and makes sense."

This statement is interesting and needs further evaluation. The statement of the existence of mistrust is quite obvious, since it is just not possible, that everyone fully trusts each colleague. The second part of the statement is related to the intention that every decision should be challenged no matter from which person it came. Only through this a healthy debate becomes possible and development will be enabled. By leaving every decision unchallenged companies would stay at the status quo and consequently, future success can be questioned.

The Influence of Trust

In conclusion it is shown that trust is one of the highest goods. It affects almost every part of the business and helps to improve the procedures by smoothing the service delivery processes. Two different types of trust are identified. Self-esteem is the basis for every individual to act autonomously and with poise. Furthermore, it is needed to raise voice and to actively participate in decision-making processes. The trust in other members of the company is as important as self-confidence. It influences the supportive behaviour, the team building and participation as well. Sharing responsibility would not be possible without both types of trust. Therefore, it should be built and maintained every day. Although, trust is the prerequisite for all enablers, it is always an outcome as well and therefore the effects on it should be handled carefully.
5.2.2 Communication

The second facilitator identified in the literature review is communication being analysed in the following paragraph. The structure is according to the evaluation of the impact of trust. Therefore, first communication’s impact on sharing responsibilities and autonomy will be assessed. After that the impact on collaboration and commitment complete the evaluation followed by a short summary at the end. Though, at the beginning the impact of communication on trust is shown.

Building Trust through Open Communication

As discussed in the previous paragraph trust among the employees is one of the most important assets a company can have. Since trust towards colleagues is built through interaction, communication has a big influence on it. Trust is built mainly through getting to know each other and transparency in behaviour. For improving these, open communication is beneficial. Communicating with colleagues means gathering information about facts but more important opinions and behaviour. Although these can be learned through observation as well, an open communication helps to learn them faster. Furthermore, communication supports the avoidance of misunderstandings, since situations or behaviour might be explained. Though, it depends on the communication style how efficient it is. The more open one communicates with each other, the more possible benefits might occur due to easier adaptation of colleagues for example. Nevertheless, one can argue that communicating too openly can disturb relationships, too. Being straightforward is a trait which is very beneficial for an open atmosphere, but the counterpart has to be able to deal with it. If all parties are okay with straightforwardness the benefits for transparency and consequently for trust are immense. In situations where some individuals can not deal with this trait, it might be better to communicate more diplomatically. The right mixture always depends on the composition of the team and the team member’s personality.

Another point to consider is a German-related one. In German language the difference between the formal “Sie” and the informal “Du” is possible as a form of addressing.
Addressing someone informally in business life means knowing each other better and having closer ties. Though, the rule is addressing the colleagues and especially the leaders formally. The change from formal to informal addressing should be proposed officially. There are certain rules about changing from formal to informal addressing being socially accepted. One of these rules is that the person higher in the hierarchy has to propose the informal way. Another one is that older propose younger or women propose men. Due to these different rules it can come to problems. For example, if the leader is a younger man and the follower is an older woman. Besides these problems there are some issues related to the communication style. The formal addressing is perceived as more distant and less open, whereas informal addressing is open and amicable. Therefore, formal addressing faces the problem that the communication is not as open as it could be and therefore transparency is affected and building trust is more limited. Informal addressing has the possible problem of being too straightforward or in stressful situations even being rude. This can lead to big problems among the colleagues and mistrust might be the consequence. In addition to these two forms sometimes a hybrid is used or one uses the old fashioned third-person-addressing. The hybrid includes using the formal addressing but the first name. Depending on the personal taste both types sound weird, but they help to overcome issues in situations, where it is not clear how to address someone. Generally the closer the tie between two people, the more likely informal addressing will be and therefore first of all trust is needed to do the change, but it will also be developed by using it.

Generally, the case company strives to maintain an open communication atmosphere. This helps developing a good working environment as well as trust towards each other. Furthermore, it is stated that not only an open communication facilitates trust, but trust facilitates communication as well. Therefore, a basic degree of trust is seen as a prerequisite for open communication which is needed to work effectively and efficiently. Moreover, there is no official rule about the communication style present in the company. The decision between formal or informal addressing is decided bilateral. Nevertheless, it is stated that addressing the colleague informally helps to ensure a more open communication and improves the problem solving, since issues can be addressed more straightforward. Though, the dark side of the “informal you” is present as well,
since conflicts might occur more easily due to the way of communication according to the interview data.

Communication and Sharing Responsibility

This subparagraph shows the impact of communication on the sharing of responsibility. It is divided into two parts. Firstly, communication is assessed as the basis for sharing behaviour. Secondly, the evaluation focuses on communication as an outcome of this behaviour.

Nowadays, the processes in business are that complex that interaction between employees is irreplaceable. Communication between the different individuals in a company is the basis for an efficient interaction. Therefore, the importance of good communication skills increases with the complexity of the tasks performed and the cooperation needed. Sharing responsibilities tries to answer the challenges of complexity. Thus, this approach demands delegation and therefore communication skills, since the tasks and the aims need to be described appropriately to ensure the service quality. Firstly, the operational matters have to be communicated. Description of tasks and processes belong to this. Secondly, the overall aim and vision has to be conveyed. This is even more important, since all employees should have the same understanding of the company’s vision. Establishing a common mindset needs the followers’ understanding but even more important the communication skills of the leaders. Communicating aims should be done on strategic as well as operational level. The latter means that the achievements of single tasks and its fit into the bigger picture have to be clarified. Only if that is done, the processing people will see the sense behind a task and therefore the motivation will increase. On strategic level the overall aims of divisions or even departments have to be communicated. Identification and clarification of these help the individuals to find the best possible way to achieve them. If this understanding is not present, they will just perform their tasks but will not strive to improve the processes, because they just do not know in which direction. Therefore clear and open communication is needed on every level of the company to ensure the benefits of sharing responsibility.
Besides communication as the general basis for dividing workload, it is needed to solve potential issues arising from it. Due to the dispersion of responsibilities it might come to situations, in which the identification of the person in charge is hardly done. Moreover, it might come to situations, in which two or more individuals think they are in charge. These situations inhibit efficient working and should be avoided, since serious conflicts might follow otherwise. Although everyone should prioritize the company’s interest, individual interests might be important as well. Furthermore, the possibility of diverging opinions about the company’s vision is always given, since everyone might have a slightly different interpretation of it. Solving these conflicts requests good communication skills from every party involved. Therefore, a clear and open communication should be chosen to answer these issues. Although it might be more diplomatic to encounter these problems by saying it in a roundabout way, the possibility that the counterpart do not understand what should be said is quite high. Consequently, approaching these issues straightforward might be the better choice, although self-criticism is requested from every party.

The previous two parts discussed communication skills as a prerequisite of sharing responsibility. Nevertheless, it can be seen as an outcome of the concept as well, since people are forced to communicate with each other and consequently the skills should improve due to practicing. The reason for the need of communication is the interdependency between the different activities in today's business life. Therefore, managing single tasks to achieve the corporate goal is very important. Managing tasks and people is not possible without communication skills and while doing it each individual should be able to learn how to communicate the best way with the counterpart. Consequently, the skills will be improved in a learning-by-doing way. Experience and knowledge of human nature is as necessary as the willingness to compromise. Within task processing communication of upcoming issues to the leader is essential, since the management needs to know how the processes are going. After task completion a reporting is needed to put the pieces together for the big picture. This is a prerequisite for showing and controlling task completion. Thus, sharing responsibility enhances the necessity of communication and helps to improve the communication skills in a learning-by-doing manner.
As discussed earlier the appearance of issues due to diverging opinions on reliabilities is increased. Therefore, more communication is needed to solve these problems as the company’s organization is more flexible than with a strict hierarchy and formally assigned leaders. Due to that mediators are more often used to solve the problems. In consequence, the problem solving is not only performed between the parties involved, but a third party helps to resolve the issues and to learn from them.

All interviewees attested an open communication in the company. Therefore, each employee is entitled to approach anybody when issues arise. The communication in everyday work is very intense, since the single tasks are interdependent and coordination is needed. From the individual therapy planning process to the strategic orientation each member is allowed to raise its voice. The different responsibilities are widely spread and therefore a communication network is established comprising all staff members of the company. Especially in the caring teams, communication is used very often to ensure the best possible service delivery. In cases of changing personnel the most important facts are communicated bilaterally. Bilateral communication is also the most practiced way of resolving problems between the involved parties according to the interviewees. The communication skill development is mainly done through experience and getting to know the colleagues. Furthermore, on-going qualifications as well as an open exchange of experiences are used to develop the skills.

*Communication Making Autonomy Efficient*

At first sight communication is not really needed for working autonomously. However, that is not the case and communication affects the effectiveness and efficiency of independent working. Although autonomy means working with no support of others, the situation might be that the task being processed is done by two different individuals. That is the case, when staff changes in the process due to illness for example. In these cases a clear communication between the two individuals is needed, since the steps conducted and the further steps need to be clear especially in complex tasks. The sharing of information will lead to a higher efficiency, since the work is not done twice or not at all. Therefore, costs will be reduced and the degree of quality will be ensured.
Besides the case described above, communication is needed more generally as well. Autonomy means performing the activities independently but not deciding on one’s own, which tasks need to be done. Therefore, the leader of the working parties needs to describe the task as good as possible to ensure, that it is done according to the plan. How detailed the procedures need to be communicated always depends on the staff involved and the tasks to be processed. The more complex the task and the less experienced the employee is, the more details need to be communicated. However, the communication is not only one-way but should be two-way. That means, the employee should ask for clarification if something is not understood. Furthermore, as the processing staff member might know possible pitfalls better than the supervisor, these should be communicated as well to become the leader aware of these possible issues. The discussion of the particulars enables the company to manage the goal achievement more effectively. Taken to extremes, if the downstream communication would not be done, the workers would not know what to produce and either they produce what they want or nothing at all. This behaviour would minimize effectiveness in the company and diminish the success a lot. If the upstream communication would not be done, the efficiency might be diminished, since possible pitfalls would not be budgeted. Consequently, the schedule or the costs or both will be above the planned.

Missing communication between the processing employees is one of the biggest problems in healthcare teams. Therefore, the case company pays special attention on both communication streams. In a first step the decreed treatments are communicated to the therapists to enable them to manage their workload independently. This step is mainly processed IT-supported. Though, the physicians might give extra advices for special cases face-to-face or via the treatment protocol. The upstream communication is done via the treatment protocol or face-to-face. In these conversations issues which came up in previous treatment sessions are discussed and the treatment plan is adapted accordingly. Yet, not only proposals made by the therapists are communicated this way but also patient’s wishes, since

“... patients address therapists more likely than physicians.”
Communication and Collaboration

The necessity of communication in collaborative work settings is quite obvious. Employees need to adjust their tasks to achieve the common goal. Since the service delivery is mainly a task of a team working on it, an open communication is crucial. Working together includes dividing work packages among the team. The division needs to be communicated and therefore exchange of information is the basis for collaboration. Though, not only the work division needs to be communicated but also the strategic goal and vision of the company. Each employee has to get an insight into the overall mission. That enables the individual to see the sense behind a task and consequently being motivated.

Besides this operational communication there is also a necessity for communication as the basis of establishing a good working atmosphere. Collaboration does not only mean working together on a common project but also building a collective, in which people know each other and feel responsible for each other as well as the company. Therefore, people communicate to get to know the colleagues better. If one knows the situation of the counterpart, the possibility to understand its behaviour is increased. Consequently, processes can be adapted and consequently might be smoothed. Establishing this atmosphere can be facilitated by the company through guidelines and off-the-job activities for example. This should enable an open communication, where everyone feels comfortable to address a problem or to ask for support. The expression of the need for help is always the first step towards collaborative behaviour and should always be done if needed. If the colleagues do not know that help is needed, they will not support the others.

The case company strives to communicate as open as possible in every part of the business. The interviews show that the atmosphere is characterized by mutual support and the sense of working in concert. The basis for this atmosphere is the composition of the staff. Furthermore, the low turnover rate helps to improve the atmosphere and open communication, since most of the people know each other for years. Since the employees know their colleagues, it is easier to address issues directly as well as request
support. Besides the individual aim for supporting the others, there are certain management activities fostering this behaviour. Firstly, the lived norms and values are emphasized by including them in the annual report. One interviewee states, that the personal fit to the company is already a part of the recruiting process. Secondly, addressing issues is mainly done face-to-face emphasizing the interpersonal relationships. The information on important incidents is dispersed less via IT-based communication systems but more in meetings, where all relevant stakeholders are present. Thirdly, the interdivisional communication is supported through the possibility of observations by the company. Consequently, not only knowledge is improved but also relationships are established especially in the case of new colleagues. Fourthly, off-the-job activities are provided to improve the teambuilding. A corporate Christmas party is organized and within the divisions barbecue-evenings or bowling-evenings are done for example. These situations help to get to know the person behind the colleague, because communication on off-the-job topics is possible.

*Communication’s Impact on Commitment*

As discussed in one of the previous paragraphs, commitment can be evaluated on different levels. According to that structure, first the influence of communication on the daily working life and second the influence on the participation in decision-making is evaluated.

The basis for commitment to the daily work is information. One has to feel confident of the necessity of the activities performed and the business conducted. Therefore, the information flow is crucial to motivate each individual to give its best for the company. Consequently, good communication skills are required to establish and maintain the information flow. The skills not only refer to interpersonal communication in bilateral discussions but also to one-to-many media such as guidelines, mailing lists and speeches in meetings. The necessity to be able to communicate information in a way that every individual has the same interpretation on the topic is unquestioned. Otherwise, if interpretation is possible, it will come to situations, in which different opinions exist and consequently the common vision and goal is undercut. Moreover,
besides the ensuring of the understanding of the general vision, motivation of the single employee is needed as well. Therefore, the leader has to know the followers and need to adapt the communication style to make it more efficient. Interpersonal and communication skills are needed immensely to be able to perform this adaptation. The aim is always to get the best out of the employees performing the tasks. Therefore, the quality of service delivery will increase and each employee might be more engaged in the business.

Although the main emphasis lies on the leader motivating the followers, the latter need communication skills as well. Since clarification of the vision for example is only possible if the leader knows that different interpretations are at hand, the followers need to discuss their understanding. If differences occur, they will need to address these issues. A second point, where each employee needs good communication skills, is if one strives to participate in the decision-making processes. Firstly, one needs to communicate the proposals in a way that every stakeholder understands the points involved and the necessity for the change. Secondly, when the suggestion was made, the proposer needs to defend the arguments against the opponents. Moreover, an open discussion should take place to find the best solution for the frictions. Therefore, raising voice in the decision-making process requests good communication skills and persuasiveness.

Lively discussion is the basis for all decisions in the company according to the interviewees. Therefore, communication skills are requested in each of the employees. Strategic decisions are communicated and explained in different ways and through different channels. If an employee wants to make a proposal for change, a committee will discuss the suggestion with all involved parties and the proposer. In these strategic meetings everyone should raise the voice to clarify the particular position and might convince the others of the necessity of the proposed change. Moreover, in the daily working processes the development of the therapy plans for example are discussed with everyone involved. This means therapists, physicians and nurses discuss the best possible way of the process supported by the input of the patient.
The Influence of Communication

Communication is the basis for every interaction in a company. An effective communication is necessary in every part of the daily business as well as the development processes. Furthermore, communication can be seen as an outcome of sharing responsibility. Since it is that important, communication skills should be developed continuously by every individual in the company. Moreover, an atmosphere of open communication in every direction in the hierarchy should be fostered. Due to this transparency the facilitator of trust is influenced positively as well.

5.2.3 Personality

A completely new and hardly discussed facilitator for leadership in general is the personality of the individual. Personality comprises factors like values, norms and beliefs as well as other factors especially important for being a leader. These other factors are for example: introversion vs. extroversion, open-mindedness, collectivistic vs. individualistic, courageous vs. cautious, etc. Although every individual has its own mixture of these factors and they influence the leadership behaviour, scholars hardly involve them in theory. Since the personality is the foundation of behaviour it impacts every aspect of interaction with other people and the individual performance.

Consequently, there is a need for discussing personality as a facilitator. The analysis is structured as the previous two and therefore starts with the discussion of the impact on sharing responsibility and ends with the impact on commitment. All subparagraphs introduce a general evaluation first followed by a case-related assessment. The interdependencies towards the other facilitators are analysed first.

Personality’s Influence on Communication and Building Trust

Since the personality characterizes the individual behaviour, it impacts the communication style and the ability and willingness to build trust towards other people.
Although, there are many features of human behaviour influencing the communication, all cannot be evaluated here. However some examples are discussed in the following.

Communication is affected due to the tendency of being more introverted or extroverted. The more extroverted a person is, the more one will speak with colleagues. Furthermore, the openness in communication might be increased as well. In addition, being more collectivistic or team-oriented helps in communication too, since open discussions are the rule and not the exemption in collectivistic settings. The personality also affects the way of addressing someone. If one is open-minded, nice and helpful, the likeliness will be increased, that the conversation with others is more friendly and informal. In contrast, authoritarian and inapproachable characters tend to be more formal in their way of speaking. Addressing issues which is very important in team settings is related to the characteristic of being courageous or cautious. The more courageous one is and the more poise one has, the higher the possibility will be that issues are addressed straightforward. Diplomatic traits relativize this effect. Cautious people might tend to not offend other people and therefore might address issues in a roundabout way.

The same mechanisms are also available for the relation to trust. The different features of human nature influence the ability and willingness to build trust. The most important characteristic in this context is maybe courage. The more courageous one is, the more trust in oneself one will have. Furthermore, since trusting other people is always connected to uncertainty, a certain amount of courage is needed to have trust towards other persons. Cautious people might tend to bide until they know the counterpart very well before they trust them. That might be related to their lower self-esteem as well, since they do not want to get hurt by others. Another important trait affecting the building of trust is reliability. The more reliable a person is, the faster others will trust the colleague since they can be sure that promises are most likely hold. Besides courage collectivistic traits might influence the building of trust, too. Since collectivistic individuals are dependent on a group of people around them, they need a certain degree of trust in them. The relation is that the more collectivistic one is, the easier trust might be developed. Experience in team settings is crucial and beneficial in that context.
There are different statements in the case company that the personality affects communication as well as trust building. Especially communication style depends on the personality as some individuals tend to be more distant than others and consequently will not use informal addressing that much. Related to the building of trust different opinions exist in the company being very interesting. On the one hand there is the opinion that trust is needed to perform well as one entity. On the other hand the statement that a certain degree of mistrust is healthy as well is present too. This difference highly depends on the personality of the individual, since some are more collectivistic and some are more individualistic and distant. Furthermore, trusting people always goes hand in hand with a higher degree of uncertainty and not every employee wants to stand that.

*Personality’s Impact on Sharing Behaviour*

Being able to share responsibility depends on the ability to build trust towards other people as well as to see the necessity of the sharing. As discussed in the previous subparagraph building trust depends on different traits and consequently affects the willingness to share the responsibility. Since most of the people try to avoid uncertainty, they might tend to do the things by their own ensuring the quality of the process delivery.Nevertheless, quality in that context is a subjective opinion and others might have a different image on it. Furthermore, the leader needs to see the necessity of sharing, since most processes are much too complex to be performed by one individual today. Therefore, a certain degree of objectivity about task completion is necessary and the manager should always have the success of the company in mind. Basing decisions on individual aims might inhibit the success of the company, although the manager is successful. A good example for this is the current financial crisis, in which some individuals enrich themselves at the expense of others. Not only the task achievement is a factor being necessary, but personal development and teambuilding in the company affect the success as well. Both will be supported by sharing responsibilities, if the leaders are willing to use it. Consequently, leader’s attitudes should support the individual development of the followers and the building of social capital. The latter can be done by assigning work packages to teams, which they should perform single-
handedly. This will show a sense of empowering each team member to contribute for the company’s success and to achieve a goal collectively. Developing the individuals can be supported by sharing responsibilities too, since the leadership skills of potential new management staff is fostered. The personality of the sharing person has a big influence on that, since it highly depends on the individual aims. Firstly, fostering future leaders might threaten the own position in the company. Therefore, the leader needs to live the vision of the successful company and not only safeguarding the own career. Secondly, the decision between present or future outcome maximization needs to be taken by the leader. The more future orientated a manager is, the more individual development will be fostered. Nevertheless, this might cause problems of effectiveness and success in the short term. The less future orientation, the better the short term outcomes will be but on the expenses of future outcomes, since the leaders of tomorrow are not supported.

Due to the nature of service delivery sharing responsibility and workload is needed in the case company. The structure of the treatment process already supports sharing behaviours. Deciding which treatments are given is done by the physician and the treatment process is done by the therapists for example. Though, the division is not only because of the structure of the process, but also because the involved individuals know that the certain tasks are the expertise of the particular performer. Consequently, employees need to be team oriented to see the necessity of the sharing being supported by the interviewees. Besides this general approach other possibilities exist, where personality affects the sharing behaviour. To exemplify, the introduction process of new physicians is done with the help of a mentorship program. The mentor being a SP helps the new colleagues by giving advices and helping in the daily work. Furthermore, the tasks can be assigned to the new colleagues with the purpose of developing skills and knowledge. This needs a future-oriented attitude in the mentors, since they help to develop and educate their possible successors. Another sharing behaviour is shown in the therapeutic division, where the tasks are divided among different professions being on different levels of education according to the interviewees’ statements. The sharing would not be required, since the tasks could be performed by physiotherapists. Nevertheless, the responsibilities are shared with the other professions to reduce
therapists’ workload, promote others abilities and to produce social capital through the appreciation of others’ work.

*Individualistic Traits Promoting Autonomous Behaviour*

Tending to work more autonomously is based in the traits of a personality too. The reasons for it are manifold. Firstly, it is possible that the individual performing the work likes to be one’s own master. That means neither receiving orders nor being supervised permanently is beneficial for the individual’s working process. The only order this type needs to receive is the order what to deliver. Secondly, the worker is perfectionistic and consequently is of the opinion that nobody but himself is able to do the job properly. Therefore, all tasks are performed by this person and the delivery of the product or service will be out of one hand. This would have a big advantage, since the employee knows the whole process and consequently answers questions about it easily. Nevertheless, the aspect of quality control is problematic, since the worker is already of the opinion that the best possible solution is processed and no control is required. Thirdly, the employee tending to work independently has problems to establish trusting relationships with the other employees. Thus, it is an outsider in the company, although maybe good work is delivered; just the interpersonal skills are less developed. All these traits are beneficial for the tendency to work alone without any help. Nevertheless, especially in complex procedures these traits are not advantageous for the success of the company, since a certain degree of collaboration is always required. Leaders need to identify these traits among the employees to be able to develop the situations for better outcomes for the company and the employee.

The employees in the case company are aware of the necessity of collaboration. Nevertheless, single activities are performed autonomously. This is mostly due to the structure of the process itself. Since an open communication is established in the company each employee knows that requesting help is always possible. Although there might be employees being more into independent working the general structure of the processes and the working atmosphere established collaboration as the basic concept of working. This applies to all levels in the company. The company’s leading staff share
their workload according to their expertise but decisions are made together and therapists for example support each other, although the treatments are given autonomously. The general consensus found in the interview data is that as much independent work as possible but as much collaboration as needed to achieve the common goal efficiently and effectively.

*Collectivistic Traits Promoting Collaboration*

The opposite of autonomous working behaviour is the trait to work in collaborative settings. This characteristic is multileveled, since it not only applies to the daily working process but also to the feeling of being part of the collective. Correspondingly, collaborative people can either focus on one of these features or on both.

Collaboration in the sense of helping and supporting each other is a more operational phenomenon. It includes the willingness of team members to support colleagues with no explicit compensation. That means, the supporter helps another one and consequently has less time for one’s actual tasks. The supported employee might achieve the personal goal faster and more efficient. Consequently, the supported individual might be rewarded by the company and the supporter who made it happen will get no reward. Therefore, the supportive individual needs to have a collective trait, where the relationship towards the colleagues and the general atmosphere is as appreciated as monetary rewards. Though, if this trait is not in everybody’s mind it can come to opportunistic behaviours, in which the supporters are exploited. Furthermore, to enable collaborative behaviour in this sense, the supported employee needs to request the help. As by asking for help the individual acknowledges that its capabilities are not sufficient, the employee needs to be sure that the other team members do not exploit this confession.

The basis for supportive behaviour as described above is the tendency towards collectivity. People’s traits to feel as a part of a community and feeling responsible not only for oneself help in that context. The individual aims should always come second behind the collective’s or company’s goal and therefore the person needs to be altruistic.
in its behaviours. The benefits would be that the individual vision is aligned with the corporate. Furthermore, in processes of high complexity the supporting each other and acting in concert is fostered. Besides the individual and corporate benefits a collaborative employee strives for harmony among the colleagues in this context. The aim is to form one entity out of the individual employees to promote the working atmosphere and togetherness. Both can be beneficial for the company’s processes as in worse times the staff sticks together and in general the efficiency of service delivery might be improved.

Collaboration is one of the highest values in the case company. Every employee knows that achieving the goals is only possible as a collective as it is emphasized in the annual report (Case Company 2012b). However, personality impacts the degree to which an employee engages for the collective. Therefore, it is mentioned in the annual report, that not only individualism but also partnership is promoted in the company. Every single individual should respect the other individuals, appreciate their effort and support each other. Direct influence can be seen especially in daily work. One example is the trait to emphasize the collective outcomes through giving input in the therapy plan development by the therapists. Although it is not their first priority, the common goal to conduct the best possible therapy drives them to support the physicians in their decisions. Another example is the mentorship program, in which first of all the new colleagues are supported in daily work and developed for the future. Both need a collective thinking rather than an individualistic. One interviewee summarizes the general opinion in that context:

“Every employee supports each other due to its intrinsic motivation with the aim to act in concert.”

**Personality’s Impact on Engagement in the Company**

Commitment to the tasks and engagement in the decision making process is different between each individual. Characteristics of behaviour like introversion or extroversion and the general approach to work is essential. The general approach to work reflects the
motivation for the tasks to be done. Work can be classified in a continuum with work as a burden on the one sight and work as self-fulfilment on the other side. Consequently, the motivation is either more extrinsic or more intrinsic. The more self-fulfilment an employee experiences in the job, the more intrinsic motivation the one will possess. Thus, motivation is increased by the task itself and the monetary compensation for example plays a minor role. Therefore, management can less influence the motivation through a higher salary, but should ensure a working environment being comfortable for the employee. Furthermore, the approach to work has an influence not only on the task accomplishment but also on the task or process development. The more intrinsic motivation exists in the staff, the more likely they will strive to develop the processes. Consequently, the business will be improved and success might be guaranteed for the future. However, being intrinsically motivated does not mean automatically that the employee will be engaged in the development process. Participation in the decision making processes always requires a certain degree of extroversion, since one needs to be able to raise voice and to defend the proposal against others and maybe leaders. Therefore, extroversion helps the employee to speak the proposal out loud, so that it will be considered in the company. Introverted people might have the same or better ideas for improvement, but they will not propose them due to their nature.

Besides the commitment to the work itself and the related aspects, showing solidarity with the company in off-the-job situations is part of the commitment as well. At first sight the main contributor for such behaviour are good working conditions and a good working atmosphere. If this basis exists then the employee might show commitment to the company in public as well. This depends to a great extent on the extroversion again, since similar as in the decision making process one needs to defend the own point of view and might challenge counterparts. The more satisfied with the job and the more extroverted an individual is, the more likely this behaviour will occur.

Employees’ commitment is shown in the case company by their engagement for the best possible patients’ treatment. Personal traits like work as self-fulfilment and collective orientation are the basis for high quality process delivery. All data show, that the aim is to always act in concert for the benefit of the patients and consequently for the
company. The strategic development process is fostered by the company’s management through an incentive system being beneficial for the extrinsic motivation. General working conditions and atmosphere is furthermore supported by the employment conditions and several other actions supporting the collectiveness among the employees. All interviewees state that the working conditions and atmosphere is very good in the company benefitting the employee’s motivation.

In the development process, employees being more authoritarian are identified as pioneers in times of change by one interviewee. That might be the case, since authoritarian people might have a higher hands-on mentality due to their opinion to assert oneself in these situations. Since being the initiator of development it can be seen as a type of leadership. In general leadership is seen as highly dependent on the personality. Traits like authoritarian, energetic, charismatic, cautious, thoughtful or subtle affect the general behaviour.

*The Influence of Personality*

The personality is the basis for every kind of human behaviour. Consequently, it not only affects the attitude towards the four enablers discussed but also to the facilitators. Each individual has its own personality and accordingly its own strength and weaknesses in interpersonal skills. Every individual should therefore be aware of that fact and knowledge about the other’s nature should be acquired through experience to develop the work processes.

“*Job experience and time in the company benefit the outcomes.*”

### 5.3 Research Framework Adjustment

According to the findings in the analysis of the case study the framework needs to be adapted. The basic parts of the framework stay the same but are extended by an additional facilitator named personality. The relationships between the enablers as well
as the facilitators are confirmed. The impact of personality on the concepts is analysed extensively above. Furthermore, personality is identified as the basis for the other facilitators and therefore influences them as well. Special emphasize should be given to the interrelatedness of the facilitators. This is highlighted by the smooth transition in the new framework. Figure 3 shows the final framework based on the analysis done in this thesis.

**Figure 3.** Adapted research framework.

The framework developed above answers the objectives of this thesis, by showing the main parts influencing leadership behaviour. Furthermore, it shows the interrelationships between the influencing dimensions and consequently answers the research question of developing a leadership framework for team settings.
6. Conclusion

This thesis strives to develop a comprehensible framework for leadership situations in team settings with its influencing dimensions. Therefore, an extensive literature review is done and based on the findings a preliminary framework is developed. Due to the analysis of the case study data this framework is adapted and extended. The main aspects in the framework are the following.

Firstly, the enablers and its interrelationships found in the literature review are confirmed. Sharing responsibility, autonomy, collaboration and commitment have a significant influence on the leadership behaviour in team settings. Furthermore, interrelationship is circular except between collaboration and autonomy where no influence on autonomy can be identified.

Secondly, the facilitators found in the review are extended by an additional one named personality. The analysis shows that personality is the most important factor in leadership behaviour but also in general working life. It provides the basis for the attitude towards the enablers and the traits form the basement of the style of communication and trust-building capabilities. Trust and communication have a circular interrelationship, whereas personality is the underlying foundation. Furthermore, the influence of all facilitators on the enablers is shown.

Thirdly, it is found that the facilitators seem to form an entity due to their close relationships. The separation in the first framework needs to be reviewed and a more integrated version is developed. This phenomenon shows once more the complexity of the situation, where no factor can be treated solely, but always the big picture needs to be considered.

The following part introduces managerial as well as theoretical implications of this study.
6.1 Managerial and Theoretical Implications

First the managerial implications of the thesis’ findings are shown to provide practitioners valuable insights for the improvement of leadership systems.

The overall finding that the whole system is related and each factor cannot be treated solely should be considered by managers. Consequently, developing an open atmosphere supported by less hierarchical structures need to be attended to. The development of the structure seems to be necessary to provide the basis for collaborative behaviour and teamwork. Since most businesses cannot be led by a single individual anymore, the possibility for teams leading the company should be enabled. Furthermore, not only on top management level but on all levels the emphasis should be shifted to the team. This will enable the efficient utilization of specialist knowledge on the one hand and collectively aligned visions on the other hand. Both foster the business’ success. Related to the company’s organization issues in the information flow need to be handled carefully. All employees need to support an open communication in every direction. This demands an open feedback culture and every individual needs to have the feeling to be allowed to raise voice and appreciated for the contribution resulting from it. By establishing this kind of open atmosphere the possibility of building trust not only on each level of the hierarchy but to everyone in the company will be increased. Trust is very important for efficient working and should be developed continuously. Although the management is able to support such behaviour in the company by changing the structure and empowering the individual, the personality of each employee needs to be handled carefully. Since it is the basis for behaviour, the leaders need to know the people and treat them appropriately. Open communication helps in that context and building trust towards each follower is essential. The leader needs to motivate each individual according to its personal needs to get the best for the company. Appreciation and encouragement are necessary and should be matched with the personal needs. However, the leader should not only strive for the fostering of task accomplishment in its followers but also for the support of the open atmosphere. Therefore, leading by example, being a good listener and supporting others when needed are crucial.
Besides the insights for practitioners this thesis provides theoretical implications as well. As this thesis combines three different theories to provide a more realistic view on leadership, it might provide the starting point for more integrated research. The team setting becomes increasingly important and should not be abandoned from the leadership research in the future. So far many scholars focused either on leading teams or on the dispersion of responsibility. Both are combined in this thesis as the focus is on the dispersion of leadership responsibilities in teams and teams leading a company. Furthermore, this thesis introduces the facilitator of personality being widely unaccounted for by most scholars. Only parts of the personality like authority are included in the literature so far. This is enhanced in this study by assessing more traits than only authoritarian behaviour. Another theoretical implication is the finding that especially the facilitators in this thesis are much closer related than expected. Most former studies separate the components more strictly. This thesis finds that trust, communication and the personality as facilitators merge and should not be assessed separately.

Nevertheless, as all studies in the field of leadership, this study cannot discuss every aspect of the phenomenon and consequently limitations are presented in the following part.

### 6.2 Limitations

The limitations are in general based on the focus of this study. Consequently, not all aspects could be evaluated which might be important. Due to the selection of the case company, the study’s focus is limited on a German healthcare institution. Furthermore, the chosen company is a special type of healthcare institution appearing rather less in the healthcare sector due to its specialization.

Other limitations are related to the study processing. First, since this study is qualitative in nature and comprises only three interviews the generalizability can be questioned. However, as stated earlier this is not the aim, but the study strives to lay the groundwork
for further research. The second point is the extraction of enablers and facilitators. Although the literature review is extensively done, not all aspects found could be implemented in the study. Especially the facilitator of personality is discussed partly in many studies. The question can be raised whether this aggregation of different smaller concepts (authority, extroversion, introversion, etc.) makes sense.

Due to these limitations and for the further development of knowledge in that particular field the following pathways for further research are identified.

### 6.3 Suggestions for Further Research

The findings in this study need justification and support from other studies. Consequently, more qualitative as well as quantitative studies should follow to broaden the groundwork for the theory development. The interrelationships between the enablers need more evaluation to find all aspects explaining the phenomenon. This study can be seen as the first step in the direction of a more comprehensive view on modern leadership.

Enabling more generalizability more studies are needed in different contexts. First, the institutions in the healthcare sector should vary and maybe the feasibility to other service-related businesses like the banking sector should be assessed. Second, more studies with different cultural backgrounds are needed. This study chose Germany as it is known as quite hierarchical and consequently it can be questioned whether the findings are applicable in other countries as well. These efforts would strengthen the groundwork for the theory development.

Regarding the facilitator of personality more research is needed to find all relevant features of human nature influencing the leadership style. Furthermore, the effects on leadership behaviour need more evaluation. The questions which should be answered in future are firstly, which features of human nature influence leadership and secondly, how do they affect the leadership style.
List of References


Case Company (2012a). Case Company's Webpage. [online]


APPENDIX 1. Interview Structure and Exemplary Questions

Interview Structure

1. General facts about the organization
   1.1. Structure
   1.2. Brief description of persons in charge

2. Influencing factors
   2.1. Responsibility
      2.1.1. Patients
      2.1.2. Team members
      2.1.3. Leading staff
   2.2. Initiative/commitment
      2.2.1. Everyday work
      2.2.2. Relationship building
      2.2.3. Company development
   2.3. Authority
      2.3.1. Personal authority
      2.3.2. Authority of the position
      2.3.3. Behavioural effects (towards authorities and as authority)
   2.4. Autonomy
      2.4.1. Decision making
      2.4.2. Support in everyday work
   2.5. Communication
      2.5.1. In-the-job
      2.5.2. Off-the-job
   2.6. Further Factors mentioned by interviewee

3. General facts about the interviewee – demographics
Exemplary Questions

Responsibility

How are the responsibilities shared?
What are each employee’s own responsibilities?
Are there cases of shared responsibilities? How are they handled?
Do you think that there are possibilities of reorganizing responsibilities to make it more effective? If yes, which?
How does trust influence employee’s behaviour related to responsibility?

Initiative/Commitment

How is initiative promoted in general?
How is relationship building promoted among the employees?
How is cooperation promoted?
Are initiatives to develop the company facilitated? If yes, how?

Authority

What is the influence of the hierarchy on authority?
How personality influences authority?
How authority influences working with colleagues/subordinates?
What is the effect of authority towards trust building?

Autonomy

How is the decision making process? Everyday work, strategic decisions…
How free are certain positions and professions in decision making?
How is support by others promoted in everyday work?
Communication

How is the way of communication on the job like?
Which ways are used for communication?
Are there situations where the communication style changes? If yes, how?
What are the differences in communication in- and off-the-job?
How are official statement communicated?

General

How do other factors influence leadership behaviour?
APPENDIX 2. Interview Protocols

Interview Protocol 1 (25th July 2012)

Company and Responsibilities
- subsidiary company of a communal group of companies
- administration and medical division
- administration’s aim: maximizing the degree of capacity utilization \( \rightarrow 90\% \) targeted/ necessary
- tasks: budgeting, administrative part of HR (contract management, etc.)
- CP responsible for personnel planning and all medical divisions
- problem: budgeting vs. degree of capacity utilization
- strive to minimize costs (e.g. replacement for ill personnel)
- organizational changes have to be approved by administration because of financing
- organizational developments come from mother company as well
- 125 employees

Communication
- good communication between different departments
- problem solving by conducting meetings if necessary
- mostly problem solving ad hoc and bilateral
- conflicts exist \( \rightarrow \) mainly solved in the particular division
- communication of organizational changes not always by top management (e.g. IT-changes)
- twice a year meetings of all employees \( \rightarrow \) information about changes and organizational topics
- meeting of works council once a year \( \rightarrow \) open communication
- open communication between different hierarchy levels
- main communication through informal meetings
- formal addressing (“Sie”) mainly used but informal (“Du”) as well
- official information through different channels communicated
Authority
• leadership style depends on personality
• using informal addressing might damage own authority
• authoritarian communication only in problematic situations (e.g. disciplinary issues)
• leader types: authoritarian, energetic, charismatic; cautious, deliberate, subtle
• completely open leaders very scarce
• some want to show that they are leading
• too nice leaders are not taken seriously
• leaders inform the employees and need to be respected

Other Factors
• trust among employees very important, but certain degree of distrust exists and makes sense
• changes always associated with conflicts and anxiety
• different opinions about certain topics exist → potential for conflicts
• job experience and time in the company very important
• collectiveness good and positive for achievement of company’s goals
• collectiveness improved through works outing

Person
• since 1996 director of administration
Interview Protocol 2 (25th July 2012)

Company and Responsibilities

- patients come to clinic at the instigation of pension insurance, health insurance, private wish
- patients’ records checked by physicians (partly CP)
- admission of patients planned by administration → information for physicians, therapists, nurses
- reception (patients’ arrival) → if necessary pick-up service organized
- nurses: intake → physicians: first physical examination (shortly after arrival)
- WP decide on treatments → information for therapeutic division through IT-system
- if additional diagnosis → additional treatments according to patients needs
- ward round twice a week by WP and/ or SP (eventually more often)
- SP act as supervisor for WP
- CP tries to be present at ward rounds → due to time constraints not always possible
- CP presentation in the beginning of therapy → get familiar with CP and the therapy
- SP specializations: rheumatology/ internist, internist (diet, nursing), orthopaedics (occupational therapy), physical rehabilitation (physiotherapy)
- approbated physicians are allowed to treat the patients but SP have responsibility
- WP need not to be a specialist
- mentorship program (mentor=SP) → learning by doing
- physicians need to be adaptive (introduction to the job performed by different physicians)
- proposals for treatment plan by therapists possible

Communication

- patients get basic information on the therapy plan
- physicians meeting every morning → open communication between divisions
  - once a week interesting cases discussed
  - partly information provided by other stakeholders (e.g. representatives of drug producer)
- communication with patient as binding as possible → forwarding to other colleagues
- meetings of the leaders → all specializations present → problematic cases discussed
- every two weeks meetings for strategic development among physicians → if needed other professions present
- personal addressing most used way of communication
- important information are sent via email-list by secretary
• IT-based communication planned
• communication is based on interpersonal relationships
• “Sie” and “Du” used equally
• “Du” problematic in interpersonal relationships

**Authority**

• levels in hierarchy necessary for control (WP partly in training)
• natural authority available with most of physicians (person-related)

**Autonomy**

• handbook of procedures available for basic autonomous working
• certain diagnosis lead to obligatory treatment modules
• treating physicians decide which patient which therapy needs

**Initiative/ Engagement**

• new physicians have to/ need to have insight in other divisions
• observations in other divisions to get the big picture
• development proposals discussed in strategy meetings ➔ thought through ➔ aim: improvement of the whole system
• patient’s feedback form used for proposals and general feedback
• pension and health insurance might demand changes as well
• implementation planning done by CP
• adjustment management performed

**Other Factors**

• internal audit on quality management
• low turnover rate
• different corporate aim than hospitals e.g. (aims of treatment)
• trust to patients and colleagues very important
• personality very important – especially new physicians

**Person**

• since 1974 in the company, since 1989 CP
Interview Protocol 3 (26th July 2012)

Company and Responsibilities

- physiotherapy biggest department (35 employees)
- professions: physiotherapists, masseurs, balneotherapists, balneotherapist assistant
- leader of physiotherapy = position between SP and therapists
- WP might be bypassed by SP and therapists
- organization of department personnel = responsibility of the department
- if problems occur, SP will be contacted (organizational, treatment)
- distribution of responsibilities well established over time → effective

Communication

- SP communicate information given in meetings
- monthly meetings with all department leaders
- if problems occur, participation in morning meeting possible
- communication style differs between formal and informal you
- “informal you” has to be proposed by the one higher in the hierarchy
- “informal you” helps to solve problems because of more open communication → but higher potential for conflict
- no differences in communication on- and off-the-job
- consultation among employees important for communication (e.g. change of treating employee)
- documentation of treatment → used for feedback
- patient’s proposals mostly communicated towards therapist → reason: physician = “demigod in white”; PT-patient relationship closer
- patients encouraged to communicate proposals or problems are forwarded to the physician
- information exchange very often to improve treatment process
- higher degree of trust helps in communication
- open communication very important
- communication with other departments to improve understanding of their work
- problematic cases discussed interdepartmental and solution will be developed together
- communication with other departments to improve understanding of the big picture
- monthly meeting led by CP
- information regarding organizational matters forwarded by CP
- evaluation of patients’ feedback protocols
- if problems at hand departments directly accessed to solve these
Authority

- position in the hierarchy is respected
- authority plays a role in the team \(\rightarrow\) depends on the personality
- authoritarian personalities act as pioneers in times of change
- authority not stressed too much

Autonomy

- allocation of patients according to specialization
- treatments divided according to professions \(\rightarrow\) otherwise less educated professions would not have work and higher educated too much workload
- personnel planning done in the department
- changes in processes in the department possible \(\rightarrow\) possibly CP/SP approval needed

Initiative/ Engagement

- proposals for improvements not continuously
- ideas handed in in paper \(\rightarrow\) commission discusses proposal \(\rightarrow\) successful implementation leads to bonus for the proposing employee
- support of others due to intrinsic motivation (“acting in concert”)
- therapists try to improve patient’s well-being with WP’s help \(\rightarrow\) therapist proposals
- mentorship program for new colleagues
- contact to patient done stepwise (new colleagues)
- first half year observation in other departments
- leader of physiotherapy is highest step in the hierarchy in that profession
- in general influence possible \(\rightarrow\) higher motivation

Other Factors

- low employee turnover \(\rightarrow\) positive influence on motivation
- working environment good (salary, climate, dismissals, etc.)
- Christmas parties, BBQ-evenings \(\rightarrow\) teambuilding improved

Person

- since 1988 in the company, since 1990 leader of physiotherapy
APPENDIX 3. Case Study Exhibits

Exhibit 1. Organization Chart
Exhibit 2. Hierarchy in the medical Department

Chief Physician
(Clinic Management)

Senior Physicians
(Supervisor/Medical Specialists)

Ward Physicians
(duly qualified to practice medicine)
Exhibit 3. Responsibilities in Patient Care

- **Arrival**
  - Administration

- **Intake**
  - Nurses

- **First Examination**
  - Medical Staff

- **Treatment**
  - Therapists

- **Ward Round**
  - Medical Staff

- **Discharge**
  - Administration
STATEMENT OF ABIDING BY GOOD SCIENTIFIC PRACTICE

I confirm that I have made this Master’s thesis by myself and that I have followed a good scientific practice. All the citations and quotations mentioned as well as all the references to the source materials have been reported completely and identifiable.


Markus Bierzynski