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Evaluating the impact of the protected title for assistant nurses: perspectives from assistant nurses and managers

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Introduction: On July 1st, the professional title of assistant nurse became protected in Sweden. The protection of the title means that only assistant nurses with certification from the National Board of Social Welfare are permitted to use the title assistant nurses. This development has generated significant expectations within the profession, with hopes that the protected title will enhance its status and attract more individuals to this career path. Assistant nurses represent the largest occupational group in Sweden and experience the highest rate of sickness absence. Their work environment is often marked by high demands and relatively low control over their working conditions. This study aims to examine the attitudes of assistant nurses and first-line managers towards the protection of the title and whether their expectations have been met.

Method: The study is based on sixty semi-structured interviews, 30 interviews with assistant nurses, and 30 interviews with first-line managers. The data were analyzed using content analysis.

Results: The results are preliminary, more comprehensive findings will be available at the time of the conference. Preliminary results indicate that both assistant nurses and managers generally hold a positive view of the title's protection. However, the findings suggests that their expectations regarding the protected title have not been fulfilled, with many expressing that little has changed since its implementation.

Conclusion: The introduction of the protected title for assistant nurses has been met with overall positive attitudes from both assistant nurses and first-line managers. However, the reveals a significant gap between the initial expectations and the actual outcomes that follows the title protection. Despite their optimism, participants feel that the changes anticipated in terms om professional recognition and improved working conditions have not materialized. This suggests that while title protection is a step in the right direction, further effort may be required to address the underlying issues within the profession such as working conditions.

Implementing Digital Interaction Boards in Home Care: A Study of Leaders' and Quality Advisors' Actions and Inaction

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Introduction: This paper explores the implementation of digital technologies, here digital interaction boards, in community home care nursing from the perspective of first-line leaders and quality advisors. The digital board has the potential to serve as a new management system that monitors and disseminates information, such as the status of mandated patient mapping and manages workflows. By doing so, the technology aims to meet the general demands for increased efficiency and quality of care through digital transformation. We ask how the first-line leaders and quality advisors perceive and adapt to this technology. The study draws on the concept of institutional work (Lawrence, Suddabye & Leca, 2011; Kraazt, 2009).

Method: Our findings are based on in-depth interviews and focus group interviews with employees, first-line leaders, and management's advisory staff in the home nursing care service.

Results: The preliminary findings indicate that leaders and quality advisors are eager to demonstrate the achievement of patient mapping objectives, such as those related to nutrition. However, they show less awareness of how to use the information for managing the necessary patient follow-up or the staff. Although the leaders and the quality advisors obtain more information to manage services, they seem to lack insight into or interest in acting upon it. This also applies to their work on continuous quality improvement. Leaders do not take ownership of the technology and refrain from seeing it as part of their toolkit.

Conclusion: First-line leaders are more engaged in the institutional work directed towards internal matters related to personnel management, rather than outwards and upwards to those responsible for the new system's implementation.

Kraftens Hus: Filling a void in the welfare system

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Introduction: In Sweden, one in three individuals will receive a cancer diagnosis in their lifetime. Due to medical and technical advances, in the last decades survival rates have increased drastically. However, many cancer-affected face challenges in regards of – and in the intersection between – physical, psychological, social, and existential domains. These challenges often cut across organizations and sectors and therefore there is a risk that no one will take responsibility. **Method:** This paper draws upon a longitudinal action research project initiated in 2016 when the first Kraftens Hus was established in Borås. Sweden. The data in focus for this paper stems from 35

first Kraftens Hus was established in Borås, Sweden. The data in focus for this paper stems from 35 interviews and 7 focus groups conducted with cancer patients, board members and staff at the three Kraftens Hus located in Borås, Stockholm, and Gothenburg.

Results: The respondents identify that a void in the healthcare system has been created by the narrowing of the definition of "care" in Swedish healthcare over the years resulting in withdrawal of services for cancer patients. Kraftens hus has identified and filled this void – not least by facilitating collaboration between public, private, and civil society actors – and by bridging gaps in the welfare system in order to *co-create* welfare services.

A central idea of Kraftens Hus is not to add additional resources, but to innovatively combining existing societal resources (often intangible) – through a process called *resource integration* – in new ways from diverse sectors, including the public (healthcare, social security agency), private entities (local businesses), other associations (traditional patient groups), as well as cancer patients and their families.

Conclusion: The case of Kraftens hus exemplifies the transformative potential of citizen-led initiatives in the welfare system. By centering on the needs of cancer-affected citizens and orchestrating collaborations with diverse stakeholders, Kraftens hus emerges as a fore-runner, a so-called *prime mover*, in the provision of welfare services. Through resource integration and co-creation, Kraftens hus supplements traditional healthcare with emotional, social, and practical support that traditional services may lack.

Legitimacy of the welfare state -people's perception of the Norwegian Welfare state

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Introduction: This paper explores how citizens legitimize the Norwegian welfare state drawing on Suchmans (1995) framework of pragmatic, moral and cognitive legitimacy. Since the early 21st century European welfare states are under pressure due to demographic ageing, globalization and disturbances in the social order which affect the social contract between citizen and state. Norway has weathered these crisis well due in part to its sovereign wealth fund While other European welfare states has tended towards retrenchment, the Norwegian welfare state has rather been restructuring, not transferring the risk to the individual citizens (Schøyen 2016; Taylor-Gooby, Hvinden et al. 2019). Still, the future of the welfare state is changing despite broad societal support (Svallfors 2012).

Method: We applied data from a study of people's expectations to future welfare services. The material included interviews with 14 individuals' citizens, two senior experts at research centres and two politicians.

We used thematic analysis of the transcribed material (Braun & Clarke, 2006). Institutional theory regarding organisational legitimacy informed our deductive analysis. Suchman (1995) divide legitimacy into three main forms; pragmatic, moral and cognitive legitimacy nuancing the sources in how an organization gain, maintain and repair legitimacy in the context of its audiences, and as such attempt to differentiate forms of legitimacy at the individual level (Suchman, 1995). The analysis focus' on the argumentation of the informants that ascribe cognitive validity to the arguments objectified meanings (Berger and Luckman (1967).

Results: Preliminary findings

The participants expressed clear support for the government's responsibility for public services, which may indicate high degree of legitimacy to the welfare state in general.

Pragmatic legitimacy tends to focus on efficiency and a cost-benefit analysis in the informant's argumentation, indicating the welfare services value to the informant and their family, sometimes framed as narrow self-interest.

Moral legitimacy tends to place itself on a spectrum from the responsibility of the individual for their own health and wellbeing, to the responsibility of the state or society at large for the individual. However, concerns about high costs of universal arrangements as for social security and pensions and suspicion that some people are exploiting the benefits demonstrate that moral legitimacy is put on test.

Cognitive legitimacy was conveyed in terms that everyone has the same right and access to public services. It seems to be based on an understanding of the welfare system as a form of caregiver for those who cannot take care of themselves. Several informants expressed experiences that not everyone gets their rights fulfilled challenging this form of legitimacy.

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Further analysis is in progress.

Conclusion: The Norwegian welfare state is built around notions of solidarity and a sense of community among the citizens. Legitimacy is central, since the model is funded by taxes and the state's savings. Our preliminary findings show that the various forms of legitimacy are put on test. Even cognitive legitimacy as the subtlest and most powerful source of legitimacy is challenged. This may indicate that even the core values of the welfare state may be threatened, undermining the legitimacy of the welfare state.

Limited audit discretion? Analyzing the design and exercise of soft inspections for organizing welfare institutions

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Introduction: In recent decades, research on auditing has increased as a result of the need for increased knowledge and problematizing of the implementation side of politics due to, for example, New Public Management reforms and new governance. So far, however, research has mainly focused on so-called individual supervision where the focus has been on legal certainty and equal treatment for the individual, as well as on how auditing limits the discretion of the welfare professionals. Accordingly, the focus has been on how the public auditors exerts influence on the objects of supervision in different ways. What the previous research not has done to the same extent is to examine and problematize the audit relationship from the other side: how the objects of auditing affect the auditors room for action, integrity and independence. This paper explores whether the design and exercise of certain welfare auditing — so called soft inspections - can circumscribe the discretion of the audit agencies. Soft inspections differ from all other forms of auditing, in particular from regular inspections, as it lacks the auditor's rights to sanction. Therefore, the relationship between the auditor and the auditee can become more horizontal, and the auditor may be dependent on the auditee in the auditing process.

Method: This paper explores this by a comparative case study of the Swedish Social Insurance Inspectorate's (ISF) and the Swedish Unemployment Insurance Inspectorate (IAF)' state inspections. Although the IAF and ISF are auditing perhaps the two most central welfare systems in Sweden – The Swedish Social insurance system and The Swedish Unemployment System, their exercise of smooth inspections has not been explored as a case for organizing welfare institutions. The research-questions are:

- Which audit strategies in the day-to-day audit activities can be identified in IAF:s and ISF:s inspection?
- How do the audit strategies differ and what explain the differences?
- How can the audit strategies link the auditor and the auditee to each other in the form of a policy community and control for accountability?

To answer the questions an interdisciplinary approach will be used. Partly, this will be based partly on a legal analysis of the agencies legal conditions and their intentions based on the content of applicable law based on the traditional sources of law; constitutional text, preparatory work, case law, the authorities' instructions and the legal literature. Partly, the study is based on a policy analysis where the audit strategies are analyzed with the help of interviews with and documents from the auditor and the auditees.

Results: Primary results show that anticipation from the auditees is common in the review and that a form of collaboration and a more unclear division of roles in the review task itself arises between the auditor and auditee.

Conclusion: Our research raises questions how auditors and auditees are linked and interrelated, and whether the relationship can decrease possibilities to accountability since the design of the auditing may result in a policy community of the auditor and the auditee.

Making sense of digitalization – Examples from Higher Education Institutions

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Introduction: Digitalization is often seen as the solution for both increased efficiency, improved quality, more control in organizations and the market offers a huge variety of digital management systems (DMS). Implementing DMS in public sector organizations is thereby encouraged from the Swedish government as a tool to handle pressures on the welfare system, such as an aging population, difficulty to hire staff etc. As a consequence public sector organizations are now being digitalized at a rapid pace, a pace in which there might be little time (or none) for evaluating the consequences that DMS have for the organization and its members, expected as well as unexpected consequences.

Implementing new technology in organizations will have consequences for the organization, the challenge is to understand how they affect the organization and its members. Historically new technology has been known to challenge established professions and reshape the power balance between different actors in the organization, also new technology affects the process of organizing.

DMS are commonly used by administration and management as systems for collecting information, managing evaluations and administrating control over activities connected to the operating staff and their work. Since DMS are tools implemented and owned by management and administration it has been noted that there has been a power shift in the organization. The use of DMS in management and administration becomes a way to transform professional work (becoming more administrative). Also using DMS reorganizes administration, and they tend to organize in accordance with the different DMS rather than after organizational responsibilities and actions. This leads to an organization where relations between administrative staff and the professionals become pseudonymous and anonymous. The use of DMS create a wide distance between administration and professionals, but sometimes also between professionals and management.

The purpose of this paper is to use the framework of institutional logics to illustrate what organizational consequences can arise in an organization that implement DMS. The institutional logics perspective allows us to understand organizations as different groups with their own social constructions by which they translate actions and give them meaning. By using this perspective we try to illustrate how digitalization organizes and how it is translated into actions in the organizations different logics and what consequences this can have in the everyday practices of people working in the organization. The examples used are found in swedish HEIs (higher education institutions) where the prominent profession is university teachers, and where administration and management also represent obvious institutional logics.

Method: -	
Results: -	
Conclusion:	-

Managerial Stress and Ethical Decision Making: Leadership challenges in home health care organizations in India

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Introduction: Eldercare as an organized sector is still in a formative stage in India. Apart from a few corporate organizations, the eldercare sector comprises start-ups and entrepreneurial ventures that struggle to provide professional services according to the needs and demands of the stakeholders. In particular, the home healthcare sector faces many challenges due to a lack of structure, size, and standard operating procedures. The budding sector lacks standard guidelines about organizational ethics or management practices to ensure the well-being and smooth coordination of employees and managers. Due to the complex needs of the aged, and the family dynamics, managers face ethical dilemmas daily. Organizational values, stress, and organizational demands influence their decisions.

The present study aimed to understand

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- (i) Work stress in Indian eldercare managers by adapting the Gothenburg Manager Stress Inventory (GMSI) and tries to explore whether perceived stress influences organizational commitment, work engagement, and intention to leave among managers of the eldercare sector
- (ii) The impact of ethical managerial decision-making on work stress, work engagement, organizational commitment and turnover intentions
- gender affect the workplace behaviour of the managers and the work environment.

 Method: The questionnaire comprised of the organizational datasheet and sociodemographic information, an adapted version of the Gothenberg Managerial Stress Inventory (GMSI), Managerial ethics and decision-making scale, scales to assess organizational commitment, work engagement and intention to leave. The questionnaire also measured some aspects of the work environment, and provision for safety and wellbeing. The questionnaire was administered to 248 managers from diverse kinds of eldercare organizations in four states of India. Depending on the nature of the organization, managers were approached individually or through the organizations.

If the job-related variables, like work experience, a span of control, working hours, and

Results: A principal Component Analysis was done to adapt the GMSI to the existing group of eldercare managers in India. Further Analysis to address the research questions indicated that the different identified stressors significantly influence organizational commitment, work engagement, and intention to leave among the managers. Analysis to find out the relationship among ethical decision-making, managerial stress and intention to leave, indicated that when managers reported using compliance, morality and fair processes in decision-making, they experienced less stress and reported less intention to leave the organization. Significant differences were also reported between managers working more and less than eight hours regarding organizing and development of eldercare, health and safety management conditions and work environment. Significant differences in perception of stress, organizational commitment and health and safety management system were found as a result of span of control.

Conclusion: The implications of the findings have been discussed to reduce managerial stress by improving the organizational work environment which in turn will enhance work engagement, organizational commitment and reduce the attrition rate. These findings have implications for the retention of eldercare managers and workers and providing them a stress-free work environment in the emerging elder care sector across India which in turn will promote the sustainable development of the eldercare sector in India.

Managers' use of organizational resources when supporting employees with common mental disorders: A critical incident study

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Introduction: Managers' room for action when it comes to fulfilling employer responsibilities related to employees' health and safety is largely determined by organizational context and its preconditions. Common mental disorders (CMDs) are prevalent among sickness absentees, but managers find these disorders challenging to handle due to uncertainty in how to act, lack of workplace knowledge and resources, and mental health stigma. More knowledge is needed on how managers use available organizational resources when handling employees with CMDs.

Method: The aim of this study was to explore what organizational resources managers use when supporting employees with CMDs, and how they use them.

Critical Incidence Technique was used to generate and analyze data. The study was carried out among Swedish managers within the private sector. Inclusion criteria were being a manager in a private company with at least 50 employees and having experiences of supporting one or more employees with CMDs in the last two years. In total 35 managers were recruited and interviewed from white collar (n=13), blue collar (n=16), and pink collar (n=6) sectors, respectively. Results: Six groups of utilized organizational resources were identified. Organizational routines and structures could increase clarity in difficult situations and provide managers with a sense of reassurance even though they felt insecure in how to handle issues related to CMDs. However, managers needed some flexibility in guidelines and routines to meet the employee's individual needs. Frames for action in terms of economic preconditions and time in the workday were preconditions for being able to handle employees but could be inadequate. Training and education could be a way for organizations to prepare managers in how to handle employees with CMDs, as it could improve their self-confidence, knowledge, and understanding on how to support employees. However, the topic of mental health was typically not included in educational resources. Expert functions in terms of HR department and occupational health services could help managers understand employees' CMDs in the company context and provide relief that the employee was properly cared for by professionals. There were concerns, however, that the CMD knowledge provided by these resources was not enough. Safety representatives who were involved in CMD cases could be experienced as a guarantee that the managers were acting correctly in their managerial role and provide managers a sense of security, even though managers could experience them as passive, absent, or unnecessary confrontative. Social support from colleagues and management at different levels was important, as it enabled managers to have a close dialogue around the organizational frames for supporting employees. This could be hindered when the social climate at the workplace was not open around issues of mental health.

Conclusion: To our knowledge this is one of the first studies exploring managers' real-life experiences of organizational resources while supporting employees with CMDs. The findings could contribute valuable insight into how employers in the welfare sector can better facilitate for managers in their responsibility to prevent ill-health and facilitate rehabilitation among employees with CMDs.

Preschool as an Arena for... - Highlighting ideas beyond care and education

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Introduction: In Sweden, the care of children, now referred to as preschool, has always been a cornerstone of the welfare system while also serving multiple purposes. It has evolved from supporting and nurturing poor children, to providing childcare that enables women to work, and now, to offering education. But the preschool institution has never been solely focused on the children attending but has always been shaped by broader objectives. A variety of ideas, interests, and actors have influenced what preschool should be, both in and for Swedish society—such as a place for integrating foreign-born women into the labor market, a space for language training, or for parental support. At the same time, the educational aspect of preschool has strengthened, leading to a more professional hierarchy, for example the professionalization of leadership of pre-school teachers.

This contribution aims to problematize the complex governance signals that preschools must navigate and discuss the implications for preschool as welfare organizations, for its professions, and for its key participants—the children. It seeks to challenge simplified views of governance, often illustrated by straightforward metaphors, and to contribute to the literature on preschool management by offering perspectives on organizing, a complement with more practice-oriented discussions.

Method: The paper analyse and highlights expectations when pre-school becomes a place for other policy areas such as gender and integration relating to the labor market policy showing how preschool has never been solely about care and education for children.

Results: Child- care and pre-school has always been an arena aim to address broader societal goals across different policy areas. However, as preschool has become part of the educational system and a space for teaching, public debate has increasingly emphasized preschool's role in education and as a child's first step into the educational system. Meanwhile, other guiding ideas and expectations remain relevant, even if less visible in discourse.

Conclusion: We argue that the lack of studies focusing on the organizing and management in practice of preschool diminishes understanding of its complexities. A more process-focused and creative approach to studying preschool management would benefit the field.

Revisiting a trust-based model for home care services

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Introduction: The paper contributes with knowledge about home care services, trust-based management, and the phenomenon of multi-governance. General welfare principles are under stress both internationally and in Sweden, as contemporary practice is transformed into regulated system concepts based on cost-effectiveness, multi-functionality, and minimal critical specification. In Sweden, care, including home care services, is a large and important part of the work of municipalities and is often associated with high costs, staff shortages and management problems. At the same time, high standards are set for welfare goals such as individualized care, independence, integrity, participation, and self-determination. Problems with system conditions have been identified in Sweden's social services, which are often imbued with management principles inspired by New Public Management (NPM). Discrepancies between management principles and care ethics, and between public sector logic and public value, are seen by researchers as serious problems. In response, the Swedish government and parliament established a Trust Commission for the benefit of public organizations in 2017. In Sweden, different methods have been used to study trust-based management. One idea was to collect examples of good practice that could be described and analyzed by researchers.

Method: The empirical setting is the implementation of a trust-based home care service in Sundsvall and the experiences of different projects related to the implementation of a model, SM, developed in Skönsmon, a part of the municipality. The "revisiting" included a focus group interview with home care workers from Skönsmon district and with trade union representatives from several districts. We also talked to managers, journalists, union representatives and the former change agent. In addition, various types of documents were important in the revisiting process.

Results: When the model was extended to other units, resistance came not only from managers, but also from care workers, despite the fact that they were to be upgraded and placed in positions of greater power in their units. Their resistance was based on the experience that their knowledge and ways of working were not recognized. They agreed in principle with the key words of quality dimensions - time, flexibility, and continuity - but not with the meaning given to these words in the SM model as it was presented to them.

Conclusion: Building manageable organizational units is one of the key concepts in NPM. This underlines the need for a clear statement on "boundary definitions", which challenges the trust principles of holistic view, discretion, and openness. Our paper examines trust-based management in home care in relation to the concepts of resistance and recognition. The analysis and discussion are based on what can be described as recurring questions and problems in organizational practice and research on organizations and organizational change. The findings are linked to key questions on the limits of organizations, organizational resistance, and recognition, using the example of a model of

trust-based home care in a Swedish municipality. Key finding is the presence of *Non stability in practise* and *Many interpretations of Trust*, which is interpreted as an example of *multi-governed home care service*.