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Research and Results

Transformation to self-managing teams: lessons learned

A look at current trends and data

Maarten Renkema, Tanya Bondarouk and Anna Bos-Nehles

The Dutch healthcare sector has witnessed a recent shift towards self-managing teams (SMTs), wherein many organizations are undergoing a transition from a top-down hierarchical organization to a bottom-up team-based organization. We have known challenges and benefits of team work for decades: in the 1960s, Emery and Trist began their work on this subject (Emery and Trist, 1965). In 1993, Caudron (1993) warned that “the decision to implement self-directed teams should not be taken lightly. The process requires an enormous amount of organization and planning”.

Currently, we are witnessing the next wave of SMTs. Let us not dispute the most appropriate terms, whether these are “self-directed”, “empowered”, “autonomous”, “regulating” or “self-managing” teams. The classifying characteristics survived through the years: the group has a whole task, and each member is equipped with certain skills required to accomplish these tasks; the group has autonomy for decision-making and performance management. Then, why do we talk about SMTs and their conceptualization again? We suggest two answers here. First, there is enough empirical evidence suggesting that SMTs are often accompanied by more flexibility,

better use of employees' creative capacities (Wageman, 1997), increased quality of work life and decreased employee absenteeism and turnover (Moorhead *et al.*, 1998), eventually resulting in increased job satisfaction and increased organizational commitment (Cohen and Ledford Jr, 1994, Corderly *et al.*, 1991). It means that working with SMTs offers a variety of positive outcomes. Therefore, the second reason for our increased interest is that organizations, leadership and technologies (work processes) were not yet ready to establish SMTs, and often played a terminating factor for the implementation of SMTs. Hence, SMTs require a new way of organizing, structuring and leadership in organisations. With rapid technological developments, as well as globalisation and digitization, and active involvement of customers and clients in the business value proposition, we observe that the “forgotten” SMTs are returning to the business agenda.

Challenges of the transition towards SMTs

One of the major challenges currently in the SMT routines is to transfer organisations from a traditional functional hierarchical structure towards a self-managing one. The Dutch healthcare sector became the

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centre of international best practices because of the developments at *Buurtzorg*, a neighbourhood nursing organisation. Jos de Blok founded *Buurtzorg* in 2006, resulting in a revolution in home care and neighbourhood nursing in The Netherlands: nurses work in teams of 10 to 12, serving around 50 patients in a small, well-defined neighbourhood. The team is in charge of all the tasks, which in other organisations are fragmented across different departments. The success of *Buurtzorg* is overwhelming: within seven years it has grown from 10 to 7,000 nurses with an outstanding quality of care. *Buurtzorg* is currently one of the largest providers of neighbourhood nursing in The Netherlands.

However, a noteworthy uniqueness of *Buurtzorg* is that it was founded as a self-managing organization. It did not go through an organizational change, re-structuring and transformation. But what to do if an existing organization wants to make a step towards SMTs? SMTs are not a new phenomenon and there is an accumulating amount of research trying to understand the success factors and its effects. However, a holistic approach is often missing. We do not quite understand how to organize and support SMTs within the entire organization.

Lessons learned from Dutch healthcare organizations

In this paper, we share our observations based on an in-depth study within one of the Dutch home and residential care organisations. We provide guidelines for those managers who decide to take upon the challenge and transfer their organization towards SMTs. The decision to move to SMTs means that the whole organization will undergo a shift in responsibilities. Not only work floor professionals adopt a new role, but a major shift in responsibilities is expected from managers,

professionals and support departments. Not only do teams execute their professional tasks, they also have to organize their own work and make decisions about their work environment. An important question is: How to facilitate this transformation process? and How can managers and HR professionals best support these teams as well as their role?

The healthcare organization that we followed during the implementation of SMTs is *Livio*, a Dutch healthcare organizations that employs around 2500 employees. At first, *Livio* experimented with SMTs in their neighbourhood nursing teams, which was later rolled out throughout the entire organization in congruence with a strategic change and redefinition of core values. *Livio* expressed belief in participation and self-responsibility at all organizational levels and therefore aimed to provide both clients and employees with as much freedom of choice as possible. "We are there when needed" was the new motto, which was translated to changes to client care and healthcare teams. To do so, teams were made responsible for the whole care process and were coached by external team leaders. Usually these leaders were former managers of these teams. HR advisers were supposed to directly help teams instead of team leaders, and teams became responsible for decisions and implementation of HR practices such as recruitment and providing feedback.

Based on our observations of the transformation to SMTs within *Livio* and more than 55 interviews with (HR) managers, coaches and SMT members, we were able to draw some critical recommendations considering the journey towards the implementation of SMTs, which we want to share in this article. We provide twelve recommendations for four different stakeholder groups that can facilitate the organizational change process when introducing SMTs:

Organization – some lessons to consider before the transition to SMTs

Responsibilities where they belong as low in the hierarchy as possible

As an organization, it is important to take courage and delegate responsibilities for their own performance to teams, while ensuring not to pinpoint any individual in the team as being more responsible than others. Show trust; the professional can and will decide best what works for the client and for the team. Be as clear as possible about your expectations: What is expected of healthcare professionals and leaders in their new roles?

Authorize responsibilities

Adapt systems and rules before starting the transition. Authorize responsibilities; without authorization and formal decisions, teams cannot function effectively and secure good performance.

Dredging information flow

Support teams and leaders during the transition by communicating clearly. To perform well, teams need on-time, reliable, error-free information. For organizations, it is the key to avoid managing *teams*, but, instead, focus on managing information and dashboards to support the teams. Do not overload teams with too much information; be transparent but selective in publishing information on a dashboard. Useful and easy-to-use communication channels should be established, piloted, improved and implemented.

Design performance outcomes but leave teams with operational freedom → enjoy diversity

Teams need indicators to show their performance, which function as boundary conditions. Keep track of the problems by identifying teams

that perform outside the boundary conditions. Provide teams with enough space; do not make the performance indicators too rigid, but prevent serious incidents. Most importantly, use an outcome-based assessment. This implies that it is up to the team how they work, as long as their performance stays within the critical boundary conditions – such as quality of healthcare and long-term budgets.

Not every team accelerates at the same rate

Allow differences to arise between teams. All teams need to become self-managing, but some teams need more time to adapt than others. Especially teams with existing problems might need more time to adjust and get used to more responsibilities. And these teams can learn from front-runners, who in turn should be encouraged to share their knowledge. Helping other teams should be seen as productive hours.

Technology enabled

Strengthen the transition to SMTs with enabling technologies, such as self-scheduling software, knowledge platforms, e-learning tools and electronic health records of clients. The transition towards SMTs can be accelerated through these tools because they facilitate the independence and decision-making opportunities of teams. For example, self-scheduling software not only gives employees more control over their work hours, but also opens up the discussion about demand for care and base formation. Offer knowledge platforms through which employees can learn from each other, because SMTs need to find bridges to other parts of the organization by themselves.

Coach-manager

Acceptance of new role – reluctant transition

As a coach-manager, let teams make their own decisions and offer multiple solutions when teams ask for help. The major pitfall for employees who formerly had a management role is to manage and make decisions. The role of the manager transforms through different stages to coach. Only during the first phase of the transition towards SMTs, leaders need to have an active role, helping teams to learn how to deal with their new responsibilities. However, this role changes in the transition period: leaders should lean back and coach teams instead of making decisions.

Expected behaviours

Most importantly, the coach-manager asks teams their needs and helps them by providing and interpreting the right information. To do this properly, the coach-managers should maintain a feeling of ownership with their teams and know about the current developments. Therefore, leaders should regularly visit teams to learn about their issues. However, teams have to solve their own challenges first, and leaders can create this feeling of ownership and responsibility of their teams. The most frequent description of the expected behaviour of the leader of SMTs is: “manage where you have to and coach where you can”.

HRM department

Where to apply HR competences

Help teams with HR-related issues such as recruitment and selection of new colleagues and develop a feedback culture. Transform HR into a service department available to provide help with performing HR tasks. As an HRM department, it is important to become more strategic: facilitate the top management with HR information during the transformation

of the organization by providing insights about the development and enactment of HR-related tasks by teams and by monitoring labour markets and developments in laws and regulations. HR is well-positioned to keep a helicopter view of the organization and to keep track of HR responsibilities and tasks, rules and regulations within teams and keeping an eye on potential negative side-effects such as groupthink (failure to be critical, to achieve conformity), unethical behaviour and unlawful behaviour.

From HR management to HR intelligence

Develop HR intelligence – tools, instruments and data – for SMTs which they can use to manage themselves, such as e-HRM systems, dashboard and team development tools. Making use of the specific skills and competences of HR professionals, tailored instruments can be developed to support the transition towards SMTs. Especially training and development policies are important for teams to use, as teams need to acquire skills to perform additional organizational tasks and improve teamwork.

Teams and team members

Team processes

One of the most important aspects is social processes within the teams. The performance of SMTs depends on how colleagues within SMTs work together. Because of the relative distance of leaders, it is important that employees in SMTs provide and receive timely feedback within their teams. This proves to be one of the most difficult aspects of the transition. Team members should take enough time for discussion and decision-making, and therefore plan regular team meetings during which progress and issues can be discussed and decisions are made. Consider to use training for team members to organize

these meetings efficiently and learn about other new responsibilities, given that many employees will have no experience in being responsible for issues such as scheduling. Put quality systems in place to warrant that the quality of care will never be an issue.

Success factors

Trust that colleagues are capable of knowing what is best for the client, the team and the organization. Let them make mistakes, but prevent blunders. Make sure that all team members know about their (new) responsibilities and take care to give everyone the authority and tools to execute their work properly. The boundaries and margins should be as clear as possible, and team members have to monitor them actively. Finally, help other teams with lessons learned and reach out for support from the coach, HR department or manager before processes take a halt or incidents happen.

Reflection

Several important lessons can be taken from our research: One of them is that the attractive topic of

SMTs is far from its final stage. The twelve recommendations we offered provide a guiding framework for how the empowerment process should be governed once organizations take the road towards self-organization. Once well steered, SMTs will increase employee satisfaction and business ownership feelings, responsibilities and innovative initiatives. However, the transformation towards self-managing is a complex management process that requires a mature level of leadership in organizations. Business leaders wanting to initiate such a transition process in their organizations should, in our view, be able to step aside the habits to control and divide tasks, but to be open for entrusting their colleagues at the work floor level in their yet-to-be-discovered self-managing capabilities.

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