## FRAGMENTATION AND POWER IN MANAGERIAL WORK IN HEALTH CARE

A study of first and second line managers

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## FRAGMENTATION AND POWER IN MANAGERIAL WORK IN HEALTH CARE A study of first and second line managers

This is a compilation dissertation of four papers on first- and second-line health care managers' work. Ten first- and second-line managers from different types of health care settings were shadowed and interviewed for four days each. The study contributes to both the managerial work activities and health care management research traditions with its analysis of fragmentation, processes of power and the creation of order in everyday work.

Scheduled and unscheduled meetings, communication activities, and deskwork consume the managers' work time. Many short activities, with rapid changes between tasks, characterize their workdays. Previous research has interpreted this way of working, with its many switches among competing activities, as evidence of work fragmentation. However, this study found the interconnected and relational character of the activities in the work of health care managers to be a salient pattern. In taking a relational perspective on the processes of power, the study also shows that even when the managers gave accounts of fragmentation, they typically used hierarchization – an ordering process – to prioritize their activities. In this way, they ranked their activities according to collective perceptions of their importance.

The managers used a narrative of fragmentation to negotiate the process of hierarchization in order to gain and/or maintain control over selected activities and to legitimately reduce their accountability for those activities. Within the management and political systems, the narrative was used to support reforms aimed at transparency and increased supervision. The managers sometimes agreed with these reforms, but at other times protested against them because of the increase in accountability, in the workload, and in the focus on quantification work instead of health care delivery. Thus, the narrative of fragmentation described disciplinary power processes at the non-managerial and managerial levels (i.e., employees, middle managers, upper management) and even possibly at organizational and societal levels.

The generalizability of the results of this study is limited by its local and restricted selection of participants. However, the qualitative patterns used in the study are generalizable with respect to the development of useful concepts for the study of managerial work. Future research should continue to focus on the connection between everyday activities (micro-level analysis) and organizational and sociological theory (macro-patterns in society).

*Key words:* managerial work, health care management, shadowing, fragmentation, disciplinary power, legitimacy, accountability, quantification, normalization.

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