# Managing Change in the Public Services

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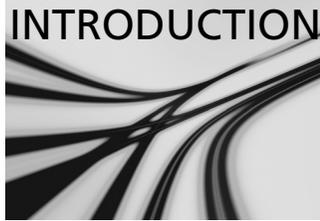
# INTRODUCTION

# MANAGING PUBLIC SERVICE CHANGE OR COPING WITH ITS COMPLEXITY?

## Mike Wallace, Michael Fertig and Eugene Schneller

What makes public service change increasingly complex to manage? How do people involved in the change process cope with this new complexity? How could the management of public service change be rendered more effective? Where might practically oriented academic enquiry productively go from here? The purpose of this book is to make a start on tackling these questions in order to put complexity more firmly on the academic and policy agenda as a key aspect of change management which many frontline professionals, managers or policy-makers would readily recognize from their daily experience.

The burgeoning complexity of change affecting the public services across many countries is widely acknowledged. An issue of self-evident practical and policy significance is therefore how to maximize the capacity to deal successfully with this complexity, and where possible to keep complexity within bounds. Academic research and theory building have potential to inform the thinking of practitioners and policy-makers alike, so that their efforts to improve the management of public service change are realistic about what can and cannot be done. Accordingly, the contributors to this book bring to bear a range of theoretical orientations, literatures and experiences as researchers and change facilitators in synthesizing what is already known, opening up ideas about what needs to be investigated further, and pointing towards promising directions for improving practice.

The term 'managing change', while long established, is something of a misnomer. It still tends to carry the beguiling connotation that change is controllable, if only managers knew how. But the management of contemporary public service change means managing the relatively unmanageable. The sheer scope, pace, ambiguity and multiplicity of change outstrip the capacity of any individual or group

to ensure directive control and certainty of outcomes in practice, whatever their formal position of authority or span of control in principle.

On the other hand, there is no shortage of evidence from different countries and service sectors that public service provision is changing fast. Public service change demonstrably does occur, even if the outcomes are not always what instigators envisioned. People based at different levels of public service systems do cope with the complexity of change, one way or another, despite their inherently limited capacity for control. So there must be some possibilities for managing public service change more or less effectively. Given this limited manageability, effectiveness seems likely to mean making the most of whatever modest possibilities for maximizing control do exist within these limits. Attempts to improve the manageability of public service change might profitably focus on them. But to be in a position to identify such possibilities requires a prior investment in deepening our understanding of the complexity of change and of coping strategies as a phenomenon. That is what this book is about.

The research leading directly to the present volume has its origins in Mike Wallace's work to develop an empirically grounded and social science-informed approach for understanding complex educational change. This focus has since broadened to cover public service change. The approach centres on the complexity, contradictions and unintended consequences of change, alongside its degree of coherence. Complex change consists of multiple parts, and programmatic change adds further complexity in comprising a package of planned changes. The relative unmanageability of complex and programmatic change is conceived as being rooted in the increase that the change process induces in the ambiguity (or uncertainty of meaning) that is endemic to organizational life. But effective coping implies maximizing the potential for manageability within the limits of human agency (the ability to choose between alternative courses of action). This approach is designed to provide a basis for context-sensitive practical ideas on how coping capacity might be developed across public service organizations and systems.

The initial investigation was a sizeable qualitative study (involving 235 interviews) of large-scale reorganization of schools in England during the mid-1990s. Reorganization was conceived as an instance of complex educational change (Wallace and Pocklington 2002). The research tracked two local education authority initiatives taken under central government pressure to reduce the surplus student capacity in schools within their jurisdiction. The ensuing initiatives were introduced in overlapping phases, entailing extensive local consultation and the implementation of school closures, mergers, new building and refurbishment, and development support for staff in the post-reorganization schools. These initiatives were also introduced in the context of a raft of central government education reforms and the rest of the ongoing work of normal service provision.

The central concern of that investigation lay not with reorganization and its specific context as such, but in taking the empirical case as a starting point for the relatively inductive exploration of patterns in its complexity with management implications, and of the extent and limits of its manageability. The starting point was a pluralistic theoretical orientation based on the expression of agency

within broad structural limits (governing what is considered doable and even thinkable). It enabled the research to be focused from the outset on the diversity of perceptions and actions of the people at different system levels who were struggling to make sense of the reorganization process.

The approach to data collection and analysis was inductive within this guiding orientation. The aim was to identify patterns in the complexity of reorganization and how it was managed within and between system levels, but without pre-specifying what these patterns might be. Rounds of data collection and analysis were iterative, analysis feeding back into subsequent data collection in order to ascertain the characteristics of emergent patterns. They, in turn, formed the basis for the development of theoretical ideas about what makes change complex to manage and ways in which people cope with it.

This relatively inductive strategy was adopted as a conscious move away from two dominant approaches towards theorizing the complexity of change at the time. One was to acknowledge complexity but then to ignore it, basing prescriptions for practice on an unrealistically rationalistic understanding of change and of the capacity of policy-makers and managers for 'command and control'. Little account was taken of the likelihood that the increasing complexity of the change phenomenon might affect the way it was and could be managed. The other approach addressed complexity head on. But prescriptions were derived deductively by trans-lating ideas wholesale from complexity theory being developed in mathematics and natural scientific fields of enquiry. Both approaches had neglected the inter-mediate inductive step of empirical research to detect patterns in the complexity of public service change and managers' coping strategies. Real-world findings could have offered a basis for assessing the applicability of their advocates' preferred theoretical frameworks, whether old or new.

Outcomes of the research into school reorganization provided the main source of ideas for an emergent conception of complex educational change embodying characteristics of complexity with management implications. A practical planning framework derived from it included themes for rendering change as manageable as possible.

## Origin and Focus of the Book

Wallace was subsequently awarded a Public Services Senior Fellowship within the ESRC/EPSRC AIM (Advanced Institute of Management Research) Initiative during 2003–5 (see Hartley and Pike 2005). Fellowship activity focused on the question: how might the initial conception of complex educational change and an associated practical planning framework, derived inductively from previous research, be refined to extend their applicability to other changes in different public service settings? The intention was to contribute towards a stronger basis for future research, and towards practical guidance on developing the capacity to manage complex and programmatic change.

While the focus on complexity of change was generic, to keep the fellowship activities manageable it was decided to concentrate empirically on education and health. As the largest and most complex public services, education and health seem likely to offer the most potent insights into the complexity of change and strategies for coping with it. These two services differ in many important respects, such as the degree of technical specialization, reliance on advanced technology, and the compulsion or entitlement to take up provision. But the complexity of education and health services is broadly similar at a high level of abstraction in ways that are significant for a focus on the complexity of change. In terms of ongoing provision, parallels include the scale of their normal operation; their highly professionalized staffing; the variety of their governance arrangements; the diversity of their service providing and administrative organizations; the range of their services; and their electoral vote-winning potential as major areas of domestic policy. In terms of the complexity of change they include the magnitude and expense of government-driven reform programmes affecting service provision, the measurement of performance and accountability, service governance and involvement of the private sector, organizational management and the management of change itself; the acceleration of technological innovation and its accompanying demand on limited budgets; and the exponential rise in public expectations concerning the quality and quantity of service provision to which they should have access.

A further pragmatic decision was to explore change in these two services within Anglo-American contexts. The reasoning was to keep the range of contextual variables within manageable bounds. At the same time, plentiful scope was offered for comparison, since many of these variables are expressed differently at the level of detail because of divergence in the evolution of each country's public services. Table I.1 gives a sense of some of the contrasts (but it should be borne in mind that the entries are so condensed that they omit much of the detail and diversity in each national and service setting – see also Levin 2001; Scott 2001).

The education and healthcare systems of the USA, Canada and the UK feature the high level of sophistication made possible in wealthy western countries; they have a long history, so the accretion of past changes has a strong impact on the parameters for contemporary change; they have contrasting administrative and governance structures reflecting their different (yet partly interconnected) national heritage; these structural arrangements differentially affect the scope for reform and emergent change; the national and regional governments engage in significant mutual 'policy-borrowing', monitoring developments in each country, exchanging information and importing and adapting ideas that appear to have worked; and, partly in consequence, there is significant overlap in the content of planned changes and responses to unplanned changes featuring in each system.

The AIM fellowship made possible exchange and collaboration with academic experts from North America (all of whom are contributors to this volume) and from the UK, consultation with senior practitioners from the UK education and health services, and dialogue between academics and senior practitioners. Fellowship activities included:

**Table I.1**   Contextual factors affecting Anglo-American public education and health care

| Contextual factor | USA | Canada | United Kingdom |
|---|---|---|---|
| Government | Federal republic, 50 states | Confederation of 10 provinces, 3 territories | 2 countries, 2 principalities |
| Population | 295 million | 33 million | 60 million |
| **Education** | | | |
| Primary responsibility | State government, federal policy framework | Provincial government, some federal involvement | National governments, some devolution |
| Local administration | Districts, extensive delegated authority | Districts, moderate delegated authority | Local education authorities, limited delegated authority |
| Public and private school provision | Mainly publicly funded, publicly funded autonomous charter schools, minority of private schools | Mainly publicly funded, part-publicly funded religious schools, minority of private schools | Mainly publicly funded, minority of private schools |
| Percentage of publicly funded school education costs | 90% | 92% | 88% |
| Percentage of publicly funded tertiary education costs | 34% | 61% | 68% |
| Expenditure as percentage of GDP | 5% | 5% | 5% |
| **Health care** | | | |
| Primary responsibility | Individuals, employers, federal assistance | Provincial government, federal policy framework | National governments, some devolution |
| Expenditure as percentage of GDP | 15% | 10% | 8% |

**Table I.1**  (*Cont'd*)

| Contextual factor | USA | Canada | United Kingdom |
|---|---|---|---|
| Percentage of publicly funded health care costs | 44% | 71% | 82% |
| Universal system of health care | No (approx 20% uninsured) | Yes, Medicare public insurance | Yes, National Health Service (NHS) |
| Funding | Private insurance, Medicare public insurance for elderly and disabled, Medicaid public insurance for poor | Medicare public insurance, some private insurance | Mainly public taxation, some private insurance |
| Purchasing | Employers, government, insurance companies, managed care organizations, physicians | Provincial government for all 'medically necessary' services, private insurance companies | Primary care trusts commission services overseen (in England) by strategic health authorities |
| Provision | Self-employed physicians, private, not-for-profit and government institutions, managed care organization facilities | Self-employed physicians, private, not-for-profit institutions | Self-employed GPs, hospital trusts and private institutions |

- A critical literature review of practically oriented texts employing chaos and complexity theory deductively as a basis for prescribing public service change.
- Consultation with experts through two international expert seminars bringing North American and UK-based academics in education and health management together with senior practitioners from the UK education and health services.
- Two invitation seminars (incorporated as one day of the international expert seminars) with senior practitioners responsible for managing change at different levels of the UK education and health services, to explore the practical applicability of the framework.
- Small-scale case study research assessing the application of the initial conception and planning framework to contrasting 'extreme cases' of change in different national contexts. (One focused on the emergence of the US 'hospitalist

movement', an increasingly complex change where a hospital-based physician coordinates treatment for acutely ill patients. The other focused on the programmatic but consultative 'Kindergarten-Senior 4 Agenda' for school improvement in Manitoba, Canada.)

- Consultation with the organization theorist Professor James March about a new ironic perspective (elaborated in Chapter 4) for conceptualizing the contribution of ambiguity to complex and programmatic change.
- A think-tank exercise at the Prime Minister's Delivery Unit offices at the Treasury in London, to exchange practical ideas on managing public service change.

Presenters at the first international expert seminar shared ideas from their work on public service change, while also responding to Wallace's initial conception of complex educational change and planning framework. The North American academics and Jean Hartley, AIM Public Services Lead Fellow, were invited to revise their presentations as chapters for this book. They drew on their own work and developed their ideas in the light of the dialogue during both seminars. Wallace similarly reworked his ideas to encompass health as well as educational contexts, programmatic change and emergent change that increases in complexity. Chapters also report on other aspects of his AIM fellowship activities: the critical literature review, small-scale research, and collaboration with Eric Hoyle from the University of Bristol on theorizing the role of ambiguity in the change process.

The content of the chapters gives a sense of the exploratory nature of the seminars and other activities. The dialogue reflected allegiance to contrasting theoretical perspectives, concern with different aspects of change and experience of different national and service contexts. A mark of successful exchange when scholars and senior practitioners come together to converse about a fresh focus for enquiry and to push forward thinking is the mixture of complementarity and tension reflected in this book. The spirit of enquiry was to exchange our contrasting experiences, debate ideas with a diverse intellectual heritage and engage with contemporary practice in the UK, not to seek premature closure.

The structure of the book reflects the variety of perspectives that were brought to bear on aspects of the complexity of public service change and its management. Chapters are grouped according to the area of complexity connected with public service change that they foreground. However, it should be borne in mind that most chapters also reach into other areas. The topic itself is too vast for any chapter to focus on everything, and too interconnected for any chapter to be meaningfully confined just to one area. A brief editorial introduction to each chapter indicates how it relates to the focus of Wallace's work (elaborated in Chapter 1) on the complexity of public service change and coping strategies, which framed the exchange and collaboration with other contributors. Cross-referencing in each chapter is intended to assist readers with making connections between the topics discussed by different contributors.

Part I focuses on theorizing what makes the process of changing public service practice complex, how people actually cope with it across public service systems

and so contribute to this complexity, and how they might do so more or less effectively. Part II focuses on the policy-making process that generates the complex and programmatic planned changes of major public service reform efforts, and the productive relationships between policy-makers and other stakeholder groups entailed in fostering implementation across service systems. Some groups are involved in service governance and, in a democracy, are entitled to a voice on the direction of public policy. Others are responsible for implementation of reforms, and government politicians therefore depend on them.

Part III looks at the complexity of public service change, starting from the opposite end: the service and administrative organizations where sense has to be made of external pressures for change and responses undertaken, where emergent changes in practice may spread to become more complex, and where changes in practice may be proactively encouraged and externally supported at the local level. Finally, a brief overview is offered, identifying messages across the contributions from Parts I to III that suggest some tentative answers to the questions posed at the beginning of this introduction.

Contributors were also invited to highlight in their chapter conclusion the wider implications of their work for policy and practice, and to suggest ideas for an agenda for further research and theory-building. Readers interested in investigating the management of change in the public services will find plenty of scope for making an original contribution, whether through doctoral or professionally conducted research. The focus of this book on the complexity of the change process, spanning political agenda setting to sense making in service organizations, opens up a substantial area of enquiry which is of considerable social scientific and practical importance.

## ACKNOWLEDGEMENTS

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# PART

# I
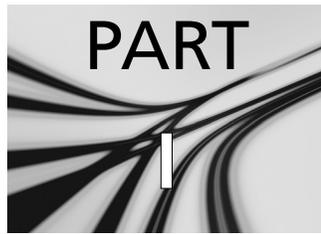
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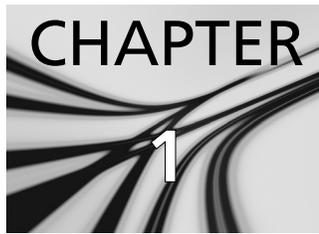
# CHAPTER 1

# COPING WITH COMPLEX AND PROGRAMMATIC PUBLIC SERVICE CHANGE

## Mike Wallace

This chapter sets the stage for other contributions to the book, foregrounding the process of changing. Mike Wallace puts forward a case for social science-informed and relatively inductive approaches to understanding and informing practice, suggesting that an emphasis on coping with the contemporary complexity of public service change is more realistic than attempting tight control over the change process and its outcomes. He argues that investigators' purpose for studying, or 'intellectual project', influences the research and theoretical questions they ask (and do not ask) about public service change, and so the range of answers they obtain. These answers inform, in turn, the sort of policy and practical implications they may identify. Wallace advocates a stronger emphasis on deepening understanding to broaden the variety of theoretical ideas and empirical findings that could valuably inform reflection on and decisions about policy and practice. Further, he advocates relatively inductive studies, which remain sensitive to the diverse contexts of public service change, to build practically oriented theory from patterns in what happens empirically. The research leading to his conception of the characteristics of complex and programmatic change with management implications was driven primarily by the intellectual project of deepening understanding.

Wallace sets out this conception and incorporates some of the ideas into a practical planning framework. It centres on the metaphor of 'orchestrating' change within and between service system administrative levels. The term captures the finding from his research that key players in diverse leadership positions can be conceived as a network. They interact, sometimes directly, but often through intermediaries, in attempting to steer the change process to realise their respective and sometimes incompatible interests. Orchestration was defined consciously to span the common conceptual divide between 'leadership' and 'management'. These terms tend to separate two dimensions of coping activity, which Wallace found empirically to be integrated. In their chapters, other contributors have both connected with and challenged these ideas.

# Why Focus on Coping with Complexity?

Change of one kind or another seems, paradoxically, to be a constant which complicates organizational life across all contemporary public services to a greater or lesser extent. There is no escape from the press of political, economic, social and technological forces that may bring reform from without and stimulate innovation from within. There is no escape from evolutionary, unplanned change affecting services from time to time, which demands a planned response. And there is no escape from coping with all this change alongside the maintenance of day-to-day service provision. To adopt the term 'coping' as the central concept for conceptualizing the management of change in the public services may seem rather downbeat. But it seems realistic and indeed mildly optimistic, given the limited capacity for managerially controlling whether to address particular changes and, if so, how to do so alongside everything else that must be coordinated to sustain normal service provision. Coping implies that problems are inevitable, and not necessarily a consequence of the wrong management strategy. Some problems will never go away because they cannot be resolved, even in principle.

One relatively inductive investigation of local improvement efforts in US urban high schools during the late 1980s proved instrumental in introducing the idea of 'problem coping' as integral to educational change. The complexity of those planned changes was perhaps moderate by today's standards, but they were still complex enough to be deeply problematic. Louis and Miles (1990: 263) emphasize the importance of 'steady orchestration and coordination', on an ongoing basis, to cope with diverse problems arising. The latter are intrinsic to their definition of coping (272):

> Problems are pervasive, but not all problems get solved equally well. Some are pushed off, others are partially dealt with, and a few get thoughtfully dealt with so that they stay solved and do not recur. This variation in solution quality depends largely, we believe, on *coping* efforts.
>
> By 'coping' we mean the pattern of behavior that appears when a problem is noticed or defined. The behavior is not necessarily deliberate, or planful, but it is addressed to – or at least stimulated by – the problem. It usually can be seen as a discernible pattern, a sort of strategy for dealing with the problem, ranging from procrastinating to exhorting to 'fixing the system'.

Thus the essence of problem coping is routinely to deploy a repertoire of strategies for dealing in different ways and levels of depth with aspects of work that are neither straightforward nor fully controllable. These strategies may range from the 'shallow', appropriate for small or transient problems (such as postponing a decision), to the 'deep', necessary to confront more serious problems (such as dealing with the withdrawal of external funding support for an improvement effort). The capacity for deep coping includes being comfortable with complexity, ambiguity and risk taking. Louis and Miles regard the day-to-day orchestration

and coordination entailed in problem coping as one of several means for keeping an improvement initiative going by getting round difficulties that crop up from time to time. Problem coping does not set the direction for an improvement initiative or get it under way. So this conception of coping is at heart reactive, even though effective strategies are held to include habitually scanning for problems. But with problem coping, it is implementation problems that drive the coping response, not coping that drives implementation.

Later in this chapter the metaphor of 'orchestration' will be brought centre-stage as the overarching change management theme for coping with complex and programmatic change. But the conception of coping through orchestration to be adopted here has a more proactive aspect. Coping is not confined to scanning and responding to problems arising with a specific planned change which, according to its instigators' values, will bring improvement. In the more turbulent context of unrelenting complex and programmatic change, coping takes on a more substantial role, both driving and driven by the change process. Coping becomes a way of managing by living with the complexity of change, rather than expecting significantly to simplify it through managerial action; of getting by through dealing with its relative unmanageability, rather than being thrown when control attempts fail; of accepting a significant degree of ambiguity as normal, rather than attempting to impose unrealistic clarity of meaning; of taking calculated risks, rather than trying to play safe when the consequences of actions cannot be wholly predicted; and of seeking to increase control at the margins while going with the flow of change, rather than endeavouring to make a one-off implementation decision and then tightly to steer its course.

A key determinant of coping with the complexity of change is the high degree of ambiguity that is inevitably generated. Ambiguity implies confusion over what new practices mean and how they might be learned, unless or until they have been put into place and have become routine. Ideas connected with ambiguity informed the conceptual linkage to be discussed later between identifying characteristics of complexity of change, and change management themes to cope with this complexity. These ideas will be explored in depth in Chapter 4, as constituents of an ironic perspective that offers an insightful way of thinking about how to cope with the limited manageability of complex and programmatic public service change.

*Foregrounding complexity so as to understand first,*
*inform practice second*

That the complexity of public service change is increasing seems scarcely in doubt. The pace and pervasiveness of change seems equally unlikely to subside in the foreseeable future. One has only to think of the 'big picture': the international drivers of change and political responses, directly or indirectly affecting political agenda setting for all public services (see Chapter 5). They include the imperative on governments, since the 1970s, to curb burgeoning public service expenditure,

threatening to outstrip the economic expansion needed to sustain it (Foster and Plowden 1996). Concerns about the variable effectiveness of public service provision and providers' protection of their self-interests have brought demands for greater accountability and tighter specification of service provision and its management. Indeed, public service management has been the target of serial political intervention whose details vary somewhat between national contexts (Pollitt and Bouckaert 2000).

The US, Canada and the UK have long been subject to the ideologically fuelled political project of 'new public management', seeking efficiency gains and quality improvements through the introduction of business practices, strong accountability mechanisms, marketization and privatization (e.g. Osborne and Gaebler 1992). The reform thrust in the UK is now shifting towards 'post-new public management' (Ferlie, Hartley and Martin 2003). This phase entails 'managed markets', devolved governance networks and partnerships (Rhodes 1997; Newman 2001), national and local target setting, performance measurement and expanded choice for service users (Office of Public Service Reform 2002). Meanwhile, in these wealthy western countries, rising public expectations about service entitlement combine with technological advances and the altruistic interests of providers to create opportunities and pressures for innovation directed towards improving the quality, sophistication and availability of services. They also generate further vote-winning pressures to expand services and improve access while restraining the vote-losing public tax burden.

Political reforms thus interact, in turn, with emergent innovations originating at different administrative levels, whether stimulated by external pressure, the planned or serendipitous spread of ideas, the exigencies of local contextual circumstances, or the professional values and commitment of service providers. (Chapter 9 refers to an example of a formally structured and resourced central government initiative to promote the dissemination of identified 'best practice'.) Unplanned changes in the wider service environment frequently add to the press for a planned response, as where the changing demographic profile of service users affects demand. The passage of time alone brings inevitable staff turnover and mutual adjustment between existing and incoming organization members. So public service managers may have to cope simultaneously with everything from substantive reforms to improve service quality and efficiency, through management reforms to enhance service providers' capacity to implement the substantive reforms, through multiple innovations and other changes emerging within their organizations or local partnership, to coordinating and sustaining the quality of ongoing practice.

Arguably, such rapid evolution in the phenomenon of public service change begs for empirically grounded and practically relevant theoretical development that addresses this new level of complexity head on. Outmoded conceptions of change applied to the public services, such as re-engineering (e.g. Davies 1997), now look increasingly simplistic. The extensive scope for planning and managerial control of processes and outcomes that they imply lacks realism, as research on re-engineering in health care demonstrates (McNulty and Ferlie 2002). New

ways of conceptualizing change are beginning to emerge, but their level of empirical grounding differs. One way forward is through in-depth exploration of what makes public service change complex to manage at the operational level, surfacing patterns in its complexity which have management implications and tracking how people actually cope with it. Pure induction is impossible, since any investigator is at least implicitly informed by preconceptions necessary for focusing any empirical enquiry. Social science offers a wealth of concepts derived from research into organizational change and policy implementation within and between organizations, which may productively frame relatively inductive research. The aim is to retain sensitivity to what research sites have to tell, inside parameters set by the initial theoretical orientation.

This approach reflects a particular 'intellectual project' (Wallace and Wray 2006) or scheme of enquiry to generate knowledge that will realize specific purposes. Five intellectual projects may be distinguished that are pursued within the field of public service management (Table 1.1). Each is driven by a different rationale

**Table 1.1**  Five intellectual projects pursued in the field of public service management

| Intellectual project | Rationale | Typical mode of working | Value stance | Typical question |
|---|---|---|---|---|
| Knowledge-for-understanding | Understand through theory and research | Social science-based basic research and theory | Disinterested towards policy and practice | What happens and why? |
| Knowledge-for-critical evaluation | Evaluate through theory and research | Social science-based basic research and theory | Critical about policy and practice | What is wrong with what happens? |
| Knowledge-for-action | Inform policy makers through research and evaluation | Applied research, evaluation and development activity | Positive towards policy and improving practice | How effective are actions to improve practice? |
| Instrumentalism | Improve practice through training and consultancy | Designing and offering training and consultancy programmes | Positive towards policy and improving practice | How may this programme improve practice? |
| Reflexive action | Improve own practice through evaluation and action | Action research, basing practice on evidence | Critical of practice, positive about improving | How effective is my practice, how may I improve it? |