

HCMG 904-001: Doctoral Seminar in Organizational Behavior and Theory in Health Care
The Wharton School, University of Pennsylvania
Fall 2010

Instructor: Ingrid Nembhard, PhD, MS

Time: Wednesdays 10:15 AM-1:15 PM

Location: Colonial Penn Center (3641 Locust Walk), Chestnut Room

Course Description:

This course examines how Organization Behavior and Theory (OBT) inform health services research and practice by introducing students to OBT and their application to the health care industry. The course will examine key issues in OBT that have relevance for health care organizations and professionals, different perspectives on key issues, and how OBT currently informs health services research and practice. We will discuss “micro” theories (i.e., *social psychological* theories of organizational behavior) and “macro” theories (i.e., theories focused on the *structural and environmental* aspects of organizations). We will examine the strengths and weaknesses of various theories, how they can be used as a foundation for research on health care organizations, methods used to study them, and the implications for health policy and management. Examples of published health services research grounded in OBT will be discussed so that students become familiar with the theories-in-use and various publication outlets for health care management (HCM) research.

Intended Audience:

This course is required for students in the PhD Program in Health Care Management. Any PhD student or post-doctoral fellow with interest in research on health care organizations and professionals is also welcome to enroll.

Course Objectives:

Upon completion of this course, students should:

1. Have a solid understanding of key topics, perspectives and findings in OBT that relate to the health care sector;
2. Be able to critically assess research methods used to examine theories and concepts in the context of health care;
3. Be able to apply OBT to issues in health care;
4. Be familiar with general management and health care journals, and the HCM work they publish; and
5. Be able to lead a discussion on topics in OBT that relate to the health care sector.

****My overall goal is for you to learn and enjoy learning about OBT, and feel like you can apply OBT. To achieve the objectives, you must bring an openness for learning and push yourself to be reflective on your own and others' views.**

Prerequisites: None.

Course Outline:

Session	Date	Topic	Discussant
1.	9/1	Introduction to OBT in Health Care	Ingrid Nembhard
2.	9/8	Contingency Theory	Ingrid Nembhard
3.	9/15	Resource Dependency	Zach
4.	9/22	Institutional Theory	Harriet
5.	9/29	Population Ecology Theory	Rouchen
6.	10/6	Organizational Change	Grace
7.	10/13	Innovation and its Diffusion	Angela
8.	10/20	Leadership and Followership	Grace
9.	10/27	Decision-making and Sense-making	Harriet
10.	11/3	Organizational Culture	Ingrid unless someone needs makeup for missed class
11.	11/10	Work Teams	Zach
12.	11/17	Organization Design and Coordination	Angela
13.	12/1	Networks	Rouchen
14.	12/8	Organizational Learning	Ingrid Nembhard

Course Materials: Readings can be found on Canvas. There are typically six required readings for each session, with half focused on theory and half demonstrating the application of theory in health care. Optional readings are listed for those who want to explore a topic further. Optional readings are not in Canvas.

Course Requirements:

- Class attendance and participation – 50% of grade
 - Each student is expected to attend each class, having completed all required readings and prepared to actively engage in a constructive conversation about the readings and the topic of the day. (20% of grade)
 - Each student will lead our discussion on at least one macro topic (Weeks 2-7) and one micro topic (Weeks 8-13). Number of times as discussant will depend on class size, and each student is expected to lead the entire session (with Ingrid as support). As discussant, the student will at least:
 1. ensure that assigned readings are summarized
 2. discussion of the major strengths and weakness of each paper or idea occurs
 3. offer 3 questions sparked by the week's readings that we should discuss (30% of grade)Leading seminar in this way is intended to help prepare you for your future role as instructor. You can be creative.
- Weekly, written readings reflection (3 pages maximum) addressing the questions below, due 9:30am on Wednesday before session via Canvas Assignments page, **excluding** Sessions 1, 6 and 10 (50% of grade)
 - In these reflections, you should address the following and submit 2-3 questions you would like to discuss:
 1. What are the main point(s) of the readings? (1-2 sentences)
 2. What did you find most interesting or insightful across the readings?
 3. What critique(s) do you have? *Think:* What did you find confusing? What gap did you find in the arguments?
 4. How does a reading or theory compare to others for this week and/or past weeks? What does that provoke?
 5. What do the readings suggest should be on the research agenda or is missing from HCM research? How could this week's perspective be integrated into your research?

****During semester, keep track of your 2 favorite papers and why, we'll circle back to them in the last class.**

Weekly reflections will be scored on a 4-point scale. A score below 3 indicates that the reflection had minimal extension past the reporting the ideas in the readings. A score of 3 indicates that the reflection engaged in some meaningful way with the readings; it showed some thoughtfulness. A score of 4 indicates an excellent reflection paper, one indicates deep/serious thinking about ideas in the readings, integrates ideas across readings, offers new ideas or studies to advance the field, etc. A score of 3+ indicates above the threshold bar of 3 that I expect for all reflections.

Background Reference List (all provide summaries of organizational theories and/or topics in HCM):

- Scott, W. R. & Davis, G.F. 2006. *Organizations: Rational, Natural, and Open Systems*, Upper Saddle River, NJ: Prentice-Hall.
- Mick, S.S. & Shay, P.D. 2014. *Advances in Health Care Organization Theory*. San Francisco, CA: Wiley
- Johnson, J.A. 2009. *Health Organizations: Theory, Behavior and Development*. Boston, Jones and Bartlett Publishers.
- Burns, L.R., Bradley, E.H., and B.J. Weiner. 2019. *Shortell & Kaluzny's Health Care Management*, 8th Ed. Thomson, Delmar Cengage Learning.

For students who wish to pursue careers, and thus job market positions in Management or Operations Departments at business schools upon completion of their PhD in Health Care Management:

I recommend taking additional courses (content and methods courses) in the Management Department (see <https://mgmt.wharton.upenn.edu/programs/phd/course-descriptions/>) or Operations, Information and Decisions Department (see <https://oid.wharton.upenn.edu/programs/phd/course-descriptions/>) in order to continue your learning and meet other faculty who may serve as mentors. Through these courses, you will meet your student-peers and have more opportunity to engage in activities that will prepare you for the broad audience of economists, sociologists and psychologists that you might encounter on the Management/Business School job market and career path.

A few seminal articles covered in this course (≤ 5 at current count) are covered in other department courses. In this course, we will be applying these articles to health care so discussion will be different. You should not worry about redundancy.

Session 1: Introduction to Organizational Behavior and Theory in Health Care

Required - Background on OBT

- Perrow, C. 1973. The short and glorious history of organizational theory. *Organizational Dynamics*, 2-15.
- Argote, L. & Greve, H.R. 2007. A behavioral theory of the firm – 40 years and counting: Introduction and impact. *Organization Science*, 18(3): 337-349. ****Read p. 337-343**

Required – Why Is OBT Relevant in Health Care?

- Burns, L.R., Bradley, E.H., and B.J. Weiner. (Eds.). 2019. Chapter 1, Delivering Value: The Global Challenge in Health Care Management in *Shortell & Kaluzny's Health Care Management*, 7th Ed. Thomson, Delmar Cengage Learning, pp. 3-26. ****Read p. 3-17**, end at the end of Contingency Theory section/paragraph
- Flood, A. & Fennell, M. 1995. Through the lenses of organizational sociology: The role of organizational theory and research in conceptualizing and examining our health care system. *Journal of Health and Social Behavior*, Vol 35 (Extra Issue):154-169
- Ramanujam, R. & Rousseau, D. M. 2006. The challenges are organizational not just clinical. *Journal of Organizational Behavior*, 27: 811-827.
- Zinn, J. & Flood, A.B. 2009. Commentary: Slack resources in health care organizations-fat to be trimmed or muscle to be exercised? *Health Services Research*. 44(3):812-820.

Optional - for those who want more

- Daft, R. L. 1983. Learning the craft of organizational research. *Academy of Management Review*, 8(4): 539-546.
- Bacharach, S.B. 1989. Organizational theories: Some criteria for evaluation. *Academy of Management Review*, 14(4):496-515
- Sutton, R. I., & B. M. Staw. 1995. What theory is not. *Administrative Science Quarterly*, 40: 371-384.
- Weick, K.E., 1995. What theory is not, theorizing is. *Administrative Science Quarterly*, 40(3): 385-390.
- Sætre, A.S. & Van de Ven, A.H. 2021. Generating Theory by Abduction. *Academy of Management Review*, press.
- Walshe, K. & Rundall, T.G. 2001. Evidence-based management: From theory to practice in health care. *Milbank Quarterly*, 79(3): 429-457.
- Mayo, A. T., Myers, C. G., & Sutcliffe, K. M. 2021. Organizational science and health care. *Academy of Management Annals*, in press.
- Tsai TC, Jha AK, Gawande AA, Huckman RS, Bloom N, Sadun R. 2015. Hospital board and management practices are strongly related to hospital performance on clinical quality metrics. *Health Affairs*, 34(8):1304-11.

Session 2: Contingency Theory

Required - Theory

- Donaldson, L. *The Contingency Theory of Organizations*. Thousand Oaks, CA: Sage, 2001. (Chapters 1 and 7)
- Drazin, R., & Van de Ven, A.H. 1985. Alternative forms of fit in contingency theory. *Administrative Science Quarterly*, 30(4):514-539.
- Lawrence, P. D., & Lorsch, J. W. 1967. Differentiation and integration in complex organizations. *Administrative Science Quarterly*, 12: 1-47.

Required - Application

- Alexander, J. W., & Randolph, W. A. 1985. The fit between technology and structure as a predictor of performance in nursing subunits. *Academy of Management Journal*, 28(4): 844-859.
- ~~▪ Young, G., Beekun, R. I., & Ginn, G. O. 1992. Governing board structure, business strategy, and performance of acute care hospitals: a contingency perspective. *Health Services Research*, 27(4): 543-564.~~
- Shay, P. D., & Ozcan, Y. A. 2013. Freestanding inpatient rehabilitation facility performance following the 60 percent rule: a matter of fit. *Medical Care Research and Review*, 70(1): 46-67

Optional - for those who want more

- Zinn, J.S., Brannon, D., Mor, V., Barry, T. 2003. A structure-technology contingency analysis of caregiving in nursing facilities. *Health Care Management Review*, 28(4):293-306.
- Mark, B.A., Hughes, L.C., Belyea, M., et al. 2008. Exploring organizational context and structure as predictors of medication errors and patient falls. *Journal of Patient Safety*, 4(2): 66-77.
- Schoonhoven, C. K. 1981. Problems with contingency: Testing assumptions hidden within the language of contingency theory. *Administrative Science Quarterly*, 26: 349-377.
- Strasser, S. 1983. The effective application of contingency theory in health settings: problems and recommended solutions. *Health Care Management Review*, Winter: 15-22.

Session 3: Resource Dependence

Required – Theory **read the third one first if you want a fun introduction to the theory before seminal pieces

- Pfeffer, J., & Salancik, G.R. 2003. *The external control of organizations: A resource dependence perspective*. Stanford, CA: Stanford Business Books. Chapters 3 & 10
- Casciaro, T., & Piskorski, M, J. 2005. Power imbalance, mutual dependence, and constraint absorption: A closer look at resource dependence theory. *Administrative Science Quarterly*, 50(2): 167-199.
- Davis, G.F, and J.A. Cobb. 2010. Resource dependence theory: past and future. *Research in the Sociology of Organizations* 28: 21-42.

Required - Application

- Hsieh, H., Clement, D.G., Bazzoli, G.J. 2010. Impacts of market and organizational characteristics on hospital efficiency and uncompensated care. *Health Care Management Review*, 35(1):77-87.
- Zinn, J.S., Weimer, D.L., Spector, W., & Mukamel, D.B. 2010. Factors influencing nursing home response to quality measure publication: A resource dependence perspective. *Health Care Management Review*, 35: 256-265.
- Yeager, V. A., Zhang, Y., Diana, M. L. 2015. Analyzing determinants of hospitals' accountable care organization participation: A resource dependency theory perspective. *Medical Care Research and Review*, 72 (6): 687-706.

Optional - for those who want more

- Shin, D. Y., Weech-Maldonado, R., & Chang, J. 2020. The impact of market conditions on RN staffing in hospitals: Using resource dependence theory and information uncertainty perspective. *Risk Management and Healthcare Policy*, 13, 2103-2114.
- Yeager, V.A., Menachemi, N., et al. 2014. Using resource dependency theory to measure the environment in health care organizational studies: A systematic review of the literature. *Health Care Management Review*, 39(1): 50-65.
- Banaszak-Holl, J., Zinn, J. & Mohr, V. 1996. The impact of market and organizational characteristics on nursing facility service innovation: A resource dependency perspective. *Health Services Research*, 31(1):97-117.
- Campbell, C. I., & J. A. Alexander. 2005. Health services for women in outpatient substance abuse treatment. *Health Services Research* 2005; 40 (3): 781-810.
- Swanson Kazley, A., & Ozcan, Y.A. 2007. Organizational and environmental determinants of hospital EMR adoption: a national study. *Journal of Medical Systems* 31: 375-384.
- Similar to bullet 3 are: Zinn, JS, Weech-Maldonado, RJ, & Brannon, D. 1998. Resource dependence and institutional elements in nursing home TQM Adoption, *Health Services Research* 33(2): 261-273. and Chisholm, L., Weech-Maldonado, R., Landry, A.Y., & Epané, J.P. 2015. The presence of hospital-based palliative care programs: A resource dependence perspective. *Health Care Management Review* 40(4):356-62].

Session 4: Institutional Theory

Required - Theory

- Meyer, J., & Rowan, B. 1977. Institutionalized organizations: Formal structure as myth and ceremony. *American Journal of Sociology*, 83: 340-363.
- DiMaggio, P. J., & Powell, W. W. 1983. The iron cage revisited: Institutional isomorphism and collective rationality in organizational fields. *American Sociological Review*, 48: 147-160.
- **Skim** this one to get a sense of the range of org responses: Oliver, C. 1991. Strategic responses to institutional processes. *Academy of Management Review*. 16(1): 145-179.
- **Skim** for a sense of ongoing debates: Heugens, P., Lander, M. 2009. Structure! Agency! and other quarrels: A meta-analysis of institutional theories of organization. *Academy of Management Journal*. 52: 61-85.

Required - Application

- D'Aunno, T., Sutton, R.I., & Price, R.H. 1991. Isomorphism and external support in conflicting institutional environments: a study of drug abuse treatment units. *Academy of Management Journal*, 34(3) 636-661.
- Westphal, J.D., Gulati, R., Shortell, S.M. 1997. Customization or conformity? An institutional and network perspective on the content and consequences of TQM adoption. *Administrative Science Quarterly*, 42:366-94
- Kennedy, M. T., & Fiss, P. C. 2009. Institutionalization, framing, and diffusion: The logic of TQM adoption and implementation decisions among US hospitals. *Academy of Management Journal*, 52(5), 897-918.

Optional - for those who want more

- DiMaggio, P., & Powell, W. Introduction. In W. Powell and P. DiMaggio (eds), *The New Institutionalism in Organizational Analysis*, pp. 1-38. Chicago: Chicago University Press.
- Scott, W.R. & Backman, E.V. 1991. Institutional theory in the medical care sector. In Mick, S. (Ed.) *Innovations*

in *Health Care Delivery*, pp. 20-52.

- Zucker, L.G. 1977. The role of institutionalization in cultural persistence. *American Sociological Rev* 42:726-43.
- Donaldson, L. 1995. A critique of institutional theory. In *American anti-management theories of organization: a critique of paradigm proliferation*. Cambridge University Press, pp. 79-128.
- Goodrick, E. & Salancik, G.R. 1996. Organizational discretion in responding to institutional practices: Hospitals and Cesarean births. *Administrative Science Quarterly*, 41:1-28.
- Ruef, M., & Scott, W.R. 1998. A multidimensional model of organizational legitimacy: Hospital survival in changing institutional environments. *Administrative Science Quarterly* 43: 877-904.
- Yang, C., Fang, S., & Huang, W. 2007. Isomorphic pressures, institutional strategies, and knowledge creation in the health care sector. *Health Care Management Review*, 32(3): 263-270.

Session 5: Population Ecology

Required - Theory

- Hannan, M. & J. Freeman. 1977. The population ecology of organizations. *American Journal of Sociology* 82: 929-964.
- Hannan, M. & J. Freeman. 1984. Structural inertia and organizational change. *American Sociological Review*, 49:149-164.
- Young, R. 1988. Is population ecology a useful paradigm for the study of organization? *American Journal of Sociology* 94:1-24.

Required – Application

- Wholey, D., Christianson, J. & Sanchez, S. 1992. Organization size and failure among health maintenance organizations. *American Sociological Review*, 57: 829-842.
- Lee, S.-Y. D., & Alexander, J.A. 1999. Managing hospitals in turbulent times: Do organizational changes improve hospital survival? *Health Services Research* 34 (4): 921-944. (structural inertia theory)
- Jiang, H. J., & Begun, J. W. 2002. Dynamics of change in local physician supply: an ecological perspective. *Social Science & Medicine*, 54(10), 1525-1541.
- Vest, J. R., & Menachemi, N. 2017. A population ecology perspective on the functioning and future of health information organizations. *Health Care Management Review*, 44: 344-355. (short article)

Optional - for those who want more:

- Alexander, J, Kaluzny, A. & S Middleton, S. 1986. Organizational growth, survival and death in the US hospital industry: a population ecology perspective. *Social Science and Medicine*, 22:303-308.
- Rundall, T. G. 1987. The organization of medical practice: A population ecology perspective. *Medical Care Research and Review*, 44(2), 375-405.
- Al-Amin, M., & Housman, M. 2012. Ambulatory surgery center and general hospital competition: entry decisions and strategic choices. *Health Care Management Review*, 37(3), 223-234. (niche overlap theory)
- Al-Amin, M., Zinn, J., Rosko, M. D., & Aaronson, W. 2010. Specialty hospital market proliferation: Strategic implications for general hospitals. *Health Care Management Review*, 35(4), 294-300 (resource partitioning theory)

Session 6: Organizational Change

Required - Theory

- Van de Ven, A. H., & Poole, M. S. 1995. Explaining development and change in organizations. *Academy of Management Review*, 20(3): 510-540.
- Armenakis, A. A., & Bedeian, A. G. 1999. Organizational change: A review of theory and research in the 1990s. *Journal of Management*, 25(3):293-315.
- Stouten, J., Rousseau, D. M., & De Cremer, D. 2018. Successful organizational change: Integrating the management practice and scholarly literatures. *Academy of Management Annals*, 12(2): 752-788.

Required - Application

- Alexander, J., D'Aunno, T. & Succi, M. 1996. Determinants of profound organizational change: Choice of conversion or closure among rural hospitals. *Journal of Health and Behavior* 37(3): 238-351.
- Kellogg, K. C. 2009. Operating room: Relational spaces and microinstitutional change in surgery. *American Journal of Sociology*, 115(3): 657-711.
- Battilana, J., & Casciaro, T. 2013. Overcoming resistance to organizational change: Strong ties and affective cooptation. *Management Science*, 59(4), 819-836.

Optional - for those who want more

- Kimberly, J. & Zajac, E. 1985. Strategic adaptation in health care organizations: implications for theory and research. *Medical Care Research & Review*, 42(2): 267-302.
- Bazzoli, G.J., Dynan, L., Burns, L.R. & Yap, C., 2004. Two decades of organizational change in health care: what have we learned? *Medical Care Research and Review*, 61(3): 247-331.
- Lukas, C.V., Holmes, S.K., Cohen, A.B., Restuccia, J., Cramer, I.E., Shwartz, M. & Charns, M.P., 2007. Transformational change in health care systems: an organizational model. *Health Care Management Review*, 32(4): 309-320.
- Weiner, B.J., Amick, H. & Lee, S.Y.D., 2008. Conceptualization and measurement of organizational readiness for change: a review of the literature in health services research and other fields. *Medical Care Research and Review*, 65(4): 379-436.
- Battilana, J., & Casciaro, T. 2012. Change agents, networks, and institutions: A contingency theory of organizational change. *Academy of Management Journal*, 55(2), 381-398.
- Nigam, A., Huising, R. & Golden, B., 2016. Explaining the selection of routines for change during organizational search. *Administrative Science Quarterly*, 61(4): 551-583.
- Golden-Biddle, K. 2020. Discovery as an abductive mechanism for reorienting habits within organizational change. *Academy of Management Journal*, 63(6), 1951-1975.
- Keller, J. R., Kehoe, R. R., Bidwell, M. J., Collings, D. G., & Myer, A. 2020. In with the old? Examining when boomerang employees outperform new hires. *Academy of Management Journal*, in press.
- Kanitz, R., Huy, Q. N., Backmann, J., et al. 2021. No change is an island: how interferences between change initiatives evoke inconsistencies that undermine implementation. *Academy of Management Journal*, in press.

Session 7: Innovation and Its Diffusion

***Updated 9/1 to reflect vote for adoption/diffusion focus**

Required - Theory

- ~~Kanter, R.M. 2000. When a thousand flowers bloom: structural, collective, and social conditions for innovation in organizations. In *Research in Organizational Behavior*. Vol. 22, B. Staw & R. Sutton. (Eds). Elsevier Science.~~
- Rogers, E. M. 1995. *Diffusion of Innovations* (4th ed.). New York: The Free Press. Chapter 1.
- Naumovska, I., Gaba, V., & Greve, H. 2021. The diffusion of differences: A review and reorientation of 20 years of diffusion research. *Academy of Management Annals*, in press.

Required - Application subject to voting

- Coleman, J., Katz, E. & Menzel, H., 1957. The diffusion of an innovation among physicians. *Sociometry* 20(4): 253-270.
- ~~Teplensky, J.D., Pauly, M.V., Kimberly, J.R., Hillman, A.L. and Schwartz, J.S., 1995. Hospital adoption of medical technology: an empirical test of alternative models. *Health Services Research*, 30(3), p.437.~~
- ~~Angst, C.M., Agarwal, R., Sambamurthy, V. and Kelley, K., 2010. Social contagion and information technology diffusion: the adoption of electronic medical records in US hospitals. *Management Science*, 56(8): 1219-1241.~~
- ~~Schultz, C., Zippel-Schultz, B., & Salomo, S. 2012. Hospital innovation portfolios: Key determinants of size and innovativeness. *Health Care Management Review*, 37(2), 132-143.~~
- Kellogg, K.C., Gainer, L.A., et al. 2017. An intraorganizational model for developing and spreading quality improvement innovations. *Health Care Management Review*, 42(4), 292.
- Compagni, A., Mele, V. & Ravasi, D., 2015. How early implementations influence later adoptions of innovation: Social positioning and skill reproduction in the diffusion of robotic surgery. *Academy of Management Journal*, 58(1): 242-278.
- Greenwood, B. N., Agarwal, R., Agarwal, R., & Gopal, A. 2019. The role of individual and organizational expertise in the adoption of new practices. *Organization Science*, 30(1), 191-213.

Optional - for those who want more

- Kimberly, J.R. & Evanisko, M.J., 1981. Organizational innovation: The influence of individual, organizational, and contextual factors on hospital adoption of technological and administrative innovations. *Academy of Management Journal*, 24(4): 689-713.
- Fitzgerald, L., E. Ferlie, et al. 2002. Interlocking interactions, the diffusion of innovations in health care. *Human Relations*, 55 (12): 1429-1449.

- Nembhard, I.M., Alexander J.A., Hoff T.J. & Ramanujam R. 2009. Why does the quality of health care continue to lag? Insights from management research. *Academy of Management Perspectives* 23(1): 24-42.
- Nembhard, I.M., Morrow, C.T. and Bradley, E.H., 2015. Implementing role-changing versus time-changing innovations in health care: differences in helpfulness of staff improvement teams, management, and network for learning. *Medical Care Research and Review*, 72(6): 707-735.

Session 8: Leadership and Followership

Required - Theory

- Yukl, G. 1989. Managerial leadership: A review of theory and research. *Journal of Management* 15(2):251-289.
- Behrendt, P., Matz, S., & Göritz, A. S. 2017. An integrative model of leadership behavior. *The Leadership Quarterly*, 28(1): 229-244.
- Katz-Navon, T., Kark, R. & Delegach, M. 2020. Trapped in the middle: Challenging the linear approach to the relationship between leadership and safety. *Academy of Management Discoveries*, 6(1), 81-106.
- Oreg, S. & Berson, Y. 2019. Leaders' impact on organizational change: bridging theoretical and methodological chasms. *Academy of Management Annals*, 13(1): 272-307.
- Kelley, R.E. 1988. In praise of followers. *Harvard Business Review*, 66(6):142-148. (short piece)

Required - Application

- Klein, K. J., Ziegert J.C., Knight, A. & Xiao Y. 2006. Dynamic delegation: Shared, hierarchical, and deindividualized leadership in extreme action teams. *Administrative Science Quarterly*, 51:590-621.
- Nembhard, I. M., & Edmondson, A. C. 2006. Making it safe: The effects of leader inclusiveness and professional status on psychological safety and improvement efforts in health care teams. *Journal of Organizational Behavior*, 27(7), 941-966.

Optional - for those who want more

- Barnard, C. 1968. *The Functions of the Executive*. Cambridge, MA: Harvard University Press. Chapters XV - The Executive Functions.
- Yukl, G., 2012. Effective leadership behavior: What we know and what questions need more attention. *The Academy of Management Perspectives*, 26(4): 66-85.
- Carnabuci, G. 2018. Emergent leadership structures in informal groups: a dynamic, cognitively informed network model. *Organization Science*.
- Junker, N.M. and van Dick, R., 2014. Implicit theories in organizational settings: A systematic review and research agenda of implicit leadership and followership theories. *The Leadership Quarterly*, 25(6): 1154-1173.
- Uhl-Bien, M., Riggio, R.E., Lowe, K.B. and Carsten, M.K., 2014. Followership theory: A review and research agenda. *The Leadership Quarterly*, 25(1): 83-104.
- D'Innocenzo, L., Luciano, M.M., Mathieu, J.E., Maynard, M.T. and Chen, G., 2016. Empowered to perform: A multilevel investigation of the influence of empowerment on performance in hospital units. *Academy of Management Journal*, 59(4): 1290-1307.
- McNeese-Smith, D. K. 1999. The relationship between managerial motivation, leadership, nurse outcomes and patient satisfaction. *Journal of Organizational Behavior* 20, 243-259.
- Carton, A. M., Murphy, C., & Clark, J. R. 2014. A (blurry) vision of the future: How leader rhetoric about ultimate goals influences performance. *Academy of Management Journal*, 57(6), 1544–1570.
- Guerrero, E. G., Frimpong, J., Kong, Y., Fenwick, K., & Aarons, G. A. 2020. Advancing theory on the multilevel role of leadership in the implementation of evidence-based health care practices. *Health care management review*, 45(2), 151.
- Succi, M. J., Lee, S.-Y. D. & Alexander, J. A. 1998. Trust between managers and physicians in community hospitals: The effects of power over hospital decisions. *Journal of Healthcare Management* 43 (5): 397-415.
- Gilmartin, M. J., & D'Aunno, T. A. 2007. Leadership research in health care: A review and roadmap. In *The Academy of Management Annals*. (Eds. J. P. Walsh & A. P. Brief): Psychology Press, Taylor & Francis Group, Lawrence Erlbaum Associates, Routledge.
- Battilana, J., Gilmartin, M., Sengul, M., Pache, A. C., & Alexander, J. A. (2010). Leadership competencies for implementing planned organizational change. *The leadership quarterly*, 21(3), 422-438.
- Lazear, E. 2012. Leadership: A personnel economics approach. *Labour Economics* 19(1): 92-101.

Session 9: Decision-making and Sense-making in Organizations

Required – Theory

- Cohen, M. D., J. G. March, et al. 1972. A garbage can model of organizational choice. *Administrative Science Quarterly*, 17(1):1-25.
- Kahneman, D., & Tversky, A. 1979. Prospect theory: An analysis of decision under risk. *Econometrica*, 47(2):263-291.
- Weick, K.E. 1993. The collapse of sensemaking in organizations: The Mann Gulch disaster. *Administrative Science Quarterly*, 38(4):628-652.

Required - Application

- Yaniv G. 2000. Withholding information from cancer patients as a physician's decision under risk. *Medical Decision Making*. 20(2):216-27.
- Staats, B.R., KC, D.S. and Gino, F., 2018. Maintaining beliefs in the face of negative news: The moderating role of experience. *Management Science*. 64(2): 804-824
- Kc, D. S. 2020. Heuristic thinking in patient care. *Management Science*, 66(6), 2545-2563.

Optional - for those who want more

- Bazerman, M. H. 1986. *Judgment in Managerial Decision Making*. New York: John Wiley & Sons.
- Kahneman, D. 2011. *Thinking, fast and slow*. New York, Farrar Straus & Giroux.
- Burgess, D.J. 2010. Are providers more likely to contribute to healthcare disparities under high levels of cognitive load? How features of the healthcare setting may lead to biases in medical decision making. *Medical Decision Making*. 30(2):246-57.
- Kc, D. S., Staats, B. R., Kouchaki, M., & Gino, F. (2020). Task selection and workload: A focus on completing easy tasks hurts performance. *Management Science*, 66(10), 4397-4416.
- Dooley, R. S., & Fryxell, G. E. 1999. Attaining decision quality and commitment from dissent: The moderating effects of loyalty and competence in strategic decision-making teams. *Academy of Management Journal*, 42(4), 389-402.
- Jordan, M.E., Lanham, H.J., Crabtree, B.F., et al. 2009. The role of conversation in health care interventions: enabling sensemaking and learning. *Implementation Science*, 4(1): 15.
- Thomas, J.B., Clark, S.M. & Gioia, D.A. 1993. Strategic sensemaking and organizational performance: Linkages among scanning, interpretation, action, and outcomes. *Academy of Management Journal*, 36(2): 239-270.
- Nordin, A.M.M., Andersson Gäre, B. & Andersson, A.C., 2018. Sensemaking and cognitive shifts—learning from dissemination of a National Quality Register in health care and elderly care. *Leadership in Health Services*, 31(4), pp.371-383. **Read first 7 pages, 371-377 up to Discussion**

Session 10: Organizational Culture and Climate

Required - Theory

- Schein, E. H. 1990. Organizational culture. *American Psychologist*, 45(2), 109-119
- Denison, D. R. 1996. What is the difference between organizational culture and organizational climate? A native's point of view on a decade of paradigm wars. *Academy of Management Review*, 21(3):619-654.
- Schneider, B., Ehrhart, M. G., & Macey, W. H. 2013. Organizational climate and culture. *Annual Review of Psychology*, 64, 361-388.

Required - Application

- Zazzali J.L, Alexander J.A, Shortell S.M, Burns L.R. 2007. Organizational culture and physician satisfaction with dimensions of group practice. *Health Services Research* 42(3 Pt 1): 1150–1176.
- Scotti, D.J., Driscoll, A.E., Harmon, J. & Behson, S.J., 2007. Links among high-performance work environment, service quality, and customer satisfaction: an extension to the healthcare sector. *Journal of Healthcare Management*, 52(2).
- Singer S.J, et al. 2009. Relationship of safety climate and safety performance in hospitals. *Health Services Research* 44(2, Part 1): 399-421.
- Zohar D., Livne Y., Tenne-Gazit O., Admi H, Donchin Y. 2007. Healthcare climate: a framework for measuring and improving patient safety. *Critical Care Medicine* 35(5):1312-7.

Optional - for those who want more

- Kuenzi, M. & Schminke, M., 2009. Assembling fragments into a lens: A review, critique, and proposed

- research agenda for the organizational work climate literature. *Journal of Management*, 35(3): 634-717.
- Zammuto, R. F., & Krakower, J. Y. 1991. Quantitative and qualitative studies of organizational culture. In W. *Research in Organizational Change and Development*: 83-114. Greenwich, CT: JAI Press Inc.
- Nembhard, I.M., Singer, S.J., Shortell, S.M., Rittenhouse, D. & Casalino, L.P., 2012. The cultural complexity of medical groups. *Health Care Management Review*, 37(3): 200-213.
- Naveh E., Katz-Navon T. & Stern Z. 2005. Treatment errors in healthcare: a safety climate approach. *Management Science* 51(6): 948-960.
- Singer, S. J., & Vogus, T. J. 2013. Safety climate research: taking stock and looking forward. *BMJ Quality & Safety*, 22(1), 1-4.

Session 11: Work Teams

Required - Theory

- Hackman, J. R. 1987. The design of work teams. In J. W. Lorsch (Ed.), *Handbook of Organizational Behavior*. Englewood Cliffs, NJ: Prentice-Hall. (pp. 315-342)
- Mathieu, J. E., Gallagher, P. T., Domingo, M. A. et al. 2019. Embracing complexity: Reviewing the past decade of team effectiveness research. *Annual Review of Organizational Psychology and Organizational Behavior*, 6, 17-46.

Required - Application

- Lemieux-Charles, L. & McGuire, W. L. 2006. What do we know about health care team effectiveness? A review of the literature. *Medical Care Research and Review* 63(3): 263-300.
- Vashdi, D. R., Bamberger, P. A. & Erez, M. 2013. Can surgical teams ever learn? The role of coordination, complexity, and transitivity in action team learning. *Academy of Management Journal*, 56(4), 945-971.
- Valentine, M. A., & Edmondson, A. C. 2014. Team scaffolds: how mesolevel structures enable role-based coordination in temporary groups. *Organization Science* 26(2): 405-422
- Song, H., Ryan, M., et al, 2017. Team dynamics, clinical work satisfaction, and patient care coordination between primary care providers: A mixed methods study. *Health Care Management Review*, 42(1): 28-41.

Optional - for those who want more

- Grumbach, K. & Bodenheimer, T. 2004. Can health care teams improve primary care practice? *JAMA*, 291(10), 1246-1251.
- Lichtenstein, R., J. A. Alexander, et al. 2004. Status Differences in Cross-Functional Teams: Effects on Individual Member Participation, Job Satisfaction, and Intent to Quit. *Journal of Health and Social Behavior* 45(3): 322-335.
- Meterko, M. M., Mohr, D., & Young, GJ. 2004. Teamwork culture and patient satisfaction in hospitals. *Medical Care* 42(5), 492-498.
- Kolbe M, Grote G, Waller MJ, Wacker J, Grande B, Burtscher MJ, Spahn DR. 2014. Monitoring and talking to the room: autochthonous coordination patterns in team interaction and performance. *J Appl Psychol*. 99(6):1254-67.
- Rodriguez, H.P., Chen, X., Martinez, A.E. & Friedberg, M.W., 2016. Availability of primary care team members can improve teamwork and readiness for change. *Health Care Management Review*, 41(4): 286-295.
- Bresman, H., 2010. External learning activities and team performance: A multimethod field study. *Organization Science*, 21(1): 81-96.
- Mathieu, J., Maynard, M.T., Rapp, T. and Gilson, L., 2008. Team effectiveness 1997-2007: A review of recent advancements and a glimpse into the future. *Journal of Management*, 34(3): 410-476.
- Schmutz JB, Meier LL, Manser T. 2019. How effective is teamwork really? The relationship between teamwork and performance in healthcare teams: a systematic review and meta-analysis. *BMJ Open*, ;9(9):e028280.

Session 12: Organizational Design and Coordination

Required - Theory

- Galbraith, J.R., 1974. Organization design: An information processing view. *Interfaces*, 4(3): 28-36.
- Charns, M.P. & Young G. 2020. Organization design and coordination (Chapter 3, pp. 57-81) in *Shortell and Kaluzny's Health Care Management: Organizational Theory and Behavior*, 7th Ed. Thomson, Delmar Cengage.

Required - Application

- Argote, L. 1982. Input uncertainty and organizational coordination in hospital emergency units. *Administrative Science Quarterly* 1982; 27: 420-434.
- Gittell, J. H. 2002. Coordinating mechanisms in care provider groups: Relational coordination as a mediator and input uncertainty as a moderator of performance effects. *Management Science*, 48(11), pp.1408-1426.

- Read abstract of: Gittel, J. H., K. M. Fairfield, et al. 2000. Impact of relational coordination on quality of care, postoperative pain and functioning, and length of stay. *Medical Care* 38: 807-819.
- Pollack CE, Weissman GE, Lemke KW, Hussey PS, et al. 2013. Patient sharing among physicians and costs of care: a network analytic approach to care coordination using claims data. *J Gen Intern Med.* 28(3):459-65.
- Lee, J.M. & Kapoor, R., 2017. Complementarities and coordination: implications for governance mode and performance of multiproduct firms. *Organization Science*, 28(5): 931-946.
- Beane, M., & Orlikowski, W. J. 2015. What difference does a robot make? The material enactment of distributed coordination. *Organization Science*, 26(6), 1553–1573.

Optional - for those who want more

- Thompson, J.D., 1967. *Organizations in action: Social science bases of administrative theory*. Transaction Publishers.
- Madsen, P., Desai, V., Roberts, K., & Wong, D. 2006. Mitigating hazards through continuing design: The birth and evolution of a pediatric intensive care unit. *Organization Science*, 17(2): 239-248.
- Charns, MP, G. Young, J. Daley, S. Khuri, W. Henderson. 2000. Coordination and patient care outcomes. In Kimberly, JR and E Miniville (eds) *The Quality Imperative*. London: Imperial College Press.
- Bolland, J. M., & Wilson, J.V. 1994. Three faces of coordination: A model of interorganizational relations in community-based health and human services. *Health Services Research* 29(3): 341-366.
- Van Houdt S, Heyrman J, Vanhaecht K, Sermeus W, De Lepeleire J. An in-depth analysis of theoretical frameworks for the study of care coordination. *Int Journal of Integrated Care*. 2013 Jun 27;13:e024.

Session 13: Networks

Required - Theory

- Podolny, J. M. & Page K. L. Network forms of organization. *Annual Review of Sociology* 1998; 24: 57-76.
- Kilduff, M., Brass, D. 2010. Organizational social network research: Core ideas and key debates. *Academy of Management Annals*, 4: 317-357.
- Borgatti, S., Halgin, D. 2011. On network theory. *Organization Science*, 22: 1168-1181.

Required - Application

- Provan, K. G., & H. B. Milward. 1995. A preliminary theory of interorganizational network effectiveness: A comparative study of four community mental health systems. *Administrative Science Quarterly* 40: 1-33.
- Powell, W., Koput, K. & Smith-Doerr, L. 1996. Interorganizational collaboration and the locus of innovation: Networks of learning in biotechnology. *Administrative Science Quarterly*, 41:116-145.
- Tasselli, S. 2014. Social networks of professionals in health care organizations: a review. *Medical Care Research and Review*, 71(6), 619-660.
- ~~Meltzer, D., Chung, J., Khalili, P., Marlow, E., Arora, V., Schumock, G., & Burt, R. 2010. Exploring the use of social network methods in designing healthcare quality improvement teams. *Social Science & Medicine*, 71(6), 1119-1130.~~

Optional - for those who want more

- Nohria, N. 1992. Is a network perspective a useful way of studying organizations? In N Nohria & RG Eccles (eds.) *Networks and Organizations: Structure, Form, and Action*. Boston: Harvard Business School Press, pp. 3-21.
- Burt, R. 2004. Structural holes and good ideas. *American Journal of Sociology* 110: 349-399.
- Burkhardt, M. E., & Brass, D. J. 1990. Changing patterns or patterns of change: The effects of a change in technology on social network structure and power. *Administrative Science Quarterly* 35: 104-127.
- Hansen, Morten T. 1999. The search-transfer problem: The role of weak ties in sharing knowledge across organization subunits. *Administrative Science Quarterly* 44(1): 82-111.
- Landon BE, Keating NL, Barnett ML, Onnela JP, Paul S, O'Malley AJ, Keegan T, Christakis NA. 2012. Variation in patient-sharing networks of physicians across the United States. *JAMA*. 308(3):265-73.
- Bazzoli, G. J., Chan, B., Shortell, S.M. & T. D'Aunno. 2000. The financial performance of hospitals belonging to health networks and systems. *Inquiry* 37 (3): 234-252.
- Wells, R., Lee, S.-Y. D. & Alexander, J.A. 2001. Institutionalized ties and corporate social capital: The case of hospital mergers and closures. *Research in the Sociology of Organizations* 18: 59-82.
- Shortell, S.M. & Rundall, T. G. 2003. Physician-Organization Relationships: Social Networks and Strategic Intent (Chapter 6, 141-174). In *Advances in Health Care Organization Theory*: University of Chicago Press, Chicago, IL.

Session 14: Organizational Learning

Required - Theory

- Levitt, B., & March, J.G. 1988. Organizational learning. *Annual Review of Sociology*, 14:319-340.
- Argote, L. and Miron-Spektor, E., 2011. Organizational learning: From experience to knowledge. *Organization science*, 22(5), pp.1123-1137.

Required - Application

- Pisano, G.P., Bohmer, R.M. J. & Edmondson A.C. 2001. Organizational differences in rates of learning: Evidence from the adoption of minimally invasive cardiac surgery. *Management Science* 47(6):752-68.
- Nemhard, I. M., & Tucker, A. L. 2011. Deliberate learning to improve performance in dynamic service settings: Evidence from hospital intensive care units. *Organization Science*, 22(4), 907-922.
- Desai, V. 2015. Learning through the distribution of failures within an organization: Evidence from heart bypass surgery performance. *Academy of Management Journal*, 58(4), 1032-1050.
- Tucker, A.L. & Edmondson, A.C. 2003. Why hospitals don't learn from failure: Organizational and psychological dynamics that inhibit system change. *California Management Review*, 45(2):55-72.

Optional - for those who want more

- March, J.G. 1991. Exploration and exploitation in organizational learning. *Organization Science*, 2(1):71-87.
- Crossan, M. M., Lane, H. W., & White, R. E. 1999. An organizational learning framework: From intuition to institution. *Academy of Management Review*, 24: 522-537.
- Reagans, R., Argote, L., & Brooks, D. 2005. Individual experience and experience working together: Predicting learning rates from knowing who knows what and knowing how to work together. *Management Science*, 51(6), 869-881.
- Chuang, Y-T., Ginsburg, L. & Berta, W.B. 2007. Learning from preventable adverse events in health care organizations: Development of a multilevel model of learning and propositions. *Health Care Management Review*, 32(4):330-340.
- Katz-Navon, T., Naveh, E., & Stern, Z. 2009. Active learning: When is more better? The case of resident physicians' medical errors. *Journal of Applied Psychology*, 94(5), 1200.
- KC, D. S., & Staats, B. R. 2012. Accumulating a portfolio of experience: The effect of focal and related experience on surgeon performance. *Manufacturing & Service Operations Management*, 14(4), 618-633.
- KC, D., Staats, B. R., & Gino, F. 2013. Learning from my success and from others' failure: Evidence from minimally invasive cardiac surgery. *Management Science*, 59(11), 2435-2449.
- Clark, J. R., Kuppawamy, V., & Staats, B. R. 2018. Goal relatedness and learning: evidence from hospitals. *Organization Science*, 29(1), 100-117.
- Myers, C. G. 2018. Coactive vicarious learning: Towards a relational theory of vicarious learning in organizations. *Academy of Management Review*, 43(4), 610-634.
- Desai, V. M. (2020). Can busy organizations learn to get better? Distinguishing between the competing effects of constrained capacity on the organizational learning process. *Organization Science*, 31(1), 67-84.

Articles on Methods used in Organizational Research beyond Econometrics and SEM

Spector, P.E. (2020). Mastering the Use of Control Variables: the Hierarchical Iterative Control (HIC) Approach. *Journal of Business and Psychology*. Retrieved from <https://link.springer.com/article/10.1007/s10869-020-09709-0>

Cheung, G.W., Cooper-Thomas, H.D., Lau, R.S., Wang, L.C. (2021). Testing Moderation in Business and Psychological Studies with Latent Moderated Structural Equations. *Journal of Business and Psychology*. Retrieved from <https://link.springer.com/article/10.1007/s10869-020-09717-0>

Spector, P.E. (2019). Do Not Cross Me: Optimizing the Use of Cross-Sectional Designs. *Journal of Business and Psychology*. Retrieved from <https://link.springer.com/article/10.1007/s10869-018-09613-8>

Lehmann-Willenbrock, N., Allen, J.A. (2017). Modeling Temporal Interaction Dynamics in Organizational Settings. *Journal of Business and Psychology*. Retrieved from <https://link.springer.com/content/pdf/10.1007%2Fs10869-017-9506-9.pdf>

Murphy, K.R., Aguinis, H. (2017). HARKing: How Badly Can Cherry-Picking and Question Trolling Produce Bias in Published Results? *Journal of Business and Psychology*. Retrieved from <http://hermanaguinis.com/JBPharking.pdf>

Topics We Don't Have Time to Cover but May Be of Interest

The Design of Work and Work Routines

Theory

- Hackman, J.R. and Oldham, G.R., 1976. Motivation through the design of work: Test of a theory. *Organizational behavior and human performance*, 16(2): 250-279.
- Parker, S.K., Van den Broeck, A. and Holman, D., 2017. Work design influences: A synthesis of multilevel factors that affect the design of jobs. *Academy of Management Annals*, 11(1), pp.267-308.
- Feldman, M. S., & Pentland, B.T. 2003. Reconceptualizing organizational routines as a source of flexibility and change. *Administrative Science Quarterly* 48(1): 94–118.

Application

- LeBaron, C., Christianson, M.K., Garrett, L. & Ilan, R., 2016. Coordinating flexible performance during everyday work: An ethnomethodological study of handoff routines. *Organization Science*, 27(3), pp.514-534.
- Dai, H., Milkman, K.L., et al. 2015. The impact of time at work and time off from work on rule compliance: The case of hand hygiene in health care. *Journal of Applied Psychology* 100(3), 846-862.
- Huckman, R.S. & Pisano, G.P., 2006. The firm specificity of individual performance: Evidence from cardiac surgery. *Management Science*, 52(4): 473-488.

Identification – Social, Organizational and Professional

Theory

- Ashforth, B.E., & Mael, F. 1989. Social identity theory and the organization. *Academy of Management Review* 14(1): 20-39.
- Tajfel, H. & Turner, J.C. 1986. The social identity theory of intergroup behavior. In S. Worchell & W.G. Austin (Eds.), *Psychology of intergroup relations*: 7-24. Chicago: Nelson-Hall
- Brown, R. 2000. Social identity theory: Past achievements, current problems, and future challenges. *European Journal of Social Psychology* 30(6): 745-778.
- He, H. and Brown, A.D., 2013. Organizational identity and organizational identification: A review of the literature and suggestions for future research. *Group & Organization Management*, 38(1): 3-35.

Application

- Dukerich, J. M., Golden, B. R., & Shortell, S. M. 2002. Beauty is in the eye of the beholder: The impact of organizational identification, identity, and image on the cooperative behaviors of physicians. *Administrative Science Quarterly*, 47, 507-533.
- Pratt, M. G., et al. 2006. Constructing professional identity: The role of work and identity learning cycles in the customization of identity among medical residents. *Academy of Management Journal* 49(2): 235-262.

Performance Evaluation: Using Quality as a Goal

Theory and Reviews

- March, J.G. & Sutton, R.I. 1997. Organizational performance as a dependent variable. *Organization Science* 8 (6): 698-706
- Campbell, S. M., M.O. Roland, & S.A. Buetow. 2000. Defining quality of care. *Social Science and Medicine* 51:1611-1625.
- Kaplan HC, Brady PW, et al. 2010. The influence of context on quality improvement success in health care: a systematic review of the literature. *Milbank Quarterly*, 88(4): 500–559.
- Hearld, L. et al. 2008. How do hospital organizational structure and processes affect quality of care?: a critical review of research methods. *Medical Care Research and Review*, 65(3): 259-299.

Application

- Chou, A. F., Yano, E. M., McCoy, K.D., Willis, D.R., Doebbeling, B.N. 2008. Structural and process factors affecting the implementation of antimicrobial resistance prevention and control strategies in U.S. hospitals. *Health Care Management Review*, 33(4): 308-322.
- Grant, A.M. and Hofmann, D.A. 2011. It's not all about me: Motivating hospital hand hygiene by focusing on patients. *Psychological Science* 22(12):1494-1499.
- Rodriguez HP, von Glahn T, Rogers WH, Safran DG. 2009. Organizational and market influences on physician performance on patient experience measures. *Health Services Research*. 44(3): 880–901.
- Bartunek, J.M. 2011. Intergroup relationships and quality improvement in healthcare. *BMJ Quality & Safety* 20(Suppl 1): i62-i66.