HOW TO CREATE SUSTAINABLE HEALTH
Experiences taken from Swedish organizations

Åsa Wreder
HOW TO CREATE SUSTAINABLE HEALTH

Experiences taken from Swedish organizations

Åsa Wreder
HOW TO CREATE SUSTAINABLE HEALTH

Experiences taken from Swedish organizations

Åsa Wreder

Luleå University of Technology
Department of Business Administration and Social Sciences
Quality and Environmental Management
ACKNOWLEDGEMENTS
The research presented in this thesis has been carried out at the Division of Quality and Environmental Management, Luleå University of Technology, between 2004 and 2006. During this time, I have received support from many people, who in different ways have contributed to the completion of this thesis.

First of all, I would like to thank my supervisor Professor Bengt Klefsjö for your encouragement, help and guidance. I am very grateful for all your support. Thank you for enriching my work with your deep knowledge and for helping me to improve my scientific writing. Many thanks also to my colleagues at the Department of Quality and Environmental Management and the students within the research school, Arena lifestyle, health and technology, for your support and advice. Special thanks to Rickard Garvare and Peter Johansson for valuable contributions and to Gunvor Touma for your assistance. Thanks also to Gary Watson for your help in improving the English of my thesis.

I would also like to express my gratitude to all representatives of FöreningsSparbanken, who made the case study possible and valuable. Thanks a lot for your helpfulness and for sharing your experiences. I also gratefully acknowledge the financial support from the Swedish insurance company, Alecta. Furthermore, I would like to thank, Ingela Bäckström and Pernilla Inglesson at Mid-Sweden University, for your inspiration and cooperation within the case study.

Finally, but not least, I would like to express my gratitude to my family and friends for their love and support. In particular, I would like to thank my father Bertil, my mother Margareta and my sister Sofia for always being there, supporting me and believing in me. Many thanks also to Maria for your friendship and for making me laugh again. Foremost, I wish to thank my Ulf for your love, patience, understanding and endless support.

Luleå, May 2006
Åsa Wreder
ABSTRACT
International competition and changing demands of modern working life mean that organizations are more dependent on co-workers’ health, motivation and commitment to increase flexibility and relentlessly improve. Indeed, attempts to manage the new demands, very often, seem to cause unhealthy workplaces. This results in sickness absence, which today has grown to a major problem in many organizations of the Western world, not least in large Swedish companies.

Research, shows that to meet the demands of modern working life with healthy and co-creative co-workers, a flat, flexible and empowered organization is needed. In this manner, good management and the relations between managers and co-workers are considered key factors.

However, in large organizations hierarchical structures and complex communication channels are common. It is even argued that empowerment and good leadership are difficult to practise. Therefore, the purpose of this thesis is to contribute to the creation of good work environments and employee health, in particular as regards larger organizations.

To achieve this purpose, the work of managers and co-workers of a large and successful bank has been studied and methodologies identified through interviews, workshops and documents. The results have then been compared to research considering successful smaller organizations and theories about health, management and Total Quality Management.

Based on the experiences of the successful organizations a management model for sustainable health was created to inspire the work of managers of large organisations. The model suggests a management strategy based on a culture of core values considering human aspects that are supported by methodologies and tools. The most salient methodologies of the organizations studied appeared to be dialogues, employee development, delegation and coaching. In addition communication and trust emerged as important to create sustainable health.
SAMMANFATTNING

Den internationella konkurrensen och föränderliga krav i det moderna arbetslivet innebär att organisationer är beroende av friska, motiverade och delaktiga medarbetare för att kunna vara flexibla och förbättras kontinuerligt. Likväl, leder anpassningar till de nya kraven ofta till ohälsosamma arbetspplatser. Dessa i sin tur orsakar sjukskrivningar som idag har vuxit till ett stort problem i många organisationer i väst, inte minst i stora svenska företag.

Forskning visar att det krävs platta, flexibla och tillåtande organisationer för att möta kraven i det moderna arbetslivet med friska och medskapande medarbetare. Sitt till detta anses bra cheffskap och relationer mellan chefer och medarbetare vara nyckelfaktorer.

I stora organisationer är det dock vanligt med hierarkiska strukturer och komplexa kommunikationsvägar. Delaktighet och bra ledarskap anses till och med vara mycket svårt att praktisera. Syftet med denna uppsats är därför att bidra till bättre arbetsmiljöer och hälsa hos medarbetare i stora organisationer.

För att uppfylla syftet har chefsers och medarbetares arbetssätt i en stor och framgångsrik svensk bank studerats via intervjuer, seminarier och dokument. Resultaten har sedan jämförts med forskning om framgångsrika mindre organisationer och teorier om hälsa, management och kvalitetsutveckling.

5 CONCLUSIONS AND DISCUSSION ........................................... 77
  5.1 Retrospect of the purpose and research questions ...................... 77
  5.2 Discussion about general conclusions ...................................... 79
  5.3 Concluding practical implications .......................................... 87
  5.4 Further research .................................................................. 90
  5.5 Final reflections .................................................................. 91

REFERENCES ......................................................................................... 93

APPENDED PAPERS

APPENDICES
LIST OF APPENDED PAPERS

Paper I

Paper II

Paper III
1 INTRODUCTION

In this first chapter, the research area is shortly described. The purpose of the research, the stated research questions and the delimitations chosen are also presented. Last, the structure of the thesis is explained.

1.1 Background

International competition and the ever changing demands of modern working life put pressure on organizations to increase flexibility and relentlessly improve products and processes to fulfil higher expectations from customers as well as co-workers\(^1\), stakeholders and society; see Arnetz (2002); Docherty et al. (2002); Molander (1996).

This increased competition and higher requirements on organizations mean that the organization is dependent on co-workers’ commitment and motivation – a situation which often results in stress and bad work environments; see Harnesk (2004 a); Docherty et al. (2002).

The connection between unsatisfactory work environments and sickness absence is well-documented; see Levi (2000). Many times, lack of influence and commitment cause stress with bad health and sickness absence as consequences; see The Swedish Labour Inspectorate (2000). Since the 1980s sickness absence has risen to alarming levels in Sweden, and other parts of Europe\(^2\), and so have the costs connected to bad health; see The National Social Insurance Board (2000, 2003). In Sweden, for instance, the number of sick leaves lasting more than 365 days increased by almost 30% between 1997 and 2001 and the costs for sickness benefits and disablement pensions together were 10% of the total Swedish government spending in 2001; see SOU (2002:5). Last, but not least, bad health and sickness absence mean suffering to the individuals and affect their performance.

---

\(^1\) In this thesis the words “co-worker” and “employee” are used alternately for a person who works for and/or with another in return for financial or other compensation.

\(^2\) For instance, Norway and the Netherlands; see Lindberg (2006).
In September 2005, out of a total work force of 4.3 million employed, 191,000 persons were on long-term sick leave, according to national statistics; see Lindberg (2006). In addition, Fredriksson (2004) highlights that an increased number of individuals are on sick leave due to a lack of influence in combination with high work demands.

At the same time, it is well known that possibilities for co-workers to actively participate can impact positively on work satisfaction; see, for instance, Kondo & Park Dahlgaard (1994); Kondo (1991); Hackman & Oldham (1976). As a consequence, there is also a quest for and adoption of ways of working to increase employee involvement and support individual development, in order to decrease absenteeism and in the long run improve productivity and organizational development; see Velury (2005); Hodson & Roscigno (2004); Paul et al. (2000).

However, involvement does not directly result in good work environments and health. According to Docherty et al. (2002), many of the solutions for achieving employee involvement and competitiveness have also increased work intensity, increased sickness absence and have had an adversary effect on the quality of operations and business. The growing involvement can increase workload, responsibility, choices and possibilities and thereby cause stress and sickness absence; see McKenna & Beech (2002); Docherty et al. (2002); McCabe et al. (1998).

Docherty et al. (2002), argue that ways must be found to reverse current trends through sustainable work systems, where human and social resources are regenerated through the process of work while still maintaining productivity and competitiveness. These authors also believe that in order to meet the demands of modern working life with versatile and co-creative co-workers, a flat, flexible and empowered organization is needed. In this manner, good management and the relations between managers and co-workers are considered key factors; see, for instance, Harnesk et al. (2004); Zwetslot & Pot (2004); Bender & van de Looij (1994); Lorenz (1992); Stowell (1988).

To achieve organizational success and health, several authors claim that management has to be adjusted to the requirements of today’s working
life and be more supportive; see, for instance, Stowell (1988); Docherty et al. (2002); Kinlaw (2002). They argue that authority and support has to be given and the power transferred to the lower levels of the organizational structures. It is no longer feasible to practise supervisory leadership; see Docherty et al. (2002); Harnesk (2004a).

1.2 Problem area

Many times, attempts to manage the new demands of flexibility and employee involvement seem to cause unhealthy work environments; Docherty et al. (2002).

Indeed, pertinent lessons today, regarding the efforts of successful smaller organizations, show that a flat organizational structure as well as committed leadership, practices of communication, relation building activities and co-worker involvement are vital to create sustainable health among co-workers; see Harnesk et al. (2004).

However, large organizations tend to have hierarchical structures and complex communication channels and are less empowering than smaller organizations; see Daly et al. (2003); Nilsson (1999). Deming (1986) even argues that it is very difficult to apply good leadership in large organizations. Managers of large groups have less opportunity to interact with individual employees. Moreover, there are many examples of top managers’ decisions being neutralized by lower managers and of decisions that have not penetrated through the hierarchy to the majority of the organization’s co-workers; see Daly et al. (2003).

Therefore, it is important to learn more about how managers in large organizations can work to adjust to the requirements of today’s working life to ensure involved, developing and healthy co-workers in conjunction with improved organizational development.
1.3 Purpose and research questions

The overarching purpose of the research described in this thesis is to contribute to the creation of good work environments and employee health. The focus is on larger organizations and on taking advantage of experiences of successful organizations in order to inspire and support the work of managers in other organizations.

Based on this purpose, the following two research questions are posed:

**Q1.** What methodologies can be identified from successful organizations to achieve sustainable health?

**Q2.** How can a model for sustainable health be formulated to support the work of managers in large organizations?

The core concepts of these questions are, ‘methodologies’, ‘sustainable health’ and ‘managers’. In this thesis, methodologies are seen as ways of working, which consist of sequences of activities that may differ between organizations and from time to time. ‘Sustainable health’ refers to the achievement of long-range maintained or increased health and social well-being whereas ‘manager’ refers to a person engaged in a professional managerial position of an organization. The core concepts are discussed further in Chapter 2.

1.4 Delimitations

The research described in this thesis is limited to Swedish organizations in order to minimize potential cultural differences between organizations. Moreover, the thesis mainly focuses on management intentions and methodologies, because ways of working should be easier to learn from and imitate in other organizations than the characteristics

---

3 There are cultural differences as well as differences in sick leave between European countries. For instance, Denmark, Germany, Finland and Great Britain have a low number of people on long-term sick leave compared to Sweden; see Lindberg (2006).
of people. In addition, the work primarily deals with psychological and social aspects of work environments and not physical issues.

### 1.5 Thesis structure

The main body of this thesis is made up of five chapters. Moreover, three papers are appended to this foundation, which is also complemented with appendices.

The structure of the thesis is described in Figure 1.1 while the relationships between the appended papers, the research questions and my research purpose are presented in Figure 1.2.

![Figure 1.1](image)

**Figure 1.1** The structure of the thesis, mainly illustrating the five chapters and the appended papers.

The first chapter is an introduction that gives a background to the research area and a problem discussion that leads to my purpose with the thesis, the research questions and the delimitations. The theoretical frame of reference in Chapter 2 briefly introduces the areas of health, employee involvement, management and TQM, which constitute the basis of the research. Chapter 3 presents the methodologies through which the research questions are examined. The paradigm in which my
research is performed and the strategies and tools by which the work is conducted are thereby described. Moreover, the case study is presented. After that, the appended papers are summarized in Chapter 4. Finally, in Chapter 5, conclusions are drawn and the research, as well as results, are discussed.

Figure 1.2 The figure illustrates how the appended papers mainly are related to the research questions and how these questions in turn are derived from the overall purpose.
2 THEORETICAL FRAME OF REFERENCE

In this chapter the theoretical frame of reference is outlined. First, the concept of health is described. Thereafter, theories about management, organizational structure and culture and Total Quality Management are dealt with. The frame is influenced by my pre-understanding, choices, reading and process of learning by conducting the research and writing this thesis.

2.1 Health

Growing welfare problems related to high levels of sickness absence and the need to promote health to improve productivity and organizational performance appear to be under discussion in organizations in several Western countries. Accordingly, there seems to be a need to promote health to decrease absenteeism and in the long run improve productivity and organizational development.

Several definitions of health seem to have been proposed and discussed during the second half of the 20th century. Health may, for instance, be related to medical care or medicine, but may also be discussed in relation to intrapersonal resources. The focus of this section is on health in a workplace context.

2.1.1 The concept of health

When studying research literature, the concept of ‘health’ seems tricky to define in an unambiguous way. However, Medin & Alexandersson (2000) have identified the following three main views of health when summarizing studies on health from the 1970s to 1990s:

- Health as the absence of illness
- Health as a resource, a strength including the ability to withstand disease
- Health as a state of being in balance.
- Theoretical frame of reference -

Medin & Alexandersson (2000) also argue that there are two approaches to the view of health; the biomedical view and the humanistic view. In the biomedical view, diseases are in focus and health is defined as absence of illness. In the humanistic view, health is considered more than lack of illness and diseases, or, in a sense, something else such as capability to achieve intentional goals; see Medin & Alexandersson (2000); Nordenfelt (1986).

According to the definition of health provided by the World Health Organization, WHO, in 1948 “health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”. This definition emphasizes the individual’s total well-being. Others define health as a combination of self-assessed health, absence of chronic conditions and absence of subjective health complaints; see Mackenbach et al. (1994). Lindberg (2006) discusses different views and definitions of health and cites a well-known view of health stated by the Finnish philosopher Pörn (1984). According to Lindberg (2006), Pörn relies on a holistic perspective and argues that health is a state of a person, which is obtained when the person’s repertoire is adequate in relation to their goals. A person, who is healthy in this sense has intrapersonal resources that are sufficient for what their goals require.

According to WHO (1986), a person’s health is affected by a range of factors commonly referred to as the “determinants of health”. These include: income and social status; social support networks; education; employment and working conditions; social environments. Moreover, Cassidy (1999) suggests that biological, social and psychosocial factors interact to sustain health or cause illness.

In discussions about health, several researchers also touch upon the dilemma of defining what is meant by good health. For instance, Patrick & Bergner (1990) argue that there is a wider disagreement about what is meant by good health than what is considered as bad. According to Witbeck (1981), there is no optimal state of health, but a person can always increase their ability to act appropriately in some situations.
The definition of health used in this thesis is based on the one by WHO (1948) mentioned above. Moreover, I believe that the state of health is subjective and I do also agree with those who argue that health can always be improved.

2.1.2 Sustainable health
Sustainable development is a fairly new concept, which was established in the report “A common future”, written by the Brundtland Commission. In that report it is defined as "development that meets the needs of the present without compromising the ability of future generations to meet their own needs"; see World Commission on Environment and Development (1987).

According to, for instance, the WEHAB (2002) document “A Framework for Action on Health and the Environment”, health may be seen as both a resource for, as well as an outcome of, sustainable development. To strive for favourable development of health and productivity within organizations, Docherty et al. (2002) propose sustainable work systems, which they define as systems “…where human and social resources are regenerated through the process of work while still maintaining productivity and competitiveness”.

Sustainable health is a related concept striving for positive development of health. According to Harnesk et al. (2004), sustainable health can be defined as “durable individual perceived wellbeing”. They further relate the concept to gain of such qualities as long-range maintained or increased motivation and commitment, and good physical and psychical health as well as social well-being in working life and private life.

My view of sustainable health is influenced by the definition by Harnesk et al. (2004). However, in the concept of durability, I also think that to be sustainable, a person’s health should meet the needs of the present demands on the person without compromising their future health. In relation to work this should mean that human resources must be regenerated through the process of work in order to provide for sustainable health. From this perspective, sustainable health could also be seen as a part of sustainable workplaces that according to Docherty et
al. (2002) are needed to achieve favourable development of health and productivity within organizations.

2.1.3 Sickness absence

In Sweden, sickness absence⁴ among people, between 16 and 64 years old increased from 3.7% in 1998 to 5.5% in 2002. Moreover, the sickness absence lasting more then 15 days increased from 1.5% to 3.2% during the same period; see Farm & Rennermalm (2004).

National statistics also show that the number of people on long-term sick leave increased dramatically between 1997 and 2002; see Figure 2.1. At the same time, there were similar trends in some other European countries such as the Netherlands and Norway, while other countries as Denmark, Germany and Great Britain, for instance, had a low level of sickness absence; see Försäkringskassan (2005).

Figure 2.1  Jans (2003) discusses the statistics from the Swedish Social Insurance Agency (“Riksförsäkringsverket”) and shows that the number of people on long-term sick leave at working age has increased dramatically in Sweden since the early 1990s. Moreover, at times when there has been something of a decline, the number of new early pensions seems to have increased contrary with a little delay. (Source; Jans, 2003)

⁴ Sickness absence is here seen as absence caused by sickness accompanied by reduced work ability. There is no general consensus regarding what is meant by long-term sick leave, but, in general, sickness absence of 28 days or more can be seen as long term; see Lindberg (2006); SCB (2004).
According to national statistics the increase in Sweden has declined somewhat after 2003; see Försäkringskassan (2005). However, Lindberg (2006) argues that national statistics also show that the number of people with newly approved early retirement pension increased by 15 % between 2002 and 2004. Moreover, many of those people granting the early pension had a history of long-term sickness absence. Accordingly, the number of people at working age that did not work at all or worked partially due to reduced work ability was almost the same in 2004 as in 2002, i.e. 784,000 persons compared to 786,000 persons; see Lindberg (2006).

Sickness absence and disability pension sickness absence are major public health problems with great socio-economic consequences for society, employers, absentees and their families in the Western world; see Alexanderson & Hensing (2004); SOU (2000). Many companies and organisations in the west are dealing with costs caused by high sickness absence among their co-workers and with consequences as inefficiency and unprofitability. For example, the costs for sickness benefits and disablement pensions together were 10% of the Swedish total government spending in 2001; see The National Social Insurance Board (2003).

Recent national statistics further show that the level of sickness absence is connected to organizational size; see SCB (2006). In organizations of more than 100 employees, sickness absence was 4.6% in 2005 whereas the same measure was 2.1% in smaller organizations of less than 20 employees. In addition, sickness absence increases in proportion to company size.

Sickness absence is affected by factors on different structural levels. It has a multi-factorial origin and involves various actors with diverse roles and incentives; see Alexanderson & Hensing (2004). Increased workloads and stress as well as a higher mean age among the workforce are some factors that have been argued as possible causes for the higher levels of sickness absence; see Arbetslivsfakta (2000). Moreover, Dolbier et al. (2001) and the Swedish Labour Inspectorate (2000) have documented the connection between a psychologically unsatisfactory working environment and a high frequency of sickness absence. Sickness absence
is indeed a complex phenomenon and its occurrence and courses are influenced by a range of factors, including social, work, organisational and individual factors. Organisational factors, for example, can be company size, the existence of health promotion programmes and absence policies; see Janssen et al. (2003).

2.1.4 Health promotion
In the work of increasing the health presence, the concept of health promotion is often used. According to WHO (1986), health promotion is “the process of enabling people to increase control over, and to improve, their health. To reach a state of complete physical, mental and social well-being, an individual or group must be able to identify and to realise aspirations, to satisfy needs, and to change or cope with the environment”.

The concept of ‘health factors’ further appears in literature discussing what makes people function in the best way and feel well; see, for instance, Johnson et al. (2003); Söderlund et al. (2003). Several researchers have also highlighted factors identified within working life, which are not normally regarded as health issues, but are argued to have considerable impact on health. Among such health factors are management and leadership, communication, corporate culture and organizational development; see Zwetslot & Pot (2004); Csikszentmihályi (2003); Eriksson (2003); Griesinger (1990). Moreover, Wilson et al. (2004) empirically have tested and validated a model showing that work characteristics influence psychological work related factors, such as work satisfaction, commitment, perceived empowerment and stress, which in turn affect employee health. Management support and strategies for open communication and meaningful participation were shown to be important. These subjects, among others, will be discussed further in the rest of this chapter.
2.2 Management

Similar to the concept of ‘health’, ‘management’ seems to be defined in many different ways and sometimes also be jointly used with the concept of ‘leadership’. According to Drucker (1998), ‘management’ may be seen as a central and distinctive organ of an organization. He argues that, what managers of every organization have to do, is to bring people together in order to achieve joint performance and make human strength productive in performance. In view of that, ways to involve, motivate and develop people should be of concern for every manager to create success and sustainable health.

2.2.1 Management and Leadership

Leadership has been of interest to society for thousands of years. However, it was not until the early 20th century that the scientific study of leadership began; see Kanji & Moura (2001). Today, there is a lot of literature within the field of leadership and management. Indeed, there seem to be almost as many definitions of leadership and management as there are researchers. As stated by Yukl (1998), a risk with going into the subject of leadership might be that “how one defines leadership affects the research and theory on it”. However, since leadership is of interest for this thesis I want, in spite of that, to give a brief overview.

During recent years, a discussion has evolved regarding the concepts of ‘management’ and ‘leadership’ as well as those of ‘manager’ and ‘leader’. Yukl (1998) emphasizes that the word manager is an occupational title. Moreover, Torrington et al. (2002) argue that a leader in some way motivates others to act in such a way as to achieve group goals. They mean that such a definition makes no assumption about who is the leader, i.e. it may be, or may not be, the professional head of a unit. Yukl (1998), similarly, claims that it is obvious that a person can be a leader without being a manager and be a manager without leading. He further states that successful management also needs to incorporate

---

5 To further complicate the situation, there are different interpretations of the concepts in different countries. In the paper by Huhn (2005) the concept of management is discussed. He states, for instance, that “the English-speaking world calls almost any activity below economics ‘management’, while the German-speaking world often talks of management when it wants to be modern.”
leadership. Certo (2000) discusses similar thoughts and argues that management, as a focused organizational process, and leadership, as focused on concern for the co-workers as people, need to be combined.

In Sweden, and several other countries, there seems to be a similar discussion going on. Here people have started to separate the concepts of ‘manager’ (in Swedish: “chef”) and that of ‘leader’ (in Swedish: “ledare”), as two types of roles. The manager gets the position from above, through an appointment, but the leader gets the status and legitimacy from the group he/she is the leader of. We also have two different ways to act within theses roles, namely ‘management’ (in Swedish: “chefskap”) and ‘leadership’ (in Swedish: “ledarskap”).

Kotter (1990) is one of the researchers, who have addressed the difference between leadership and management. Much of the leadership literature treats the two concepts as synonymous and there is a lack of agreement and a strong debate in literature on this issue; see, for instance, Huhn (2005) and Hunt et al. (1982). The outcome of the study presented in Kotter (1990) is that leadership is conceptually broader than management and that leaders provide much more to their organizations than managers. This view is consistent with the writings of a number of other researchers; see Bennis (1989); Zaleznik (1977).

Certo (2000), Kotter (1988, 1999) and Wiberg (1992), for instance, also discuss the difference between those concepts and emphasize two distinct but complementary systems of action. Kotter (1988) describes leadership as “a process for influence, without forcing, one or several groups of people in one direction”. Northouse (1997) presents a similar definition and suggests four characteristics of leadership: it is a process; it involves influence; it occurs within a group context; it involves goal accomplishment.

According to Wiberg (1992), leadership means personal and deliberate influence on co-workers to perform a result. He describes management as orientation of an operation in the surrounding world. Kotter (1999) argues that the main function of management is to provide directions and consistency to an organization, whereas the primary function of
leadership is to cope with change. Gustavsson (1992) further discusses two concepts of leadership. These are ‘substantial leadership’ and ‘symbolic leadership’. Substantial leadership means the traditional role as a leader, whereas symbolic leadership focuses on the leader as a symbol that gives shapes to the possibilities that exist in the organization. He argues that both types are involved in every leader’s situation. However, he believes that it is easier to practice substantial leadership in smaller organizations, while a leader is more forced to manifest symbolic leadership in large organizations.

Stoner & Freeman (1989) only discuss management and managers. Indeed, they seem to include leader in their description of managers: “organizational planners, organizers, leaders, and controllers”. In addition they argue that managers work both with and through people.

In summary, leading is not the same as managing, as a manager may or may not be a leader. In this thesis, management is associated with the professional way an organization is controlled through issues of strategies, responsibilities, planning and results. A manager is further defined as a person engaged in a managerial position of an organization. However, I assume that leadership, as defined by Kotter (1988), is also an important part of good management.

2.2.2 The managerial position and management

According to Mintzberg (1973), managers have a few things in common. One is the formal position and status in an organization. In addition, they interact with others, deal with information and make decisions. At the same time, a managerial position makes demands on the person who occupies it and the actions of the manager are constrained by regulations, policies, traditions and scope of formal authority; see Yukl (1998).

According to Yukl (1998), research shows that aspects of the particular situation, such as organizational levels and size of unit, influence the activities and behaviour of managers. A high level manager typically has more responsibility for making important decisions about such things as organizational objectives, planning of strategies, general policies and
allocation of resources. Further down in the hierarchy, managers tend to have less freedom of action in combination with less discretion while lower-level managers must operate within the constraints imposed by formalized rules and policy decisions made at higher levels. Instead, managers at the lower levels tend to be more concerned with employee selection and training, work scheduling and monitoring of subordinate performance; see Yukl (1998); Stoner & Freeman (1989).

2.2.3 Employee involvement

A significant role of managers is to facilitate involvement from all members of an organization through means such as decision-making processes, empowered teams and delegation of authority; see Harnesk (2004 a). At the outset, co-worker involvement was practiced in programs like quality circles and self-managing work teams; see Paul et al. (2000); Tubbs (1994). During recent decades, the concept’s prominence has expanded to include delegation of authorities, responsibilities and rewards to lower levels of the organization. Accordingly, the name of the phenomenon has changed to “employee commitment” or “employee empowerment”. Employee commitment is here seen as an effect of new requirements in today’s working life; see Velury (2005); Axelsson & Bergman (1999); Stowell (1988). Information sharing, ownership and partnership are often discussed as means to fulfil the common needs of the co-workers and organization; see, for instance, Velury (2005); Lawler et al. (1989) and Stowell (1988).

Similar to management and leadership, the concept of ‘employee involvement’ is defined and used ambiguously, as well as expressed in a variety of terms. Empowerment is, for instance, one common term. Wellins et al. (1991) define empowerment as “the process of giving authority and responsibility to individuals at lower levels of the organizational hierarchy”. Kinlaw (1995) also discusses influence based on competence, whereas Tengblad & Hällsten (2002) talk about empowerment as a process in which management make the decisions about what authority to distribute and in what way.

Tengblad & Hällsten (2002) further discuss the concept of ‘employeeship’ or ‘co-workership’, which according to them means that every employee
should feel like, act like and have the power to be like a manager of their specific work tasks and area of responsibility. This does not mean that the co-workers take the role of management, neither is it collective decision making. Tengblad & Hallsten (2002) mean that the Dane Claus Möller, who was involved in the ‘commotion’ within Scandinavian Airlines, during Jan Carlzon’s period as CEO in the 1980s, was one of the pioneers in the discussion of employeehip; see Möller (1994).

Bergman & Klefsjö (2003) state that co-workership is a way of “contributing to the personal development of the employees”, when involving the endeavour to stimulate and create opportunities for co-creativeness. Csikszentmihályi (2003), Eriksson (2003), Leiter & Maslach (1988), and others, draw similar conclusions while several researchers also emphasize the importance of the leader’s ability to stimulate employees through coaching; see, for instance, Kinlaw (2000); Stowell (1988).

Harnesk (2004 b) uses the term ‘partnership with internal customers’ to stress the necessary mutual agreement between employers and co-workers. He argues that internal partnership could be a way to achieve increased co-worker commitment and has, from a management perspective, identified decisive factors for achieving partnership. These decisive factors, which are presented in a partnership model, are core values, personal motives, personal maturity, trust and equity. The model also demonstrates that these, in turn, depend on the fifth factor; communication in dialogue; see Harnesk (2004 b).

Indeed, Bergman & Klefsjö (2003) and Eklund & Lund (1999) state that to achieve real success, a deeper form of involvement, which they call co-creation, is needed. They state that “co-creation is a committed, actively contributory and supportive way to participate”. It means that co-workers take responsibility for initiatives and development efforts and seek activity with the aim of the common good. The will to be co-creative, though, depends on the belief that one is needed and is able to contribute, as well as on signals from the societal culture influenced by expectations that one should be co-creative and contribute to the development.
2.2.4 Communication

Telling people what is going on is seen as a desirable organizational objective and a useful management methodology; see Molander (1996). If a group is to accomplish tasks that enable it to adapt to its external environment, it must be able to develop and maintain internal relationships among its members and establish a system of communication and a language that permits interpretation of what is going on; see Schein (2004).

Several authors also emphasize communication through dialogue between people as a key factor for managers to respond to co-workers’ needs and developing individuals and organizations; see, for instance, Harnesk (2004 a); Bergman & Klefsjö (2003). According to Molander (1996), communication is even a part of a cultural change and the core of managing change.

The essence of communication may be argued to be listening. Therefore, listening skills are central to organizations, and should be reinforced and become embedded in the way management at all levels does its business; see Molander (1996). Harnesk (2004 a, b) also believes that well-functioning communication depends on people’s interest in communication and ability to discuss, as well as using suitable technical support systems. He also explains that the core of communication in dialogue is to be open-minded and to practise active listening, trying to understand the messages and together come to mutual understanding. He further argues that this is to avoid misunderstanding, which is a common source of conflicts.

2.2.5 Coaching

Several authors highlight the importance of a leader’s ability to stimulate employees through coaching6; see, for instance, Kinlaw (2000); Stowell (1988). Molander (1996) talks about coaching as a process of systematically increasing the ability and experience of managers through activities of delegation, counselling and appraisal between top managers and subordinate managers. He argues that it is through

---

6“Coaching” was originally used within leadership in sport, but is today an established concept within management literature for all types of organisations; see Gjerde (2004).
delegation, which involves the setting of objectives and boundaries of authority and responsibility as well as performance assessments, that executive managers can most clearly be coaches. The skill of coaching further depends on limited intervention, so that learners do not make too many mistakes and lose confidence, or alternatively become dependent on their tutors.

According to Kinlaw (2000), coaching is something that managers do, to support people to resolve performance problems and challenges to reach higher levels. Furthermore, he argues that it is a function, not a role, and that it “is a mutual conversation that follows a predictable process and leads to superior performance, commitment to sustained improvement and positive relationships.” Coaching clarifies goals and priorities, helps people understand what is and is not important, invites people to influence their performance and careers, improves the knowledge and skills people need to do their best and conveys to people how important and appreciated they are; see Kinlaw (2000). In this manner, coaching leads to employee commitment.

2.2.6 Motivation and work satisfaction
It is hard for an organization to improve and satisfy its customers without satisfying the needs and expectations of the internal customers, i.e. the co-workers, first; see Bergman & Klefsjö (2003). Satisfying the co-workers’ needs and expectations is a way to increase motivation and commitment, which in turn promotes health and organizational success; see, for instance, Arnetz (2002); Wright (1996). According to Park Dahlgaard (2002), high personal commitment is “a state where a person is fully motivated to devote himself to a certain task or an organization”.

Motivation, in turn, may be described as “what arouses people into action, determines their goals and influences the vigour and persistence with which such goals are pursued”; see Wright (1996). Abrahamsson & Andersen (1996), refer to McClelland (1990) when explaining that motivation is about how human behaviour is sustained, controlled and ends. Theories of motivation for work are often based on the assumption that needs may be the force which triggers motivated behaviour, and that these needs, can be identified and fulfilled within the work environment. More
narrowly, the motivation to work can be defined as the willingness to spend effort on a particular task to obtain an incentive; see Wright (1996).

Different types of theories of motivation have been presented over the years; see, for instance Skinner (1953); Vroom (1964); Adams (1965). However, these different theories could be summed up in two groups. One group of theories is focusing on intrinsic explanations for motivation, such as need theories, and another group describes external explanations, for instance equity theory; see Abrahamsson & Andersen (1996).

A well-known theory on motivation is presented by Herzberg (1959), who analyzed motivation through two sets of variables: motivators that give work satisfaction and hygiene factors. Hygiene factors reflect things such as company policy and administration, supervision structures, salary, working conditions and relations and can not improve work satisfaction but decrease dissatisfaction. Instead, he emphasizes that making the work more interesting and improving opportunities for achievement, recognition, responsibility and advancement is the way to gain work satisfaction.

Maslow’s theory (1943) of human motivation based on human needs is probably the most often referred to. His theory is based on a hierarchy of human needs from physiological needs, security needs, social needs and ego or esteem needs and self-fulfilment needs.

The physiological needs are defined as basic or untaught needs and are life supporting. Here we find the needs for sleep, food, air and warmth. When the physiological needs are fulfilled, the safety needs, such as trust, freedom from assault and ability to foresee consequences, can be fulfilled. The social needs come from needs such as giving and receiving love. Status, acknowledgement and acceptance are examples of ego or esteem needs. The need for fulfilment is not always possible for all since it means to be able to utilize one’s personal abilities fully and possible causes may be lack of self-awareness or having the right conditions. Sometimes other needs, such as security needs or social needs, are obstacles. It might, for instance, be hazardous to give up a steady job and
identity in order to develop one’s talent as an artist with much uncertainty about success and income; see Maslow (1943). When needs on lower levels in Maslow’s model are satisfied, needs on higher levels become prominent. Kondo (1991) has generalized Maslow’s model in the sense that for each single individual, needs on different levels may coexist, but with different prominence.

According to Hackman & Oldham (1976), the motivation for work is dependent on how the work is designed. To achieve high motivation, they emphasize the importance of five dimensions that influence the experienced meaningfulness of the work, experiences of responsibilities for outcomes of the work and knowledge of the actual results of the work tasks. The dimensions: skill variety; task identity; task significance; autonomy; feedback, give psychological rewards to individuals and thereby higher motivation. This in turn results in improved quality and productivity as well as higher work satisfaction and decreased sickness absence; see Hackman & Oldham (1976). Thus, motivation is a vitally important issue for managers; see Wright (1996).

2.3 Organization theory

Literature discusses different ways to describe the concept of ‘organization’. Jacobsen & Thorsvik (1998) argue that the purpose of an organization is to create an efficient way to work by distributing power and creating a common culture. Based on that, the aim of this section is to touch upon how an organization may do so and be structured as a whole and not to go deep into organization theory.

2.3.1 Organizational structures, functions and size

According to Abrahamsen & Andersen (1996), organizations have certain universal characteristics, of which the most important are objectives, people, structure, activities and culture. Minzberg (1973) emphasizes that organizations are built of five parts. The operators, which are the base that actually produce products or provide services as well as a strategic top of executives. An organization also includes middle line managers with formal authority to align the executives’
strategies and the operating base. Moreover, he argues that in all organizations, there is a techno-structure of analysts who, for instance, work to improve the efficiency of the business. In general, there are also some types of supporting co-workers. Moreover, Mintzberg (1973) proposes different types of organizational configurations based on these five parts of actors; see Mintzberg (1973) for further details.

However, the way an organization functions does not necessarily depend on its configuration. For instance, the word bureaucratic can tell something about the way an organization works, but bureaucratic is not the same as hierarchical; see Abrahamsson (2000). He argues that a hierarchical organization may be as democratic as those organized in networks. Often the form of the organization “has to be accepted”, but it is the responsibility of the people, not least the managers, to ensure that an organization functions and works in the best way; see Abrahamsson (2000); Yukl (1998).

Indeed, an organization’s size affects some of its form and function; see Robbins (1990); Blau & Schoenherr (1971). Organizational size may be defined in different ways. However, the number of employees is the variable used in over 80% of the studies; see Robbins (1990). In this thesis, that variable is used as well, since it is people and their actions and interactions that are structured and also make up an organization. To put this into perspective, I consider organizations of more than 500 employees as large and consequently organizations of less as smaller.

Since the 1990s it has become popular to create small, flexible and autonomous organizations and units; see, for instance, Docherty et al. (2002); Abrahamsson (2000); Robbins (1990). One reason for this may be to make the units “more manageable”; see Robbins (1990). Large organizations tend to have hierarchical structures and complex communication channels and are often less empowering than smaller organizations; see Daly et al. (2003); Nilsson (1999). According to Robbins (1990), smaller craft are more responsive to shifting currents and can better navigate in times of uncertainty. It is even argued that it is more difficult to apply good leadership in large organizations than in smaller; see Daly et al. (2003); Gustavsson (1992); Deming (1986).
2.3.2 Organizational culture

A large amount of literature published in the 1980s and 1990s deals with corporate cultures; see, for instance, Schein (1992); Stoner & Freeman (1989); Macoby (1983). Culture as a concept has been used during recent decades to refer to the climate and practices that organizations develop around their handling of people; see Schein (2004). Stoner & Freeman (1989) argue that corporate culture is an integral part of organizational life and has important implications for managerial actions. Some people even talk about ‘leadership based on values’ and state that organisations with strong cultures are more successful than other organizations; see Collins & Porras (1994); Kotter & Heskett (1992); Peters & Waterman (1982). IKEA might be one illustration of this, with a culture based on statements by the founder Ingvar Kamprad, see Kamprad (1976).

The terminology and the views related to organizational culture differ somewhat between different people. However, I have chosen not go into details of that here but to give a brief outline of organisational culture, since that concept seems to be important to create successful organisations and sustainable health.

Schein (2004) discusses culture as a result of a group’s accumulated learning and define it as “a pattern of shared basic assumptions that was learned by a group as it solved its problems of external adaptation and internal integration, that has worked well enough to be considered valid and, therefore, to be taught to new members as the correct way to perceive, think, and feel in relation to those problems”.

According to Sathe (1983), a culture is “the set of important understandings (often unstated) that members of a community share in common”. Several authors also seem to describe the shared understandings as values or beliefs that generate common rules and behaviours; see, for instance, McKenna & Beech (2002); Robbins (1999); Molander (1996). The different sets of values, beliefs and rules are also supposedly reflected in such factors as the organization’s structure, relationships, power distribution, development processes; see Robbins (1999); Molander (1996); Stoner & Freeman (1989).
Kaufmann & Kaufmann (2005) emphasize that a culture is based on a number of shared core values and that the climate is the effect of these shared values measured in terms of the atmosphere, norms and practices. Schein (2004) further argues that the culture adds values of structural stability, depth, breadth and integration of the core values into a whole. Moreover, Senge et al. (1994) believe that mutually agreed values should be part of the organization’s shared vision to guide behaviour towards that vision.

Schein (1992) classifies organisational core values in three groups. One consists of ‘artefacts’, which are values visible within the organization, such as furniture, architecture and clothes, for instance. The next group consists of ‘espoused values’, which are values related to how the professional role is performed – how we act in our professional role and how we take decisions. The third group consists of ‘basic values’; such as how we treat people with different culture, religion or skin colour. These are entrenched in the organization and often co-workers are not even aware of them.

Robbins (1999) emphasizes that a strong culture is characterized by the organization’s core values being intensely held, clearly ordered and widely shared. Some researchers also talk about a strong culture as a substitute for formalization since the culture can convey to employees what behaviours they are expected to engage in; see Kaufmann & Kaufmann (2005). Molander (1996) argues that it is possible to define certain characteristics of an effective culture. Some examples are flexibility, integration, decentralisation, performance orientation, quality consciousness and empowerment.

According to Robbins (1999), most large organizations have a dominant culture and numerous sets of subcultures. He believes that the dominant culture expresses the core values that are shared by a majority of the members. Schein (2004) further discusses whether a large organization can be allied within one common culture and argues that at a certain size the variations among the subcultures is substantial. He believes that each person is a member of several groups. As a result of insufficient stability of membership, lack of shared history or the presence of
subgroups with different kinds of shared experiences, certain beliefs and values may work at cross purposes with others and cause situations of ambiguity and conflicts.

In summary, an organizational culture could be explained as representing a joint perception related to shared sets of core values that guide for instance the practices used by the organization’s members.

2.3.3 Change management
The area of change management is large and I do not want to go into details here. However, it seems important to briefly give some basic ideas of how successful changes might be implemented. The focus will be on management. Some references for change management are Burnes (2004), Balogun & Hailey (1999), Kotter (1996) and Burke (1994).

Pidd (1999) suggests that implementation work can be seen as a transformation and can be viewed as a process of interactions between settings of goals and actions geared to achieve them. This means that implementation of an idea can be considered as a form of organisational change, changing of behaviour and way of work. Pressman & Wildavsky (1973) declare that implementation of a new idea or way to work does not include the initial conditions, “legislation has to be passed and funds committed before implementation”.

A new idea or way to work is not implemented simply because top management has paid a consultant, presented the new idea to the staff and appointed a number of new managers. The implementation of a new idea depends also heavily on its acceptance by co-workers; see Balogun & Hailey (1999). To achieve a successful implementation the management needs to be able to introduce, discuss and motivate why the new way of work is better than the existing one and understand the reality of their employees; see Sandberg (1994). Therefore, managers need to be skilful in verbal communication, team building, coaching and negotiation; see Balogun & Hailey (1999).
2.4 Quality Management

Today, there seems to be support for the belief that a holistic view of work environment, efficiency and quality increases the likelihood for success. Warrack & Sinha (1999), for instance, discuss the relation between quality and health. They suggest that the same kind of overarching management system is needed both to achieve good quality, and to organize healthier workplaces. Total Quality Management is further argued to positively influence financial results, work satisfaction and customer satisfaction and the perceptions employees have of their own health; see, for instance, Lagrosen & Bäckström (2005); Lagrosen (2004); Hansson & Eriksson (2003); Hendricks & Singhal (1997).

2.4.1 The evolution of Quality Management

The evolution of Quality Management may be described in different ways; see Bergman & Klefsjö (2003). Kroslid (1999) describes an evolution based on two different schools of Quality Management. One is the Deterministic School of Thought, which may be seen as related to Quality Inspection and Quality Assurance. This part of Quality Management started with Frederick W. Taylor at the end of the 19th century; see Taylor (1911). Taylor’s ideas were followed by military standards, which later became the foundation for the international system ISO 9000 of quality management system. The second school is the Continuous Improvement School of Thought, which focuses on variation and improvements, and may be seen as related to Quality Control and Total Quality Management. This part of Quality Management is built upon ideas by Walter A. Shewhart; see Shewhart (1931, 1939).

Another common description of the development consists of a single evolutionary path made up of the four consecutive phases Quality Inspection, Quality Control, Quality Assurance, and Total Quality Management. At the first phase, Quality Inspection, the focus was on the inspection of critical characteristics of finished products relative to requirements. That stage started in about 1910, when the Ford Motor Company started to employ teams of inspectors to test the T-model cars with the project standard; see Dahlggaard et al. (1998). In the second phase, Quality Control, characteristics of the production process were
inspected and compared to the inherent variation of the process. The main idea was to try to identify problems earlier and control the manufacturing process, instead of just rejecting or repairing afterwards. At this second phase the responsibility for quality was often located in the manufacturing and engineering departments.

Quality Assurance considers the whole production chain, from design to market. Moreover the contribution of all functional departments is believed to prevent failures. Even though this phase is related to routines, responsibilities, and use of standards such as ISO 9000, top management was only involved in quality work to a limited degree. This stage implies a change from detection to prevention, according to Dahlgaard et al. (1998). Indeed, at the fourth phase, Total Quality Management, everyone in the organisation is responsible for quality and fulfilling customer needs. This covers understanding and implementation of quality management principles and concepts in every aspect of business and has a clear systems approach. Accordingly, the fourth stage is also concerned with Quality Inspection, Quality Control and Quality Assurance. In addition committed leadership from the top management is emphasized; see Bergman & Klefsjö (2003); Dale (1999).

In the 21st century some authors further discussed a plausible next step of the evolution of quality management related to an enlarged view of customers; see Bergqvist et al. (2006); Foley (2005); Foster & Jonker (2003). Edgeman & Hensler (2005) and Garvare & Isaksson (2005) believe that by enlarging the view of customers, extensive parts of quality management theory should be relevant for sustainability management. Foley (2005) even talks about this stakeholder orientation that enlarges the customer focus, as turning quality management into a theory of management.

2.4.2 Definition of Total Quality Management
Oakland (1993) explains Total Quality Management (TQM) as an approach for improving competitiveness, effectiveness and flexibility of a whole organization. He argues that it is a way of planning, organizing and understanding the activities of an organization and that it depends on each individual at each level. He states that “Total Quality Management
is far more than shifting responsibility of detection of problems from the customer to the producer.”

Many different definitions and descriptions of Total Quality Management, TQM, have been presented over the years; for a discussion, see Bergquist et al. (2006). For instance, Dale (1999) defines TQM as “a management approach of an organisation, centred on quality, based on the participation of all its members and aiming at long-term success through customer satisfaction, and benefits to all members of the organisation and to society”. Dahlgård et al. (1998) describe TQM as “a corporate culture that is characterized by increasing customer satisfaction through continuous improvements involving all employees in the organisation”.

The concept of TQM is often described as being based on a number of core values, where the concept of value has several interpretations; see Schein (1985). In relation to TQM core values are often described as “guiding principles and/or behaviours that embody how your organisation and its people are expected to operate”; see NIST (2003).

In recent decades, some definitions with a system emphasis have been suggested; see, for instance, Shiba et al. (1993) and Hellsten & Klefsjö (2000). Hellsten & Klefsjö (2000) view TQM as “a continuously evolving management system consisting of values, methodologies and tools, the aim of which is to increase external and internal customer satisfaction with a reduced amount of resources”; see Figure 2.2. They further argue that to achieve and maintain the culture, the values must persistently be supported by suitable methodologies and tools. Methodologies are here interpreted as ways to work consisting of a sequence of activities and tools are more concrete “support”, for instance, computer software or diagrams. Indeed, Bergman & Klefsjö (2003) emphasize the importance of looking upon the management system as an open system, interacting with and being influenced by the surrounding world. Consequently, the meanings of the values will, for instance, change somewhat over time.
2.4.3 The core values of TQM

According to Hellsten & Klefsjö (2000), the core values constitute a foundation for the culture of the organisation and also the basis of goals set by the organisation. The naming, formulation, and number of values seem to differ somewhat between different authors. However, many authors express values that may be summarised as the values presented in Figure 2.2; see, for instance, Oakland (1993); Shiba et al. (1993); Tenner & DeToro (1992); Dahlgaard et al. (1994). According to Hellsten (1997), these values are frequently mentioned in the literature describing Quality Management. This view is also confirmed by Sila & Ebrahimpour (2002), who summarised, after analysing 347 survey articles published between 1989 and 2000, the most frequently covered TQM factors\(^7\) in the literature.

The top management commitment is an overarching condition for focus on processes, base decisions on facts, continuous improvement, and letting everybody be committed. Focus on customers is a basic core value, which is based on and should be supported by the other four core values that work as a system; see Bergman & Klefsjö (2003).

---

\(^7\) With the terminology from Sila & Ebrahimpour (2002).
- Theoretical frame of reference -

**Focus on customers**

Deming (1986) states that the customer’s judgement of a product or service is the base for estimating the quality. Therefore, it is important to focus on the customers’ experiences of what the organization has delivered and investigate their present and future needs to fulfil, and favourably exceed their expectations; see also Bergman & Klefsjö (2003).

The concept of customer includes traditional external customers like consumers, buyers, as well as other people, organizations, shareholders and parts of the surrounding society, who benefit from and have interests in the organization. Moreover, internal customers, i.e. those who work within the organization, are in this thesis, as well as generally, included in the concept.

**Focus on processes**

A process may be defined in different ways in different organizations. For instance, a process may be described as a chain of activities that transforms inputs to outputs or as an iterative chain of activities that produces value for customers; see Ljungberg & Larsson (2001).

Deming (1986) argued that the focus of top management should be on processes, not single pieces of the outcome. With a focus on processes it becomes clearer how different co-workers contribute to the end result. Other advantages with a focus on processes are considered to be increased work satisfaction, reduced costs, less divergence between functions within the organization as well as reduction of unnecessary activities; see Bergman & Klefsjö (2003).

**Base decisions on fact**

In quality management it is considered important to base decisions on fact instead of letting random factors have influence; see Bergman & Klefsjö (2003). Deming (1994) emphasizes the use of simple statistical tools for gathering, structuring and analyzing numerical data in order to ensure stable processes. Indeed, both quantitative and qualitative data regarding factors such as operating measurements, employee satisfaction and product development should be gathered; see Bergman & Klefsjö (2003). To structure and analyze numerical and verbal data, use of tools
like the Seven Quality Control Tools and the Seven Management Tools are advocated; see, for instance, Mizuno (1988); Ishikawa (1985).

**Improve continuously**
In 1986 Deming stated, in one of his 14 points of management, the importance of constant improvements to enhance quality and productivity and accordingly decrease costs. In addition, he emphasized the use of the Deming cycle\(^8\) to improve systematically through four stages; Plan, Do, Study, Act (PDSA).

Today, systematic improvement work is practiced in many organizations. There are several reasons for the importance and accordingly increasing interest. One is that pace of change in society generally has increased. New technology as well as increased internationalization are also mentioned as reasons; see Sörqvist (2004). Moreover, continuous improvement is essential due to the increasing and changing customer demands; see Sörqvist (2004); Bergman & Klefsjö (2003).

**Let everybody be committed**
An important means of quality improvement is to enable co-workers to participate in the work; see Bergman & Klefsjö (2003). By inviting employees to actively participate in decisions and activities, motivation and work satisfaction can be created. The advantages of involvement is also understood to be higher quality, less absenteeism, lower turnover, better decision making and better problem solving, which in turn result in better organizational effectiveness and competitiveness; see Juhl et al. (1997). Moreover, if people are given responsibilities and authorities they are likely to have increased confidence in top management; see Kotter (1996).


\(^8\) Although Deming used the name “Shewhart cycle” to honour Walter Shewhart from whom he got the inspiration.
is achieved through methodologies based on communication, delegation and training; see Bergman & Klefsjö (2003).

**Top management commitment**
According to Kanji & Moura (2001), leadership plays the prime role for creation of excellence in an organization and it converges from the core values of the organization. According to Foster (2001), leadership, not least top management commitment to quality is vital to create a quality mindset within an organization. Dale (1999) similarly argues that top management has the responsibility for creating the organizational environment, values and behaviours that provide for successful quality work within TQM. He emphasizes that top management’s attitude is vital for its importance as role model. Moreover, the top management has the authority to give financial and moral support.

**2.4.4 Methodologies and tools**
Another element of the TQM system is the set of methodologies, which are needed to support the core values of the organisation and integrate them into the organizational culture; see Bergman & Klefsjö (2003); Hellsten & Klefsjö (2000). ‘Methodology’ is the established English term, in TQM literature for an organization’s approach, way of working or work procedure. In this thesis methodologies are defined as ways of working, which consist of sequences of activities. This definition further implies that a methodology is not necessarily related to a TQM system but may also be a way of working to create sustainable health.

Methodologies may also differ between organizations and from time to time. According to Bergman & Klefsjö (2003) these variations should even be utilized to adapt the use of methodologies to support specific values. Some examples of methodologies are Six Sigma, Competence development and Benchmarking; see Figure 2.2.

The third element in the management system consists of tools such as tree diagrams, process maps and the House of Quality; see Bergman & Klefsjö (2003); Hellsten & Klefsjö (2000). The tools are needed to
- Theoretical frame of reference -

structure and facilitate the activities within the methodologies and make them effective – you cannot do good wood-work without a hammer.

Similar to methodologies, tools may differ between organizations and from time to time and should not necessarily be related only to the TQM system. A tool is further different from methodologies in the sense that it is a concrete aid, for instance, a diagram, computer software, routine or a matrix. However, the line between what is to be considered a methodology versus a tool is not always obvious.

According to Bergman & Klefsjö (2003), there are many different methodologies and tools, in addition to the ones exemplified in Figure 2.2, that may be used to support a specific value. They also emphasize use of several methodologies, and thereby tools, to support each core value.
3 METHODOLOGY

This chapter describes the research process within which the purpose, research questions and theoretical frame of reference were created. The research approach and the selection of methodologies are also discussed, as well as the accomplishment of the research. Finally, issues regarding validity and reliability are presented.

3.1 Introduction

All research is consciously or unconsciously conducted on a basis of pre-understanding of paradigms and theoretical conceptions concerning what is important, interesting and relevant; see Bjereld et al. (1999). According to Denzin & Lincoln (2000), the different paradigms of research and theoretical perspectives on research that the researcher believes in influence how the researcher looks at the world and acts in it.

Certainly, my beliefs, pre-understanding and experiences have influenced this thesis and the research conducted. My background is in the natural sciences, where perspectives tend to be positivistic. However, my interest in technology, and not least in people, made me move to Luleå in 1997 for my M.Sc. studies in Industrial Production Environment at the Department of Human Work Sciences at Luleå University of Technology. My belief that we are good, creative and responsible and, with the right prerequisites, want to be active, learn, contribute and develop made me interested in learning more about how technology can be adapted to the needs of people.

During my first years I was also primarily studying how to design industrial work environments, which are adapted to human conditions and needs. Nevertheless, during 1999 and 2000 I worked as a trainee in a large Swedish energy company and was mainly involved in the quality work. After that, my wonder and interest in the role of work environments and work satisfaction in quality management tempted me to take my first, but not last, course on quality technology and
management at the Department of Business Administration and Social Sciences.

During the last years of my M.Sc. studies I had a focus on what could be more seen as social sciences; quality technology and management on the one hand and on the other hand on psychosocial issues in the work environment, for instance, stress prevention, leadership and personal development. Moreover, despite education at two different departments, my growing interest was in the commonalities between quality management and occupational health and safety management.

In 2004, after I had finished my Master’s thesis I got the opportunity to be involved in a research school about lifestyle, health and technology and as a PhD student in a research project about management for co-worker commitment and sustainable health at the Division of Quality and Environmental Management at Luleå University of Technology. It is there my research presented in this thesis had its starting-point.

Several researchers advocate that the pre-understandings of the researcher and also the way the research is conducted should be meticulously described and documented to increase the trustworthiness; see, for instance, Yin (1994). Therefore, my intention with the rest of this chapter is to describe the choices I have made and the steps I have taken when conducting the research.

3.2 The research process

I began my research for this thesis in late spring 2004. At that time the focus was on reading literature to develop my theoretical understanding within subjects that I found relevant. At the same time I also started the process of deciding upon my research approach, formulating the purpose and my research questions; see Figure 3.1. Based on that, I further chose two strategies, case study and literature study, for finding out the answers and fulfilling the purpose. The particular studies, related to these strategies are described in more detail in Sections 3.7 and 3.8, respectively. Both studies were performed in a way similar to the
Deming cycle: Plan-Do-Study-Act, between the autumn 2004 and spring 2006. During that time, the results of the studies were reported in the three papers appended to this thesis. The results of the research process as a whole are rendered in this thesis.

**Figure 3.1**  The research process, including a literature study and a case study, that have resulted in the three papers and the content of this thesis.

### 3.3 Literature review

The role of reviewing literature related to theory in order to specify the theoretical propositions, prior to the design of the study and data collection is advocated by, for instance, Dane (1999); Yin (1994); Merriam (1988). Yin (1994) argues that it is sufficient to create a blueprint for the study and that the review functions as guidance in determining what data to collect and the criteria for analysis as well as for the analytic generalization.

The literature review initially served as a foundation for the research. The theories considered are mainly presented in Chapter 1 and in more
- Methodology -

detail in Chapter 2. These theories were also combined with theories about research methodology when designing and planning the studies.

Even though the focus on search for literature and reading was during 2004 and 2005 additional literature studies have been performed during the whole research process. One example is the literature study that intentionally acted as complement to the case study; see Section 3.7 and Paper III.

The literature was searched for by different combinations of key-words such as management, leadership, employee involvement, co-worker commitment, health and sustainability. The reading of these topics also brought up new combinations including communication, culture, coaching, partnership and motivation.

Indeed, my choices of authors and subjects have affected the study and other authors, as well as topics, might have been studied. I have, for instance, chosen to not include many discussions in literature about the historical development of work environmental issues as well as perspectives on theories about management research. Moreover, the topics and literature of interest have developed the last few years and affected the Theoretical Frame of Reference presented in Chapter 2.

3.4 Research purpose

According to Zikmund (2000), research may be classified based on its purpose. Three main purposes are to explore, describe or explain a phenomenon; see, for instance, Zikmund (2000); Marshall & Rossman (1999); Wallén (1993).

Zikmund (2000) argues that exploratory studies are performed to clarify the nature of vague problems while descriptive studies are based on some previous understanding about the research problem and try to describe certain characteristics of a phenomenon. Furthermore, Marshall & Rossman (1999) state that exploratory and descriptive studies aim to create descriptions of complex and unexplored situations whereas
explanative studies aim to show relationships between events and the meanings of these events.

My purpose of the research presented in this thesis is to contribute to the creation of good work environments and employee health. The focus is on larger organizations and on taking advantage of the experiences of successful organizations in order to inspire and support the work of managers in other organizations. To achieve this, I want to explore and describe a phenomenon of how sustainable health is created in successful organizations, which is rarely described in the literature. Because, while both management and ways to achieve organizational success are commonly described in literature, the focus on implications due to specific characteristics of large organizations and sustainable health is limited. Therefore, the purpose of this research is both explorative and descriptive.

3.5 Research approach and design selections

Deciding upon the research approach is primarily about determining how to systematically approach a problem; see Merriam (1988). There are different approaches available and these are often closely related to each other. According to Yin (1994) and Merriam (1988), the choice of research approach is dependent on the particular problem, the research purpose and the questions the problem generates.

3.5.1 Hermeneutics and Positivism

Two prevailing research approaches, which are founded on two different views of people and society and also differ in methodological issues, are hermeneutics and positivism. Hermeneutics is about interpretation and tries to attain interpretative understanding of phenomenon. It can also be seen as a general doctrine about communication and understanding; see Wallén (1993). Moreover, Molander (1993) argues that hermeneutics puts a person’s own interpretation and their perception of reality in focus, and thereby recognise the person as a part of the understanding and explanation of the phenomenon. Positivism, on the other hand, strives to explain a phenomenon objectively by causal relationships between
dependent and independent variables; see Denzin & Lincoln (2000); Andersson (1979). Positivism is based on experimentation, logical reasoning and formulating laws; see Wiedersheim-Paul & Eriksson (1992); Andersson (1979).

3.5.2 Induction, Deduction or Abduction
The choice of research approach is also influenced by the understanding of the relations between theory and empirical data; see Wallén (1993). Induction and deduction are here two main research approaches. Induction is a generation of general conclusions from a specific case; see Molander (1988). It means going from empirical findings to theoretical explanations. Dane (1990) describes inductive reasoning as “a process of generalization; it involves applying specific information to a general situation or future events”. However, a weakness is that induction is limited to the fact that a general rule is developed from a limited number of observations; see Molander (1988).

According to Wiedersheim-Paul & Eriksson (1992), deduction means, on the other hand, that “from theory we form hypotheses, which are testable statements about reality. Through logical conclusions we derive results”; see Figure 3.2. Accordingly, in deduction theory has a more obvious role than in induction. However, it also means that the approach sets the rule instead of explaining it; see Molander (1988).

![Figure 3.2](image-url)  
*Figure 3.2  The logic of inductive and deductive reasoning. (Source: Wiedersheim-Paul & Eriksson, 1992)*
According to Alvesson & Sköldberg (1994), abduction is used in many case studies. Abduction starts off from empirical facts, just like induction, but does not dismiss a theory. In this way, it may be understood as a combination of induction and deduction that goes from understanding of the empirical data, to understanding based on theoretical data and back to understanding of the empirical base; see Alvesson & Sköldberg (1994).

3.5.3 Quantitative and Qualitative approaches
Another relevant question when choosing research approach is whether the approach should be qualitative or quantitative. In quantitative research one is interested in measurement and analysis and identification of relationships between variables; see Denzin & Lincoln (1994). Qualitative research, in contrast, is conducted with an interest in the meaning and understanding of processes and objects; see Denzin & Lincoln (1994); Merriam (1988). Pictures and words are often more useful, and therefore more common than the use of numbers to describe findings from a study of a certain phenomenon. Therefore, the qualitative research may be seen as descriptive and holistic; see Taylor & Bogdan (1984).

The choice between qualitative and quantitative methodologies should be based on the information wanted as well as the problem formulation. However, the two approaches have different strengths and weaknesses and are also combined in many research studies; see Miles & Huberman (1994); Holme & Solvang (1991). According to Miles & Huberman (1994), a qualitative approach is useful for exploring, describing and explaining phenomenon by answering questions such as “how are….described?” and “what characterizes….?”. In such studies the aim is more to increase the understanding of a defined phenomenon, whereas quantitative studies in general tend to be wider and include numerous units, which can make statistical generalization possible.

3.5.4 Choice of research approach
Even though I have my background in the natural sciences I deal with research about social sciences when studying the work of successful organizations. Consequently, the research is founded on my positivistic
view, but is probably also influenced by hermeneutics in the sense that I try to understand and describe the work of managers.

My choice was to deal with exploratory aspects to get a basic understanding of a phenomenon, but the focus was on descriptive aspects. Since my purpose was largely to increase the understanding of how sustainable health is created in successful organizations I further chose an inductive approach for my first research question and an abductive approach, based on empirical data, for the second question.

### 3.6 Research strategy

Based on my research purpose and approach selection, I continued to sort out different research strategies for how the research should be carried out. Research strategies represent different logical ways of collecting and analysing empirical evidence. In social sciences these can be related to five different strategies; see Table 3.1. These have distinctive characteristics, but can indeed be used for descriptive, explanatory as well as explorative research purposes. To differentiate the strategies there are three important conditions to consider; see Yin (1994)

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Type of question</th>
<th>Requires control over behavioural events?</th>
<th>Focus of occurrence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experiment</td>
<td>How / Why</td>
<td>Yes</td>
<td>Contemporary</td>
</tr>
<tr>
<td>Survey</td>
<td>Who / What / Where / How many / How much</td>
<td>No</td>
<td>Contemporary</td>
</tr>
<tr>
<td>Archival analysis</td>
<td>Who / What / Where / How many / How much</td>
<td>No</td>
<td>Contemporary / Past</td>
</tr>
<tr>
<td>History</td>
<td>How / Why</td>
<td>No</td>
<td>Past</td>
</tr>
<tr>
<td>Case study</td>
<td>How / Why</td>
<td>No</td>
<td>Contemporary</td>
</tr>
</tbody>
</table>

For example, Yin (1994) avows that questions in terms of “why” and “how” are more explanatory and likely to lead to use of the three strategies case study, history or experiment. Questions of “what”, “who” and “where” are instead likely to favour survey strategies or analysis of archival records.
3.6.1 Choice of research strategies

The purpose of the thesis is focused on larger organizations and on taking note of the experiences of successful organizations. However, to increase understanding of the creation of sustainable health in large organizations, as well as presumed differences to smaller organizations, my intention was also to examine successful organizations of different size.

Literature study

Prior to the start of my research I knew about a study carried out with the purpose of describing how successful smaller organizations in Sweden had worked to achieve sustainable health among their co-workers. I was also aware of the methodologies that had been used to conduct that study. Moreover, I had the opportunity to work at the same division as Roland Harnesk and Karin Schöen, members of the research team that studied the organizations.

With this background, a literature study based on that study was chosen as one strategy for answering my research questions. The main purpose of the literature study was to explore methodologies for achieving sustainable health within successful smaller organizations and also to provide a reference to compare the work of large organizations to.

Case study

Considering my first research question, aiming at investigating contemporary procedures within successful organizations to find out about their methodologies, a case study was considered a suitable choice. One reason for that was that I would have no possibility to control the behaviour of events within a successful organization. Moreover, case studies are characterized by their focus on the recognizable facts, descriptions that enhance the understanding of the reader and inductive approaches; see Yin (1994); Merriam (1988). Merriam (1988) also relates case studies to intensive and comprehensive descriptions and analysis of a single unit or phenomenon. Another reason for my choice was that case studies are recommended in order to understand complex phenomena within a real-life context when the boundaries between the phenomena and the context are not evident; see Yin (1994).
Single-case or multiple-case study

A case study can further be designed as a single-case or a multiple-case study with holistic or embedded units of analysis. A multiple-case study, i.e. a study of more than one case, should be considered when different experiments are needed for comparisons. Contrarily, a single-case design is useful when the case represents an extreme or unique case or when the case is revelatory. The difference between the two situations is revealed by the different rationales underlying the replication (experiment) as opposed to sampling (survey) logic. To decide between holistic and embedded design is further a question depending on whether the study examines subunits or not. (Yin, 1994)

Based on the assumptions that large organizations tend to be complex and have many organizational levels as well as managers and employees, a single-case study with embedded units of analysis was chosen as the central strategy for answering my research questions. I choose to focus on one organization to provide for a deeper study and understanding of a particular case. Moreover, I decided to consider individual managers and groups of co-workers on different organizational levels as different subunits of analysis.

In addition, I chose a literature study to provide comparisons of large and smaller organizations. The intention with the strategies was to capture the view of managers and co-workers, by using several methods of data collection.

Alternative choices

An alternative strategy could have been a multiple-case study of different organizations. Indeed, the focus was on large organizations and I was aware of the results of the study of Harnesk et al. (2004). Moreover, literature studies are argued to aid the answering of explorative research questions; see Yin (1994). He further describes literature studies as a form of archival study.

In order to answer the second research question a literature study, solely, could have been chosen. However, the phenomenon was found to be rarely described in the literature; see Chapter 2.
3.6.2 Choice of case organization
The case study organization, the Swedish bank FöreningsSparbanken (FSB), was chosen based on its recognition as a large, successful organization and being receiver of the award, “Sweden’s best workplace”, in 2003. More information about the case organization is given in Appendix I.

In this thesis, the award “Sweden’s best workplace”\(^9\) was used as a reference for identifying the large organization and judging that it had managed to break the trend towards rising sickness absence, nurtured co-worker involvement and simultaneously achieved financial results. Moreover, it provided for comparisons with the receivers of the award in 2001 and 2002, which are smaller organizations that were studied by Harnesk et al. (2004).

3.7 The literature study

To explore the work of successful smaller organizations a literature study strategy was chosen. The work was mainly performed in the summer of 2004 and spring of 2006; see Figure 3.1. During the planning phase and initial data collection period, the study was planned and literature searched for and reviewed. Moreover, a research report and a draft to their paper were reviewed; see Bäckström et al. (2004) and Harnesk et al. (2004).

The second part of the data collection and the analysis were then performed in March and April 2006, with a focus on the empirical data and findings presented in the research report and paper. The focus was then on methodologies and other factors expressed by the leaders and co-workers as important to their organization’s success and the conclusions drawn. Within the material key words were highlighted and

---

\(^9\) The award is a national award that is instituted by the Swedish insurance company Alecta. The award considers leadership, work environment, participation and interaction, long term planning, preventive work and profitability. Each year one or several organizations may be awarded in an evaluation process similar to that of quality and business excellence awards, such as the European Quality Award; see EFQM (2005).
- Methodology -
	hen sorted into categories of key words\textsuperscript{10}, which I considered related. The reason for searching key words and creating categories out of their empirical descriptions was to get a deeper understanding of the findings and provide a more critical approach to the literature. Last, the findings of Harnesk et al. (2004) were thoroughly considered. Moreover, I compared my categories to their findings and conclusions of the case study.

3.8 The case study

The case study was performed in a way similar to the Deming cycle: Plan-Do-Study-Act, between autumn 2004 and spring 2006; see Figure 3.3. The planning and data collection phases as well as parts of the analysis phase were conducted in a team with Ingela Bäckström and Pernilla Ingelsson, postgraduate students at Mid-Sweden University. Bäckström was also a member of the research team that earlier studied the work of successful smaller organizations.

\textsuperscript{10} In this analysis categories were identified from the described view of the managers and out of the descriptions of opinions expressed by the co-workers. Key words relating to categories of ‘Management’, ‘Communication’ and ‘Competence development’ were highlighted from both managers and co-workers. In addition, categories of ‘Co-worker participation’, ‘Focus on customers and society’ and ‘Health promotion’ were derived from the information about the view of the managers. Instead, key words relating to categories of ‘Improvement’, ‘Work satisfaction’ and ‘The work’ were highlighted within the information given about the opinions of the co-workers.
Figure 3.3 The case study was performed in four consecutive phases. Later, the conclusions of the study were also to be compared to the conclusions of the literature study.

3.8.1 Planning

The planning of the study focused on selection of representatives within the bank and data collection as well as analysis methods. Moreover, meetings were held with the manager of the health project and two local bank managers in order to build relations, get an overview of the organization and sample bank units, managers and co-workers.

Sampling representatives of the bank

FöreningsSparbanken is a large, nationwide organization; see details in Appendix I. One important dilemma to solve initially was how to decide on a sample that accounted for the different management levels of the organizational structure, the geographical dispersion of the organization and also the wide variation in distance between different units and the head office. Since the focus was on a defined case and statistical generalizing was of no interest, non-probability sampling was used to select appropriate managers and co-workers within the bank. The choice of sampling adapted to the purpose of exploring and increasing the
understanding before probability sampling in qualitative research is further supported by, for instance, Merriam (1988).

In August 2004, the research team first got in contact with the project manager of the bank’s company-wide health project, which had been carried out between 2002 and 2004. In cooperation with her, we decided to focus on the ‘Bank branches’, one of the bank’s five business areas. This choice was made because of the clear organizational structure of this unit. Furthermore, it is represented all over Sweden. Subunits and respondents were then chosen from three management levels that would cover the hierarchy from top managers to the bank offices; see Figure 3.4.

![Figure 3.4](image)

**Figure 3.4** The selection of representatives resulted in a sample of six managers from three different management levels (the square) and two diverging local banks. From all the offices, within each of the two local banks, one office was chosen and thereafter its manager and a sample of co-workers were decided upon. The figure also shows that the office managers represent the lowest management level of the business area and thereby work closest to the employees.

The HR Manager (who is also the executive vice president), was chosen to represent the board of directors, executive managers. To cover the rest of the management structure within the Bank branches two ‘local units’ were chosen with support from the project manager. These units, called local bank A and local bank B in this thesis, are located in different parts of Sweden and were chosen because they represent the geographical
dispersion of the bank. Thereafter, two offices were randomly selected from each of the local units A and B. From these offices, Office α and Office β, co-workers were sampled by the office managers. The selection of management representatives is described in more detail in appended Paper I whereas the selection of employees is outlined in Paper II.

The population was limited to provide deeper studies of managers’ and co-workers’ opinions and experiences within the organization since we believed that the success of FSB could be presumed to be a result of teamwork between managers and co-workers. This choice is further supported by, for instance, Miles & Huberman (1994), who state that a key feature of qualitative sampling is the work with a deeper study of a small sample of people in their natural context. The choice of two respondents, or groups of respondents, per organizational level was made to provide comparison between different bank units. Moreover, three management levels were chosen to take in managers on executive as well as middle and lower organizational levels.

*Planning for data collection and analysis*

As mentioned earlier, the success of the organization could be presumed to be a result of teamwork between managers and co-workers. Furthermore, the success factors were possibly parts of the day-to-day work and complex to identify. Therefore, the intention of the research team was to gather information and identify successful methodologies in cooperation with managers and employees and complement the information with document studies. The key question was then how we could do this in a proper way and also facilitate a future comparison to the study of smaller organizations.

Indeed, a characteristic of case studies is that they can rely on many sources of evidence; see Yin (1994); Merriam (1988). Yin (1994), for instance, discusses six main sources of evidence to apply in a case study. These sources of evidence are documentation, archival records, interviews, direct observations, participant-observations, and physical artefacts; see Table 3.2.
Considering the population and research purpose, interviews were chosen as one source of evidence in this case study. Yin (1994) also states that using interviews is one of the most important sources of case study evidence. However, the reason for choosing interviews was to try to get considerable information about and insight into the six managers’, earlier and present, intentions, opinions and work. Interviews had also been used to study managers of the two smaller organizations; see Harnesk et al. (2004).

Table 3.2  A comparison of strengths and weaknesses of six sources of evidence that may be useful when conducting case studies (Source; Yin, 1994)

<table>
<thead>
<tr>
<th>SOURCE OF EVIDENCE</th>
<th>STRENGTHS</th>
<th>WEAKNESSES</th>
</tr>
</thead>
</table>
| Documentation     | -Stable – can be reviewed repeatedly  
                   -Unobtrusive – not created as a result of the case study  
                   -Exact – contains exact names, references, and details of an event  
                   -Broad coverage – long span of time, many events, and many settings | -Retrievability – can be low  
                   -Biased selectivity, if collection is incomplete  
                   -Reporting bias – reflects (unknown) bias of author  
                   -Access may be deliberately blocked |
| Archival Records  | *(Same as above for documentation)*  
                   -Precise and quantitative | *(Same as above for documentation)*  
                   -Accessibility due to privacy reasons |
| Interviews        | -Targeted – focuses directly on case study topic  
                   -Insightful – provides perceived casual inferences | -Bias due to poorly constructed questions  
                   -Response bias  
                   -Inaccuracies due to poor recall  
                   -Reflexivity – interviewee gives what interviewer wants to hear |
| Direct Observations | -Reality – covers events in real time  
                          -Contextual – covers contexts of events | -Time consuming  
                   -Selectivity – event may proceed differently because it is being observed  
                   -Cost – hours needed by human observers |
| Participant Observation | *(Same as above for direct observations)*  
                           -Insightful into interpersonal behavior and motives | *(Same as above for direct observations)*  
                           -Bias due to investigator’s manipulation of events |
| Physical Artifacts | -Insightful into cultural features  
                        -Insightful into technical operations | -Selectivity  
                           -Availability |
The planning of the interviews, except for relation building, further included preparation of two slightly different questionnaires with regard to the different management levels; see Appendix II and Appendix III. These questionnaires were designed in a chronological order that would facilitate a natural conversation about management, leadership and business development. However, the interviews and the questions were planned for open-ended interviews, with a certain set of questions but without stress on the set order of the questions. Such semi-structured interviews are not aimed at forcing the respondent in any direction, but to capture the person’s view; see Patton (1980).

Both question forms were constructed before any data collection was made. However, the research team decided not to send the forms to the respondents beforehand to avoid prepared answers and lack of spontaneity. The questions were however tested in a pilot study in the Swedish bank Nordea, and since the interview worked out as planned no adjustments were made to the questionnaires.

To explore the opinions of employees, workshops and tree diagrams were selected to aid the data collection. The idea was to perform a workshop session similar to focus groups; see Wibeck (2000). Therefore, the questions were also planned to trigger discussions and answers in a process similar to the “five-why”-methodology, introduced at Toyota to reach basic reasons; see Toyota Motor Corporation (2003).

According to Mizuno (1988), the tree diagram tool is useful for structuring large amounts of qualitative information. In this case it was also chosen on the assumption that an interactive process based on individual answers and followed by a consensus discussion would give answers that could not come out of several individual interviews. Furthermore, tree diagrams were used in the studies of smaller organizations and proven to inspire creativity and be successful in helping structure qualitative information from a complex situation; see Harnesk et al. (2004). The method was first tested by the research team in a bank office not included in the study.
3.8.2 Data collection
As a result of the choices made in the planning phase, the data collection was accomplished mainly through interviews, workshops and document studies. Initially, an interview was held with the manager of the health project in order to get a sense of the health status and work in the organization. The order, in which the remaining interviews and workshops were performed, was partly adjusted due to planning and convenience reasons. The intention was to concentrate on one local bank at a time, first managers and co-workers within Local bank A and then the representatives of Local bank B, to avoid mixing up answers and impressions. Finally, the interview with the HR manager was held.

**Interviews with managers**
In total, six interviews, of approximately one to one and a half hours each, were held with the managers at their respective places of work. In order to facilitate the conversation and eliminate effects of different emphasis in the questions due to different persons, the same interviewer asked the questions in all interviews. The question forms were used as guides for the interviews but the orders of the questions were adjusted to create natural conversations.

At least one other member of the research team was present during all interviews (except for the last one) to facilitate, intervene to ask complementary questions, and take notes. The interviews were performed from October to December 2004 and five of them were recorded\[11.\] After transcription the respondents were asked to comment on their answers in order to eliminate misunderstandings. The results of the interviews are presented in more detail in Paper I.

**Workshops with co-workers**
The two workshop sessions were held between October and December 2004 and lasted for approximately four hours each. The workshop at Office α, was held the same day as the interview with the Office manager had taken place. In this workshop five female co-workers took

\[11.\] The interview with Office manager α, was not recorded due to problems with the technical equipment. Instead the research teams took notes during the interview and recapitulate the notes in a discussion immediately thereafter.
part. They represented a mixture of ages, defined working roles and periods of employment in the bank. At Office β four persons of varying ages, gender and roles participated in the workshop, which was held a couple of weeks after the interview with Office manager β.

Each session was opened by an informal information and presentation of all participants, to build a relation between the members of the research team and the co-workers. The co-workers were also asked about their opinions about the award and being named “Sweden’s best workplace”.

The intention of the workshops was mainly to identify successful methodologies. To fulfil the purpose, the discussions at both Office α and Office β were initiated by the question “What makes FSB to one of Sweden’s best workplaces?” The groups were then guided to discuss and answer successive questions, on two more levels to identify methodologies. This was done in brainstorming and consensus processes using tree diagrams to organize and scrutinize the answers.

Suggested procedures for using tree diagrams were followed; see Klefsjö et al. (1999); Mizuno (1988). One tree diagram was established during each workshop. Both workshops were guided by the same member from the research team. This coordinator asked the questions, followed up the answers and, when needed, acted as a facilitator during the discussions. In addition, at least one more member of the research team participated as an observer and, when needed, assisted the group by writing the submissions on post-it notes. Each workshop lasted for approximately four hours and afterwards the tree diagrams were documented by the research team and verified by the participants; see Figure 3.5. The workshops and how the tree diagrams were created are described in more detail in Paper II.
Figure 3.5 The tree diagrams were created in discussions and consensus processes using three consecutive questions. The figure shows an example of how suggestions were given and explored in several steps through the questions. The example is a part of the tree diagram created at Office α. The complete tree diagrams are presented in Bäckström et al. (2005).

Document studies and observations
In the case study, data was also collected through documents and observations. According to Yin (1994), information found in documents is likely to be relevant for nearly every case study topic, especially for confirming and supplementing evidence from other sources. However, care must be taken in the interpretation of documents, since they are often aimed at another audience than that of the case study. However, a strength with documentation as a source of evidence is that it is stable and therefore may be reviewed repeatedly; see Table 3.2. According to Yin (1994), documentation is also unobtrusive because it has not been created as a result of the case study.
Until the interviews and tree diagrams were finished we avoided, to a large extent, reading facts about FSB. The reason for this was a wish to affect the information given by respondents as little as possible with our own opinions about the bank. However, some information given on the bank’s homepage as well as articles and documents, regarding for instance organizational structure, were considered at an early stage in order to get an overview of the organization and to plan the interviews and workshops.

During visits, interviews and workshops, observations were also made by the research team, since they were impossible to avoid. However, the observations were never planned or fully documented but after each visit, impressions were discussed within the research team and notes of these reflections written down.

After the interviews and workshops, deeper document studies were also conducted to enhance our understanding. All data collected by use of the different methods were then used as a base for the analysis that followed.

3.8.3 Analysis and conclusions
Yin (1994) argues that there are two general strategies for the analysis of collected case study data; to rely on theoretical propositions and to develop a descriptive framework for organizing the case study. Theoretical propositions direct attention to something that should be examined within the scope of the study. However, when theoretical propositions are absent a case description may be an alternative strategy; see Yin (1994).

Merriam (1988) argues that data collection and analysis are performed simultaneously. She further describes analysis as a process aimed at creating value out of the information and claims that several levels of analysis are possible in a case study. What level to strive for depends on the expected result. Miles & Huberman (1994), similarly, describe the analysis of qualitative data as an interactive process consisting of three activities: data reduction, data display, and conclusion drawing; see Figure 3.6.
When conducting the analysis, analytic techniques may be used as part of the general strategy. Initially, to arrange the findings of the case study and reduce the information, some of the Seven Management Tools may be appropriate; see Mizuno (1988). One of these tools is the tree diagram, which was used to collect and reduce data during the workshops. Another tool is the affinity diagram, which may be used to structure large amounts into groups of related categories to describe, for instance, a problem or causes to a phenomenon; see Klefsjö et al. (1999).

Miles & Huberman (1994) and Merriam (1988) also suggest techniques of structuring the information thematically, in chronological order or according to trends, at an early stage of the analysis process and display the result descriptively.

To get higher than a descriptive level, the researcher may categorise the data to serve interpretation. The creation of categories is based on finding themes, regularities and relations in the obtained information; see Merriam (1988). Moreover, Goetz & LeCompte (1984) suggest that this process should be based on convergence and divergence thinking. Convergence thinking means deciding what is connected to what, whereas divergence is about first naming the categories and then filling them with more information; see Merriam (1988); Goetz & LeCompte (1984). The categories may further be decided by the researcher or replicated. Indeed, the categories should not be the information but indicate and represent the content; see Merriam (1988). According to Miles & Huberman (1994) and Merriam (1988), a third level of analysis is about drawing conclusions and possibly development of theory.
In order to analyse the data from the case study I chose to rely on both theoretical propositions reflected in Chapter 1 and 2 and a case description.

The major proposition made in this thesis is that the ways managers work may affect the health of the co-workers. Moreover, organizational success and sustainable health among co-workers may be dependent on what is argued to be difficult to practise in larger organizations; cooperation between management and employees grounded in trust, commitment and involvement. This phenomenon further appears to be rarely described in theory whereby it seems apposite to also apply a case description. According to Yin (1994), a case description is intended to organise the findings of the case study, which is in line with the descriptive purpose of my research.

The analysis was performed with diverse techniques at different levels as advocated by Merriam (1988). Initially, the transcripts were examined individually in the project team, before the three members together examined the empirical data in two work-shops covering two days each. During these workshops, the central questions of interest were:

- How have managers at different organizational levels worked to achieve co-worker health?
- How have managers and employees within FSB worked to create a good workplace, according to the co-workers?

The first workshop was held in December 2004 to analyze the tree diagrams and transcripts from the interviews with the office managers. The aim was to scrutinize their opinions and how they work, before analyzing the intentions of leaders at higher levels. To start with, the empirical material of each interview and tree diagram was examined and discussed separately and success factors and methodologies identified from the material. After agreement these success factors and methodologies were written down on post-it notes, which were placed on a white-board. The second day a session with a facilitator was held and an affinity diagram was used to organize the large amount of qualitative information into related categories. The external facilitator
had no information about the bank, but helped the research team to control the steps and to keep as objective as possible when discussing. The tool was applied with the idea of achieving unanimous and deeper understandings of successful methodologies used by the leaders and help building explanations. This analysis and creation of affinity diagrams may be defined as development of categories as described by Merriam (1988) and Goetz & LeCompte (1984).

The four remaining interviews performed with local bank and executive managers were analysed in the same way as the interviews and tree-diagrams of the office level in a second work-shop. The activities performed to create each affinity diagram are described in more detail in Paper I and Paper II, whereas the complete diagrams are presented in Bäckström et al. (2005).

Except for this analysis, I also used the transcripts of each interview in combination with notes from the observations made to describe the core of the managers’ work; see Paper I. Later, both the tree diagrams, the results of the team’s analysis and my descriptions served as a foundation to compare the work of managers and co-worker groups within each organizational level and also to compare the different management levels as well as managers and co-workers. Finally, the results of this analysis were also compared to theory and conclusions made; see Figure 3.3. This last step may be defined as analysis on a higher level as described by Miles & Huberman (1994) and Merriam (1988).
3.9 Comparison of the case organization and smaller organizations

The comparison of large and smaller organizations was mainly made between the findings and conclusions of the case study in the bank versus the findings and conclusion made by Harnesk et al. (2004). Initially a model of identified methodologies presented by Harnesk et al. (2004) served as a foundation to identify similarities and differences regarding methodologies used in smaller organizations versus the large. Thereafter, the view of managers and co-workers, respectively, were compared between the bank and the smaller organizations. Moreover, the three organizations were put side by side and key words highlighted to contrast the core of their work; see Figure 3.7. Finally, the findings of the comparisons were also related to theory and the experiences taken from the studied organizations formulated in a tentative model aimed at managers of large organizations.

Figure 3.7 The findings and conclusions from the case study and literature study, respectively, were compared to identify similarities and differences regarding the work of organizations of different size.
3.10 Summary of methodological selections

This chapter has dealt with different research approaches as well as many strategies, data collection methods and analysis techniques. Therefore, the specific methodological choices I have made to conduct the research are summarized in Figure 3.8.

![Diagram showing the research process choices regarding research approach, strategy, data collection methods, and analysis techniques.]

Figure 3.8 During the research process choices regarding research approach, strategy, data collection methods and analysis techniques were made based on the purpose and research questions.
3.11 Validity and reliability

The concepts of ‘validity’ and ‘reliability’ are commonly used to discuss the quality and credibility of research; see, for instance, Martella et al. (1999); Yin (1994); Wiedersheim-Paul & Eriksson (1992). According to Martella et al. (1999), validity deals with the question as to whether the measurement device indicates what it aims to measure. Reliability, on the other hand, focuses on whether the measurement produces consistent results across observations to provide the researcher with a way of assessing the trustworthiness of the findings. Yin (1994) further discusses reliability and also three different kinds of validity: construct validity; external validity; internal validity.

My intention has been to write this thesis in an honest and clear manner to provide for transparency and the readers’ own interpretations. To secure the validity and reliability of the literature review I have also appended a list of references to the thesis and tried to make references to other authors correctly. In the following I will further discuss how validity and reliability have been considered in the literature study and the case study.

3.11.1 The literature study

Validity
The aim of the literature study was to explore the work of successful smaller organizations. A weakness of this literature study is the choice to study only the findings of one case study described by Bäckström et al. (2004) and Harnesk et al. (2004). This choice is certainly affected by my relation to these authors and my position at the Division of Quality and Environmental Management.

Use of another strategy or study of other authors, at another point of time, may most certainly have given diverging results. However, with regard to my purpose and focus on large organizations, I consider my limitation of the literature study feasible. In addition, the validity should be strengthened by the fact that the results of the literature study to a large extent are confirmed in the case study and by other theory
reviewed. Moreover, to secure the validity I have tried to describe the view of Bäckström et al. (2004) and Harnesk et al. (2004) clearly and honestly. Indeed, it was impossible to avoid being influenced by the findings of the case study of the bank when reading and analyzing the literature.

**Reliability**

To improve the reliability of the literature study I have appended the references to the studied reports and paper. In addition I have tried to describe the literature study in an honest and clear manner.

### 3.11.2 The case study

Yin (1994) discusses that the research design of case studies can be positively affected by conscious use of different tactics; see Table 3.3.

<table>
<thead>
<tr>
<th>TESTS</th>
<th>CASE STUDY TACTIC</th>
<th>PHASE OF RESEARCH IN WHICH TACTIC OCCURS</th>
</tr>
</thead>
</table>
| Construct validity | • Use multiple sources of evidence  
• Establish chain of evidence  
• Have key informants review draft case study report | Data collection  
Data collection  
Composition |
| Internal validity | • Do patter-matching  
• Do explanation-building  
• Do time-series analysis | Data analysis  
Data analysis  
Data analysis |
| External validity | • Use replication logic in multiple case studies | Research design |
| Reliability | • Use case study protocol  
• Develop case study data base | Data collection  
Data collection |
Validity

In the case study, the question of validity is about whether or not the chosen measurements methods reflect the true description of the work within the bank.

The aim of the research was never to give a complete picture of the entire bank but to give valuable examples of how to work to achieve sustainable health. The studied units were therefore chosen on practical and geographical reasons and were not necessary the most successful units of the bank. Indeed, there is a risk with having the participated co-workers of the offices selected entirely by the managers. On the other hand, there are no suspicions that the studied units or employees perform differently from what is typical in the bank; see Appendix I.

When conducting the case study, different sources of evidence, i.e. document studies, interviews and workshops with tree diagrams, were consciously used to provide data triangulation and thereby improve the construct validity of the research. The concept of triangulation is based on the assumption that bias inherent in particular sources of data, investigator and method would be neutralized when used in conjunction with other sources, investigators and methods; see Creswell (1994). Moreover, the data was looked upon through theories from both management and co-worker perspectives, which may be compared to theory triangulation; see Yin (1994). According to Yin (1994), theory triangulation strengthens construct validity. In this case study, the construct validity should further be improved by the fact that the interviews were semi-structured and open-ended and the work-shops based on discussions to allow the respondents to freely describe their opinions and work. Moreover, the transcripts of interviews and tree diagrams as well as drafts of the case study report have been studied by the informants.

Another test of the quality deals with external validity, which is about the problem of knowing whether the findings are possible to generalize beyond the performed case study. In case studies, the external validity concerns analytical generalization, which is generalization of the results of the case study to broader theory. (Yin, 1994)
- Methodology -

An analytical generalization requires that the theory is tested through replications of the findings in other cases, where the theory has stated that the same thing will happen; see Yin (1994). He further compares this to the logic of experiments where the researcher may generalize from one experiment to another. However, this particular case study was designed as a single-case study due to the uniqueness of the bank. The findings were thereafter compared to the literature study and some theoretical findings. Moreover, examples of how managers in large organizations can work to achieve sustainable health were described. Hopefully, the external validity of these descriptions may be corroborated by the application and if not completely, at least give valuable examples possible for other organizations to learn from.

Reliability
Reliability can be achieved if another researcher can reach the same findings and conclusions, following the same procedures as described by an earlier researcher and conducting the same case study all over again; see Yin Martella et al. (1999); (1994). In order to affect the reliability of a case study positively a case study database and a case study protocol may be useful. Moreover, the thesis should be written so that transparency and inter-subjectivity are achieved; see Yin (1994). My tactic to affect the reliability positively has been to describe the research conducted thoroughly in Chapter 3 of this thesis. In addition, a checklist and protocol have been used for logging the proceedings and a case study report has been established; see Bäckström et al. (2005).

Indeed, I believe that my own and the research team’s conscious and unconscious perceptions and interpretations have affected the research. The case study has been carried out at the Division of Quality and Environmental Management and my choices of methodologies and literature are therefore most certainly influenced by a strong TQM focus and my pre-understanding. Thereby, other researchers may not certainty arrive at the same results or conclusions, but not necessarily closer to a more correct description of the work of the bank.
3.11.3 The comparison of the case study and the literature study
The creation of the tentative management model for sustainable health was based on the findings of the case study. Moreover, the results were complemented with a literature study, which may have improved the validity of the research. However, a risk to bear in mind is that the results of two studies were compared even though the case study of smaller organizations initially was performed with a slightly different purpose and methodologies than was the study of FSB. Accordingly, the results of the literature study initially were derived through examinations of the results from the first case study i.e. using secondary data within the case study report and related article.

Even though many of the characteristics described in the case study and literature study certainly must be seen as unique to the specific organizations, my belief is that some of the results can be generalized to other organizations. The tentative model is, for instance, also supported by theories and should be adaptable to the work of managers in different organizations.
4 SUMMARY OF APPENDED PAPERS

In this chapter short summaries of the three appended papers are provided. The summaries mainly present the background, purpose, methods, results and conclusions of each paper.

4.1 Overview of appended papers

The research and results of the case study and literature study are presented in more detail in the three papers appended to this thesis. Figure 4.1 gives an overview of how the papers contribute to the research questions.

Figure 4.1  The overview shows how the three appended papers contribute to the research questions posed in Chapter 1.

Paper I addresses management methodologies identified from the view of managers at different levels within a large Swedish bank. Thereafter, Paper II presents what the co-workers of that bank believe are important methodologies for achieving a good workplace. Paper III, aligns these views and draws conclusion about the overall work of the bank. In addition, these conclusions are compared to findings about methodologies identified by managers and co-workers of smaller Swedish organizations.
4.2 Paper I


4.2.1 Background
Today, many organizations in different European countries experience problems with high sick leaves among employees. This has negative implications on the organizations’ ability to compete on the market, but also means suffering for the individuals concerned. Indeed, there are organizations that successfully have broken the tendency of rising sickness absence, accomplished co-worker health and simultaneously achieved financial growth. Recent studies of some small and medium sized organizations who have received the award “Sweden’s best workplace” show that, the leadership, infrastructures for communication, relation building activities, co-worker influence, established holistic view and balance between work and private life have been vital success factors for achieving health; see Harnesk et al. (2004). However, it is advocated that the larger an organization gets the harder it is to apply good leadership.

4.2.2 Purpose
The purpose of this paper is to describe how managers on different levels of a large Swedish bank, who have received the award as “Sweden’s best workplace”, say that they intentionally have worked to support the development toward co-worker health and profitability, and also to identify successful management methodologies (ways of working) that may be possible for managers in other organizations to adopt.

4.2.3 Method
The paper is based on a case study of the bank FöreningsSparbanken (FSB). Within the study managers on three different organizational levels were studied. These managers also represented different geographical areas, local banks and offices of the organization. To explore the work of the managers, data were collected through individual semi-structured
interviews. The interviews were recorded and the transcriptions checked by the respondents in order to eliminate misunderstandings.

Two workshops, each lasting two days and supported by an external facilitator, were held to analyze the empirical data. Affinity diagrams were initially used to organize the large amount of qualitative information into related categories. The empirical findings and diagrams were then assessed separately for the local banks and offices, but also for different organizational levels. Finally, the findings were related and compared to theory.

4.2.4 Main results and conclusions
All interviewed managers mentioned clear, honest and consistent leadership; measurements and feedback; co-worker participation and communications in dialogues as central for achieving co-worker health. Executive managers also believed that a structural business approach on health issues and an effective model of control are important.

The commitment of the bank’s managers seems to have been central to achieve a healthy and efficient organization. Executive managers have had a strategic and business focus on health issues and set objectives thereafter. These objectives were, according to the executive managers, intentionally supported by their ways of working. Further on, the objectives deliberately were passed on throughout the organizational hierarchy down to the bank offices. The interviews show that dialogues, delegation and goal setting seem to have been important management methodologies. Middle managers in addition have been coaches to office managers, who in turn have had focus on building relations, coaching and encouraging employees.

The paper shows that in addition to already well-known methodologies, the company-wide health approach with supportive methodologies and measurements, the business view on health issues and the managements’ courage to learn and deal with psychosocial illness as well as personalities, seem to have been important within the bank.
4.3 Paper II


4.3.1 Background

With ever-increasing competition, employee involvement has become an important issue to support individual development, decrease absenteeism and in the long run improve productivity and organizational development; see Velury (2005); Paul et al. (2000). The argument for this is the positive influence the possibilities to active involvement have on motivation and work satisfaction; see, for instance, Kondo & Park Dahlgaard (1994); Kondo (1993); McGregor (1960); Mayo (1949). Thereby, stress can be prevented and employee health promoted at the same time as the employees’ knowledge and desire for commitment contribute to improvement work within the organization; see Bergman & Klefsjö (2003); Salancik (1977).

However, involvement does not automatically ensure good work conditions, but can also lead to co-worker stress and sickness absence which lead to high costs to society and suffering for the individuals; see Arnetz (2002). Therefore, it is of great importance to study and learn what employees think is vital in this respect and how managers can work to achieve forms of employee participation that promote health and organizational development. This is particularly important in large organizations, where it is argued that empowerment is difficult to practise; see, for instance, Nilsson (1999).

4.3.2 Purpose

The purpose of the paper is to describe what factors and methodologies co-workers of a large Swedish bank, who have received the award “Sweden’s best workplace”, think has been vital to create what they consider a good workplace.
4.3.3 Method
The paper is based on a case study of the bank FöreningsSparbanken (FSB). The opinions of two groups of co-workers, representing two different bank offices, were considered. Data was collected in two workshops with these co-workers using tree diagrams; see Mizuno (1988). Initially, the co-workers were asked about their opinions about the award and being named “Sweden’s best workplace”. The groups were then guided to answer consecutive questions, on different levels, through discussions about success factors and methodologies in brainstorming and consensus processes.

A workshop, lasting two days and supported by an external facilitator, was then held to analyze the empirical data. Affinity diagrams were first used to organize the information within the tree diagrams into related categories based on the research team’s understanding of the data collected. The analysis was later continued by a comparison of the two offices. At that time, the findings of both the affinity diagrams and tree diagrams of the two offices were considered to find out about similarities and differences regarding the factors argued to make the bank a good workplace. Thereafter the methodologies related to the success factors that looked similar to both offices, were compared. In that way we arrived at an answer to the question “How have FSB worked to become one of Sweden’s best workplaces”. Finally, the results of the analysis were also compared to theory.

4.3.4 Main results and conclusions
The study shows that the possibilities to actively participate as a co-worker were seen as important. The value of everybody’s involvement seem to have been achieved through coaching and co-workership with communication, delegation, goal setting and training as commonly used methodologies. The results, for instance, also confirm the importance of caring and visible managers, clear goals and adapting the business to the needs of internal and external customers; see Figure 4.2.
The conclusions from the study are that managers and co-workers of the bank have worked to nurture five success factors which have much in common with the fundamental values expressed by the bank; see FöreningsSparbanken (2005). Furthermore, they seem to have worked systematically by choosing methodologies supporting these values. This strategy is in accordance with what some authors believe creates Total Quality Management.
4.4 Paper III


4.4.1 Background

Good management and employee health are considered key factors to improve productivity, organizational development and competitiveness in a sustainable way. In spite of that, many organizations are still struggling with sickness absence, absenteeism and quality problems.

From a work perspective, research demonstrates that a shared corporate culture, organizational development as well as communication and possibilities to be involved are important issues for creating employee health; see, for instance, Zwetslot & Pot (2004); Bergman & Klefsjö (2003); Eriksson (2003). In this manner, good management and leadership are considered key factors to succeed; see Harnesk (2004 a); Zwetslot & Pot (2004); Kanji & Moura (2001); Bender & van de Looij (1994).

However, an organization’s size influences some of its structure as well as management work; see Robbins (1990); Blau & Schoenherr (1971). For instance, it is argued that as an organization grows larger internal communication, managers’ interactions with the co-workers and empowerment get more difficult; see Daly et al. (2003); Nilsson (1999).

At the same time, recent national statistics also show that the level of sickness absence increases consistently in proportion to company size; see SCB (2006). Despite this, the attention to the implications due to specific characteristics of large organizations and sustainable health seem to be described in limited detail.

4.4.2 Purpose

The purpose of the paper is to suggest a model, for management methodologies in large organizations, aimed at achieving sustainable health.
4.4.3 Method
Since the examples of achievement of sustainable health within large organizations of more than 500 employees were limited in the literature, a qualitative case study was performed to explore and describe the work of managers and co-workers of a large successful bank (Förenings-Sparbanken). A literature study was also performed to explore methodologies for achieving sustainable health within successful smaller organizations that had been studied by another research team.

Within the case study, interviews and workshops were used to collect the data from managers on different organizational levels as well as from the co-workers. The findings, mainly derived through analysis in workshops using affinity diagrams, were then compared to the findings of Harnesk et al. (2004) who had studied smaller organizations.

4.4.4 Main results and conclusions
Managers and co-workers within the large bank have worked systematically to create a culture based on stated values by choosing methodologies and tools supporting these values. The methodologies identified in the bank versus the studied smaller organizations are to a large extent the same and also, but not least, already well-known methodologies advocated in management theory. Dialogue, development of employees, delegation and coaching are the most salient methodologies of the studied organizations. Moreover, communication and mutual trust in mandate seem to have been important for successfully managing and aligning the large organization; see Figure 4.3. The managers were employed as managers on different levels but in addition seem to have practiced what several authors characterize as leadership.
The model describes how managers on different organizational levels may work together according to espoused values to create sustainable health. The model is based on experiences taken from the large bank which has managed to create a sustainable workplace where health and performance improve. The model suggests a strategy of values, methodologies and tools that other organizations should be able to adopt. (Source; Wreder, 2006).

**Figure 4.3**
5 CONCLUSIONS AND DISCUSSION

In this final chapter, I reconnect to the purpose of the research and present my conclusions of the research questions posed in Chapter 1. In the end, ideas for further research and my reflections of the conducted research are presented.

5.1 Retrospect of the purpose and research questions

The main purpose of this thesis is to contribute to the creation of good work environments and employee health. The focus is on larger organizations and on taking advantage of the experiences of successful organizations in order to inspire and support managers in other organizations. This is formulated in the following two research questions:

Q1. What methodologies can be identified in successful organizations to achieve sustainable health?

Q2. How can a model for sustainable health be formulated to support the work of managers in large organizations?

5.1.1 Research Question 1

The first question is mainly answered through a case study in a large Swedish bank, but also by a literature study concerning methodologies identified in smaller Swedish organizations. These studies resulted in several thriving methodologies derived from the opinions of both co-workers and managers on different organizational levels.

The methodologies identified within the large bank, as well as in the smaller organizations, were to a large extent similar to methodologies already advocated in theory. The most salient methodologies of the studied organizations, dialogues, employee development, delegation and coaching, should thereby be possible for managers in other organizations to consider adopting. In contrast to the smaller organizations, the executive managers of the large bank also worked
with a health project to improve health within the organization. Moreover, a corporate culture was commonly mentioned when the co-workers of the bank discussed the success of their organization. Co-workers and managers from all organizations also emphasized the credence of communication and trust.

However, responsibilities and methodologies seem to vary to some extent, for managers at different levels in the hierarchy of the large bank. The same tendency can be seen in the literature study of smaller organizations, but not as clearly. Executive managers have had a strategic focus and set objectives in accordance with the core values of the bank. These managers also explained that they intentionally tried to support the values and objectives in their ways of working by, for instance, deployment of goals, employee development and by offering possibilities for a self-evaluation of health status to all employees.

Moreover, the objectives were successively passed on throughout the organizational hierarchy down to the bank offices. Within the offices, goal setting and follow-up were practised regularly in cooperation between the manager and co-workers. At the same time, middle managers seem to have been coaches to the lower office managers, who in turn expressed a focus on building relations to encourage and provide for good conditions for the co-workers.

5.1.2 Research Question 2

The second research question is answered by the model for management practices to achieve sustainable health in large organizations, which is presented in Figure 4.3 and Paper III. The model is mainly based on the experiences taken from the large bank considered in the case study. However, these experiences were also related to theory and compared to findings presented about the study of smaller organizations when the model was created; see Section 3.9 and Paper III.

The model presents a structure of values, methodologies and tools and describes how managers on different organizational levels through communication and mandate may work together to establish a culture, based on core values, in order to create sustainable health. Such values
may be ‘management commitment’; ‘employee involvement’; ‘continuous development’; ‘focus on customers’, as were identified within all studied organizations. The model also suggests methodologies, for instance, dialogue, relation building, employee development and suggestion schemes as well as some tools that the managers of the bank used to support their intentions.

The work of both the bank and the two smaller organizations has resulted in improved health and success; see Appendix I and Harnesk et al. (2004). Indeed, it is difficult to assess whether the organizations will achieve co-worker health that is sustainable in a durable long-time perspective. Nevertheless, the common values and methodologies identified within the studied organizations support what other authors have already emphasised for creation of sustainable health. By presenting a strategy including examples of methodologies and tools that actually have been practised to achieve health within the large bank the model may further support and inspire the work for sustainable health of other managers.

5.2 Discussion about general conclusions

The results of the case study in the bank support the findings by Wilson et al. (2004) and health factors that have been stated by, for instance, Csikszentmihályi (2003), Juhl et al. (1997), Griesinger (1990) and Leiter & Maslach (1988). Management commitment and actively involved co-workers seem to have been a base of the bank’s work for creating a flexible company adapted to the needs of its employees and external customers. Within the large bank, the intentions of the executives were successfully transferred through the middle and lower managers into the co-workers’ daily operations within the offices. A comparison of Paper I and Paper II shows that managers and co-workers share core values and mentioned almost the same methodologies as important to success. Accordingly, the bank seems to have succeeded with management, communication and empowerment in large organizations and avoided the difficulties mentioned by Daly et al. (2003), Nilsson (1999) and Deming (1986) among others.
At the same time, the identified methodologies presented in Paper I and Paper II are obviously not revolutionary, but already advocated as winning concepts in theory by, for instance, Bergman & Klefsjö (2003), Csikszentmihályi (2003) and Hackman & Oldham (1976). Many of the methodologies such as dialogues, suggestion schemes, coaching and the health project are further related to concern for co-workers. The same conclusion was stated by Hamesk et al. (2004), when they studied smaller organizations.

5.2.1 An exemplary organization
Based on the results of Paper I-III one might argue that the bank is a good example of how theory could be applied to achieve success and co-worker health in a large organization. However, one might wonder if it is true that the bank is really as good as it seems to be.

After having studied a sample of managers and co-workers from two units of the bank my intent is not to show that it does everything right. However, even though the results from the study can not be assumed to give a complete picture of the entire bank, I believe that the bank certainly has done much good and seems to be an exemplary organization for others to be inspired by and learn from.

The most surprising aspect of the case study may be that when discussing the success of the bank, many of the co-workers and managers also talked about difficulties they had had some years earlier. For instance, strain related to when the bank was created out of a merger of two different banks, when staff reductions were made and employees did not agree with the new professional roles that were to be introduced for each manager and employee; see Appendix I. Seen in the light of the human motivation theory by Maslow (1943) and Kondo (1991), the bank even appears to have been opposed to basic human needs for security by carrying out such changes.

Out of that, another problem with high and rising numbers of sickness absence appeared and was also the initiating factor for the health project, which was started in the bank in 2002. Within the project the project manager seems to have worked intentionally to increase interest in
health issues among executive management and co-workers. This was done through a business perspective and information to the executives and by offering information, preventive health care activities and health-evaluation to the co-workers. Therefore, one might argue that middle managers have been more or less forced to prioritise health issues because of the pressure from both their managers and subordinates. Also, by putting a business perspective on health, executive management presumably has paid attention to and increased each manager’s responsibility for health related results.

The empirical material also shows that the managers of the bank were not afraid of identifying and solving problems. The lower managers within the bank described how they frequently asked each employee how he/she felt and tried to build relations to increase the opportunities of getting an honest answer and detecting if someone did not feel well. At one office they had recently reorganized, and the office manager explained that she had introduced a health evaluation when it was at its worst, to see how the employees felt and to identify problems.

In addition, the co-workers and managers described mistakes and failures. However, they also explained that they felt trusted by their managers and got encouragement rather than punishment when making mistakes. For instance, one of the middle managers explained that it was vital to his management to work without prestige. He explained that he felt that he was trusted by his manager, i.e. he had a mandate from his manager: “When you have a mandate it is okay to make mistakes, regret and fail”.

In summary, it seems as if the successful bank also has had difficulties for the co-workers and managers to handle in their work. Somehow, it seems as though having to depart from a problematic situation creates special conditions for success. The similar was also stated by Harnesk et al. (2004). In addition to already well known methodologies, the company-wide health approach with supportive methodologies, tools and measurements, seem to have been an important part of the bank’s work for improved co-worker health. Based on the empirical material,
there is also a reason to believe that the health project has supported the bank’s core values.

5.2.2 Values, methodologies and tools
The empirical data imply that managers and co-workers within this large bank have worked systematically to create a culture based on stated values by choosing methodologies and tools supporting these values. In addition, managers’ and co-workers’ performance seem to rely on the culture based on the shared values and the effect of these values measured as the framework and methodologies, similar to what is discussed by Kaufmann & Kaufmann (2005). The values seem to convey to employees what behaviours they should engage in and thereby creating security, being a substitute for formalization and a prerequisite for steering a large organization in one direction. This is in line with what some researchers emphasize about a strong culture; see for instance; Kaufmann & Kaufmann (2005).

Support for a comparable structure, of values, methodologies and tools, within the work of the smaller organizations was identified in Paper III. Such a strategy is also similar to what some authors state creates Total Quality Management; see, for instance, Hellsten & Klefsjö (2000).

However, none of the three organizations mentioned any aim or relation to TQM-practices. The four core values that were common in all organizations: ‘management commitment’, ‘co-worker involvement’; ‘focus on customers’; ‘continuous development’, are similar to four of the six TQM values stated by Hellsten & Klefsjö (2000). Those are the values of TQM that are focused on softer values linked to human aspects and seem to relate to what Hackman & Oldham (1976), Herzberg (1959) and Maslow (1943) emphasize for human motivation and work satisfaction. Moreover, three of the core values identified as common are also espoused values within the bank; see Appendix 1. Indeed, ‘Management commitment’, which is not an espoused value, seems to have been an overarching condition for ‘co-worker involvement’, ‘focus on customers’ and ‘continuous development’ within the bank.
The methodologies and tools that were identified within the organizations differ from the ones exemplified by Hellsten & Klefsjö (2000). In addition those identified sometimes even depart somewhat from the definitions of methodologies and tools offered in Chapter 2. After having conducted the studies I even realized that I have had difficulties in defining pure methodologies and tools since the dividing line sometimes was difficult to distinguish. Moreover, communication and trust, that seemed to be important to the success of the bank, did not fit in the definition of methodologies. This may indicate that more than methodologies or a wider definition is needed to describe how sustainable health can be created. A possible wider explanation, suggested in Paper III, is that a culture based on values with concern for human aspects may support ‘health factors’ expressed by, for instance, Csikszentmihályi (2003), Eriksson (2003) and WHO (1986), and thereby support creation of sustainable health; see Figure 5.1.

**Figure 5.1** The figure describes how a management system of values, methodologies and tools may support factors advocated to support creation of health. The health factors are examples taken from theory about health promotion and are believed to interact.
Accordingly, the bank’s work seems to be similar to TQM regarding the strategy of core values that intentionally are supported by the managers' work. In addition, the focus on the four softer values related to concern for people, are similar.

**Management commitment**

The value of commitment and work of managers were described as central to the achievements in all three organizations. This is in agreement with, for instance, Zwetslot & Pot (2004), Arnetz (2002) and Hackman & Wageman (1995).

The co-workers of the bank described how their managers practise a caring, clear, visible and coaching leadership, which reduces uncertainty and increases openness. This work is in agreement with, for instance, Kinlaw (2000) and shows that a supportive approach from managers, as advocated by Docherty et al. (2002), is favourable. Based on the definitions of, for instance Certo (2000), Kotter (1999), Wiberg (1992) and Stoner & Freeman (1989), one might even argue that the managers within the bank have combined management with leadership focused on concern for the co-workers as people, to achieve successful management.

However, the focus and methodologies of managers on different levels seem to differ. The function of executive managers of the bank support the theory of Kotter (1999), whereas middle and lower managers seem to work more deliberately to influence co-workers’ performance as described by Wiberg (1992). Based on the interviews, the leadership of the executive managers within the large bank could be argued to be characterized by espoused values and clear objectives in combination with care for the co-workers. In addition, the same values were mentioned by the rest of the managers and also by the co-workers; see Paper I and Paper II. Differently, middle and lower managers did not declare the values as core values, but discussed the kernel of them as important to their leadership.
Co-worker involvement
To achieve real commitment, or even co-creation, it is important to create conditions for everybody’s active participation through dialogues, delegation and education; see Bergman & Klefsjö (2003); Tengblad & Hällsten (2002). The findings of the case study and literature study support this theory.

In Paper I, II and III, delegation of both responsibilities and authorities were identified as a methodology supporting a good workplace and sustainable health. Within the bank the co-workers also described how freedom to act within unambiguous frames was delegated along with the responsibilities. Thereby, the employees were given the opportunity to make their own decisions, which is a good way to get employees to care about the success of an organization; see Dygert (2000). The methodologies used may further have increased the willingness of the co-workers to be co-creative by drawing attention to the role and need of each employee’s participation as discussed by Bergman & Klefsjö (2003).

Despite several hierarchical levels within the bank there was no evidence of lack of empowerment, as Nilsson (1999) fears in large organizations. The managers and co-workers gave several examples of methodologies for employee involvement, such as cross-functional groups and networks, daily dialogues, individual goal setting and follow up. These are similar to the methodologies identified within the smaller organizations. However, within the large organization different focus and responsibilities on different management levels seem to reinforce the kernel of the methodologies and tools. To support the methodologies the bank has also instituted a co-determination agreement with all managers and co-workers.

Focus on customers
Executives as well as lower managers in all three organizations were aware of the fact that mental and social well-being is a pre-condition for employee satisfaction, health and performance and consequently customer satisfaction as described by many authors; see, for instance, Bergman & Klefsjö (2003); Arnetz (2002); Hellsten & Klefsjö (2000); Hackman & Oldham (1976). In the large, as well as the smaller
- Conclusions and discussion-

organizations, management methodologies seemed to be aimed at supporting the co-workers and providing a good work environment to increase satisfaction. This was accomplished through, for instance a health project supported by self-evaluation tests and routines for rehabilitation of long term absent employees.

The empirical data also shows that the bank, according to its employees, strives to adapt to the needs of the customers and society. The employees described methodologies, such as questionnaires and relation building with customers, aimed at learning more about the customers’ needs. Accordingly, the findings of the research support that a strong organizational culture which is focused on the needs and expectations of the surroundings and at the same time is flexible to fulfil the needs, leads to success; see Kotter & Hesket (1992).

Continuous development
According to the co-workers, continuous development was part of the culture of the bank. The interviews also show that development was supported by systematic approaches for competence development and networks for knowledge sharing. These were aided by use of competence profiles and the intranet of the bank.

5.2.3 Communication and mandate
Communication and trust between co-workers and managers and between managers at different levels was a common theme of the interviews and workshops within the three organizations. The importance is also supported by theorists, for instance, Schein (2004), Bergman & Klefsjö (2003), Dale (1999) and Molander (1996).

All organizations showed systematic infrastructures for communication. However, objectives and information were transferred between more levels within the large organization. Personal dialogues seem to have taken place between employees and managers at the lowest organizational levels whereas different channels for information, such as intranet and email, were important for executive managers to reach out to the employees.
In smaller organizations executive managers seem to have had more opportunity to interact with the employees. Instead, in the large organization an important channel for spreading executive management’s intentions and support to the co-workers as well as involving them, was the managers at middle and lower levels. In all organizations the managers have worked through communication combined with mutual trust. Moreover, a documented meeting structure for the business area as a whole was practiced within the bank to provide for regular information sharing and discussions within different forums and between management levels. For instance, regular telephone meetings were held between the local bank manager and the office managers whereas weekly meetings were held between the office managers and the employees within each office. Another example for information sharing is the use of television and intranet by executive managers to communicate with all co-workers simultaneously.

Arnetz (2002) argues that the managers, who work closest to the co-workers affect the co-workers’ satisfaction and performance the most. In the large organization, the mandate of each individual’s closest supervisor was emphasized, no matter if the individual him/herself was a co-worker or a middle manager. Every manager’s and employee’s awareness of what was valued, and thereby acceptable within their corporate culture, in combination with the mandate also seem to have been a prerequisite for middle managers’ ability to fulﬁl needs of both executive managers and employees and reinforce the priorities of the organization.

5.3 Concluding practical implications

In conclusion, it seems difficult to describe how managers on different levels of the bank have worked by solely exemplifying methodologies. The overall results of the research conﬁrm that in order to improve health, a management strategy based on a culture of core values that are supported by the ways of working, may be valuable. In a large organization, where the role models and close interaction with employees may only be found lower in the management hierarchy such
a strategy seems to aid focusing on health, mediate what is accepted behaviour and spread consistent messages to steer a large organization in one direction.

Therefore, my first suggestion to managers of large organizations is to consider the core values of the organization and soft values related to human needs and consistently practice methodologies that support these values.

In addition, managers should practice leadership and base their management and leadership on the values. The values should be visible in the managers’ work and guide their behaviour since they are role models to the co-workers and thereby may affect their behaviour.

Last, I would like to suggest some methodologies to managers within large organizations that support the soft values. The suggestions, which are given below, are based on experiences of the bank and theory.

Executive managers:
- Create and mediate clear health strategies, objectives and intentions with a business perspective on health and also allocate resources to provide for performance.
- Be consistent when mediating intentions and decisions to show that “they won’t be neglected”.
- Set goals, measure and evaluate performance. For instance, a balanced scorecard may be useful for deploying objectives, and continually highlighting and asking for results in areas associated with the objectives.
- Delegate responsibilities and authorities to lower managers and trust them to facilitate active involvement from all managers and co-workers.
- Provide for education of all managers and co-workers. Learning is argued to be an intrinsic motivator and should be encouraged and supported by resources.
- Conclusions and discussion-

- Use suggestion schemes to consider opinions and needs of the co-workers. Feedback is thereby important to create motivation, learning and rewards.

- Facilitate the work of managers at lower levels and co-workers by offering methodologies and tools that support the objectives of the organization. A concrete example may be routines for performance reviews or handling of people on long-term sick leave.

**Middle level managers:**

- Have dialogues with managers at lower levels and walk as you talk. Be clear and consistent when mediating what executive managers have stated is important to the organization.

- Delegate responsibilities and authorities. Trust lower managers and allow freedom. Do not intrude into their work if not necessary, but be a coach who clarifies goals and priorities.

- Provide for networks within and between different subunits of the organization to facilitate knowledge sharing and a shared culture.

**Lower level managers (closest to the co-workers):**

- Create relations with the individuals by dialogues, trust and “management by walking around”.

- Be a coach to the co-workers and make sure they have the right opportunities and competence to perform their work. Talk to them and ask what they need. Clarify goals and priorities, invite people to influence their performance and careers, improve the knowledge and skills people need to do their best and convey to people how important and appreciated they are. In this manner, coaching may lead to employee commitment.

- Set goals, measure and follow up results in confidence with the co-workers to understand individual needs and support the co-workers’ understanding of what is and is not important. Also, have regular performance reviews and meet each co-worker regularly for face-to-face conversations to learn about their current opinions, intentions and feelings and also identify problems within the workplace.
5.4 Further research

Harnesk (2004 a) has already questioned why methodologies that are known to be successful are not used to a larger extent. The case study implies that the large bank in several aspects has managed to succeed by practicing what are advocated methodologies. Therefore, a question similar to the one that was posed by Harnesk (2004 a) seems to be relevant for further research: why do organizations not use methodologies such as those presented in this thesis and by Harnesk et al. (2004) to a larger extent? Furthermore, how could the use of such methodologies be promoted?

In addition, it would be interesting to perform a broader follow-up study of the work of other successful organizations and further develop the tentative management model. This should increase the utility of the model to support other managers. Using similar reasoning, as when comparing organizations of different sizes, it would also be interesting to investigate commonalities and differences in methodologies between different branches of industries as well as in the private versus public sector, since national statistics also show variation in sickness absence within these groupings; see SCB (2004). In addition, it would be worthwhile to study less successful organizations to try to distinguish the commonalities in methodologies that were identified in the successful organizations.

Based on the findings in Paper I and Paper III, further research on not only methodologies but also on comprehensive approaches regarding management for sustainable health should be of interest. In this manner, it is interesting that the similarities to TQM that were identified are also partly what seem to be the core of the bank’s success. Therefore, there also appears to be an interesting connection to the system view and some values of TQM. It would be valuable to further study the relations between TQM and management for sustainable health as well as the connection between health and TQM-values in organizations where a TQM-focus is intentional.
- Conclusions and discussion -

The research shows that common values, and the culture these create the foundation for, are the key to success. Therefore, it feels important to further study how successful organizations have worked with values in their leadership. It would also be interesting to investigate how such values are shaped in an organization and if and how this can be done intentionally by managers to affect the direction and work of an organization.

5.5 Final reflections

The conclusions of this thesis have been achieved from experiences taken from a few specific organizations. Despite that, my belief is that the methodologies identified can be of benefit to other organizations.

As mentioned above, the key for success seems to be structured management work according to core values and supported by the ways of working. I believe that if more managers practised a leadership similar to that, the prerequisites for co-workers would improve and thereby their health and performance.

A strength with the research presented in this thesis is that similar findings have come out of several studies. However, I, as well as the research team that studied smaller organizations, work at a university department that promotes quality management. Thereby, it could be argued that different conclusions, but not necessarily closer to a more correct description of the work of the organizations, would have been drawn if a person who was not as involved in TQM had performed the studies. At least, I have tried my best to be objective and to describe the research conducted to provide for your own interpretation of the findings.

When starting my research journey and the research for this thesis in 2004, entering the world of organizational and management theories, I did not realize what a flood of information I would have to find my way through. In retrospect, I do not believe that I have managed, but I have
made my choices and gained knowledge that are reflected in my research and the findings.

During this journey I have also made many reflections about how to achieve sustainable health, but at this point there seems to be no ultimate solution. As can be seen in the suggestions for further research there is much more that I would like to study further and there is certainly much more to explore. However, at this stage I have described methodologies identified from successful organizations and also suggested a model for sustainable health, so this is also where I will end this research journey.

I have looked back on my journey when writing this thesis and I will now, for the future, bring with me the new knowledge gained about how to achieve sustainable health, but not least about, research and myself as a person and what prerequisites I need to feel and perform well. The endeavour of writing this thesis was my interest in people and belief in our capacity to achieve betterment when supported by a good work environment and the right prerequisites. I think that my new knowledge is a good start for contributing to better work environments. I also hope that you, as a reader, may find some methodologies useful for contributing to the health and performance of others in this thesis.
REFERENCES


- References -


- References -


- References -


References


- References -


- References -
- References -


Shewhart, W.A. (1939). *Statistical Method from the Viewpoint of Quality Control*. Graduate School of the Department of Agriculture, Washington, DC.


- References -


- References -


World Health Organisation, WHO. (1986). Ottawa charter for Health Promotion, WHO Europe, Köpenhamm


PAPER I

Successful Management Methodologies for Achieving Co-worker Health in a Large Organization

Wreder, Å. (2005)

Submitted for publication
Successful Management Methodologies for Achieving Co-worker Health in a Large Organization

Asa Wreder
Division of Quality and Environmental Management
Luleå University of Technology
SE-971 87, SWEDEN
E-mail: asa.wreder@ltu.se

Abstract

Today, many organizations in different European countries experience problems with high levels of sick leave among employees. This has negative implications on the organizations’ ability to compete on the market, but also means suffering for the individuals. An issue that is considered by several researchers to have an impact on employee health and competitive advantage is leadership. However, it is argued that the larger an organization gets, the harder it is to apply good leadership.

The purpose of this paper is to describe how management in a large Swedish bank, awarded as “Sweden’s best workplace” in 2003, has worked to profitably transform increasing levels of sick leave into co-worker health. Through interviews, with managers at three different levels of the organization, management methodologies and success factors have been identified. The paper also includes suggestions that managers in other large organizations might consider adopting.

The commitment of the bank’s managers has been central to achieving a healthy and efficient organization. Executive managers have had a conspicuous strategic focus on health issues and set objectives thereafter. These objectives were deliberately supported by the managers’ methodologies and tools used within the organization. Furthermore, the objectives have been successfully passed on throughout the organizational hierarchy down to the bank offices. Dialogues, clear goals and mutual trust seem to have been important management methodologies. Middle managers in addition have been lucid coaches to office managers, who in turn have put focus on building relationships, being transparent in their role as coaches and encouraging employees.

Introduction

Since about 1980, sickness absence has risen to alarming levels in parts of Europe. In Sweden, for instance, the number of sick leaves listed more than 365 days increased by almost 30 % between 1997 and 2001(SOU 2002:5).

Bad health has implications for society as a whole and the costs for sickness benefits and disablement pensions together were 10 % of the Swedish Government’s total spending in 2001 (The National Social Insurance Board, 2000, 2003). From a business perspective, sickness impairs the ability to work and be productive and thus strategies are needed to reduce
the costs of sickness absence and working disability. Last but not least, bad health means suffering for the individuals concerned and has implications on their performance, which in turn reduces the company’s ability to compete on the market and its future prospects. (Cordes & Dougherty, 1993, Arnetz, 2002 and Porter et al., 2003)

Leadership is mentioned by several researchers as an issue with considerable impact on employee health; see, for instance, Bender & van de Looij (1994), Eriksson (2003) and Zwetsloot & Pot (2004). In addition, Docherty et al. (2002) claim that management has to be more supportive to successfully meet the requirements and complexity of today’s business market. Authority has to be delegated and power transferred to the lower levels of the organizational structures. Several researchers also explain how leadership must be conducted in such a way as to increase the motivation and well-being of co-workers. However, there is often a conflict between the human aspects and the demands of efficiency and profitability; see, for instance, Deming (1986), Docherty, (2002) and Porter et al. (2003).

There are however organizations that have successfully broken the trend towards rising sickness absence, nurtured co-worker health and simultaneously achieved financial growth. Recent studies of some small and medium sized organizations who have received an award as “Sweden’s best workplace” show that, the leadership, infrastructures for communication, relationship building activities, co-workers’ influence, established holistic view and balance between work and private life have been vital success factors for achieving health. (Harnesk et al., 2004)

However, as organizations grow larger, internal communication gets more difficult (Daly et al., 2003). According to Nilsson (1999), most large organizations have hierarchical structures, and complex communication channels and are less empowering. Deming (1986) even claims that it is very difficult to apply good leadership in large organizations. Therefore, it is of great importance to study and learn how top management in large organizations can act to achieve co-worker health in combination with economic growth. This study has, for that reason, been conducted at FöreningsSparbanken, FSB, receiver of the award “Sweden’s best workplace”. The aim of the study was to answer the question: How have managers on different levels worked to achieve co-worker health?

In addition, the purpose of this paper is to describe how managers on different levels of FSB have deliberately worked to support the development toward co-worker health and profitability, and also to identify successful management methodologies (ways of working) that managers in other organizations can also adopt.

Case description

FöreningsSparbanken is one of the largest banking groups in the Nordic area and was founded in 1997 through the fusion of Sparbanken Sverige and Föreningsbanken, which have their roots in the early 19th and 20th centuries respectively1; see Table 1.

---

1The information about FSB is based on personal observations, documentations of the organization (Annual reports for 2002-2004, and http://www.fsb.se) and facts given by its management and co-workers. More information about FöreningsSparbanken AB can be found on http://www.fsb.se.
Successful Management Methodologies for Achieving Co-worker Health in a Large Organization

Table 1: A selection of important events in FöreningsSparbanken, mainly between 2000 and 2004.

<table>
<thead>
<tr>
<th>Year</th>
<th>Activity in FöreningsSparbanken</th>
</tr>
</thead>
<tbody>
<tr>
<td>1997-1999</td>
<td>Staff reductions as consequence of the merger</td>
</tr>
<tr>
<td>2000</td>
<td>The co-determination agreement (IDA) was established</td>
</tr>
<tr>
<td>2001-2004</td>
<td>Roles of employees and managers were defined in order to better meet the needs of customers</td>
</tr>
<tr>
<td>2001-2004</td>
<td>Programs for managers were carried out to ensure new leadership and help managers</td>
</tr>
<tr>
<td>2002</td>
<td>A staff reduction program, including more than 500 employees, was run in the banking group</td>
</tr>
<tr>
<td>2002-2004</td>
<td>A health project was carried out in order to cope with increasing levels of sick leave</td>
</tr>
<tr>
<td>2003</td>
<td>Received the national Alecta award “Sweden’s best workplace”</td>
</tr>
<tr>
<td>2003 &amp; 2004</td>
<td>Was the most profitable major bank in the Nordic region</td>
</tr>
<tr>
<td>2004</td>
<td>Received an award as “The Competence Company of the year”</td>
</tr>
</tbody>
</table>

According to FöreningsSparbanken AB (2005: b) the bank’s fundamental values are long-term sustainable development and a strong relationship with local communities. It prioritises customer satisfaction and aims to be “a bank for everyone” and an attractive employer. Moreover, the bank stands for security, humility, respect, openness and involvement. A characteristic is a co-determination agreement aiming at inviting employees to take part in the bank’s operations through insight, involvement, and responsibility.

In 2004 FSB had around 15,000 employees, of which approximately 9,000 worked in Sweden. The group is organized into five business areas including Swedbank Markets (investment bank), Robur (fund management) and Swedish retail operations. The latter consists of subsidiaries, for instance the telephone and internet banks and the bank branches. The bank branches make up an important unit, which is divided into geographic regions and encompasses a network of local bank offices; see Figure 1. In 2004 around 490 offices were divided into 75 local banks spread in six regions.

![Figure 1: Overview of the 'Bank branches' unit. The relation between offices, local banks and regions is illustrated. The figure also shows the connection between these regions, the unit and the executive management.](image-url)

In the Annual Report 2004, improvements, in measurements of health issues as well as customer satisfaction and profitability, of the Swedish operations were presented; see Table 2 and Figure 2.
Successful Management Methodologies for Achieving Co-worker Health in a Large Organization

Table 2: The development of human capital, in terms of the indices measured since 2003. “Satisfied Employee Index” measures employees’ opinions of their personal situation in the company, “Well-being” measures employees’ opinions on health-related issues and “Value-adding ability” measures employees’ opinions of their ability to create value for customers.

<table>
<thead>
<tr>
<th>Development of Human Capital (Local banks in Sweden)</th>
<th>2003</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satisfied Employee index</td>
<td>65</td>
<td>68</td>
</tr>
<tr>
<td>Well-being</td>
<td>75</td>
<td>75</td>
</tr>
<tr>
<td>Value-adding ability</td>
<td>75</td>
<td>77,5</td>
</tr>
</tbody>
</table>

Figure 2: The numbers of long-term healthy employees, i.e. employees who take a maximum of five sick days during a 12-month period, have increased and sick leaves have decreased within FSB between 2002 and 2004. At the same time both profit and customer satisfaction have improved.

Theory

Management and leadership

The expressions ‘management’ and ‘leadership’ are generally used, but have a variety of definitions and meanings (Yukl, 2002). According to several authors, e.g. Kotter (1988), there is a difference between management and leadership. Yukl (1998) argues that it is obvious that a person can be a leader without being a manager and be a manager without leading. He further believes that successful management also needs to incorporate leadership, whereas Kotter (1988) describes leadership as "a process for influence, without forcing, one or several groups of people in one direction". Yukl (1998) points out that the word ‘manager’ is an occupational title for many people.

In this paper leadership will be used as defined by Kotter (1988), while management will be associated with a profession and the way an organization is controlled through issues of strategies, responsibilities, planning and results. Leadership is also assumed to be an important part of management.
Health and health promotion
The concept of “health” is difficult to define in an unambiguous way. However, many researchers seem to have a humanistic view of health and agree that health is more than just lack of illness and diseases (Medin & Alexandersson, 2000). The definition of health in this paper will follow the well-known and accepted definition, stated by the WHO’s Constitution (1946): “Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”.

The concept of ‘health promotion’ is often used for work aimed at increasing good health. According to WHO (1986), health promotion is: “the process of enabling people to increase control over, and to improve, their health”. What is more, to achieve health, an individual or group must be able to identify and realise goals, to satisfy needs and to change or cope with the environment (Ibid.).

Zwetsloot & Pot (2004) highlight some issues, normally not regarded as health related, which have considerable impact on health: leadership and its style, industrial relations, trust, communication, corporate culture, business partners and organizational development, among others. Griesinger (1990) also claims that a reduction in uncertainty and an increase in honesty and openness can contribute to both economic efficiency and social and ethical betterment.

A manager needs knowledge about what really makes people feel well, in order to support co-worker health (Porter et al., 2003). Arnetz (2002) presents research on stress, efficiency and renewal seen from the perspective of organizations. He argues that the initiate leaders (at the lowest level) of an organization affect the co-workers’ awareness of effectiveness and thereby their work satisfaction, which in the long run has a direct impact on the quality that is vital to achieve customer satisfaction. This statement is also backed up by Porter et al. (2003) and the ideas in Total Quality Management; Bergman & Klefsjö (2003).

Eriksson (2003) claims that organizations must think of health instead of sickness and also have a holistic view. Furthermore, Lindkvist (1996) argues that top management initiatives and long term perspectives as well as focus on ‘soft’ aspects are associated with competitive success. He believes that the figures in the budget are insufficient as statistics unless complemented by considerable dialogue with co-workers.

Several researchers also discuss what factors can make us feel well at work. For example, a study presented by Eriksson (2003), of three different organizations, shows that the management, structures and routines of work, clarity, balance between requirements, objectives and resources, are vital to how the employees perceive their health. Similar thoughts are expressed by Csikszentmihalyi (2003), who claims that conditions like clear goals, feedback, balance between challenges and skills, sense of control and flexibility are key issues.

Management concepts
During the last few decades, management concepts such as Lean Production, Total Quality Management, Business Process Reengineering and Integral Health Management have been used to facilitate changes and development toward business excellence; Docherty et al. (2002) and Zwetsloot & Pot (2004).
Zwetsloot & Pot (2004) discuss the business value of health management. They present the Integral Health Management (IHM), a strategic approach for reducing the costs of sickness absence and working disability, while at the same time increasing the productivity and resilience of the company and its employees. To implement IHM, they suggest that five changes of a general health and safety nature are needed:

- From focus on problem solving to positive challenges
- From a medical perspective to a business perspective on health
- From fragmented activities to a holistic approach
- From attention on people with health problems to care for all personnel
- From cost to a sound investment.

According to Hellsten & Klefsjö (2000), Total Quality Management, TQM, can be described as a management system consisting of values, methodologies and tools; see Figure 3. To achieve results, the values must persistently be supported by suitable methodologies and tools. Also, management must preserve the core values in TQM by quality activities and with the use of economic, ethical and other resources; see Hellsten & Klefsjö (2000).

The connection between Total Quality Management (TQM) and profitability has been explored in several investigations. For example, Eriksson & Hansson (2003) showed in a Swedish study, that organisations that received quality awards performed better than comparable competitors and branch indices. The relation between participation and work satisfaction has been a subject of research literature for many years (see for instance Mayo (1949), McGregor (1960) and Kondo (1993) and recent studies have also reported on correlations between TQM-values and the perceptions employees have of their own health; see Lagrosen (2004) and Lagrosen & Bäckström (2005). Nevertheless, it is not evident what methodologies to use in today’s working life to support the values of TQM and create co-worker health. In recent literature, there is a lot about so called “health factors”, but little concerning particular management methodologies for achieving co-worker health.

Figure 3: Total Quality Management can be seen as a management system made up of values, methodologies and tools. The values are fixed but the methodologies and tools are just examples and can differ depending on the value it is supposed to support. The objective of the system is to create increased external and internal customer satisfaction with less resource consumption. (Hellsten & Klefsjö, 2000)
Successful Management Methodologies for Achieving Co-worker Health in a Large Organization

Research method

Research strategy and approach
A qualitative case study was performed to explore management methodologies within FSB. Miles & Huberman (1994), Yin (1994) and Zikmund (2000) and Merriam (1988), among others, discuss different research strategies for qualitative research. In this case an explorative study was conducted through a single-case approach with embedded units of analysis. In that way different units of the organizational hierarchy could be studied by use of numerous tools.

The full research process, which originated from the aim of the study, is described in Figure 4. The case study organization was chosen on its recognition as a successful organization and receiver of the Alecta award, “Sweden’s best workplace”, in 2003.

Selection of interviewees
Miles & Huberman (1994) state that a key feature of qualitative sampling is the work with a deeper study of a small sample of people in their natural context. Since statistical generalizing was of no interest, non-probability sampling was used to select appropriate managers within FSB.

In August 2004, the research team first got in contact with the project manager of FSB’s now-concluded company-wide health project. In cooperation with her and other managers, the

---

The Swedish insurance company Alecta has instituted a national award, “Sweden’s best workplace”, that considers leadership, work environment, participation and interaction, long term planning, preventive work and profitability. Each year one or several organizations are awarded in an evaluation process similar to that of quality and business excellence awards, such as the Malcolm Baldrige National Quality Award (NIST, 2004).
Successful Management Methodologies for Achieving Co-worker Health in a Large Organization

team decided to focus on one unit; the Bank branches, “Swedish retail operations”, within one of the bank’s five business areas. This choice was made because of the clear organizational structure of this unit. Furthermore, it is represented all over Sweden.

Subunits and respondents were then chosen to cover several levels of the organizational hierarchy and the geographical dispersion of the organization. The study was based on three management levels that would cover the hierarchy from top managers to the bank offices. The HR Manager (who is also the Executive Vice President), was chosen to represent the board of directors. To cover the rest of the management structure within the Swedish retail operations two “local units” were chosen with support from the project manager. These units, here called local bank A and local bank B, are located in different parts of Sweden and were chosen because they represent the geographical dispersion of the organization. Meetings were held with the managers of the two units since they were naturally the representatives of the second management level. The aim of the meetings was to decide which bank offices to study. In the end, two local branches were randomly selected from each of the local units A and B. These offices are here called office α and office β. The choice of representatives of the third management level, namely the two managers of the offices, was then obvious. Finally, the sampling process resulted in the selection described in Figure 5.

Figure 5: The selection of representatives resulted in a sample of six managers (see the red square) from three different management levels and two different local banks. Within each of the two local banks one office manager was chosen from all the offices. The diagram also shows that the office managers represent the lowest management level of the business area and thereby work closest to the employees.

Data collection
To explore the work of the managers, data were collected through individual semi-structured interviews during October to December 2004. Each interview lasted for about an hour and a half and was performed at the places of work. Question forms were used as a guide for each interview, but the order of the questions was adjusted to create natural conversations. The interviews were recorded and the transcriptions checked by the respondents in order to eliminate misunderstandings.

Data reduction and analysis
The empirical data was analysed with diverse methodologies in several steps. The central question of interest was: How have managers at different levels worked to achieve co-worker health?
The transcripts were examined individually in the project team, before the three members together examined the empirical data in two work-shops covering two days each; see Figure 4. In the first work-shop the information given by the managers at the office level were considered. The aim was to scrutinize their opinions and how they work, before analyzing the intentions of managers at higher levels. During the first day, the research team examined and discussed the interviews and identified methodologies from the texts. After agreement the identified success factors and methodologies were written down on post-it notes which were placed on a white-board. The answers of the office managers were considered separately and the post-it notes were kept apart to separate the two of them.

The second day a session with a facilitator was held and an affinity diagram was used to organize the large amount of qualitative information into related categories. The external facilitator had no information about FSB, but helped the research team to control the steps and to keep as objective as possible when discussing. Affinity diagrams can be used to collect and reduce disorganized facts, ideas and information, about unknown and unexplored areas, to a narrative form (Mizuno, 1988). In this study the tool was applied with the goal of achieving unanimous and deeper understandings of successful methodologies used by management and help building explanations.

The post-it-notes from each interview were organized into categories in consensus processes built on several steps. Initially, groups of related factors were arranged according to subjects or factors that were common to several notes and/or were recognised as important to business success. Thereafter, the notes of each group were summarized into a single sentence reflecting the core meaning of the notes. Within these sentences the team searched for relations and then again formed groups of sentences that had connections. For example, groups of communication issues, goal setting and evaluation factors and health prevention methodologies were formed. Once more, the vital content of each group was summarized into a single sentence. These sentences were also, when feasible, arranged in cause-and-effect order. Finally, these sentences, for each respondent, were used to form a statement answering the question: “How has the respondent worked to make FSB one of Sweden's best workplaces?”

The two remaining management levels were analysed in the same way as the office level in a second work-shop. Finally, the results of each of the six diagrams were put together in a table to make it easy to evaluate different organizational levels as well as the local banks. When drawing conclusions the empirical findings and diagrams were assessed separately for the local banks, but also for different organizational levels. Last, the findings were related and compared to theory and recognized research findings. The complete affinity diagrams are presented in (Bäckström et al., 2005)

**Results**

The empirical findings from each interview are here presented in reviews sorted by management levels and local banks, see also Figure 5. Thereafter, a figure will help summarize the identified methodologies and success factors. To begin with, Table 3 gives some information about the working situation of the respondents. The original transcripts can be found in Bäckström et al. (2005).
Table 3: Basic facts about the studied local banks and offices.

<table>
<thead>
<tr>
<th></th>
<th>Local bank A and office α</th>
<th>Local bank B and office β</th>
</tr>
</thead>
<tbody>
<tr>
<td>No of local banks in the region</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>No of employees in local bank</td>
<td>130</td>
<td>250</td>
</tr>
<tr>
<td>No of offices in local bank</td>
<td>10</td>
<td>15</td>
</tr>
<tr>
<td>No of employees in office</td>
<td>9 (all women)</td>
<td>7 (mix of men and women)</td>
</tr>
</tbody>
</table>

HR manager
The HR Manager, who had principal responsibility for human resources and competence development, strongly supported delegation of responsibility and authority. He stated that his foremost task as a leader was to point the way and make sure that management in FSB had a common understanding of the bank’s status and in what directions to work. In 1999, when the HR Manager was recruited, the bank was at the end of the fusion process between Sparbanken and Föreningsbanken, two former competitors. This process resulted in extensive changes in the organization, new IT systems and staff reduction programmes. At the same time management noticed that the number of sick leaves was constantly increasing. In 2001, the health status of the organization was studied in systematic ways and the results were alarming. As a result, the HR Manager initiated a health project and appointed a project manager, who was assigned to evaluate what should be done to reduce the high level of sick leave.

The project was finished in 2004 and had then resulted in changed infrastructures and routines and also new ways of measuring health. To ensure an enduring and systematic approach to health concerns and to get the routines to work, the project manager was positioned in a company-wide organization that would integrate health and wellness issues with work-related health issues. However, managers at lower levels still had responsibility for work environment and health in their units while the executive management focused on providing appropriate methodologies and tools to help them succeed.

The HR Manager said that the rehabilitation of those staff with long term sickness absence and management approaches to psychological health issues had been important parts of the health project. He thought that the project had been successful, but that it was too early to evaluate the numbers since reducing sick leaves is a long-term process. He explained that it is vital that people have the right prerequisites to perform their work, have clear goals, get feedback and have time to recover. According to him, the key factor that reversed the trend within the bank was that they became aware of the problems and the costs: “...to get attention and priority of other organizational issues you have to create a feeling for the economic effects. That is what counts.” He also believed that FSB’s president had been a factor, by pointing out the direction, involving people and making difficult decisions when needed. Moreover, he said that consistency, communication in honest dialogues as well as measurements and feedback on organizational and individual levels had had a great impact on the success of FSB.

Coordinator of the health and work environment organization of FSB
(former project manager)
In September 2002, a long-term focus on health was initiated with the health project. The person, who was appointed as project manager, had been in the bank since 1988. According to her, there were willpower and belief that the project would reduce costs of sickness, but they did not state any cost reduction objectives in either the bank or the project. She said that the goal was to reduce sickness absence and increase long-term healthiness and thereby save money. Luckily, she thought, they got the executive management and president to understand
this, and allocate resources for the project. However, the project manager was the only human resource completely involved in the project, and she brought managers and other co-workers into the project in order to integrate it into the day-to-day work.

She described the project as a development process to which resistance was naturally met. As a project manager, she had to work to involve both executive management and also lower level managers and co-workers. “It did not work to just point with my finger. In my role it is important to involve people, both upwards, downwards and sideways, so to speak. So you have to find languages that they understand.” She further explained that it was important to find different languages that talked to the different categories of staff in order to make everybody understand the goals and what was important. Within the project, they formed the language to fit the interests and values of managers by having more of a result orientation and a business perspective. In addition, the project had a site on the FSB intranet in order to spread information and achieve a wide understanding. Moreover, within the project they created activities and tools such as a self-evaluation test for personal health, which was, and still is, available for all co-workers on the intranet. The purpose of the tool was to achieve improvements, educate and raise interest among co-workers.

According to her, there is always, some difficulty for executive management to reach out to the co-workers and therefore the middle managers were important to the implementation of the project. To make it function in the day-to-day work they worked through the middle managers and trusted their local initiatives. Moreover, in the beginning it was vital to involve and raise interest among the executive management. “I do not think that it is possible to succeed in such a task (to achieve co-worker health) unless you have a strong connection with executive management. I believe that you can perform well somewhere in the middle of an organization, but it will always run out of momentum without upper management’s commitment.”

She made it clear that through consistent, clear and open management and by inviting the co-workers and not giving up, the intentions of the project had been realized. Furthermore, she summarized her thoughts about success factors of the project in the following terms: committed, open and clear leadership; information sharing, business focus on health; a customer model including both stakeholders, customers, co-workers and society as a whole; a management model based on three components; human resources, customer satisfaction index and business results; structured and consistent work (evaluation, planning, performing, assessment) within the project and the organization of the project.

In the end, she explained that the project finally had led to a clear organization and infrastructures for work environment, employee and health issues within FSB. Today, there are measurements of risks and the health status of specific organizational units, which she felt are important in order to prevent and act upon potential risks. The present focus is on making the routines, measurements and activities work in practice and being consistent in order to make the changes long lasting.

**Local bank manager A**

The manager of local bank A had worked in the banking business almost all his life. He felt that his responsibility was to work with both people and regulations and to balance the administration work with leadership tasks. He worked through other managers and was convinced that he had to create his leadership in cooperation with them to be able to communicate the same commonly-agreed goals and messages throughout the whole local
Successful Management Methodologies for Achieving Co-worker Health in a Large Organization

He said that leadership is about aligning people in the organization to the same objectives, bearing in mind that all of us have different preconditions. Moreover, it is about creating an open climate and giving a lot of structured information. The local bank manager gave the office managers absolute responsibility, freedom, safety and support. Also, the manager expressed the opinion that it was vital to his leadership to work without prestige. He had the mandate, from his manager; “When you have a mandate it is okay to be creative, fail and regret mistakes.”

According to the manager, there was a clear structure for sharing information and a smoothly working bureaucracy in the bank with simple and clear structures as well as regulations from the executive board. He said that what had been vital to the success of FSB was that there were honest objectives of change and that changes were planned, money was allocated to execute the plans and the plans were rooted in the organization before changes were executed.

He also believed that FSB had practiced a caring leadership and said that an employee satisfaction index had been used to improve even more. “As a leader you need to care about the employees and show that you really do so. You can do that by inexpensive means such as offering bowls of fruit”. He also claimed that the values you pay attention to as a manager, will be perceived as important among co-workers. According to him, a good working climate and job satisfaction are essential to achieve good results.

Local bank manager B

The manager of local bank B had worked in the bank and finance businesses for more than twenty years. His responsibility was to supervise the office managers and give them authority, responsibilities and tools to perform their jobs. However, he felt that through his leadership and general manner and demeanour he was a leader for all co-workers within the local bank and offices belonging to it. He also tried to visit all co-workers in their offices as often as possible and to know them all by names and be aware of their professional roles. He said that it is important that managers remember that improvement work is a process, not a competition, in which all units have to take part. He believed that to succeed in the local bank there needs to be continuous dialogue, evaluation and feed-back, competent people and also a clear organizational structure.

To a great extent he used the office managers to communicate with the employees. He made good use of the intranet when sharing information from executive management. Moreover, he wrote a newsletter and distributed it, in different forms, to the employees of the local bank every week. Since most decisions were taken by executive management and communicated in a hierarchical order, the local bank manager himself got information and briefings regularly from his manager and in the weekly meetings with the regional management. However, they did not only discuss results and economy. An important issue was also the soft values that produce the really good results.

He believed that there is a relationship between job satisfaction and sickness absence. His methodology to keep people healthy was to constantly be observant as a manager. Also, health progress was a fixed point on the agenda of the local bank’s work environment committee. He said that his responsibility was to show the importance of health issues and prioritise these issues in order to affect the co-workers. Moreover, he claimed that it had been vital to communicate the message repeatedly through different channels, to make sure everyone understood that “it won’t disappear”.

- Successful Management Methodologies for Achieving Co-worker Health in a Large Organization -
Successful Management Methodologies for Achieving Co-worker Health in a Large Organization -

Within the local bank they had also focused consistently on rehabilitation, information distribution and the indexes of human capital development. In addition, they had sessions with all managers and work environment representatives together with lecturers and discussed stress and other work environmental issues. He meant that these initiatives had resulted in people being more observant and focused on health in the offices. Moreover, he thought that well adjusted health activities and also measurements of health and follow ups, consistency, patience and dialogues had contributed significantly to the success of FSB.

Office manager α
The manager at office α became an office manager in 1975. He said that information is central in an organization and within his group of nine people he could manage to efficiently spread information. The manager in turn, got information through the local bank manager in the group of managers of the local bank A. Information was also given regularly from executive management to offices through intranet and the internal TV. The office manager worked to create an open atmosphere and had told the employees to tell him both good and bad news.

Manager α believed that his most important task was to make sure that everyone in the office felt well. He knew his staff well and if someone did not seem to feel well he talked to that person to get to the bottom of problems. Moreover, he said that the key to satisfied customers is healthy employees; “If you are happy and satisfied at work you will also perform well and satisfy the customers”. He gave the employees opportunities to take care of their health by offering a variety of initiatives such as health activities, fruits, vitamins and light therapy at the office. Moreover, he worked in cooperation with the employees in order to create values with them.

All employees had individual goals and an important task of the manager was to set the goals in cooperation with each individual and to follow up the results every month. Moreover, the office was competing against itself and was rewarded by the office manager if performing better than it had done in previous years.

When talking about work changes and improvement work of the bank, the manager mentioned the fusion and the changes in work processes and systems that followed as a result. He said that the office had made the fusion rapidly in comparison to other offices and that he had had daily information sessions with the employees and had focused on everything that really was successful in the new organization. Moreover, the manager himself had learned and evaluated new routines and systems before asking the staff to use them.

The office manager believed that FSB’s safe and secure workplace, where managers cared about each other, learned from each other and took care of the staff had been vital to success. He believed that clear professional roles and lucid managers are important to both managers and employees. However, he could acquire the authority he felt necessary in order to fulfill his responsibilities. Finally, he highlighted that everyone in the office, regardless of professional role, has the same value.

Office manager β
The manager at office β became the office manager in 2003. She believed that her foremost responsibility was to be committed and coach the employees. She expressed the opinion that the change of the bank, toward a more sales-orientated organization, meant major changes in tasks and the focus of employees’ work. Therefore, an important task as a manager had been to manage the changes in the office and involve the employees. She had used her close
relationship with the employees, study groups in the office, discussions and dialogue to accomplish this. Also, before accepting the responsibility to implement anything new in the office, she herself always had evaluated it against her own values. She was of the opinion that executive and middle managers need to be clear and consistent to successfully implement changes in the organization and make it easier for the office managers to involve the co-workers.

The most important factor for the office manager was the wellness of the employees. Therefore she actively involved the employees in decisions, gave regular feedback, talked with them about health, had evaluated the health status in the office through questionnaires and tried to act immediately on problems such as physical and psychological stress symptoms. Her goal was to prevent burnout in the office. Therefore, she tried to know the individuals well and talk a lot with the employees and often asked how they felt. In addition, she did not give up until she got an honest answer and she really had the willpower to solve the problems.

The office manager practiced ‘management by walking around’. Likewise, she meant that because of the small group of employees she, as a manager, had plenty of time to give each employee. Once a week there was a meeting in the office but there were also informal meetings during coffee breaks. Information was also communicated through email. All employees had individual goals that were set in cooperation between the manager and employee in accordance with the constraints given by executive management. The short term goals were followed up once a week in a meeting with the individual employee.

Manager β, in turn had meetings with the other office managers of the local bank and the local bank manager every second week. Between meetings, she had regular phone calls with the local bank manager. She also, said that “the office is like a small company within the larger company” and that she could feel her authority and her manager’s trust.

According to the office manager, the customer orientation and the “selling organization” which made it possible to recognize each individual’s performance and have clear and fair demands on the employees, had contributed most to the success of FSB. Furthermore, she felt that the new organization had encouraged involvement, more authority for the offices and pride in work.

**Recognized management methodologies**
The methodologies that could be identified within each management level, by use of affinity diagrams, are summarized in Figure 6. The full affinity diagrams can be seen in Bäckström et al. (2005)
- Successful Management Methodologies for Achieving Co-worker Health in a Large Organization -

**EXECUTIVE MANAGERS**
- Decide upon consistent strategies and clear objectives in accordance to common values
- A comprehensible model of management
- A structured, company wide health approach
- Rely on local bank managers - give responsibilities and authorities
- Give methodologies and tools to aid the work of local bank managers
- Have a business perspective on health
- Reserve resources for improvements of health issues

**LOCAL BANK MANAGERS**
- Delegation – trust office managers and set the frames (mandate)
- Consistent and patient focus on important objectives of the bank
- Management by walking around
- Offer methodologies and tools to support the work of office managers
- Measurements, evaluations and feed-back
- Dialogues
- Act as they talk

**OFFICE MANAGERS**
- Goal- setting and feed-back in cooperation with each co-worker
- Weekly information sessions
- Monthly planned conversations with each co-worker individually
- Give the co-workers prerequisites to perform a good work
- Management by walking around
- Committed and caring leadership - everyone has the same value
- Have dialogues and build relations to get to know each individual
- Learn about and take care of psychosocial health issues – dare to solve problems

*Figure 6: In general, the same methodologies were recognized within the different local banks and offices. The methodologies should be good examples and possible for managers in other large organizations to adopt.*

The analysis of the interviews, in addition, resulted in patterns of success factors expressed by the managers. Most of them expressed the importance of customer focus and highlighted the vitality of employee satisfaction and health to fulfill customer needs. For example one of the managers explained the relationship as: “Satisfied employees give satisfied customers”.

Moreover, all six managers mentioned the following factors as central for achieving co-worker health: clear, honest and consistent leadership; measurements and feedback; co-worker participation and communications in dialogues. Executive managers also meant that a structural business approach on health issues and an effective model of control are important.

**Discussion and Conclusions**

In this study a sample of six managers from the large bank, FSB, has been studied through interviews. Therefore, the results can not be assumed to give a complete picture of the entire bank but should give good, valuable examples of management methodologies. The studied units were chosen on practical and geographical reasons and were not necessarily the most successful units of FSB. On the other hand, there are no indications that these units perform differently from what is typical in the bank. Within the two local banks and offices there were
Successful Management Methodologies for Achieving Co-worker Health in a Large Organization

some differences, but in general the same methodologies were identified. Some of these might though, be influenced by the perceptions and analysis of the research team.

The results support the findings of Griesinger (1990), Eriksson (2003) and Zwetsloot & Pot (2004) by demonstrating that leadership, structures, objectives, clarity and resources as well as trust and communication are important to achieve employee health and business results. Moreover, there seem to be similarities between the managers’ intentions and what employees in the study of Eriksson (2003) have reported as promoters of health.

The commitment and work of managers appear to have been central to achieving success. This connection has also been pointed out in other research; e.g Hackeman & Wageman (1995). All interviewed managers, regardless of level have stated that their immediate superior has been important to the success of the organization. Moreover, most of the local bank managers and office mangers mentioned that they feel they have authority and their managers’ trust.

FSB’s management approach towards health

Executive management initiated a health project and assigned a project manager to plan, perform and implement health improvement activities into the daily work of FSB. The project was performed in stages and started with an cost assessment of sickness absence and related costs as well as development of metrics. Key measures of health have then also been integrated into the FSB’s balanced scorecard and are related to co-worker indices, economical results and customer satisfaction indices. Thus, health was made a focal area, in which the managers were asked to present results. In addition, it illustrates that the executive managers paid attention to and measured, and thereby acted upon, what they said was important to the bank.

The rehabilitation programme and the education of managers in stress management also appear to demonstrate an honest effort by executive management to act upon psychosocial health issues, not only physical health activities. It feels acceptable to assume that many times it is easier to work preventively by arranging a physical health activity than working with psychosocial health. It was clear that managers within FSB were not afraid of taking care of the employees or aiding individuals who were not feeling well.

However, both economical and health incentives seem to have been behind the management’s strategic approach. The economical results apparently have been calculated and evaluated in relation to health progress to show the impact, of for instance sickness absence, on the organization. The initiation of the health project and calculation of the costs related to sick leaves were means, to raise the awareness of the executive managers and employees, but with the goal of improving employee health. Furthermore, a business perspective on health, which is also prescribed by Proter et al. (2003), seems to have been a prerequisite for reserving resources to health related initiatives.

The management approach versus IHM and TQM

It is clear that aspects of both IHM and TQM values are parts of FSB’s management approach towards health. Specifically three of the needs mentioned by Zwetsloot & Pot (2004) were characteristics of FSB. The bank talked in terms of long term healthiness and health issues instead of focusing on sickness. In addition, a clear business perspective on health could be seen. However, while middle and lower level managers expressed the importance of health care for all personnel, there was an evident attention on people with problems as can be seen
Successful Management Methodologies for Achieving Co-worker Health in a Large Organization

from the rehabilitation program, which was activated throughout the organization by executive management. Furthermore, investments and resource allocations to health activities seem to have been a result of cost awareness in FSB. In addition, the results of this study show the importance of management methodologies and measurements that support the approach and objectives.

Executive managers demonstrated commitment through the strategic and holistic project-approach, which was companywide, and got resources reserved for them. Objectives have obviously been intentionally supported by methodologies and tools used within the organization. Links between the intentions expressed by the managers and their methodologies were visible. For example the TQM values of customer focus, total co-worker commitment and fact based decisions find clear support in the statements summarized through the affinity diagrams; see Figure 7.

**Figure 7:** The arrows show a few examples of how management methodologies, identified within FSB, supported the values of the managers. Values represent examples of intentions that were expressed by the managers during the interviews and the methodologies are a sample of the methodologies summarized in Figure 6.

The managers did also evidently create methodologies and tools to help employees contribute to the objectives and fulfil customer needs. In addition, managers “practised what they preached”. The analysis of the interviews and observations showed clearly that the managers of FSB acted as role models and behaved according to common guidelines and as they expected the co-workers to behave. They consistently concentrated on and paid attention to what they communicated as important factors to the bank.

**Methodologies of different management levels**

All managers, regardless of management level, seem to agree upon the fact that the top down management has been effective for achieving health. There was indeed, no evidence of lack of empowerment, as Nilsson (1999) fears in large organizations. Instead, co-worker participation obviously was integrated by daily dialogues and goal setting in cooperation with employees. The managers at the three levels worked through delegation and as coaches.

The executive managers were important in order to decide upon strategies, point the way to middle level managers and get the organization as a whole to work in the same direction. The objectives of the bank have successfully been passed on throughout the organizational hierarchy by middle managers and finally, been well executed in the bank offices. Open
Successful Management Methodologies for Achieving Co-worker Health in a Large Organization

communication, clear goals and mutual trust seem to have been important to achieve that. These methodologies have much in common with the results of Harnesk et al. (2004).

However, the executive managers’ work through middle level managers may possibly have been facilitated by the use of common values and the creation of aiding tools. Moreover, within the project they seem to have worked hard to raise interest in health issues among executive management and co-workers. Therefore, one might argue that middle managers more or less have been forced to prioritise health issues. Also, by putting a business perspective on health, executive management presumably has put attention on and increased each manager’s responsibility for health related results.

Management methodologies

The identified methodologies, presented in Figure 6, are obviously not revolutionary, but already well known as winning concepts in management theories. The same conclusions could be arrived at by Harnesk et al. (2004), when they studied smaller organizations. They questioned why only few organizations though, seem to practise the methodologies. Unfortunately, there are no answers given, to that question, in this study of FSB either. One guess is that lack of knowledge as well as pressure on managers to make money can hinder long-term efforts for health improvements and staff activities, when problems are faced. Short term and local initiatives might be easier to apply, when there is no holistic business view of health or acceptable ways of measuring the consequences of health improvements.

In conclusion the business perspective towards health and focus on health in the companywide strategies seem to have had a great impact on the success of FSB. In addition, the support of these strategies through management methodologies and not least the good relationships and dialogues between managers and co-workers, appear to have contributed to the employee health. These results show the importance of an overall approach to health and of managers supporting the objectives and the employees by their methodologies and through communication.

Practical Implications

It is difficult to answer the question “How have managers on different management levels worked to achieve co-worker health?” by simply identifying management methodologies. After having studied three management levels of FSB no complete solution can be given, but the identified successful approach and advice of methodologies presented in Figure 6, may give valuable inputs and ideas to other managers who aim to improve both health status and profitability. In summary, the author would give the following suggestions to managers at different levels of large organizations.

Executive management:

- Create and mediate clear health strategies, objectives and intentions with a business perspective on health.
- Set goals, measure and evaluate performance - continually ask for results in areas associated with the objectives.
- Facilitate the work of managers at middle levels and co-workers by offering methodologies and tools that support the objectives of the organization
Successful Management Methodologies for Achieving Co-worker Health in a Large Organization

**Middle level management:**
- Have dialogues with managers at lower levels - be clear in communicating what executive managers have expressed as being important to the bank
- Be a coach to managers at lower levels and trust them
- Prioritise and ask for results in focal areas

**Lower level management (initiate/closest to the co-workers):**
- Create a relationship with the individual through dialogue, trust and “management by walking around”
- Be a coach to the co-workers and make sure they have the right opportunities and competence to perform their work
- Set goals, measure and follow up results in confidence with the co-workers.

**Further research**
There is a reason to believe that, in addition to already well known methodologies, the company-wide health approach with supportive methodologies and measurements, the business view on health issues and the management’s courage to learn and deal with psychosocial illness as well as personalities, have had large impact on the success of FSB. Further research on not only methodologies but also on holistic approaches regarding management for sustainable health would therefore be of interest. There also seems to be an interesting connection to TQM that should be studied further. In addition, since a business perspective and cost incentives on health seem to have impact on management motivation to reserve resources and activities to health improvements, it is necessary to learn more about business models, measurements and calculations reckoning health and sickness absence issues.

The result also shows a common understanding, among the managers, about what are important factors to achieve health and profitability. These factors also have similarities with health factors identified in other studies. This leads the author to also wonder about the opinions of FSB’s co-workers and how the co-workers opinions are related to the managers’ statements. However, this subject has to be the issue of a future, additional analysis to be performed from the view of the co-workers.

**Acknowledgements**

The author gratefully acknowledges the financial support from the Swedish insurance company, Alecta, and the representatives of FöreningsSparbanken, who made the study possible and interesting. Furthermore, the author would like to thank the members of the project team, Ingela Bäckström and Pernilla Ingelsson at Mid Sweden University and also Professor Bengt Klefsjö at Luleå University of Technology for his support.
References


Miles, M. B. and Huberman, A. M. (1994) Qualitative data analysis: an expanded sourcebook
Successful Management Methodologies for Achieving Co-worker Health in a Large Organization


SRDS (2005) http://www.srds.ndirect.co.uk


PAPER II

How to create a successful workplace
- The co-workers’ opinion of “Sweden’s best workplace”

Wreder, Å. & Klefsjö, B. (2006)

Accepted for publication in
International Journal of Management Practice
How to create a successful workplace

The co-workers’ opinion of “Sweden’s best workplace”

Åsa Wreder & Bengt Klefsjö
Division of Quality & Environmental Management
Luleå University of Technology
SE-97187 Luleå
asa.wreder@ltu.se
bengt.klefsjo@ltu.se

Abstract

Employee involvement has become an important issue to support individual development, decrease absenteeism and in the long run improve productivity and organizational development. However, involvement does not automatically ensure good work conditions, but can also lead to co-worker stress and sickness absence. Therefore, it is of great importance to study and learn what employees think is vital in this respect and how managers can work to achieve forms of employee participation that promote health and organizational development. This is particularly important in large organizations where it is argued that empowerment is difficult to practise.

The purpose of this paper is accordingly to describe what co-workers of a large Swedish bank, awarded as “Sweden’s best workplace”, think has been vital to create a successful and well-functioning workplace and also identify methodologies that have been used to achieve this.

The study shows that the possibilities to actively participate as a co-worker were seen as important. The value of everybody’s involvement has been achieved through coaching and co-workership with communication, delegation, goal setting and training as important ingredients. The results, for instance, also confirm the importance of caring and visible managers, clear goals and adapting the business to the needs of internal and external customers. Furthermore, managers and co-workers have worked systematically to create a culture based on common values by choosing methodologies supporting these values. This strategy is in accordance with what some authors believe creates Total Quality Management.

Introduction

The concept of employee involvement is not new, but has been discussed and used for decades (Tubbs, 1994). However, with ever-increasing competition, employee involvement has gained new prominence among organizations in order to lower absenteeism, achieve responsibility and social interactions and in the long run, improve productivity, quality of working life and organizational development (Paul et al., 2000; Velury, 2005). In this context, co-workers who actively participate, are seen as a factor for stress prevention, health promotion and for achieving local, as well as global, betterment (Bergman & Klefsjö, 2003). The argument for this is the positive influence the possibilities to active involvement have on

---

1 In this paper the words “employee” and “co-worker” are used alternately for “a person who works for and/or with another in return for financial or other compensation”.

---

1

- How to create a successful workplace -
motivation and work satisfaction; see, for instance, Mayo (1949), McGregor (1960), Kondo (1993) and Kondo & Park Dahlgaard (1994). Thereby, stress can be prevented and employee health promoted at the same time as the employees’ knowledge and desire for commitment contribute to improvement work within the organization; see Salancik (1977) and Bergman & Klefsjö (2003).

However, involvement does not directly equate with good work conditions and health, but can also lead to co-worker stress and burn-out. For instance, the disappearance of formal boundaries without their replacement by suitable structures or resources is argued as leaving people to their own judgement with stress as a consequence and thereby a cause for sickness absence; see Backström (2003), Docherty et al. (2002), Kira (2002) and McKenna & Beech (2002). Bad health, in turn, implies higher costs for society. For example, the costs for sickness benefits and disablement pensions together were 10 % of the Swedish Governmental total expenses in 2001 (The National Social Insurance Board, 2000, 2003). Not least, bad health means suffering for the individuals concerned and has implications on their performance, which in turn reduces the companies’ future prospects (Cordes & Dougherty, 1993; Arnetz, 2002; Porter et al., 2003).

On the other hand, there are organizations that have successfully broken the tendency towards rising sickness absence that is documented in several countries in Europe and have established good forms of co-worker involvement. This, in turn, has resulted in good employee health and also in financial growth. Studies by Harnesk et al. (2004), as well as earlier research, show that the management and communication in the organization is vital to create employee commitment. For example, Stowell (1988) disputes that managers have to learn how to be more like coaches and less like bosses. It is interesting to note that in many discussions related to co-worker commitment, no co-workers are included; see, for instance, Tengblad & Hällsten (2002).

In addition, as organizations grow larger, internal communication gets more difficult (Daly et al., 2003). According to Nilsson (1999), most large organizations have hierarchical structures and complex communication channels and are less empowering. Deming (1986) even claims that it is very difficult to apply good leadership in large organizations.

Therefore, it is of great importance to study and learn what employees of large organizations think is vital and how managers according to the co-workers, should work to achieve forms of co-worker involvement that promote health and organizational development.

For that reason, employees in a large Swedish organization, awarded the title of “Sweden’s best workplace” in 2003, have been studied. The purpose of this paper is, based on that study, to identify and describe factors and methodologies that, according to these co-workers, have been important to create a good workplace.

2 In this paper the meaning of what is a “good workplace” is based on the opinions of the co-workers. The organization studied has though, externally been awarded the title “Sweden’s best workplace 2003” for its excellent leadership, employee involvement, work environment and financial results.
Theory

Employee involvement

At the outset, co-worker involvement was practised in programs like quality circles and self-managing work teams (Tubbs, 1994; Paul et al., 2000). However, during recent decades, the concept has expanded to cover delegation of authorities, responsibilities and rewards to lower levels of the organization. Factors such as information sharing, ownership and partnership are also often discussed as means to fulfill the common needs of the co-workers and the organization; see, for instance, Stowell (1988), Lawler et al. (1989) and Velury (2005). Accordingly, the name of the phenomenon has sometimes changed to “employee commitment” or “employee empowerment”.

According to Wellins et al. (1991), empowerment is the process of giving authority and responsibility to individuals at lower levels of the organizational hierarchy. Kinlaw (1995) also talks about influence based on competence. Juhl et al. (1997) simply explain empowerment as delegation of authority, whereas Tengblad & Hällsten (2002) talk about empowerment as a process in which management make the decisions about what authority to distribute and in what way.

Spreitzer (1996) claims that there are good reasons to propose that an empowerment feeling of being able to make a difference in the workplace as a co-worker facilitates the commitment to the organization. Janssen (2004) further argues that commitment, by several authors, have been defined as an individual’s identification with and involvement in the organization, characterized by a strong belief in and acceptance of the organization’s goals and values, and a willingness to exert considerable effort on behalf of the organization. Employee commitment is here seen as an effect of new requirements in today’s working life; see Stowell (1988) and Axelsson & Bergman (1999).

On the subject of involvement, Tengblad & Hällsten (2002) also discuss employeeship, which means that every employee should feel like, act like and have the power to be like a manager of their specific work tasks and area of responsibility. This does not mean that the co-workers take the role of executive management, neither is it collective decision making. They believe that the Dane Claus Möller, who was involved in the revolution within Scandinavian Airlines, under Jan Carlzon in the 1980s, was one of the pioneers; see Möller (1994).

To achieve real success, Bergman & Klefsjö (2003) argue that a deeper form of involvement, which they call co-creation, is needed. They state that “co-creation is a committed, actively contributory and supportive way to participate.” It means that co-workers take responsibility for initiatives and development efforts and seek activity with the aim of the common good. The will to be involved as co-creative, though, depends on the belief that one is needed and is able to contribute, as well as on signals from the societal culture influenced by expectations that one should be co-creative and contribute to the development.

Harnesk (2004), similarly to Stowell (1988), further uses the term “partnership with internal customers” to stress the necessary mutual agreement between employers and co-workers. He argues that internal partnership could be a way to achieve increased co-worker commitment and has, from a management perspective, identified decisive factors for achieving partnership. These factors, which are presented in a partnership model, are core values, personal motives, personal maturity, trust and equity. The model also demonstrates that these, in turn, depend on a fifth factor; communication in dialogues; see Harnesk (2004).
Means to involve employees
To get co-creatively involved employees the management is important; see, for instance, Stowell (1988), Bergman & Klefsjö (2003) and Harnesk (2004). Managers must make sure that employees at all organizational levels have the right mix of information, knowledge and rewards to work autonomously or independently of management control (Paul et al., 2000).

Bergman & Klefsjö (2003) state that co-workership is a way of “contribute to the personal development of the employees”, when involving the endeavour to stimulate and create opportunities for co-creativeness. Also Leiter & Maslach (1988), Csíkszentmihályi (2003), Eriksson (2003), and others, draw similar conclusions. Moreover, Bergman & Klefsjö (2003) argue that, to get people co-creative, there is a need for trust and confidence in people and also self-confidence, communication, purposefulness and the ability to learn from experience. Similar arguments are presented by Griesinger (1990), who claims that a reduction in uncertainty and an increase in honesty and openness can contribute to both economic efficiency and social and ethical betterment.

Furthermore, relations between co-workers and managers, common values and also balance between requirements, objectives and resources are argued to be important factors in the work environment to achieve employee involvement. It is also shown that clear goals, feedback, structures and routines of work, competence development and good performance reviews are important to support personal development and wellness; see, for instance, Leiter & Maslach (1988), Csíkszentmihályi (2003) and Eriksson (2003).

Similar conclusions, on how to work to achieve a successful work environment were drawn from case studies carried out among employees of successful minor organizations. In these studies Harnesk et al. (2004) found a number of methodologies considered, by the co-worker, to be fundamental to their commitment and health. Some of these are: participation by everybody; evaluations made with inquiries and in group discussions; listening, visible and encouraging managers; competence development programs; the corporate culture and encouraging atmosphere; responsibilities and authorities distributed in accordance to personal interests and competence.

Further on, several researchers stress the importance of the manager’s ability to stimulate employees through coaching; see, for instance, Stowell (1988) and Kinlaw (2000). According to Kinlaw (2000), coaching is something that managers do, to support people to resolve performance problems and challenges to reach higher levels. Further, he means that it is a function, not a role, and that it “is a mutual conversation that follows a predictable process and leads to superior performance, commitment to sustained improvement and positive relationships.” Coaching clarifies goals and priorities, helps people understand what is and is not important, invites people to influence their performance and careers, improves the knowledge and skills people need to do their best and conveys to people how important and appreciated they are. In this manner, coaching leads to employee commitment (Kinlaw, 2000).
**Total Quality Management and employee involvement**

Employee involvement is one of the core values within Total Quality Management (TQM). Hellsten & Klefsjö (2000) express the value as “Let everybody be committed”, Foster (2001) talks about “Employee improvement” and Dale (1999) emphasizes team work and recognition of people as an asset.

Many different definitions and descriptions of TQM have been presented over the years; for a discussion, see Bergquist et al. (2006). For instance, Dale (1999) defines TQM as “a management approach of an organisation, centred on quality, based on the participation of all its members and aiming at long-term success through customer satisfaction, and benefits to all members of the organisation and to society”. Dahlgård et al. (1998) describes TQM as “a corporate culture that is characterized by increasing customer satisfaction through continuous improvements involving all employees in the organisation”.

In the last decade some definitions with a system emphasis have been suggested; see, for instance, Shiba et al. (1993) and Hellsten & Klefsjö (2000). Hellsten & Klefsjö (2000) view TQM as “a continuously evolving management system consisting of values, methodologies and tools, the aim of which is to increase external and internal customer satisfaction with a reduced amount of resources”; see Figure 1. They further argue that to achieve and keep the culture, the values must persistently be supported by suitable methodologies and tools.

The value of everybody’s commitment is achieved through methodologies based on communication, delegation and training. By inviting employees to actively participate in decisions and activities, motivation and work satisfaction can be created. (Ibid.) Moreover, TQM positively influences financial results, work satisfaction and customer satisfaction and the perceptions employees have of their own health; see, for instance, Hendricks and Singhal (1997), Hansson & Eriksson (2002), Lagrosen (2004) and Lagrosen & Bäckström (2005).

![Figure 1](image-url)
- How to create a successful workplace -

**Methodology**

To explore factors and methodologies that are important to achieve a good workplace and sustainable health, a case study was performed at FöreningsSparbanken (FSB), a large Swedish bank, chosen because of its having received the award “Sweden’s best workplace” in 2003. (More information about FSB is given in the Appendix). The study included managers at many levels as well as employees at separate bank offices. This paper focuses on the views of the employees.

**The research process and approach**

The case study was accomplished in a process similar to the Deming cycle: plan-do-study-act. Figure 2 shows the activities performed in each phase of the process in order to explore the views of the co-workers at two different bank offices; Office α and Office β.

![Figure 2: The study of the co-workers’ view of FSB was performed in four consecutive phases and complemented with literature and document studies. The figure illustrates the steps taken in each phase and also that the outcome of the data collection, i.e. empirical findings, served as input to the analysis. In the same way the results of the analysis together with literature was a base for comparisons to theory, the conclusions and the discussion. Here, for instance, the notation “Tα” refers to tree diagram from Office α and “Aα” refers to the affinity diagram from Office α.

**Planning**

In August 2004, the research team first got in contact with managers of FSB and decided to focus the study on “Bank branches”, one of the bank’s five business areas; see Appendix. Two offices were randomly selected from two different local groups. These local groups were chosen, to make sure that several related levels of the organizational hierarchy and the geographical dispersion of the bank would be accounted for. The selection of representatives

3 The Swedish insurance company Alecta has instituted a national award, “Sweden’s best workplace”, that considers leadership, work environment, participation and interaction, long term planning, preventive work and profitability. Each year one or several organizations are awarded in an evaluation process similar to that of quality and business excellence awards, such as the Malcolm Baldrige National Quality Award (NIST, 2005) and the European Quality Award (EFQM, 2005).
of the co-workers was entrusted to the office managers in order to assure a variation in professional roles, genders, ages and experiences among the participants and to minimize the disturbance to the everyday business of the offices.

Data collection
The intention of the study was to explore the employees’ views of how managers and employees within FSB, have worked to create a good workplace. Since we believed that the reasons might be embedded in complex activities and difficult to express, workshops using tree diagrams (Mizuno, 1988) were selected to aid the data collection.

In the workshop at Office a five female co-workers took part. They represented a mixture of ages, defined working roles and time in the bank. At Office β, four persons of varying ages, gender and roles participated in the workshop.

Initially, the co-workers were asked about their opinions on the award and being named “Sweden’s best workplace”. The groups were then guided to answer three successive questions, on different levels, through discussions about success factors and methodologies in brainstorming and consensus processes. In these discussions the tree diagram tool was used to organize and scrutinize the answers; see Figure 3. The idea was similar to the “five-why”-methodology, introduced at Toyota to reach basic reasons; see Toyota Motor Corporation (2003).

- How to create a successful workplace -

![Figure 3](image)

Figure 3: The tree diagrams were created in discussions and consensus processes using three consecutive questions. The figure shows an example of how suggestions were given and explored in several steps through the questions. The example is a part of the tree diagram created at Office a. Compare with Table 1, where “Continuous learning” can be found as a success factor expressed on Level 1 and “Education”, for example, is replicated on Level 2 of the table. The complete tree diagrams are presented in Bäckström et al. (2005).
The first question, Level 1, was of a general nature: “What makes FSB to one of Sweden’s best workplaces?” Suggestions from the co-workers were then written on post-it notes and placed on a white-board; see Figure 3. The next step was to further explore these suggestions by asking “Why”? or “What is causing this?” to each of the post-it notes (Level 2). Once again, answers were written down and placed on the white-board. Last, on Level 3, to identify more detailed methodologies, these suggestions were examined by asking the co-workers “How have you worked within FSB to achieve this?”.

Suggested procedures for using tree diagrams were followed (Mizuno, 1988; Klefsjö et al., 1999) and one tree diagram was established during each workshop. Both workshops were guided by the same member of the research team. This coordinator asked the questions, followed up the answers and, when needed, acted as a facilitator during the discussions. In addition, at least one more member of the research team participated as an observer and assisted the group by writing the submissions on post-it notes. Each workshop lasted for approximately four hours and afterwards the tree diagrams were documented by the research team and verified by the participants.

Analysis

The data in the tree diagrams was later analysed by the research team in a workshop lead by an external facilitator. This person had no information about FSB, but helped the research team to control the steps of the analysis and to keep as objective as possible. One tree diagram, at a time, was considered and the information on each separate post-it note was discussed to get a common understanding of its message within the research team. Affinity diagrams, recommended to reduce disorganized facts, ideas and information, about unknown and unexplored areas, to a narrative form (Mizuno, 1988), were then used to organize the large amount of qualitative information. The procedures suggested by Mizuno (1988) were used to achieve unanimous and deeper understandings of influential factors and methodologies and help building explanations to the question “What, according to the co-workers, makes FSB to one of Sweden’s best workplaces?”.

Throughout the analysis, all the notes originating from the tree diagrams were taken out of the diagrams and instead organized into categories based on affinity. Basically, this was done in a consensus process built on different steps. Initially, all the notes were arranged in groups of related factors and methodologies that the co-workers had recognised as important to FSB’s success. Thereafter, the notes of each group were summarized and expressed into a new success factor reflecting the core of the notes within the group. Within these newly formulated success factors the research team, once more, searched for relations and then again formed groups of factors that had connections. Thereby a few prevailing factors could be formed to explain the question about FSB’s success. These success factors were also when possible, arranged in cause-and-effect order; see Figures 4a and 4b.

The analysis was later continued by a comparison of the two offices. In this comparison the findings of both tree diagrams and affinity diagrams served as inputs; see also Figure 2. First, the findings of the affinity diagrams and tree diagrams of the two offices were compared to find out about similarities and differences regarding the factors that make FSB a good workplace. Thereafter the methodologies related to these success factors that looked similar to both offices, were compared. In that way the question “How have FSB worked to become one of Sweden’s best workplaces” could be explained. Finally, the results of the analysis were also compared to theory.
Empirical findings

Initially, the co-workers at both Office α and Office β, with one accord said that they were lucky to work at FSB and that they had a great workplace. They were proud of and enjoyed being employees of FSB.

By using the tree diagrams, the employees were then encouraged to answer questions on three different levels: “What?”, “Why?” and “How?” and thereby explain what makes FSB a good workplace and what methodologies had been used to achieve that.

Success factors that make FSB a good workplace

On the lowest level, Level 1, of the tree diagrams, both groups had agree upon four success factors that answered the question “What makes FSB to one of Sweden’s best workplace?”; see Table 1.

The groups were then asked to agree upon why each of these success factors was important or alternatively explain what was creating the factor. The reason for this was to further investigate why the mentioned success factors were considered important and to get a more detailed explanation. The discussions within the groups resulted in several answers on the second level of the tree diagrams; see Table 1.

Table 1: The matrix shows the employees’ answers on the first and second level of the tree diagrams. These success factors were derived through discussions about what makes FSB a good workplace and why.

<table>
<thead>
<tr>
<th>Office α</th>
<th>LEVEL 1: Success factor</th>
<th>LEVEL 2: Why is this factor important? and/or What is causing this factor?</th>
<th>Continuous learning</th>
<th>A good work environment</th>
<th>Continuous development</th>
<th>We work close to the customers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>•Training&lt;br&gt;•We learn from each other&lt;br&gt;•Enjoyable work&lt;br&gt;•Variation&lt;br&gt;•Changing customer demands&lt;br&gt;•Varying working tasks</td>
<td>•We enjoy being at work&lt;br&gt;•Good facilities&lt;br&gt;•We work office hours&lt;br&gt;•Preventive healthcare&lt;br&gt;•Ergonomic workplaces</td>
<td>•Personal development&lt;br&gt;•Dialogues&lt;br&gt;•Business development</td>
<td>•We ask about our customers' opinions&lt;br&gt;•We are available to the customers</td>
<td></td>
</tr>
<tr>
<td>Office β</td>
<td>LEVEL 1: Success factor</td>
<td>LEVEL 2: Why is this factor important? and/or What is causing this factor?</td>
<td>Clear professional roles</td>
<td>Secure workplace</td>
<td>Flat organizational structure</td>
<td>Possibility to participate and influence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>•Customers' requirements on competence have increased&lt;br&gt;•Organized methodologies&lt;br&gt;•We learn from each other&lt;br&gt;•Continuous training</td>
<td>•Preventive healthcare&lt;br&gt;•The type of business makes outsourcing impossible&lt;br&gt;•Good terms of employment&lt;br&gt;•Clear regulations&lt;br&gt;•The company is successful&lt;br&gt;•Resources to improve safety&lt;br&gt;•Knowledge available within the company</td>
<td>•Managers see the co-workers&lt;br&gt;•Good office-managers with authority&lt;br&gt;•A &quot;we-feeling&quot; in all units&lt;br&gt;•Responsibilities and authority delegated to co-workers having customer relations&lt;br&gt;•Re-organization</td>
<td>•Clear bodies of regulations – freedom within&lt;br&gt;•Market and Human capital research&lt;br&gt;•Management encourages dialogues</td>
<td></td>
</tr>
</tbody>
</table>
- How to create a successful workplace -

Methodologies

When creating the top level, Level 3, of the diagrams the co-workers described methodologies, i.e. how they thought that managers and co-workers had worked to achieve the essence of the factors presented in Table 1, and consequently become a good workplace. The methodologies mentioned by the co-workers are given in Tables 2a and 2b. These tables also describe from which factor the methodologies were derived in the co-workers’ discussions.

Table 2a: The table shows methodologies expressed by the employees of Office a. During the work-shops, the methodologies were derived through co-workers discussions about how they had worked within FSB to achieve each of the factors given in Table 1. Consequently, the methodologies were expressed on Level 3 of the tree diagram; see also Figure 3.

<table>
<thead>
<tr>
<th>Success factor</th>
<th>METHODOLOGIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Co-worker participation in design of workplaces</td>
<td>We work office hours</td>
</tr>
<tr>
<td></td>
<td>Preventive healthcare: common activities, health representatives, counseling, competitions</td>
</tr>
<tr>
<td></td>
<td>Ergonomic and tailor-made workplaces to individuals</td>
</tr>
<tr>
<td></td>
<td>The office manager and co-workers create a atmosphere based on the needs within the office - We respect each other and work as a team</td>
</tr>
<tr>
<td></td>
<td>Both male and female co-workers</td>
</tr>
<tr>
<td></td>
<td>Measure the human capital</td>
</tr>
<tr>
<td></td>
<td>A co-determination agreement – possibility for the co-workers to actively participate</td>
</tr>
<tr>
<td></td>
<td>Yearly gathering of all within of the whole local unit</td>
</tr>
<tr>
<td></td>
<td>Resources to work environmental and health activities are reserved by managers</td>
</tr>
<tr>
<td></td>
<td>The office managers listens, cares, remembers everyone’s birthday and asks the co-workers and tries to arrange what the co-workers need</td>
</tr>
<tr>
<td></td>
<td>Regular office meetings and information sessions</td>
</tr>
<tr>
<td>Access to external and on-the-job training</td>
<td>We learn from each other</td>
</tr>
<tr>
<td></td>
<td>We consult and advise each other by email</td>
</tr>
<tr>
<td></td>
<td>Formal networks between local units and offices – meetings, mailing registers etc.</td>
</tr>
<tr>
<td></td>
<td>The organizational culture: we share our knowledge</td>
</tr>
<tr>
<td></td>
<td>Technical innovation is prioritized by managers and new technical equipment is tested before it is put in use</td>
</tr>
<tr>
<td></td>
<td>Suggestion schemes</td>
</tr>
<tr>
<td></td>
<td>We adapt to changing customer demands by counseling, go-to-see meetings, registers and offering tools to customers</td>
</tr>
<tr>
<td>Individual goal-setting, based on restrictions from upper management, and follow up monthly in confidence with manager</td>
<td>We work office hours</td>
</tr>
<tr>
<td>Choose to compete against other offices</td>
<td>Performance reviews twice a year</td>
</tr>
<tr>
<td>System for competence administration including diagnostic tests, self-evaluation tools, knowledge certifications and competence profiles</td>
<td>Ask about customers’ opinions: questionnaires and personally – results evaluated and acted upon</td>
</tr>
<tr>
<td>Try and adopt new work conditions</td>
<td>Available to the customers: the only office with its own telephone exchange, opening hours 9am-4pm</td>
</tr>
<tr>
<td>Everybody is engaged in a professional role</td>
<td></td>
</tr>
<tr>
<td>Measure the human capital</td>
<td></td>
</tr>
<tr>
<td>Both male and female co-workers</td>
<td></td>
</tr>
<tr>
<td>Resources to work environmental and health activities are reserved by managers</td>
<td></td>
</tr>
<tr>
<td>Everybody is engaged in a professional role</td>
<td></td>
</tr>
<tr>
<td>Try and adopt new work conditions</td>
<td></td>
</tr>
<tr>
<td>Everybody is engaged in a professional role</td>
<td></td>
</tr>
</tbody>
</table>
- How to create a successful workplace -

Table 2b: The table shows methodologies expressed by the employees of Office β. These methodologies also explain how FSB, according to the employees of Office β, has worked to achieve the factors that they believe are the reasons for why the bank is a good workplace.

<table>
<thead>
<tr>
<th>Success factor</th>
<th>METHODOLOGIES</th>
<th>Office β</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clear professional roles</td>
<td>We learn from each other</td>
<td></td>
</tr>
<tr>
<td></td>
<td>We work close to each other in an open-plan office</td>
<td></td>
</tr>
<tr>
<td></td>
<td>It is okay to ask questions</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Work in cross-functional projects</td>
<td></td>
</tr>
<tr>
<td></td>
<td>New co-workers are actively recruited to fit in the group and culture of the workplace</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Regular performance reviews</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Personal strategies for education –considered in the performance reviews</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Continuous education</td>
<td></td>
</tr>
<tr>
<td></td>
<td>System for administration of competences including competence profiles and tests</td>
<td></td>
</tr>
<tr>
<td>Secure workplace</td>
<td>Good terms of employment; flexible working hours, bonuses</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Preventive healthcare</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clear and standardized methodologies, tools and vocabulary</td>
<td></td>
</tr>
<tr>
<td></td>
<td>A clear body of regulations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Continuous development and clarification of the business</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The bank works according to a long-term strategy</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Safety is prioritized –no cash handling, new technical equipment, training</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Competence available within the bank; specialists tied to each office, helpdesk, internal education, user-friendly computer systems</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The co-workers can influence the design of computer systems</td>
<td></td>
</tr>
<tr>
<td>Flat organizational structure</td>
<td>Re-organization to reduce the number of levels of middle managers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The co-workers are trusted; authority and responsibility are given to office managers and co-workers who work closest to the customers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clear recruitment of managers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Managers pay attention to the co-workers; know everybody’s name, fast feedback on suggestions and questions submitted by telephone and email</td>
<td></td>
</tr>
<tr>
<td>Possibility to participate and influence</td>
<td>Managers encourage dialogues; meetings and an open culture</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The co-workers can actively influence the business plan</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Management has created a “framework” – Co-workers and office managers have freedom to act within the frames</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Market research and continuous measures of the human capital –results are presented</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ask customers about their needs and expectations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Use of a business plan including goals, measures, analysis of gaps, actions</td>
<td></td>
</tr>
</tbody>
</table>

The empirical findings show that the co-workers of the two offices came up with different success factors that they believed were the foundation for the achievements of FSB. However, the answers regarding why the factors are important and what is creating them, as well as the methodologies mentioned show similarities. Together, the success factors and methodologies consequently seem to give two fairly consistent pictures of what, co-workers of Office α respectively Office β think, makes FSB a good workplace and how they have worked even though the success factors were expressed differently.
Results

The information given in the tree diagrams was then analyzed by the research team. First success factors were derived by use of affinity diagrams; see Figures 4a and 4b. Based on these and comparisons of the two offices’ complete tree as well as affinity diagrams, a model could be created to describe both success factors and how FSB has worked to become one of Sweden’s best workplaces; see Figure 5. The results of different steps of the analysis are described in more detail below.

Findings of the affinity diagrams: What makes FSB one of Sweden’s best workplaces?

The complete tree diagrams were analyzed by the research team in order to structure and condense the information and to describe and explain the opinions expressed by the co-workers. This analysis resulted in two affinity diagrams that summarize the thoughts of the employees; see Figure 4a and 4b.

**Figure 4a:** The figure shows five success factors that together are explanations for “What, according to the co-workers of Office a makes FSB one of Sweden’s best workplaces?”. The success factors were formed in the affinity diagram created by the research team in an analysis workshop. The arrows illustrate the explanations of cause and effect orders, which were formulated with the help of the information in the tree diagram. For example, these are understood such that management is a foundation for the clear expectations and requirements on employees which in turn is one source that makes it possible for the employees to be actively involved.

**Figure 4b:** The figure shows the success factors formulated in the analysis of the tree diagram of Office b in order to formulate an answer to the statement above. Moreover, between the three success factors to the left there was a cause and effect order identified with the help of the information in the tree diagram.
Comparison of Office α and Office β: How has FSB worked?

A comparison between the affinity diagrams at the two offices show similarities. In both diagrams the cause-and-effect relations seem to emphasize a clear, caring and committed leadership as a base; see Figure 4a and 4b. Moreover, the affinity diagrams show that the co-workers wanted management to have clear expectations on them and to give opportunities to co-worker participation.

The results presented in Figure 4a, regarding Office α, highlight the importance of continuous learning, co-operation and the possibility for employees to influence work and participate in the design of their work environment. Similar thoughts are also found in the tree diagram created at Office β. For example, the co-workers emphasised their opportunities to influence the business plan and design of computer systems as well as their freedom to make decisions and work independently within the framework set by management; see table 2b.

Ultimately, both affinity diagrams show that FSB strives to adapt its business, methodologies and work environment to the needs of the customers (and society). Moreover, the employees described a culture of openness and knowledge sharing that encourages active participation and learning. Within both offices employee involvement was vaunted and methodologies such as a co-determination agreement and delegation were observable. The diagrams also show that management and employees practise clear goal setting and follow up to create a safe and good work environment and make participation and learning possible. At the same time competence systems, active recruiting, training and networks are mentioned as means to further support this culture.

Success factors and methodologies

Last, the findings of the analysis could be summed up as describing those factors that appear to have made FSB a good work place and how FSB has worked to achieve this; see Figure 5.

In summary, the figure highlights the success factors that, from the view of the employees, seem to have been vital to the success of FSB: customer focus, continuous development, employee involvement, a good work environment, committed leadership and clarity. These were identified based on the central role they had in both tree diagrams and affinity diagrams. Moreover, they seemed to be common to both offices and the core of their work. The methodologies described, in addition, seemed to emphasise a work aimed at these success factors.
A flexible organization adapting to internal and external customers’ needs

Continuous learning and development

Employee involvement
- In design of work and work environment

A good work environment

Clarity
- clear goals, follow up and feedback

Committed, caring, active and visible managers

-External and on-the-job training
- Learn from each other – share our knowledge
- Ask and advice each other
- Networks and cross-functional projects
- System for administration of competence
- Personal education strategies
- Adapt to changes in customer demands – ask what they need

-Measure the human capital
- Co-workers are encouraged to participate
- Security is prioritized by managers
- Good terms of employment
- Preventive healthcare
- Resources reserved to health and work environmental issues
- Strategic recruitment of co-workers to fit into the culture

-Strategic recruitment of managers
- A clear body of regulations
- Managers pay attention to, listen to and care about all co-workers

How to create a successful workplace

-Dialogues
- Performance review twice a year
- The Business plan
- Managers delegate within framework
- Professional roles
- Clear and standardized methodologies and tools

A co-worker determination agreement
- Managers delegate
- Individual goal setting and follow up monthly
- Networks
- Regular office meetings
- Dialogues

A good work environment

Employee involvement
- In design of work and work environment

Continuous learning and development

Clarity
- clear goals, follow up and feedback

Committed, caring, active and visible managers

-External and on-the-job training
- Learn from each other – share our knowledge
- Ask and advice each other
- Networks and cross-functional projects
- System for administration of competence
- Personal education strategies
- Adapt to changes in customer demands – ask what they need

-Measure the human capital
- Co-workers are encouraged to participate
- Security is prioritized by managers
- Good terms of employment
- Preventive healthcare
- Resources reserved to health and work environmental issues
- Strategic recruitment of co-workers to fit into the culture

-Strategic recruitment of managers
- A clear body of regulations
- Managers pay attention to, listen to and care about all co-workers

How to create a successful workplace

-Dialogues
- Performance review twice a year
- The Business plan
- Managers delegate within framework
- Professional roles
- Clear and standardized methodologies and tools

A co-worker determination agreement
- Managers delegate
- Individual goal setting and follow up monthly
- Networks
- Regular office meetings
- Dialogues

A good work environment

Employee involvement
- In design of work and work environment

Continuous learning and development

Clarity
- clear goals, follow up and feedback

Committed, caring, active and visible managers

-External and on-the-job training
- Learn from each other – share our knowledge
- Ask and advice each other
- Networks and cross-functional projects
- System for administration of competence
- Personal education strategies
- Adapt to changes in customer demands – ask what they need

-Measure the human capital
- Co-workers are encouraged to participate
- Security is prioritized by managers
- Good terms of employment
- Preventive healthcare
- Resources reserved to health and work environmental issues
- Strategic recruitment of co-workers to fit into the culture

-Strategic recruitment of managers
- A clear body of regulations
- Managers pay attention to, listen to and care about all co-workers

How to create a successful workplace

-Dialogues
- Performance review twice a year
- The Business plan
- Managers delegate within framework
- Professional roles
- Clear and standardized methodologies and tools

A co-worker determination agreement
- Managers delegate
- Individual goal setting and follow up monthly
- Networks
- Regular office meetings
- Dialogues

A good work environment

Employee involvement
- In design of work and work environment

Continuous learning and development

Clarity
- clear goals, follow up and feedback

Committed, caring, active and visible managers

-External and on-the-job training
- Learn from each other – share our knowledge
- Ask and advice each other
- Networks and cross-functional projects
- System for administration of competence
- Personal education strategies
- Adapt to changes in customer demands – ask what they need

-Measure the human capital
- Co-workers are encouraged to participate
- Security is prioritized by managers
- Good terms of employment
- Preventive healthcare
- Resources reserved to health and work environmental issues
- Strategic recruitment of co-workers to fit into the culture

-Strategic recruitment of managers
- A clear body of regulations
- Managers pay attention to, listen to and care about all co-workers

Figure 5: The figure highlights the success factors that, according to the analysis of the employees’ opinions, have contributed to the success of FSB. The figure also summarizes methodologies that have been used within FSB, in order to achieve each of these factors. However, several methodologies seem to support more than one success factor and in the end contribute to “A flexible organization adapting to internal and external customers’ needs”. Moreover, committed, caring, active and visible managers have been a base, which has been achieved by, for instance, strategic recruitment and clear regulations.
Discussion

In summary, the study shows that well practised management methodologies and actively involved co-workers have been the base for creating a flexible company adapted to the needs of its employees and external customers. These results confirm what has been stated by, for instance, Leiter & Maslach (1988), Griesinger (1990), Juhl et al. (1997), Csikszentmihályi (2003) and Harnesk (2004).

According to the employees, FSB appears to have practised a caring, clear, visible and coaching leadership, which reduces uncertainty and increases openness in order to create employee commitment and frameworks that support development and avoid stress as an outcome of participation. This work is in agreement with Kinlaw (2000).

The findings contrast with the fears of Deming (1986), Nilsson (1999) and Daly et al. (2003) demonstrating that a large and geographically dispersed organization can successfully practise a coaching leadership and establish good communication. The employees at the lowest organizational levels have got the right mix of information, knowledge and rewards to work autonomously or independently of management control. In that way the bank has achieved co-creation, low percents of sickness absence and organizational competitiveness.

Methodologies for achieving employee involvement and a successful workplace

FSB has managed to involve the co-workers and built personal relations between managers and employees through a caring leadership, daily dialogues, individual goal setting and follow up, frequent performance reviews and weekly meetings.

Moreover, the co-workers in the study claimed that managers delegate responsibilities along with authorities and availability to resources and training and give them freedom to act within unambiguous frames; see Figure 5. Thereby, the employees have had the opportunity to make their own decisions which, according to Dygert (2000), is a good way to get employees to care about the success of an organization.

Furthermore, the employees felt that the culture of FSB encourages participation and personal development. The concrete co-determination agreement further shows the opportunities employees have to be co-creative and also that FSB has well developed forms of involvement. The agreement is an actual mutual contract between the employer and co-workers, reflecting the responsibility of managers to simplify employee participation and the responsibility of co-workers to take initiatives and seek involvement, activity and development; see Appendix. In this manner, it could be argued that co-workershisp, as defined by Bergman & Klefsjö (2003), and employeeship, as discussed by Tengblad & Hällsten (2002), exist within FSB. The co-determination agreement also shows similarities to an internal partnership, that Harnesk (2004) talks about.

Total Quality Management and fundamental values

Interestingly, the factors highlighted in Figure 5 have similarities to the bank’s values; sustainable development, humility, customer satisfaction and to be “a bank for everyone” and an attractive employer providing opportunities for involvement, personal development and security; see Appendix. These values are also visible in the tree diagrams.
Consequently, the findings show that managers and co-workers within FSB have worked systematically to support the common values. These common values consistently seem to have been supported by strategic methodologies and tools practised within FSB and by resources reserved by management. Thereby, the work of FSB, could be argued to follow the view by Hellsten & Klefsjö (2000) on how to work with TQM.

Both affinity diagrams also show that FSB, according to its employees, strives to adapt the business, methodologies and work environment to the needs of the customers (and society). Moreover, the study demonstrates the importance of management and co-worker involvement, which has been stressed by, for instance, Stowell (1988), Kinlaw (2000) and Bergman & Klefsjö (2003).

Methodological issues
In general the same factors and methodologies were identified at the two offices. The results might though, be influenced by the analysis of the research team, since affinity diagrams were created out of the co-workers’ suggestions and then compared. However, the validity of the study should be strengthened by the fact that the tree diagrams were created in discussions between the employees without management participation. In addition, these tree diagrams demonstrated large similarities even before the analysis. Tree diagrams have also been used in similar studies and proven to inspire creativity and be useful to structure qualitative information from a complex situation; see Harnesk et al. (2004).

The minor differences found between the offices could be a result of two different units working as two smaller organizations within FSB and with their own “unit” managers. This feeling was even described by the co-workers as the “we feeling” of each unit.

Finally, the results are not assumed to give a complete picture of the entire bank but should give valuable examples of how to work. The selection of co-workers was entrusted to the office managers in order to assure a variation among the participants and to minimize the disturbance of the everyday business of the offices. Moreover, the studied offices were chosen on practical and geographical reasons and were not necessarily the most successful units of FSB. On the other hand, there are no suspicions that these offices or employees perform differently from what is typical in the bank.

Conclusions
The purpose of the paper was to identify and describe factors and methodologies that, according to the co-workers, are important to create a good workplace.

Five success factors that seem to have been vital to the success of FSB could be recognized: customer focus, continuous development, employee involvement, a good work environment, committed leadership and clarity.

The findings demonstrate the importance of strong co-worker involvement, which has been stressed by Stowell (1988), Kinlaw (2000) and Bergman & Klefsjö (2003), to mention a few. The possibility to actively participate as a co-worker was seen as a vital factor by the employees.
Further, the importance of a caring, clear, visible and coaching management as a base for that was emphasized. Practices of, for instance, dialogues, preventive health care, delegation, a system for administration of competences, and also strategic recruitment of managers have been common methodologies within the bank. Most of these should be applicable in other companies.

Managers and co-workers within FSB seem to have worked systematically in accordance to common values to create a culture that has been the base for the methodologies and tools used in the every-day work. This is in line with Hellsten & Klefsjö (2000) when discussing Total Quality Management. The employees mentioned several thriving methodologies used by managers to create a culture that encourages learning and development and to involve the co-workers in the design of work tasks, the work environment and the business plan.

The conclusion from this is that management has been vital to create employee allegiance. Also, managers and co-workers of FSB have worked in accordance to what is already advocated in theory and have managed to create successful practices of leadership and communication in their large and wide spread organization. Through coaching and co-workership and co-creation, a good work place and business results have been created. In summary, the study in several ways confirms what already has been argued in theory but too seldom is shown in practice.

The conclusions in this study derive from the opinions of co-workers. More about possible links between the objectives and means of managers on higher organizational levels and the actual activities and performances as experienced by the employees are discussed in Wreder (2006).

Acknowledgements

The authors gratefully acknowledge the financial support from the Swedish insurance company, Alecta, and the representatives of FöreningsSparbanken, who made the study possible and interesting. Furthermore, the authors would like to thank the members of the research team, Ingela Bäckström and Pernilla Ingelsson at Mid-Sweden University.
References


Actually Improve Operating Performance? Empirical Evidence from Firms that have Won Quality Awards. 


- How to create a successful workplace -

Wreder, Å. (2005) Successful Management Methodologies for Achieving Co-worker Health. (Submitted for publication)
APPENDIX

Case description

FöreningsSparbanken is one of the largest banking groups in the Nordic area and was founded in 1997 through the fusion of Sparbanken Sverige and Föreningsbanken, which have their roots in the early 19th and 20th centuries respectively4; see Table I.

Table I: A selection of important events in FöreningsSparbanken, mainly between 2000 and 2004.

<table>
<thead>
<tr>
<th>Year</th>
<th>Activity in FöreningsSparbanken</th>
</tr>
</thead>
<tbody>
<tr>
<td>1997</td>
<td>FöreningsSparbanken was founded</td>
</tr>
<tr>
<td>1997-1999</td>
<td>Staff reductions as consequence of the merger</td>
</tr>
<tr>
<td>2000</td>
<td>The co-determination agreement (IDA) was established</td>
</tr>
<tr>
<td>2001-2004</td>
<td>Roles of employees and managers were defined in order to better meet the needs of customers</td>
</tr>
<tr>
<td>2001-2004</td>
<td>Programs for managers were carried out to ensure new leadership and help managers</td>
</tr>
<tr>
<td>2002</td>
<td>A staff reduction program, including more than 500 employees, was run in the banking group</td>
</tr>
<tr>
<td>2002-2004</td>
<td>A health project was carried out in order to cope with increasing levels of sick leave</td>
</tr>
<tr>
<td>2003</td>
<td>Received the national Alecta award “Sweden’s best workplace”</td>
</tr>
<tr>
<td>2003</td>
<td>A new CEO was appointed</td>
</tr>
<tr>
<td>2003 &amp; 2004</td>
<td>Was the most profitable major bank in the Nordic region</td>
</tr>
<tr>
<td>2004</td>
<td>Received an award as “The Competence Company of the year”</td>
</tr>
</tbody>
</table>

According to FöreningsSparbanken AB (2005) the bank’s fundamental values are long-term sustainable development, humility and a strong relationship with local communities. It prioritises customer satisfaction and aims to be “a bank for everyone” and an attractive employer giving opportunity to involvement, personal development and security. A characteristic is a co-determination agreement that invites employees to take part in the bank’s operations through insight, involvement, and responsibility.

In 2004 FSB had around 15,000 employees, of which approximately 9,000 worked in Sweden. The group is organized into five business areas including Swedbank Markets (investment bank), Robur (fund management) and Swedish retail operations. The latter consists of subsidiaries, for instance the telephone and internet banks and the bank branches. The bank branches make up an important unit, which is divided into geographic regions and encompasses a network of local bank offices; see Figure I. In 2004 the business area comprised around 490 offices, which were divided into 75 local banks and spread in six regions.

---

4 The information about FSB is based on personal observations, documentations of the organization (Annual report for 2004, and http://www.fsb.se) and facts given by its management and co-workers. More information about FöreningsSparbanken AB can be found on http://www.fsb.se.
How to create a successful workplace

Figure 1: Overview of the Bank branches unit, which consists of six regions. Each region is divided into a number of local banks. Moreover, several offices are organized under these local banks.

Some basic information about the two specific local banks that have been studied and measurements of health issues as well as customer satisfaction and profitability of the business unit they represent is presented in Table II and Table III.

Table II: Basic facts about the studied offices and the local banks that they are parts of.

<table>
<thead>
<tr>
<th></th>
<th>Local bank A and Office α</th>
<th>Local bank B and Office β</th>
</tr>
</thead>
<tbody>
<tr>
<td>No of local banks in the region</td>
<td>10</td>
<td>3</td>
</tr>
<tr>
<td>No of employees in local bank</td>
<td>130</td>
<td>250</td>
</tr>
<tr>
<td>No of offices in local bank</td>
<td>10</td>
<td>15</td>
</tr>
<tr>
<td>No of employees in office</td>
<td>9</td>
<td>7</td>
</tr>
<tr>
<td>Other remarks</td>
<td>All employees at Office α are women (except for the manager)</td>
<td>Mixture in gender at Office β</td>
</tr>
</tbody>
</table>

Table III: The development of human capital, in terms of the indices measured since 2003 and presented in the Annual report, 2004. “Satisfied Employee Index” measures employees’ opinions of their personal situation in the company. “Well-being” measures employees’ opinions on health-related issues and “Value-adding ability” measures employees’ opinions of their ability to create value for customers.(FöreningsSparbanken AB, 2005)

<table>
<thead>
<tr>
<th>Development of Human Capital (Local banks in Sweden)</th>
<th>2003</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satisfied Employee index</td>
<td>65</td>
<td>68</td>
</tr>
<tr>
<td>Well-being</td>
<td>75</td>
<td>75</td>
</tr>
<tr>
<td>Value-adding ability (private and business customers)</td>
<td>75</td>
<td>77.5</td>
</tr>
</tbody>
</table>
PAPER III

Management for sustainable workplaces
-A tentative model based on experiences
of successful Swedish organizations

Wreder, Å. (2006)

Accepted for the 9th QMOD Conference,
Liverpool, 9-11 August 2006
Management for sustainable workplaces

A tentative model based on experiences of successful Swedish organizations

Åsa Wreder
Division of Quality & Environmental Management
Luleå University of Technology
asa.wreder@ltu.se

Keywords: Health, Sustainability, Total Quality Management, Methodologies
Category: Case study

ABSTRACT

Good management and employee health are considered two key factors to improve productivity, organizational development and competitiveness in a sustainable way. In spite of that, many organizations are still struggling with sickness absence, production losses and quality problems. Accordingly, there is an intensified search for and adoption of practices to increase employee involvement, support individual development, decrease absenteeism and in the long run improve productivity and organizational development.

This paper addresses contemporary practices that have generated both organizational success and employee health. More specifically, a tentative model for management work, based on experiences taken from successful Swedish organizations, is presented. The model consists of values, methodologies and tools and includes practices that managers in other organizations might consider adopting.

The paper is based on a case study of a large Swedish bank that has received an award as “Sweden’s best workplace” and has managed to turn round increasing levels of sickness absence while nurturing employee dignity and developing organizational performance. Interviews and workshops have been used to explore intentions and methodologies of the bank’s managers as well as opinions of employees. The findings have then been compared to findings derived from studies of successful smaller organizations, which have received the same award.

The overall results confirm the importance of management commitment, employee involvement and encouraging corporate cultures to achieve sustainable workplaces where human resources are regenerated through the process of work. Moreover, communications through dialogues, trust and delegation have been central to align the work of managers and employees. The case study also shows that managers and employees have worked systematically to create a culture based on core values by choosing methodologies supporting the values. This strategy is in accordance with what some authors emphasize creates Total Quality Management.

INTRODUCTION

During the last decade, sickness absence and disability pension sickness absence have grown to be a major public problem in parts of the Western world. This causes great socio-economic consequences for society, organizations and absentees (Alexanderson & Hensing, 2004; SOU, 2002). For example, the costs for sickness benefits and
disablement pensions together were 10% of the total Swedish government spending in 2001 (The National Social Insurance Board, 2003).

The connection between unsatisfactory work environments and sickness absence is well-documented (Levi, 2000). Accordingly, there is a need for the creation of sustainable workplaces, where human and social resources instead are regenerated through the process of work while productivity and competitiveness are maintained (Docherty et al., 2002). However, many attempts to do so have instead increased work intensity and thereby sickness absence, which has an adversary effect on the quality of operations and business competitiveness (Backström, 2003; Docherty et al., 2002; Kira, 2002; McKenna & Beech, 2002).

Research demonstrates that, for instance, a shared corporate culture, organizational development as well as trust, communication and involvement are important issues for employee health (Zwetslot & Pot, 2004; Bergman & Klefsjö, 2003; Eriksson, 2003). In this manner, good management and leadership are considered key factors for success (Harnesk, 2004; Zwetslot & Pot, 2004; Kanji & Moura, 2001; Bender & van de Looij, 1994).

However, an organization’s size influences its structure and management work (Robbins, 1990). Many large organizations have hierarchical structures, complex communication channels and are less empowering (Nilsson, 1999). In addition, responsibilities differ for managers at different levels in the authority hierarchy of such organizations (Lennerlöf & Tydén, 2004; Robbins, 1990; Yukl, 1988). Thereby, managers on middle levels risk falling in between the different interests of the employees and the executive managers (Lennerlöf & Tydén, 2004). According to Daly et al. (2003), there are also many examples of top managers’ decisions being neutralized by lower managers and of decisions that have not penetrated through the hierarchy to the majority of the organization’s members. Deming (1986) even argues that it is very difficult to apply good leadership in large organizations.

At the same time, recent national statistics also show that the level of sickness absence is connected to organizational size. In Swedish organizations of more than 100 employees sickness absence was 4.6% in 2005, whereas the same measure was 2.1% in organizations of less than 20 employees. In addition, the sickness absence increases in proportion to company size (SCB, 2006). Therefore, the purpose of this paper is to suggest a model, for management methodologies in large organizations, aimed at achieving sustainable health.

**THEORY**

**Health and sustainable workplaces**

When studying research literature, the concept of ‘health’ seems tricky to define in an unambiguous way. Some researchers define health as a combination of self-assessed health, absence of chronic conditions and absence of subjective health complaints (Medin & Alexandersson, 2000; Mackenbach et al., 1994). The Finnish philosopher Pörn even argues that health is a person’s state, which is achieved when the person’s repertoire is adequate relative to its goals (Lindberg, 2006). Moreover, Witbeck (1981) emphasizes that there is no optimum state of health, but a person can always increase the ability to act appropriately in some situations.
A person’s health may be affected by a range of different social factors, work factors, organisational factors and individual factors. Several authors use the concept of ‘health factors’ considering what makes people function in the best way and feel well (Johnson et al., 2003; Söderlund et al., 2003). Such factors are, for instance, trust, work satisfaction, leadership, communication and organizational development (Alexanderson & Hensing, 2004; Janssen et al., 2003; Söderlund et al., 2003; Dolbier et al., 2001).

The definition of health used in this paper, follows the definition by WHO (1946): “Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”. Moreover, the author believes that the state of health is subjective and agrees with those who claim that health can always be improved. Further on, the author’s view of sustainable health is influenced by a definition by Harnesk et al. (2004): “durable individual perceived wellbeing”. However, in the concept of durability, the author also thinks that to be sustainable, a person’s health should meet the needs of the present demands on the person without compromising the future health. In relation to work this should mean that human resources must be regenerated through the process of work in order to provide for sustainable health. From this perspective, sustainable health could also be seen as a part of sustainable workplaces that according to Docherty et al. (2002) are needed to achieve favourable development of health and productivity within organizations.

Management and leadership
According to several authors, there is a difference between management and leadership (Certo, 2000; Wiberg, 1992; Kotter, 1988). For instance, Kotter (1988) describes leadership as “a process for influence, without forcing, one or several groups of people in one direction”. Yukl (1998) claims that the word ‘manager’ is an occupational title. He further argues that a person can be a leader without being a manager and being a manager without leading. According to Certo (2000) and Yukl (1998), successful management also needs to incorporate leadership.

Quality management, work satisfaction and sustainable health
Motivation and involvement are closely related to work satisfaction (Bergman & Klefsjö, 2003). In addition, active participation by employees is seen as a factor for stress prevention, health promotion and for improving productivity, and organizational development (Velury, 2005; Paul et al., 2000). The argument for this may be the positive influence possibilities to active involvement have on motivation and work satisfaction (Kondo & Park Dahlgaard, 1994; McGregor, 1960).

Moreover, Hackman & Oldham (1976) argue that the motivation for work is dependent on how the work is designed. They emphasize five dimensions that influence the experienced meaningfulness of the work, experiences of responsibilities for outcomes of the work and knowledge of the actual results of the work tasks. The dimensions give psychological rewards which give individuals higher motivation that results in improved quality and productivity as well as higher work satisfaction and decreased sickness absence. Other researchers discussing factors that can make us feel well at work are, for instance, Csikszentmihályi (2003), Eriksson (2003) and Arnetz (2002). Arnetz (2002) presents research on stress, efficiency and renewal seen from the perspective of organizations. He believes that the initiate leaders (at the lowest level) of an organization affect the employees’ awareness of effectiveness and thereby
their work satisfaction, which in the long run has a direct impact on the quality that is vital to achieve customer satisfaction. This statement is also in agreement with Porter et al. (2003) and the ideas in Total Quality Management (Bergman & Klefsjö, 2003; Dahlgård et al., 1998).

**Total Quality Management**

Many different definitions and descriptions of Total Quality Management have been presented over the years (Bergquist et al., 2006). In the last decade some definitions with a system emphasis have also been suggested by for instance Shiba et al. (1993) and Hellsten & Klefsjö (2000). Hellsten & Klefsjö (2000) view TQM as “a continuously evolving management system consisting of values, methodologies and tools, the aim of which is to increase external and internal customer satisfaction with a reduced amount of resources”; see Figure 1. They further argue that to achieve and maintain the culture, the values must persistently be supported by suitable methodologies and tools. Methodologies are here interpreted as ways to work consisting of a sequence of activities whereas tools are more concrete support, for instance, matrices, sheets, computer software or diagrams.

![Figure 1: Total Quality Management can be seen as a management system made up of values, methodologies and tools. The values are fixed but the methodologies and tools are just examples and can differ depending on the value they are supposed to support. From Hellsten & Klefsjö (2000).](image)

**Organizational culture and values**

Organizational culture as a concept has been used during recent decades to refer to the climate and practices that organizations develop around their handling of people (Schein, 2004; Stoner et al., 1989). Culture may be defined as “the set of important understandings (often unstated) that members of a community share in common” (Sathe, 1983). Several authors further seem to describe the shared understandings as values or beliefs that generate common attitudes, rules and behaviours within the community, which may be for instance an organization (Kaufmann & Kaufmann, 2005; McKenna & Beech, 2002; Robbins, 1999). Schein (1992) further classifies organisational core values in three groups. One consists of ‘artefacts’ visible within the organization, such as furniture and clothes. The next group consists of ‘espoused values’, which are values related to how the work is performed and decisions made. The third group consists of ‘basic values’, such as how we treat people of different religion or skin colour, and are often deep rooted and unconscious to the employees.

**METHODOLOGY**

To increase the understanding of management work for achieving sustainable health in large organizations, as well as presumed differences to smaller organizations, I
chose to examine both large and smaller successful organizations. Since the examples of achievement of sustainable health within large organizations of more than 500 employees were limited in the literature, a qualitative case study was performed from 2004 to 2006 to explore and describe the work of managers and employees of large organizations.

In 2003 a different study had been carried out by another research team, with the aim of describing how successful smaller organizations in Sweden had worked to achieve sustainable health among their employees. My knowledge about that study made me perform a literature study to explore the work of smaller organizations and to provide a reference to compare methodologies of large organizations to; see Figure 2.

Figure 2: The study of successful Swedish organizations of different sizes consisted of two parts; a case study aimed at exploring the work of managers and employees of a large organization and also a literature study to find out about methodologies used by smaller organizations

The case study

The case study was performed in a way similar to the Deming cycle: Plan-Do-Study-Act. The planning and data collection phases and parts of the analysis phase were conducted in a team, containing one of the persons who had also participated in the study of successful smaller organizations. However, the case study was focused on one organization to provide for a deeper study and understanding of the particular case. The case organization, the Swedish bank FöreningsSparbanken, was chosen based on its recognition as a large organization and receiver of the award, “Sweden’s best workplace”, in 2003. The award is a national award considering leadership, work environment, participation and interaction, long term planning, preventive work and profitability. Each year one or several organizations may be awarded in an evaluation process similar to that of quality and business excellence awards, such as the European Quality Award (EFQM, 2006). Therefore, the award was used as proxy for identifying a successful large organization of more than 500 employees. The award had also been used by Harnesk al. (2004) to identify successful organizations.

The study considered one business area of the bank. Respondents were chosen from three management levels and different subunits to cover the hierarchy from executive managers to middle managers and managers at bank offices, i.e. a lower management level. Moreover, nine employees from different offices were sampled. Data was then collected through interviews with the managers, workshops with employees and complementary document and literature studies. The information was later analyzed
with diverse techniques at different levels and comparisons were made as described in Figure 3 below. The case study and the results are described in more detail in Wreder (2005) and Wreder & Klefsjö (2006).

The literature study
During the initial data collection in 2004, a research report and a draft to the related paper were reviewed (Bäckström et al., 2005; Harnesk et al., 2004). The second part of the data collection and the analysis were then performed in 2006 with a focus on the findings presented in the research report and paper.

Comparison of large and smaller organizations
The comparison of large and smaller organizations was initially made with the findings of Harnesk et al (2004) as a foundation to identify similarities and differences regarding the methodologies. Thereafter, the view of managers respectively employees of large versus smaller organizations were compared. Moreover, the three organizations were put side by side to contrast the core of their work; see Figure 3.

![Diagram](https://via.placeholder.com/150)

Figure 3: The findings of the case study and the literature study were compared and finally also related to theory. Thereafter, the results were used to create a tentative model to support the work of managers in large organizations aimed at creating sustainable health.

FINDINGS
The case study and the literature study together comprise studies of three successful Swedish organizations; a manufacturing company that had 54 employees in 2002, an emergency hospital department with 397 employees in 2002 and the large bank that employed 9000 persons in Sweden in 2004. For more details about the organizations see Harnesk (2004) and Wreder & Klefsjö (2006).

Experiences taken from the large bank
The interviews show that the managers referred to the following as central for achieving employee health: clear, honest and consistent management in accordance to core values; measurements and feedback; employee participation; dialogues. In, addition, most of them mentioned the importance of customer focus and highlighted the vitality of employee satisfaction and health to fulfil customer needs. The executive managers also believed that a business approach on health issues and a comprehensible model for management are important to success.

Employees at different offices agreed about the importance of their possibilities to actively participate in order to create a good work place. For example, the employees emphasised their autonomy to make decisions and work independently according to
clear frames. Moreover, they described a culture of openness and knowledge sharing that encouraged active participation, learning and adoption of the business to customer needs. Within the offices, competence systems, active recruiting, training and networks were mentioned as means to support this culture. However, clear, caring and visible managers were argued to be the foundation for their work and good work place.

Accordingly, management’s intentions and the view of the employees show large similarities and are also related to the bank’s espoused values (FöreningsSparbanken AB, 2005). The objectives of the bank were successively deployed throughout the organizational hierarchy by middle managers, and finally, reinforced the work within the offices. The opinions and work of managers and employees within the bank are described in more detail in Wreder (2005) and Wreder & Klefsjö (2006).

Experiences taken from smaller organizations

Harnesk et al. (2004) studied two smaller organizations in a multiple-case study, which resulted in four categories of methodologies based on opinions of managers and employees; see Figure 4.

![Figure 4: A simplified version of the model by Harnesk et al. (2004).](image)

Their main conclusions were that the following management methodologies are important for achieving sustainable health: building close relations with employees; dialogues; mediation of how each individual function is important to the performance of the whole; observing and respecting the needs of each employed person; making an effort to establish trust in all directions.

Comparison of the large bank and the smaller organizations

The four categories of methodologies identified by Harnesk et al. (2004) comprise of similar values and methodologies as were identified within the large bank. Four values appeared as common to all three organizations: management commitment; employee involvement; focus on customers and continuous development. According to Harnesk et al. (2004), ethical issues were certainly present in the daily work of the smaller organizations, but neither of them used the term ‘core values’. In contrast, executive managers of the bank talked about agreed upon values that acted as a foundation for their decisions and acting.

Management commitment: All interviewed managers within the bank, independent of level, declared that their manager, on the next higher level, was important to the success of the organization. Moreover, the employees expressed appreciation for their
managers being visible, supportive and caring. Similar to the bank’s managers, the managers of the smaller organizations “practised what they preached” and expressed awareness of being role models within their professions. Within all organizations “Management by walking around” was practised to build relations and get to know the employees and their needs better. However, in the smaller organizations executive managers seemed to have more opportunity to interact with the employees. Contrary, executive managers within the bank described that they worked through managers on middle and lower levels, who were more involved in building relations with the employees. The executives instead seemed to demonstrate commitment by steering the way of the bank through strategy and goal deployment and providing resources for lower managers. For instance, they used a balance scorecard tool to steer the organization as a whole. Also, by including measures of health in the scorecard it created a business focus on health issues to make sure health was paid attention to in goal setting and follow up within all levels of the bank.

**Employee involvement:** The value of employee involvement was expressed by both managers and employees independently of their belonging to a large or a smaller organization. Moreover, the employees of the organizations appreciated that they were very much involved in the development of their work and work environments. All organizations highlighted their use of infrastructures for communication. However, objectives and information were transferred between and applied on more levels within the large organization. The managers at middle and lower levels of the bank were considered an important channel for spreading executive management’s intentions and support to the employees as well as involving them. In all organizations the managers in addition seem to have worked through delegation and as coaches by clarifying goals and priorities, inviting people to influence their performance and careers and conveying people’s importance. Managers on middle and lower levels as well as employees mentioned that they felt they had authority and their managers’ trust to be creative and make decisions as well as to fail and regret mistakes. Within the bank, this was called mandate and the managers discussed the necessity of both having mandate from their managers and of giving mandate to subordinates.

**Focus on customers:** According to the employees, the bank strived to adapt to the needs of the customers and society through such tools as questionnaires and relation building with customers, aimed at learning more about the customers’ needs. The managers in all three organizations further declared that mental and social well-being is a pre-condition for employee satisfaction, health and performance and consequently for customer satisfaction. Accordingly, methodologies were used to support values of employee involvement and motivation to create satisfaction. In contrast to the smaller organizations, the large bank had a strategic focus (a health project) on making health improvements among employees. In both smaller and large organizations they further focused specifically on rehabilitation of long term sickness absent employees. Within the bank executive managers had created tools, for instance a routine, to aid middle and lower managers’ handling of employees on long-term sick leave.

**Continuous development:** Employees and managers of all organizations mentioned methodologies, as competence development, networks for knowledge sharing and on-the-job training, related to employee development. Within the bank, these were also aided by use of competence profiles and the intranet as well as different mailing lists for knowledge sharing.
CONCLUSIONS AND DISCUSSION

The empirical data show that the values and methodologies identified within the organizations support creation of employee health in accordance to what is argued in theory (Csikszentmihalyi, 2003; Eriksson, 2003; Arnetz, 2002; Hackman & Oldham, 1976). Moreover, management commitment to employee well-being seems to have been the base to achieve health within the organizations. These findings also support what is stated by other authors (Zwetslot & Pot, 2004; Kanji & Moura, 2001; Bender & van de Looij, 1994).

Based on the definitions of for instance, Certo (2000), Kotter (1999) and Wiberg (1992), one might even argue that the managers within the bank have connected management with leadership focused on concern for the employees as people, to achieve successful management. The interviews also show that the leadership of the executive managers within the large bank is characterised by strongly espoused values as discussed by Schein (1992). However, middle and lower managers did not declare them as core values but discussed the issues as important to their leadership. In addition, the values somewhat seemed to convey to employees what behaviours they should engage in and thereby created security, being a substitute for formalization and a prerequisite for steering the large organization in one direction. The managers and employees also mentioned almost the same methodologies as important to success. As a result, the bank seems to have succeeded in avoiding the difficulties related to management, communication and empowerment in large organizations, mentioned by Daly et al. (2003), Nilsson (1999) and Deming (1986) among others. Every manager’s and employee’s awareness of what is valued and thereby acceptable within their corporate culture in combination with the mandate also seem to be a prerequisite for middle managers’ ability to fulfil needs of both executive managers and employees and reinforce the priorities of the organization. In addition this seems to have reduced the risks related to hierarchical management levels as described by Lennerlöf & Tydén (2004) and Daly et al. (2003).

Accordingly, the results of the case study imply that managers and employees within the large bank have worked systematically to create a culture based on core values by choosing methodologies and tools supporting these values; see Figure 5. It could be argued that this strategy follows the view of Hellsten & Klefsjö (2000) on how to work with TQM. Similar to the identified strategy of the bank, Harnesk et al. (2004), also talk about “Attitudes” and “Organizational structures” in their model. They argue that, in the smaller organizations, a common base of values of the respective organization is based on the “General Attitudes”. Moreover, they found that “Leadership Attitudes” affects the way the organization is structured as well as the methodologies used. Therefore, the author’s interpretation of the model by Harnesk et al. (2004) is that the categories of attitudes express shared understandings consisting of values and the attitudes, rules and behaviours they have generated. This is similar to what Kaufmann & Kaufmann (2005), McKenna & Beech (2002) and Robbins (1999) believe about common values. Accordingly, one might argue that the model by Harnesk et al. (2004) similar to Figure 5 consists of values and methodologies that depend on these values.
Figure 5: The model is based on experiences taken from the large bank which has managed to create a sustainable workplace where health and performance improve. The model suggests a strategy of values, methodologies and tools that should be able for other organizations to adopt. The concept of 'co-worker' is here synonymous with 'employee'.

Further on, what is described in Figure 5 and the model of Harnesk et al. (2004) shows that similar methodologies, focused on the needs of the employees, have been used in all organizations. Both models also support the theory by Bergman & Klefsjö (2003) showing that the value of everybody’s involvement is achieved through methodologies based on communication, delegation and training. However, there seem to be some differences between what are considered methodologies in the case study versus the model by Harnesk et al. (2004). The dividing line between methodologies and tools is sometimes also difficult to distinguish within the examples given in Figure 5. In addition, such as communication and trust that were mentioned as important to the bank’s success did not fit in the definition of methodologies but show similarities to health factors described in theory (Alexanderson & Hensing, 2004; Janssen et al., 2003; Dolbier et al., 2001). This may indicate that more than methodologies, or a wider definition, is needed to describe how sustainable health can be created. A possible explanation could be that a culture, based on values with concern for human aspects that are supported by methodologies and tools, may be of benefit to support ‘health factors’ and thereby support creation of sustainable workplaces where health improves; see Figure 6.

Figure 6: The figure describes how a management system of values, methodologies and tools may support factors advocated to support creation of health.
In conclusion, the top management commitment seem to have been an overarching condition for the focus on values and supporting methodologies that have been used in the exemplified sustainable workplaces, where human and social resources are regenerated through the process of work. The methodologies identified in the bank and the smaller organizations are similar and also already well-known methodologies advocated in management theory. Indeed, the similarities found may also reinforce that the author and the team that studied the smaller organizations have backgrounds in quality departments. However, the model in Figure 5 may inspire the work for sustainable workplaces of other managers by presenting examples of values, methodologies and tools that are advocated in theory and actually have been practiced to achieve health and success within a large bank.

REFERENCES


Management for sustainable workplaces


World Health Organisation. (1986). *Ottawa charter for Health Promotion*, WHO Europe, Köpenhamn


Appendix I

Description of FöreningsSparbanken AB
FöreningsSparbanken AB

FöreningsSparbanken AB, FSB, was founded in 1997 through the fusion of Sparbanken Sverige and Föreningsbanken which had their roots in the early 19th and 20th centuries respectively; see Table 1. Today, FSB, is one of the largest banking groups in the Nordic area and is represented in Sweden as well as Norway, Finland, Denmark and the Baltic countries. In 2004, the bank had around 15,000 employees, of which approximately 9,000 worked in Sweden. The same year, it had about 8,4 million private customers including independent savings banks and partly owned banks in Sweden and the Baltic States. (FöreningsSparbanken AB, 2005a,b)

Table 1: A selection of important events within the bank since 1997, when it was founded.

<table>
<thead>
<tr>
<th>Year</th>
<th>Activity in FöreningsSparbanken</th>
</tr>
</thead>
<tbody>
<tr>
<td>1997</td>
<td>FöreningsSparbanken AB was founded</td>
</tr>
<tr>
<td>1997-1999</td>
<td>Staff reductions as consequence of the merger</td>
</tr>
<tr>
<td>2000</td>
<td>The co-determination agreement (IDA) was established</td>
</tr>
<tr>
<td>2001-2004</td>
<td>Roles of employees and managers were defined in order to better meet the needs of customers</td>
</tr>
<tr>
<td>2001-2004</td>
<td>Programs for managers were carried out to ensure new leadership and help managers</td>
</tr>
<tr>
<td>2002</td>
<td>A staff reduction program, including more than 500 employees, was run in the banking group</td>
</tr>
<tr>
<td>2002-2004</td>
<td>A health project was carried out in order to cope with increasing levels of sick leave</td>
</tr>
<tr>
<td>2003</td>
<td>Received the national Alecta award “Sweden’s best workplace”</td>
</tr>
<tr>
<td>2003 &amp; 2004</td>
<td>Was the most profitable major bank in the Nordic region</td>
</tr>
<tr>
<td>2004</td>
<td>Received an award as “The Competence Company of the year”</td>
</tr>
</tbody>
</table>

According to FöreningsSparbanken (2005a, b) the bank’s fundamental values are long-term sustainable development and a strong relationship with local communities. It prioritises customer satisfaction and aims to be a bank for everyone and an attractive employer. Moreover, the bank stands for security, humility, respect, openness and involvement. For instance, a characteristic of the bank is the co-determination agreement aiming at inviting employees to take part in the bank’s operations through insight, involvement, and responsibility. The agreement is called IDA, which is the Swedish acronym for Insight, Involvement, and Responsibility. The personal development reviews that each employee and manager within the bank has with his or her manager is an important tool in the IDA process. The reviews lead to individual action plans that promote personal development.

Health promotion

Since late 2004, FSB has a special organization that integrates health and wellness issues with work-related health issues to ensure an enduring and systematic approach to health concerns. The starting point to the organization was a health project, which was aimed at reducing sickness absence, lower the costs associated therewith and profile the bank as an employer that looks after the well-being of its staff. The project was initiated in 2002 after several years of increased sickness absences. A project leader was appointed to implement it and making activities sustainable by tying managers to the project and start activities in the organization. From the very beginning the whole project started with an evaluation regarding the health status in the bank and the costs connected to sick leaves and illness were also calculated. As a
result special measures were identified and introduced to intensify rehabilitation and increase the focus on healthy employees. For instance, a new measure was introduced, ‘long-term healthy employees’, which is defined as: “a maximum of 5 sick days per 12-month period”. The project did also analyze sick leaves by unit, age, gender and length of absence and set a goal to reduce sick leave from 4.8 to 3.8 percent. Since 2002 the results of the health related measures have developed as presented in Table 2 and Table 3.

Table 2: The results of “long-term healthy employees” and sickness absenteeism of FSB between 2002 and 2004. (Results from FöreningsSparbanken, 2005a and the interview performed with the project manager in 2004)

<table>
<thead>
<tr>
<th>Development of Human Capital (Local banks in Sweden)</th>
<th>2003</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satisfied Employee index</td>
<td>65</td>
<td>68</td>
</tr>
<tr>
<td>Well-being</td>
<td>75</td>
<td>75</td>
</tr>
<tr>
<td>Value-adding ability (private and business customers)</td>
<td>75</td>
<td>77,5</td>
</tr>
</tbody>
</table>

Table 3: The development of human capital, in terms of the indices measured since 2003. “Satisfied Employee Index” measures employees’ opinions of their personal situation in the company, “Well-being” measures. (Results from FöreningsSparbanken, 2005a)

<table>
<thead>
<tr>
<th>Share of long-term healthy employees</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>71,3%</td>
<td>73,2%</td>
<td>74,8%</td>
</tr>
<tr>
<td>Sickness absenteeism</td>
<td>4,8%</td>
<td>4,6%</td>
<td>4,3%</td>
</tr>
</tbody>
</table>

Rehabilitation for employees in the Swedish operations on long-term sick leave has eliminated approximately 70 percent of these cases. Of these employees, about 60 percent have returned to work full- or part-time.

Some examples of the work FSB performed in 2004 to promote health are:

- Frequent evaluation of human capital (employees) and market capital (customers) in relation to profitability and initiation of actions based on the results. Among the indexes used are the “Satisfied Employee Index,” which measures employees’ opinions of their personal situation in the company; “Value-adding ability,” which measures employees’ opinions of their ability to create value for customers, and “Well-being,” which measures employees’ opinions on health-related issues.
- Consistently identifies risks and prevents psychosocial disabilities through a Wellness Index that is followed up with actions.
- Provides guidance and personal support to employees through an outside counsellor.
- Offers ‘health money’ to support individual or group activities that support employee health.
- To stimulate and retain the skilled employees over the age of 55 the bank has developed a program consisting of individualized competence development, annual health screenings, the offer of an hour of exercise a week during work time, and the opportunity to, after the age of 58, cut back to an 80-percent work schedule with a 90-percent salary.
Organizational structure and operations

The bank provides its products and services through subsidiaries; see Figure 1

![Organizational structure diagram](image)

*Figure 1: The bank is organized into four main business areas and one unit of Shared Services and Group Staffs. (From: FöreningsSparbanken, 2005a)*

The business area of Swedish Retail operations is a focal division of the bank since it includes the network of offices and the responsibility for all Swedish customers is within its business. It includes the Bank Branches (with the offices), the telephone and internet banks and also some other subsidiaries. The Bank Branches is divided into geographic regions and encompasses the network of the local bank offices; see Figure 2.

In 2004, around 490 offices were divided into 75 local banks spread throughout six regions. The same year the Bank branches employed more than 5 000 of the 6 600 employees within the business area. (FöreningsSparbanken, 2005a)
Appendix I

Figure 2: The figure shows a simplified description of the two units Bank branches and Group Staffs. The Bank branches, which encompass a network of local banks and offices, is one unit within the business area Swedish Retail Operations. The Group Staffs is a part of the Shared Services and Group Staffs of the bank and is therefore relevant to the operations of the Bank branches. For instance, it includes the Human Resource work, under which the project manager of the health project operated.

Bank offices

A large proportion of the bank’s offices are private banking offices, business offices and advisory offices that do not handle cash. The role of the offices includes the responsibility for private and business customers, qualified advice, sales, and service. Around one million customers have their own personal economical adviser in the bank and the number of very satisfied customers has increased continually. In 2004 that number rose to 28% from 24% in 2003. (FöreningsSparbanken, 2005 a)

To meet the needs of the various customers, work to specialize the roles of office employees was carried out between 2001 and 2004. As a result, all the professional roles encompassed by the bank’s branch operations have been identified and described. Also, the employees and managers have been employed in these professional roles.

The bank has an IT-based competence system that encourages employees’ participation and stresses the ties between competence development and operating objectives. This competence system is used to define the competence requirements and identify competence gaps between roles and individual competence levels. The system also serves as a support in employees’ competence development, knowledge assessment, training, and selection from the bank’s different courses. Training, knowledge assessments, and in the end certification for around
6,000 employees working close to the customers have been carried out within the bank in the 21\textsuperscript{st} century based on a new Financial Advisory Services to Consumers Act.

Local banks and offices studied

Two different local banks, Local bank A and Local bank B, from two different regions were examined in the case study of FSB. In addition employees from one office of each local bank, Office α and Office β, were studied. These units are briefly described here but more details can be found in Bäckström et al. (2005).

Local bank A and Office α
In 2004, Local bank A was divided into ten offices which were located in a region more than 1000 kilometres from the head office in Stockholm. In total the local bank had approximately 130 employees.

The local bank manager had been a local bank manager since 2000 and before that he had also worked as an office manager. In his role, he operated under the manager of the region and was responsible for the ten office managers, among others. He held regular meetings with these subordinates by telephone because of the long distance between the offices. In his position he receives directives from the manager of the region. The information about the health project had come from the human resource department but activities related to the project had generally been adopted late within the local bank.

The manager of Office α had been an office manager since 1975 and in 2004 he was responsible for nine female employees of varying ages, which worked within the office. The office handled cash and therefore was specific compared to most other offices.

The office manager and each employee had formal performance reviews twice a year but the manager also held individual reviews once a month to support and facilitate the work of each employee. Issues regularly discussed during the reviews, were goal setting and follow up. Everyone in the office had personal goals set to fulfil personal motives, and the objectives of the bank. Within the office they also competed together between themselves as a group and their shared goals. Every week there was a meeting where the manager and all employees had a chance to exchange information and discuss their business. The manager also had daily contact with the employees to make sure the co-workers felt well, were satisfied and had a pleasant working environment. For instance, the manager offered vitamins and opportunities such as light therapy that the co-workers could choose to use. In 2004, they had not had any sickness absence at all within the office.

Local bank B and Office β
In 2004, Local bank B was one of three local banks located in the same region as the head office of FSB. In local bank B there were 13 offices and all together around 250 employees.

The manager of the local bank had been in the position for two years and regularly visited all offices in the local bank to show his interest in, support and get to know the employees. His subordinates were made up of 21 managers of whom 13 were the office managers within Local bank B. However, the manager was keen on also knowing all 250 co-workers in the offices by name and to be aware of each person’s defined professional role. He had the responsibility to make sure that the objectives and activities initiated at higher organizational
levels of the bank were fully implemented in the local bank. He had received the information about the health project from the Shared services and Group Staffs and from that had chosen activities and further focused on the project and rehabilitation of absent employees within his local bank.

In 2004, Office β had eight employees with a range of ages, defined professional roles and of both genders. The manager of this office was recruited to her position in 2003 but had been in the bank since 1987. She was operating under the manager of Local bank B and thus had meetings with him and other office managers within the local bank every second week.

In the office they worked with individual sales goals which were adapted to the restrictions of the bank region. The goals of each person and the progress made were on display in the lunch room for everyone to see. These goals were also followed up in discussions between the office manager and each individual once a week. Every week there was also a meeting where the manager and all employees had a chance to exchange information and discuss their business.

References


Appendix II

The questionnaire used in the interviews with the executive managers (The HR manager and The Project manager)

(In Swedish)
"NIVÅ 1” – Koncernledning/Styrelse

UTSKICK INNAN

Syftet med intervjun
Frågestruktur
Genomförande (bandspelare etc.)

INTERVJUUNDERLAG

Tid: Ca 1 timme

Inledning

Presentation av oss och projektet
Syfte med intervjun
Tid och upplägg för intervjun

Bakgrund

1. Berätta kort om Dig själv
   o Nuvarande befattning?
   o Arbetsuppgifter?
   o Tid inom företaget, som ledare och på nuvarande befattning?
   o Antal medarbetare Du ansvarar för/direktrapporterande?

2. Hur ser Du på Din roll som ledare?
   o Hur arbetar Du som ledare?
   o Ansvar och befogenheter?
   o Drivkrafter?
   o Förebild/mentor?

3. Hur skulle Du, med fem ord, vilja beskriva Föreningssparbankens värderingar (företagskulturen på FSB)?
Hur har Ni tänkt och agerat? Vad blev resultatet?

Planera

4. Varför startade förbättringsarbetena (med fokus på delaktighet och hälsorämnande ex Offensiv hälsa, IDA, 55+...)?
   - Ge, på en tidsaxel, en kort beskrivning av viktiga händelser med relation till arbetsmiljö, personal- och hälsorämnande åtgärder inom Föreningssparbanken.
   - Vad var syftet?
   - Varifrån kom idén, kravet, förebilden, inspirationen?
   - Vem tog initiativet?
   - Vem hade ansvar att starta projektet?
   - Hur fördelades ansvaret/befogenheter?

5. Vilka strategier hade Ni för genomförandet av förbättringsarbetet?
   - Satte Ni upp särskilda mål?
     - Vilka och hur?
   - Kommunikation?

6. Vilken är/var Din roll i Föreningssparbankens utveckling/arbete med att förbättra hälsoläget?
   - Vad har varit styrande i Ditt arbete?
   - Ansvar?
   - Är det några särskilda frågor som Du medvetet drivit?
   - Hur har Du i så fall realiserat dessa?

Gör

7. Hur (och varför) arbetade Du för att få med Dig personalen i förändringsarbetet?
   - Facket?
   - Styrelsen?
   - Ledningen (Lokalbankscheferna och kontorscheferna)?
   - Medarbetarna – vilka deltog aktivt?
   - Hur gjorde Du för att skapa förtroende?
     - Mellan ledare och medarbetare?
     - Mellan medarbetare?

8. Arbetade Ni aktivt med kultur/värderingar? I så fall hur?

9. Hur (och varför) delegerade Du ansvar och befogenheter?
Appendix II

10. Hur fungerade kommunikationen praktiskt under utvecklingsarbetet/hälsoarbetet?
   o Vilka aktiviteter fokuserade Ni i ledningen (Nivå 1) på?
     • Hur och varför?
   o Kommunikation – vad, hur, när, vem…?
     • Styrelse/företagsledning?
     • Lokalbankchefer/Kontorschefer?
     • Medarbetare?
   o Form/särskilda medel (personlig, intranät, mail…)?
   o Dialog- vilken infrastruktur och vilka förutsättningar för dialog fanns?
   o Kunde alla delta på samma villkor?

11. Hur gjorde Du/Ni för att möta eventuella behov att utveckla ny kunskap?
   o På organisationsnivå?
   o På individnivå?

Studera

12. Vilka effekter har Ni sett av hälsoarbetet?
   o Utfall mot målsättning?
   o Har medarbetarnas "hälsa" förbättrats?
     • Hur mycket?
     • Trend?
   o Har medarbetarnas engagemang och delaktighet förändrats?
     • Bevis?
   o Har företagets konkurrenkskraft/lönsamhet ökat?
     • Bevis?
     • Varför?
   o Ändrade fysiska/tekniska förutsättningar (arbetsmiljö)?

13. Genomfördes arbetet som planerat?
   o Fungerade/ändrades strategierna?
   o Flexibelt, ad hoc eller strukturerat?

14. Har den formella strukturen haft betydelse för arbetet och utvecklingen? I så fall på vilket sätt?

Lär

15. Vilka anser Du är de viktigaste erfarenheterna Ni fått från arbetet med att förbättra hälsoläget?
   o Anser Du att hälsoarbetet så här långt varit framgångsrikt?
   o Vad har fungerat bra/mindre bra?
16. På vilket sätt har Ni utnyttjat dessa erfarenheter?
   o Har följande ”påverkats”:
     • Medarbetarrollen
     • Organisation/Struktur
     • ”Det dagliga arbetet – Arbetssätt”
     • Värderingar

17. Hur har arbetet med hälsofrämjande påverkat Dig som ledare?
   o Skulle du tänka och agera annorlunda om hälsoarbetet skulle starta nu?
   o Ledarrollen?
   o Ansvar?
   o Arbetssätt?

18. Hur gör Ni/Du för att fortsätta upprätthålla/förbättra hälsoläget?
   o Integrering i det dagliga arbetet? Koncretisera!

19. Hur tycker Du att man ska leda ett förändringsarbete så att det skapar en miljö
    för hållbar hälsa (där medarbetarna mår bra och håller sig friska)?
   o Vilka ledaregenskaper är viktigast?

Träddiagram

a) Träddiagram

20. a) Varför är Ni Sveriges bästa arbetsplats?
    o Varför 5 ggr/träddiagramsfrågorna
    o Skiljer sig Föreningssparbanken från andra stora organisationer?

21. a) Vilka arbetssätt/projekt anser Du varit mest framgångsrika (nämn 5 och
     motivera)?

22. a) Är det något Du skulle vilja tillägga eller särskilt framhålla?
b) Frågor om tid ej finns för träddiagram

20 b) Nämnn fem faktorer/arbetssätt som varit avgörande för Föreningssparbankens hälsoförbättring?

21 b) Är det något Du skulle vilja tillägga eller särskilt framhålla?

- Får vi återkomma om något är oklart eller om vi har ytterligare frågor?

TACK!
Appendix III

The questionnaire used in the interviews with middle managers (Local bank managers) and lower level managers (Office managers)

(In Swedish)
”NIVÅ 2” – Lokal bankchef/Kontorschef

UTSKICK INNAN

Syftet med intervjun
Frågestruktur
Genomförande (bandspelare etc.)

INTERVJUUNDERLAG

Tid: Ca 2 timmar

Inledning

Presentation av oss och projektet
Syfte med intervjun
Tid och upplägg för intervjun

Bakgrund

23. Berätta kort om Dig själv
   o Nuvarande befattning?
   o Arbetsuppgifter?
   o Tid inom företaget, som ledare och på nuvarande befattning?
   o Antal medarbetare Du ansvarar för/direktrapporterande?

24. Hur ser Du på Din roll som ledare?
   o Hur arbetar Du som ledare?
   o Ansvar och befogenheter?
   o Drivkrafter?
   o Förebild/mentor?

25. Hur skulle Du, med fem ord, vilja beskriva Föreningssparbankens värderingar (företagskulturen på FSB)?
Hur har Ni tänkt och agerat? Vad blev resultatet?

Planera

26. Varför startade förbättringsarbetena (med fokus på delaktighet och hälsofrämjande ex Offensiv hälsa, IDA, 55+…?)
   o Ge, på en tidsaxel, en kort beskrivning av viktiga händelser med relation till arbetsmiljö, personal- och hälsofrämjande åtgärder inom Föreningssparbanken.
      • Vad var syftet?
      • Varifrån kom idén, kravet, förebilden, inspirationen?
      • vem tog initiativet?
      • vem hade ansvar att starta projektet?
      • hur fördelades ansvaret/befogenheter?

27. Vilken är/var din roll i Föreningssparbankens utveckling/ arbete med att förbättra hälsläget?
   o Vad har varit styrande i ditt arbete?
   o Ansvar?
   o är det några särskilda frågor som du medvetet drivit?
   o Hur har du i så fall realiserat dessa?

28. När och hur blev du involverad i arbetet?
   o vilket ansvar och vilka befogenheter tilldelades du?
   o Direktiv uppfprän?
      • vilka och hur?
   o Hur påverkades ditt arbete/agerande av detta?

29. a) Vilka strategier hade ni i lokal bank norr/stockholm c för genomförandet av förbättringsarbete?
   o Satte ni upp särskilda mål?
      • vilka och hur?
   o Kommunikation?

7.  b) Vilken var din strategi för genomförandet av förbättringsarbete på Haparanda-/Luleå-/Hornstullkontoret?
   o Satte ni upp särskilda mål?
      • vilka och hur?
   o Kommunikation?
- Appendix III -

Gör

30. Hur (och varför) arbetade Du för att få med Dig personalen i förändringsarbetet?
   o Facket?
   o Styrelsen?
   o Ledningen (Lokalbankscheferna och kontorscheferna)?
   o Medarbetarna – vilka deltog aktivt?
   o Hur gjorde Du för att skapa förtroende?
      • Mellan ledare och medarbetare?
      • Mellan medarbetare?

31. Arbetade Ni aktivt med kultur/värderingar? I så fall hur?

32. Hur (och varför) delegerade Du ansvar och befogenheter?
   o Till vem, när och vad?

33. Hur fungerade kommunikationen praktiskt under utvecklingsarbetet/hälsoarbetet?
   o Vilka aktiviteter fokuserade Du på?
      • Hur och varför?
   o Kommunikation – vad, hur, när, vem…?
      • Styrelse/företagsledning?
      • Lokalbankschefer/Kontorschefer?
      • Medarbetare?
   o Form/särskilda medel (personlig, intranät, mail…)?
   o Dialog- vilken infrastruktur och vilka förutsättningar för dialog fanns?
   o Kunde alla delta på samma villkor?

34. Hur gjorde Du/Ni för att möta eventuella behov att utveckla ny kunskap?
   o På organisationsnivå?
   o På individnivå?

Studera

35. Vilka effekter har Ni sett av hälsoarbetet?
   o Utfall mot målsättning?
   o Har medarbetarnas ”hälsa” förbättrats?
      • Hur mycket?
      • Trend?
   o Har medarbetarnas engagemang och delaktighet förändrats?
      • Bevis?
   o Har företagets konkurrenskraft/lönsamhet ökat?
      • Bevis?
      • Varför?
   o Ändrade fysiska/tekniska förutsättningar (arbetsmiljö)?
36. Genomfördes arbetet som planerat?
   - Fungerade/ändrades strategierna?
   - Flexibelt, ad hoc eller strukturerat?

37. Har den formella strukturen haft betydelse för arbetet och utvecklingen? I så fall på vilket sätt?

38. Vilka anser Du är de viktigaste erfarenheterna Ni fått från arbetet med att förbättra hälsoläget?
   - Anser Du att hälsoarbetet så här långt varit framgångsrikt?
   - Vad har fungerat bra/mindre bra?

39. På vilket sätt har Ni utnyttjat dessa erfarenheter?
   - Har följande ”påverkats”:
     - Medarbetarrollen
     - Organisation/Struktur
     - ”Det dagliga arbetet – Arbetssätt”
     - Värderingar

40. Hur har arbetet med hälsorömnande påverkat Dig som ledare?
   - Skulle du tänka och agera annorlunda om hälsorbetet skulle starta nu?
   - Ledarrollen?
   - Ansvar?
   - Arbetssätt?

41. Hur gör Ni/Du för att fortsätta upprätthålla/förbättra hälsoläget?
   - Integrering i det dagliga arbetet? Koncretisera!

42. Hur tycker Du att man ska leda ett förändringsarbete så att det skapar en miljö för hållbar hälsa (där medarbetarna mår bra och håller sig friska)?
   - Vilka ledaregenskaper är viktigast?
Träddiagram

a) Träddiagram

43. a) Varför är Ni Sveriges bästa arbetsplats?
   ○ Varför 5 ggr/träddiagramsfrågorna
   ○ Skiljer sig Föreningssparbanken från andra stora organisationer?

44. a) Vilka arbetssätt/projekt anser Du varit mest framgångsrika (nämnn 5 och motivera)?

45. a) Är det något Du skulle vilja tillägga eller särskilt framhålla?

b) Frågor om tid ej finns för träddiagram

20  b) Nämnn fem faktorer/arbetssätt som varit avgörande för Föreningssparbankens hälsoförbättring?

21  b) Är det något Du skulle vilja tillägga eller särskilt framhålla?

- Får vi återkomma om något är oklart eller om vi har ytterligare frågor?

TACK!