

# [Organizational transformation issues in a health care clinic](https://assignbuster.com/organizational-transformation-issues-in-a-health-care-clinic/)

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ORGANIZATIONAL TRANSFORMATION ISSUES IN AHEALTHCARE CLINIC (CASE STUDY). EXECUTIVE SUMMARY This paper is based on the case study Organizational Transformation in a Health Care Clinic where focus, is the many organizational transformational issues that take place during an organisational development and transformational change of the Health Care Clinic. According to Anderson and Ackerman (2001: 39-40 & 50), transformational change is defined as a “ completely new way the organization and its people see the world, their customers, their work and themselves. For organizational change to be successful the procedure would require changes that would affect employees’ behaviour, how they think and the organization’sculturethus raising many transformational issues such asleadershipissues, communicationissues, training and development issues, and cultural issues. GLOSSARY BehavioursThe way in which people in the organization act in terms of what they do and say that brings the strategy and desired culture to life ControlsWhat gets measured and rewarded

Change To alter, modify or transform CultureThe totality of socially transmitted behavior patterns, arts, beliefs of an institutions FacilitateTo make something easier to do GoalsThe objectives or targets that the organization is trying to achieve LeadershipThe ability to guide, direct and influence persons ManagementPersons in charge of organizing and controlling the affairs of a business or a sector of a business MissionThe purpose of the organization

OrganizationA body of persons organized for some specific purpose Organization Development (OD)A primarily behaviouralscienceapproach to planned organizational change that is composed of traditional OD and mainline OD ( Krell 1981) Organizational Transformation (OT)Change that involves transformative changes in the fundamental nature of the organization and requires completely new ways of thinking, behaving and perceiving by members of the organization Realignment To readjust or change something to fit different circumstances StrategyThe approach that the organization is adopting to achieve thegoalsthat support the strategy ValuesThe underlying principles and ethics that drive the organization Vision A picture of a desired future state that is sufficiently appealing and compelling to drive change forward 1. 0. INTRODUCTION:

ORGANISATIONAL TRANSFORMATION can be defined as “ a fundamental shift in the way business delivers value to its customers and stakeholders resulting in dramatic change strategy, processes, technologyand utilisation and management of human resources to meet the needs of the global economy”. ORGANISATIONAL DEVELOPMENT is a system wide application and transfer of behavioural science knowledge to the planned development, improvement and reinforcement of the strategies, structures and processes that lead to organisational effectiveness. Many organizations of today go through changes because of circumstances, wanting to become more developed and/or advanced or simply because of wanting to move with the time.

Management of the health care clinic initiated an organizational development programme because of problems originating from the application of modern technology to the jobs of medical technologists. It was discovered that employees of the biochemistry department were greatly dissatisfied because of their feeling of having their skills underutilized, having cultural differences with other staff members, having communication barriers and not having job challenges present. The organizational development staff and the manager agreed that job redesign should take place to bring more autonomy, control, feedback and meaningfulness to the work for the employees of the clinic.

Over a period of two years evaluation of the results by the organizational development staff found that job characteristics and satisfaction declined for both groups that were involved in the transformational change process. Changing environments of an organization has effect on the organization and the organization’senvironmentthus creating many transformational issues. Transformational issues include leadership issues, cultural issues, communication issues, cultural issues and training and development issues. 1. 1. OBJECTIVES: 1-To identify the organizational transformational issues that are involved in the change in the health care clinic 2-To evaluate change implementation and intervention strategies at a health care clinic. 1. 2. METHODOLOGY:

The researcher in the context of this case study has opted to use the phenomenological approach as opposed to a positivistic approach (Collis and Hussy 2003). Triangulation-“ the use of more than one method or source of data in the study of a phenomenon so that findings can be cross checked” Bryman (2008 pg. 700) Triangulation method of data collection will be used collecting qualitative and quantitative data from bothprimary and secondarysources for example using unstructured questions and interviews. A variety or literature, theoretical and analytical tools and techniques will be used. The research conducted being a case study the data collection will be consequence on the evidence as suggested in the case study. Random sampling s suggested by Saunders et al cannot be validated, in that for quantitative research the sample size must be of at least 95% in order to obtain realistic or quantifiable data and it may be dangerous and less accurate to do otherwise. 2. 0. LITERATURE REVIEW The core issues which will guide the facilitation of policy development, plans and programs for the organisational will include the under mentioned factors: Lewin’s(1951) force field analysis demonstrates the two key external forces that push organisations into change situations but counteracting, resisting forces are often arisen from inside organisations when the changes are attempted and that change occurs when the driving forces out number resisting forces.

This force field is propagated on the idea that social situations can be seen as equilibria that are periodically disturbed when changes to the situation are attempted. The concept of change as modification of these forces keeping a system’s behaviour stable. The two groups of forces are those striving to maintain the status quo and those pushing for change. A state of ‘ quasi-stationary equilibrium’ as coined by Lewin(1951) is achieved when both sets of forces are almost equal and current behaviours and attitudes are maintained. FIG. 1 BELOW REFERS. Kurt Lewin (1951) identified three stages of behaviour modification in a simplistic change management model is seen in the table 1 below. LEWIN(1951)THREE STAGE MANAGEMENT TABLE. (TAB. ) UnfreezingIs concerned mainly with selling the change and provides a motive for groups and individuals to change their attitudes, systems, behaviours values and structures. The unfreezing stage will be greatly accelerated if it is recognised that the need for change is immediate, clear and the survival of the organisation depends upon it. MovingIs concerned with recognising what the new attitudes and desirable practise, norms and behaviours should be and communicating it and encouraging others in the organisation to embrace and own it as new job requisites. This aspect can occur through assimilation and exposure to new concepts or from individuals with different perspectives. RefreezingThis stage is the final and stabilising stage of the change implying reinforcement of the new behaviours.

Evoking positive reinforcements such as rewards and praise. For negative reinforcement such as sanctions for indiscipline or deviant attitudes. Source: Mullins, Laurie J. (1997) Management and Organisational Behaviour 9th. Edition. FT/Prentice Hall . Again, Lewin(1951) suggested that for change to be successful there must be group activity. Unless group norms are transformed there will be no sustenance to individual actions and without reinforcements change can be short-lived. Employees are beginning to accept that the time has come for change and the changes must be made so that the organisation can remain viable. Schein (1988) model of change outlined the pivotal role of the change agent.

Schein (1988) delineated each stage of Lewin’s (1951) model by expressing the dynamics of individual change and how imperative it is for change agent to manage these changes (see table 2 below) the change agent can be seen as the coach, facilitator and motivator assisting individuals through the change can be seen as the coach, facilitator and motivator assisting individuals through the change. According to Schein’s(1988) model the first stage the change agent assists with motivating the individual by disconfirming their behaviours, attitudes and performance. Stage two emphasises the need to get employees to perform tasks differently and actually engaging belief that changing norms and working habits can effectively improve their performance.

At Stage three the change agent helps the employee to change his thought patterns by integrating new and well defined behaviours. Self conceptualisation and reinforced performance standards are confirmed. Schein (1988) believes that none of these stages are susceptible to self management but need the intervention of change agents. In furtherance, Cummings and Worley (2005) planned change concept outlined how change can be implemented in organisations. This action research model places heavy emphasis on gathering and diagnosing data prior to action planning and implementation and on assessment of results after action is taken. The action research model describes change as a cyclical process involving joint activities between employees and organisational ractitioners. Figure 2 below compares Lewin (1951) change model to other models of planned change such as the positive model and the action research model all of which describes the phases by which planned change occurs in organisations. Initiation of successful organisational change modified restructuring strategies and organisational efficiencies can be envisaged through these theories. In this model many steps overlap and interact in practise. This simple model has been used to analyse and manage change and can be useful at times. However, it tends to treat people as the objects of manipulation and does not involve them in the change process at all.

All three approaches emphasises the application of behavioural science knowledge, involve organisation members in the change process to varying degrees and recognise that the interaction between an organisation and a consultant constitutes an intervention that affects the organisation. Lewin’s(1951) change model approach differs from the other two models in that it deals with the general process of planned change whereas the others target specific organisational development(OD) activities. To manage strategic change effectively, it is important to understand its causes. Two main classifications of the causes of change are outlined by the following theorists: 1) Tichy’s(1983) four main causes of strategic change 2) Kanter, Stein and Jick’s(1992) three dynamics for strategic change. According to Tichy (1983) four main triggers for change:

TICHY(1983) TRIGGERS FOR CHANGE •Environment- shift in the economy, competitive pressures and legislative changes can lead to demands for strategic change. •Business relationships-alliances, acquisitions, value chain linkages or core competencies. •Technology •People-new entrants may have different educational or cultural backgrounds or expectations that require change. Source: Mullins, Laurie, J. (1997) Management and Organisational Behaviour 9th. Edition FT/Prentice Hall. (TABLE 3) Tichy(1983) suggests that change is not only inevitable in such circumstances but can be managed to produce effective results. Kanter, Stein and Jick(1992)identified three causes of strategic change: Environment-changes here compared with the situation in the organisation can lead to demands for strategic change.

Life cycle differences-changes in one division or part of the organisation as it moves into a phase of its life cycle that is different from another division may necessitate change. Typically, change issues related to the size, shape and influence of such parts and involve coordination and resource allocation issues between them. Political power changes inside the organisation-individuals, groups and other stakeholders may struggle for power to make decisions or enjoy the benefits associated with the organisation. For example, shifts in strategy from production oriented to customer oriented would be accompanied by a shift in the power balance between those two functions.

The researcher suggested that the causes were constantly shifting, sometimes slowly and at other times faster. Kanter, Stein and Jick’s(1992) theory can be directly related to the Health care clinic as the organisation go through the process of change as it relates to the external environment changes so too must the organisation, as one part of the organisation change so too must other parts of the organisation change to ‘ catch up’. Internal and external factors influence changes. Kanter, Stein and Jick (1992) identified three major forms taken by the change process. They linked these three categories of people involved in the change process, to produce a three stage process for managing change.

These three forms were: 1)The changing identity of the organisation. 2)Coordination and transition issues as an organisation moves through its life cycle. 3)Controlling the political aspects of the organisation. The three major categories of people involved in the change process: I. Change strategists-those responsible for leading strategic change in the organisation. They may not only be responsible for implementation. II. Change implementers –those who have directresponsibilityfor change management. III. Change recipients- those who receive the change programme with varying degrees ofanxietydepending on the nature of the change and how it is presented.

Kanter, Stein and Jick(1992) offer one way of structuring and managing aspects of the change process. However, these categories of people only give limited indicators of how to manage the process. Kanter, Stein and Jick’s(1992) model may be suited to major changes than the more common ongoing process. According to Cummings and Worley (2005) there are five major activities involved in order to lead and manage change and they are done in the order in which they are performed. These in order of priority are: ? Motivating change. ? Creating a vision. ? Developing political support. ? Managing the transition. ? Sustaining momentum. A major point to note is that in this model, overcoming resistance to change is required early in the change.

The change process in the organisation can be severely affected by resistance to change. People tend to very reluctant to move from their perceived ‘ comfort zone’ to some unforeseen place as it relates to change thereby begging the questions of whether their contributions will mean anything for them in the future. Albrecht (1983) provided an interesting model of change in which organisations undergo the change cycle. Individuals also experience symptoms of change response cycle. This cycle is prevalent when change is dictated or imposed by management and internal and external forces. ( Table 4 below refers. ) (TABLE4) Source: Cummings, Thomas G. nd Christohper G. Worley,(2005) Organisation Development and Change 8th. Edition-, Thomson Southwestern. The six box model of change was introduced by Weisbord (1978) as a diagnostics tool to measure organisational effectiveness and looks at the inter-related elements within the organisation. Purpose. Is the representation of the organisation and an understanding of the employee’s agreement and commitment to it. Leadership.. - Includes the style and integrity of the employee and their ability to be goal oriented. Structure . -Displays the organisational chart, reporting styles and systems, job responsibility and delegation of authority Relationship. Are those of the employees in the organisation together with their norms, behavioural patterns, conflict management and their degrees of inter dependence Rewards. -Represent what the organisation needs to rewards both in real and psychological terms and include incentives for ‘ doing the right thing’ Helpful Mechanisms. -Are the different and varied formal procedures and management systems that monitor and coordinate the organisation’s work. . According to Kotter(1995) there are eight steps to transforming an organisation. Source: Cummings, Thomas G. and Christohper G. Worley,(2005) Organisation Development and Change 8th. Edition-, Thomson Southwestern.

Kotter(1995) suggests ” that for change to be successful 75% of the company’s management needs to buy into the change and really work hard at step and spend significant time and energy building urgency before moving into the other steps. Don’t panic and jump in too fast because you don’t want to risk further short term losses, if you act without being properly prepared, you could be in for a bumpy ride’’ As a result of change many times there is the issue of conflict arising. Conflict is inevitable just as change and assuming that organisational goals are broadly dersiable , there are two aspects of conflict that are relevant and leaders must take cogniscance of. According to Hunt (1986) conflict can be highly desirable, it can energise relationships and clarify issues. Conflict can be constructive as well as destructive. the constructive effects of conflict are hat it can introduce different solutions to problems, power relationships can be defined more clearly, it can encouragecreativity and testing of ideas, it focuses attention on individual contributions, it brings emotions out in the open and it provides opportunities for the release of hostile feelings that may have been, or may be, repressed otherwise. Conflict can have negative effects as it may distract attention from the task, it can polorise views and dislocate the group, odjectives may be subverted in favour of secondary goals, it encourages defensive or spoiling behaviour, it may result in the disintegration of the group and it can foster emotional, win-lose within the group. Job design involves the planning of the job. This includes its contents, the methods of performing the job and how it relates to other jobs in the organization (Rahim 2001).

Job design and redesign main focus is to put together the needs of the employees that are involved in the different jobs with the production necessitate of the organization in mind. One of the main aims of job redesign is to supply the organizations workers with significant work that fit effectively into the flow of the organization. Enriching, enlarging or simplifying are also goals of job redesign. For the improvement of performance job redesign theory focuses on, job rotation and job enlargement. As in the case it was shown that the general feeling of the employees of the clinic was that there was an absence of job challenge and that technology had simplified the work to be done.

According to Herzberg’s theory ofmotivation, workers motivation to work depends on the nature of the work and how challenging it is. Lack of this challenge will allow employees to become disenchanted with their job thus having a negative impact on organizational transformation. Having job challenges will help in motivating the employee to work. Adair (2004) believes that motivation comes from within a person but is fuelled by external factors eg. having work challenges to be able to align themselves to achieve a specific goal, (the goal being a challenge but yet it is attainable by the employee). Job rotation where the employees will be allowed to work on different tasks or in different departments.

This will increase job satisfaction and would have helped the employees as they would have had the opportunity to perform different tasks, thus inhibiting boredom on the job. Learning will also take place as employees also learn new tasks and have different responsibilities with job rotation. Job enlargement whether horizontal or vertical would also lead to a more successful organizational transformation as it would also help in giving the employees a challenge as they will have more to do. Time is also extended so that the challenge of doing more is realistic. Self esteem will be contributed to as the employee would be entrusted with exercising judgement thus having added responsibility for tasks.

Job design and redesign is mainly done by the management of the organization who are responsible for making decisions about how to design those jobs ( Mintzberg 1973) as they see fit. Although managers would have more influence and control over job design than they do over structure, technology, culture, relationships and people ( Hackman & Oldham 1980), the time and attention of managers would still be greatly needed (Dutton &: Ashford, 1993). Pfeffer(1994) believed that the depending on how managers make decisions about job design, it can be a liability or a potential source of competitive advantage for organizations however, many managers often use simplified work as the default approach to designing jobs (Campion &: Stevens, 1991). 3. 0. ANALYSIS/FINDINGS:

The researcher in her analysis of the case study of the particular health care clinic sought to ascertain where the problems were and attempts to ascribe the requisite solutions. There were certain strengths as well as considerable weaknesses associated with the case study. It was found that Lewin’s(1951) models were followed to the letter in the structure of this health care clinic and that factors outside these frameworks were not used thereby creating obvious gaps. TECHNOLOGY: Tichy’s(1983) four main triggers of successful strategic change identifies technology as an important driver in the change. As is the situation in the case study it was found that with the advent of new modern technology strengths as well as weaknesses are abound.

The medical technologists in the bio chemistry department were either inept with the new technology or were not prepared for the imposition of the new technology thereby dissatisfaction was wide spread, which can be seen as another weakness. Technological shifts can substantially impact on the quality or content of the work and may ultimately influence the factors that affect survivability of the organisation. SOURCES OF DISSATISFACTION Paragraph 2 of the case study identifies several sources of dissatisfaction among the technologists that were of concern. The under mention identifies the concerns together with the possible cause and effect and likely solutions. Under utilisation in their work”-this can be seen as a weakness in the organisation and could have been possible as the OD staff failed and or neglected to take into consideration issues such as job design and redesign RAHIM (2001), job rotation, job enrichment, job enlargement and job evaluation on employees at the health care clinic. “ Communication within the laboratories was insufficient”-it is apparent that the communication channels between laboratories were severed or perhaps were insufficient. As such the OD experts should have embarked on team building workshops and organisational development seminars and sufficient enough training and development exercises. Work wasn’t evenly distributed”- this would suggest that there was a certain lack of supervision in the laboratories and there was afailureto have equity distribution in assignment and management of tasks. The issues of capacity management and production planning are areas that OD experts should have looked at. “ Medical staff didn’t treat them with therespectthat they deserve”-this clearly suggests that the medical staff felt that the technologists were their subordinates and felt that way because the technologists may be less remunerated as compared to the medical staff. As such OD staff should take into consideration issues such as reward management systems, merit recognition eg. Employee of the month, performance pays system, team based pay and a comprehensive performance related merit system of remuneration. The advent of technology had had simplified the work to the point that it no longer seemed to require the level of training common among medical technologists”-this would suggest that technologists should have had enhanced training in other skill sets or multi skill training which would give them the extended capacity to build manpower capacity. “ Studies in personnel management literature”-there is no such evidence in the case study to suggest that there were any studies in the personnel management literature carried out. “ Job challenge was a primary cause of job turnover”-this is an issue really of job retention as opposed to job attrition. By looking at performance appraisal strengths and weakness can be determined.

In looking at job turnover OD require job retention, job security andcareerand talent management. LEADERSHIP: The art of leadership is saying no, not yes. It is very easy to say yes. (TONY BLAIR, 1994) Are leaders born or made? Trait (1950) theory seems to suggest that leaders are born and not made, yet Stodgill(1949) and Mann (1959) suggests that there are few relationship between the traits possessed by leaders and their performance. The Trait (1950) theory that leaders are born failed under scrutiny (Zaccaro, 2007). Kirkpatrick and Locke (1991) having examined existing literature on leadership suggests that there are six leadership traits.

They are: 1-Drive 2-Leadership motivation 3-Honesty and integrity 4-Self confidence 5-Cognitive ability 6-Knowledge of the business As in the case study there is no clear indication as to the leader (Weisbord 1978) of the change process as it is reputed that the OD staff had discussions with the managers. Clearly no one took charge of the change process from the onset of the planned change. There is no evidence to suggest whether the OD staffs were adequately qualified to conduct such a change process or whether the interviews were conducted professionally. COMMUNICATION Communication is a key component in the facilitation of any change process.

For this reason communication is heightened importance when change is needed. Bordia et al (2004) suggests that communication during change is vital to manage employee uncertainty and feelings of loss of control. As was the case in this case study there is hardly any evidence to suggest that there was a proper reporting structure so that information on the change initiatives were being communicated to the technologists by the OD experts. To this end came the issue of the readiness for change as this is an important indicator to coping with resistance to change so suggests Armenakis, Harris and Mossholde(1993). Communication strategies need to emphasize two messages.

They are: 1- The need for the change, that is, indicating what the organisation is doing as opposed to what it should be doing and 2- The ability to change successfully, that is, it is important that the employees believe that the change could be done thereby encouraging them to make the extra effort. TIMEFRAME: Apart from using volunteers to assist in the analysing of the data which is in itself questionable as there is evidence that they are overworked and not properly remunerated. The OD staff administered questionnaires which asked for confidential opinion as opposed to change or job analysis questions and there is no indication of its contents. These questionnaires sought only quantitative data.

Whether the truth will be written on those questionnaires is anybody’s guess as there is no validation of the data. There is no clear definition as to the timeline for the project and no implementation plan. The random sampling data collecting took two months seems to be incredibly long for such an exercise. To suggest that two years later the OD staff evaluated the results of the change program was incredulous to say the least as this was certainly not an effort in organisational transformation but rather an incremental change plan. This was an exercise that was limited in scope, time and cost thereby failing to meet its objectives. RESISTENCE TO CHANGE

Resistance to change is a widely used term that generally gives a bad or a negative connotation. It us usually asked of employees to change something in the organisation that they may have been comfortable with for their entire life. That change will not come easy at all, there will be some anguish and fight and may even be the source of collective group action like strikes and industrial action by employees. This is not necessarily a bad thing. Ford and Ford(2009) suggests that resistors to change should not be overlooked but that resistance should be taken in a positive light and accepted as a form of feedback that can actually build and encourage the change process.

Pockets of resistance can also be found with the Lewin (1951) model of unfreezing, moving and refreezing. As the activity of unfreezing comes to an end resistance is usually found as employees attempt to move. This is quite natural as without proper communicating many are unsure of their future especially the employees who have fallen into their comfort zone. As with the case study there was a definite feature of resistance to change. 4. 0. REFLECTION: This change process was a failure from its inception because the very basic of protocols were not adopted. The OD staff sought to enlist volunteers who do not have the requisite educational capacity to carry out that vital function of collecting and analysing data.

The human resources department should have been the ones directly involved in the change process. The change agent should have been engaged who is a highly trained professional in organisational development to lead the drive towards organisational transformation. In this case study the data collected would at best be unscientific and unrealistic to say the least. Change, whether planned or emergent can take a number of forms, each of which requires a different type of action. Utilising collective methods of action research together with capacity building and the will to include people in the change process will go a long way in achieving successful change.

In conclusion it must be said that there are unprecedented opportunities and challenges in the health care industry for which organisational development (OD) practitioners must be aware of and as such there can be significant positive growth and development by linking strategic activities of the organisation towards the direction of organisational transformation. Organisational transformation can also be achieved by being able to facilitate integration of people and processes across traditional department and organisational boundaries and by acknowledging competencies and integrity. REFERENCES: ATKINSON, P. E. (1990) ‘ CREATING CULTURAL CHANGE’ MANAGEMENT SERVICES VOL. 34 NO. 7, PP. 6-10.

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