

Senior managers' Delphi study

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Senior manager decision-making and interactions with frontline staff in intellectual disability organisations: A Delphi study

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Abstract

Very little is known of the activities of the most senior managers in organisations providing social care in the community to people with intellectual disabilities. Yet the importance of the focus and activities of senior managers in directing and supporting staff practice and staff experiences is likely to be central to an organisation's functioning and support provided for staff and service users. This study employed Delphi methodology with a panel of eleven senior managers' mostly chief executives, managing small to very large organisations providing support for people with ID, in the UK. Over three rounds of questions senior managers described their face to face and non-face to face contacts with staff and decision making. Narrative data was subject to quantitative and thematic analysis. In the last round themes were subject to quantitative analysis. Most contacts between senior managers and staff were in formal structured contexts and all managers used social media to promote the organisations good practice ambitions and practice. The panel were focused upon accessing and understanding the informal aspects of their organisations and staff factors. Decisions were both short term reactive and long term strategic and an effort to link these was felt to improve organisational functioning. A framework for understanding senior managers' activities emerged showing two sources of demands and opportunity, extra-organisational focused upon meeting legal and regulatory demands and intra- organisational focused upon understanding and influencing informal staff practices/experiences and cultures within their organisations.

Keywords: intellectual disabilities, senior management, decision making, community care, staff practice/experience

What is known about this topic?

- Very little is known of senior managers' activities regarding staff experiences/practice
- Senior managers' activities are thought to be important.
- We wanted to explore this topic.

What this paper adds

- Senior managers meet staff in mostly formal structured activities.
- Senior managers were focused upon meeting external demands e.g. regulation and accessing/understanding the informal aspects of organisations.
- Senior managers sought to link short term reactive decisions with long term strategic decisions.

Introduction and background

The practices of staff working in organisations providing support for people with intellectual disabilities (ID) are an important variable for the quality of life of people living in staffed services (McGill et al., 2018, Rose et al., 2013, Department of Health 2007). Staff experiences of their work are felt to be important in their own right and have, at present, partially understood relationships to their practice (Rose 2011). A range of factors have been researched in relation to staff practice. For example, training (MacDonald & McGill, 2013) improving staff rapport with service users (Magito-McLaughlin & Carr 2005, Willems et al., 2010). Research into staff experiences has mostly focused upon negative aspects e.g. stress and burnout related to managing behaviours regarded as challenging (Shead et al., 2016, Rose et al., 2013).

Shogren et al. (2015) explored the role of 'context' in transmitting policy into daily outcomes for people with ID. Shogren et al. (2015) suggest three levels of contextual factors; the middle '*meso*' level factors includes management and leadership. Management in ID services is under researched e.g. a recent review of research into the role of managers of social care in the community (covering all specialities) described it as important and neglected; this neglect was especially marked in ID (Orellana et al., 2017). However, research into management and leadership in health services is widespread, for example, supporting focussed international journals (e.g. Health Services Management Research) and a UK government funded health service leadership programme running in England for over ten years (the NHS Leadership Academy).

Research in ID social care management has focused upon examining the role and impact of managers working in direct supervisory positions to frontline staff i.e. first line or frontline managers. For example, research focused upon the influence of frontline managers on developing good staff practice through Active Support, has drawn attention to the difficulties frontline managers may have in providing staff with 'on-the-job' coaching, to support classroom based training (Jones et al., 2001). However, a particular style of management focused upon developing staff practice called 'practice leadership' (and good general management) are important factors for implementing Active Support (Beadle-Brown et al., 2014). Frontline managers also have an important role in ameliorating potential negative experiences for staff when they have to support service users who may show behaviour described as challenging (Deveau & McGill 2016b, [Deveau & McGill, 2019](#)).

Other research in ID has examined the competencies that frontline managers (in USA and Australia) 'must have' to undertake their roles, outlining 144 competencies in 14

categories (e.g. Clement & Bigby 2012). More recently a series of research studies employing qualitative interview methods with frontline managers has been published. For example, examining frontline managers' perceptions of their role in providing a supportive 'environment' for staff practice with service users to enable 'engagement in meaningful activities' (Bradshaw et al., 2018, Berlin Hallrup et al., 2018) and to manage challenging behaviours (Deveau & McGill 2016a, Olivier Pijpers et al., 2018).

Research exploring the work and activities of more senior managers in organisations providing social care support to people with ID in the community is notably lacking. Therefore the aim of this research is to explore the activities of senior managers within organisations providing social care in community settings for people with ID.

The focus upon activities reflects the growing recognition by leadership scholars and practitioners of the importance of 'authentic leadership' (see special issue *Leadership Quarterly on Authentic Leadership*). Encompassing the view that an organisation's culture, mission and priorities are communicated more powerfully through a leader's actions and activities than through their words (Avolio & Gardner 2005). Whilst organisational systems like: leadership and management, espoused values and goals are common to all organised entities; from huge commercial and public bodies e.g. Ford Motors and the NHS to small community sports clubs; Leadership is widely conceived as 'contextualised' requiring managers' activities and relationships specific to the local setting and goals. This suggests that senior managers in ID are important subjects for specific research.

This study used a Delphi approach. Delphi research methods have been widely used in studies of leadership and management (Okali & Pawlowski 2004) and increasingly used in medical and health research as a means of achieving a consensus of expert opinion (Holey

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et al., 2007, Keeney et al., 2006). Delphi studies are particularly useful for examining contexts where little high quality research e.g. RCTs currently exists.

Examples of Delphi research in ID have been published. For example, developing consensus views on operationalising quality of life for people with profound disabilities (Petry et al., 2007) providing remote/rural area services to people with ID (Wark et al., 2013) and examining patients' views of mental health treatment by different ethnic groups (Bonell et al., 2012).

The Delphi method is characterised by:

- using a sample of experts to develop a consensus of opinion in a particular field;
- a repeated iterative process of gathering responses to questions in 'rounds' usually three;
- anonymity of individual participant responses;
- the results of each round are subject to statistical **and/or** qualitative summary and 'fed back' to experts in subsequent rounds until statistical consensus of opinion is reached (Holey et al., 2007; Keeney et al., 2006);

Two research questions were:

- to describe the activities of senior managers and explore themes emerging from these activities;
- To assess whether a consensus could be developed regarding the emerging themes.

Method & participants

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A three round Delphi study collected data from 11 senior managers (SM) from organisations in the UK providing services for people with intellectual disabilities. Each round built upon the results of the preceding round.

Procedure

Eleven participants (the panel) were recruited using purposive 'snow ball' sampling techniques. A chance contact of the first author and a chief executive led through subsequent recommendations to the formation of a small group of senior managers interested in research. Further contacts of the research group, including a charitable body representing senior managers in social care, completed the sample over a period of weeks. Ethical approval was gained from the University of Kent. All potential panel members were sent an information sheet and consent form which was signed and returned. Google forms was used to distribute questions and summaries of previous rounds to participants. Questions for round 1 were distributed in April 2017 and final responses to round 3 collected in January 2018. The questions were agreed within the research team i.e. the three authors. Responses to rounds 1 and 2 were subject to quantitative and thematic analysis by the first author, then reviewed and discussed within the research team to reach agreement on themes and subsequent questions. Each participant's responses were anonymised using an individual code.

Participants (the panel)

Table 1 around here please

Eleven panel responded to round 1 and of these nine responded to both rounds 2 and 3.

Examples given in the results below are prefaced by the panel member's individual code e.g.

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GW19 and another code e.g. (M) signifying number of people supported by the organisation.

Measures, analysis and results

The method and results are presented below consecutively for each round. In addition to aiding readability this represents the research procedure as it occurred with distinct measures, analysis and results. In summary:

- Round 1 collected descriptive data for panel activities regarding contacts with staff and decision making. These were subject to content analysis and are presented in aggregated categories. Preliminary themes emerged regarding the informal aspects of organisations and long term versus short term decision making.
- Round 2 provided summaries of contact and decision making from round 1 and sought panel agreement as to their accuracy, and if required clarification. Additional descriptive data was sought regarding the effectiveness of decision making. Emergent themes regarding contacts and decision making were tested for preliminary consensus.
- Round 3 tested the importance and consensus regarding themes and subthemes e.g. informal aspects of panel organisations and long versus short term decision making. Panel responses were gathered on a five point scale to ten structured items.

Round 1 measures and analysis

Round 1 collected descriptive data using four open ended questions (three of which are reported here) asking panel to describe their individual activities regarding:

1. Their face to face contacts and frontline staff (staff);

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2. Their non-face to face contacts and staff;
3. Decision making - panel members were asked to describe two decisions made in the last six months that they felt were influential for staff practice and/or experience.

Descriptive data for contacts and decision making were subject to content analysis and aggregated into broader 'categories' e.g. service visits were aggregated into routine or in response to events/opportunities or challenges. Results are given for the aggregated categories with examples and frequency of responses for each category.

Round 1 results

Face –to-face contacts between panel and staff

Nine panel conducted routine visits to services e.g. GW19 (M) "I try and visit some services every week" TB03 (L) "I visit each service as a minimum of quarterly". A purpose for visits was given by seven panel, which were usually routine. However, visits may be in response to challenges e.g. new services. Four responses suggested panel were providing frontline 'practice leadership' through modelling, observations of practice and feedback e.g. 1104, (L) "I discuss good practice with staff and praise them when I see something particularly positive, I regularly discuss (organisation's) values with staff and what they mean in practice. I also carry out social inclusion audits which score each service on a range of measures including supporting people into paid and voluntary work. I address any poor practice that I see straightaway".

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Six panel had contact with staff during formal, regular staff consultative meetings. Meetings involved, service managers, staff groups or other advocates e.g. GW19 (M) "hold a Tea and talk with front line staff every quarter" AA17 (VL) "breakfast meetings with groups of front line managers. Regional listening forums (involves people we support / front line staff / front line managers / families)". Other panel had contact with staff during ad-hoc planning and development meetings e.g. SC30 (L) "I am currently working with 8 support workers on a new initiative with..... This involves supporting them to use their skills and knowledge to improve the quality of support across the organisation..... often skype into team meetings by request of teams and managers to talk through issues, answer questions....".

Six panel regularly presented at routine staff training sessions where they focused on organisational values and philosophy Meeting staff during training was reported as facilitating 'relationships' with staff rather than 'just being a name on the paperwork'. For example, CA07 (M) "...also provide training to staff in values and other subjects.... opportunity to coach and mentor staff and means I get to know them. It allows me share my vision and set culture" TB03 (L) "I complete a number of different training sessions to each of the teams. This enables me to build relationships with the team members".

Four panel attended routine social events e.g. Halloween Parties, Christmas parties and staff award ceremonies.

Non-face-to-face contacts between panel and staff

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All eleven panel used various forms of internet based social media for general communicating with all staff. These contacts were often focussed upon promoting the organisational culture/ vision, or best practice ambitions. For example, SC30 (L) "I write a 'message from the MD' ... focused on an individual or a team in relation to best practice. On our website, I have made several videos for staff about the work we do – highlighting their practice and the good work" BJ52 (VL) "A CEO briefing goes to all staff from me when announcements and changes to the sector happen".

Nine panel also used social media to send personal messages to individual or teams of staff. For example, CA07 (M) "I write to staff teams to thank them... when they have achieved good work with the people we support... where they have been positively rated and commended by CQC", SC30 (L). The majority of social media communications were to congratulate and celebrate success. Two panel reported using mistakes or errors to communicate actions the organisation was taking to avoid these in the future.

Decision making

Nine panel reported making decisions focused upon changes to the organisational systems within which staff worked. For example, to reduce the complexity and number of policies for staff - implementing an electronic case records - developing a new learning and development framework for all staff. One decision featured an attempt to foster innovation BJ52 (VL) "...to promote & create innovation... CEO 'announced' opportunity for staff to put forward 'best ideas' for doing things differently in services, specific email address for staff to send suggestions for changes... a personal monetary reward (for staff) and funding to implement the best ideas". A further five decisions focused upon staff pay and conditions.

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For example, improved payments for 'sleep overs' and agree salary raises for staff in a 'couple' of services where recruitment had been difficult.

Emerging themes

One emergent theme from round 1 suggested that whilst most contacts between SM and staff were in formal contexts others focused upon understanding the informal aspects of their organisations and required informal settings to achieve this. A second emergent theme contrasted long term strategic decision making with short term reaction to events.

Round 2 measures and analysis

Two questions asked how well the summaries of round 1 described the panel contributions for the face-to-face and non-face-to-face contacts. Responses were gathered on a three point scale: 'fully captures - mostly captures - not really captured'. Participants were invited to suggest additional categories and provide an example for those suggested. Two questions asked how well the round 1 summaries for decision making described panel contributions with the opportunity to provide additional categories. One additional category question asked how participants judged the effectiveness of, and measures used for judging effectiveness of decisions made.

The two questions below sought initial consensus regarding emerging themes from round 1, relating to contacts and to decision making. The questions were:

- "Most contacts between participants and FLS described in round 1 appeared to be conducted during formal organisational activities e.g. consultation meetings. A few

appeared to be more informal contacts what Peters & Waterman call 'water cooler moments' e.g. TB02 (L) 'catching people in the kitchen' GC52 (S) 'around the head office I make sure I am around when staff pop in to use the office equipment and have a chat' Would you say the uneven balance between informal and formal indicated in these responses applies more widely and is this useful?" (see Table 2).

- "Some decisions described in round 1 were in response to circumstances that required quick action; others were more considered to meet a long term goal e.g. better service user health or inclusion in employment. Could you comment below on which sort of decision takes most of your time and attention?"

Scaled data presents frequency of panel responses for contacts and decision making. Where additional categories or narrative were provided these were subject to content analysis. A potential theme for long term versus short term decision making was subject to thematic analysis.

Round 2 results

Eighteen responses reported panel views of the accuracy of summaries for contact between SM and staff from Round 1, seven reported the summary fully captured and eleven mostly captured their contributions. Three additional categories were offered and suggested a potential emerging theme i.e. that formal processes established as communication channels between SM and staff may not be very effective and achieve the two way communication desired e.g. BJ52 (VL) "These formal processes (Bulletins and CEO briefings) are not always achieving the desired outcome and are more a one way process".

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Table 2 around here please

Decision making

Eight panel said most or quite a few of their decisions were system or management focussed and somewhat less that decisions were focused directly upon service user and/or FLS issues. Six panel suggested five other diverse categories of decision making.

Table 3 around here please

Panel members reported used a variety of intra and extra-organisational measures to judge the effectiveness of decisions. Eight panel referred to intra-organisational measures of effectiveness, five staff and five service user focused measures, frequencies in brackets:

- Staff: surveys (2) - feedback from staff forums (1) - recruitment and retention (2);
- Service user and advocates: surveys (2) – an organisation devised service user outcomes tool (1) - 'IIP' (1) and periodic service review of engagement levels and effectiveness of personal plans (1).

Four panel reported using extra-organisational measures:

- CQC inspection ratings and reports (2) - autism accreditation (1) - complaints and queries (1) and staff Unions (1).

Three panel suggested a lack of good measures of effectiveness e.g. TB02 (L) "I think that this is a weakness in most organisations". Although most panel described quantitative measures of effectiveness, one suggested qualitative measures are also important CA07 (M) "Other measures are less scientific such as feedback from those affected by decisions and we always have to listen and remain open minded to this".

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Round 3 measures and analysis

Ten items (see Table 4) were used to test consensus and importance on the following themes from the first two rounds:

- Informal aspects of organisations;
- Decision making, long term versus short term;
- SM creating links within the organisation between senior strategic decision making and staff doing the day-to day caring, and concern that 'formal' avenues for communication may not be as effective as required.

Responses to statements were gathered on a five point scale from, strongly agree to strongly disagree. Consensus was calculated by summing: agree + strongly agree and disagree+ strongly disagree responses separately. Statistical consensus of > 80% was supported if eight or more participants agreed, or disagreed with an item.

Round 3 results

Table 4 around here please

An overarching thematic framework for thinking about senior managers' influence upon staff practice and experience is suggested by the results from round 3 and elements from previous rounds. The dual focus for demands, opportunities and challenges faced by SM requires they pay attention to both extra and intra-organisational factors. For example, organisational sustainability requires (formal extra organisational and informal- intra-organisational) evidence that staff meet service user needs; formally by satisfying the care regulator standards i.e. CQC and informally by accessing staff informal work culture.

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Figure 1 around here please

Discussion

This study employed Delphi research methods to explore a little understood area of ID care in the community - SM activity and its relationships with staff practice and experience; a wide ranging phenomena. This was the first study of its kind to explore the direct views of senior managers in the field of ID in this way. Whilst much can be learnt from general literature on management, the needs, and contexts in which senior managers in ID services work are quite specific and a particular research focus was therefore warranted; which is a strength of the current study. Finding ways to build and maintain positive management and frontline staff practices whilst closing the 'gap' between senior managers espoused values and frontline staff practice is likely to be a key method to support better quality life styles for people with ID and safeguard against abusive practices (Bigby et al., 2012, Shrogen et al., 2015). This is particularly salient in view of recent national scandals that have occurred in ID services in the UK (see below and Panorama, British Broadcasting Corporation, May 2019).

Delphi methods are usually employed for more specific questions e.g. agreeing Quality of Life items (Petry et al., 2007) or opinions on processes or outcomes of medical procedures. This led to the results being rather diffuse, laying the ground for further research and practice, rather than providing an agreed expert view of how best to provide senior management.

An overarching theme and several sub themes emerged from the activities of the panel suggesting that SM in organisations providing community care for people with ID

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experience dual sources of opportunities and challenges – from extra and intra-organisational factors. This study focused upon intra-organisational factors related to frontline staff and did not gather data directly related to the pressures and demands placed upon SM by extra-organisational factors e.g. regulation and government policy; although these emerged in the results. The generalised statements, 1, &7 in Table 4; showed that SM feel: personal interaction - their own behaviour and activities - and knowledge of what happens 'at the frontline', are very important aspects of their individual managerial role. These may be understood as a response to dual demands: to understand and influence frontline staff practice and experience; whilst responding to regulatory requirements and inspections, service commissioners, legal requirements and need for financial sustainability. The latter extra-organisational factors likely represent an immediate and demanding focus upon SM time and commitment, in potential contention with intra-organisational factors i.e. understanding and influencing staff practice and experiences through developing relationships and interaction with staff.

The subthemes may be seen as various ways in which the over-arching theme plays out in day to day SM activities. For example, the importance and difficulty of accessing and understanding informal aspects of the organisational, through developing/ accessing 'water cooler' moments. Round 1 provided three responses suggesting panel members were interested in using informal interactions with staff to better understand their organisations. Round 2 responses supported this emerging theme and round 3 showed consensus for related items. The factors 'behind' this emergent consensus were not explored but the intense focus in English national policy, including official inquiries and debate, given to the failings at Winterbourne View Hospital (Panorama, British Broadcasting Corporation, 2011; Flynn & Citarella, 2012) likely played a role. The inquiry into events at Winterbourne View

hospital demonstrated a 'gap' between, 'exemplary' organisational policies and abusive frontline staff practice (Green, 2013). Close attention to informal cultural aspects represents one way to avoid such abusive care and potential gaps developing between policy and actual practice (McDonnell et al., 2014, Bigby et al., 2012).

Achieving a genuine sharing of views in a relaxed atmosphere was experienced by most panel (see item 3, table 4). However, one subtheme suggested that contacts between staff and SM within *formal processes* e.g. staff consultation meetings and 'formal' service visits may not support a 'real' sharing of views, genuine communication (see items 5 & 6). These items failed to reach consensus in round 3 with one third of the panel responding they neither agreed nor disagreed. Items 5 & 6 approach the subtheme in somewhat different ways. Item 5 suggested that formal contexts for communication may not provide a forum for achieving 'genuine two way communication' and item 6 sought views on whether 'unannounced' informal service visits would be more influential than announced visits. This uncertainty may reflect the wide range of contextual factors influencing SM/staff communication e.g. subject matter, communication partners, physical and emotional contexts. The size of organisation may also mediate the role that formal versus informal interactions play in communication between staff and SM. The panel members suggesting formal settings for communication were not effective represented two large and one very large organisations. The CEO of the smallest organisation commented having no difficulty in creating informal relaxed interactions with staff.

Further thoughts on conceptual frameworks for leadership and management in ID

It has been suggested that ID organisations should be analysed and managed as complex adaptive systems, characterised by non-linear responses to interventions (e.g. government and organisational policy and decision making) leading to unpredictable emerging patterns of behaviour (see Deveau, 2016; Duryan et al., 2014). Duryan et al (2014) analyse 'decision making' in ID organisations using a complex adaptive system perspective and suggest that organisational decision making should take account of service user and frontline staff perspectives to be effective in meeting policy and individual service user goals. This study showed that SM may employ behaviours and thinking that, whether consciously or not, take account of this complex system thinking. For example, linking short term reactive decisions with long term strategic decisions and inclusion of staff in the decision making process. Deveau & McGill (2016a) suggested a two sided framework for management and leadership in ID. One side focused on administrative management of procedural and hierarchical factors, the other focused upon leadership of interactional and relationship based factors. This study showed SM focused, in part, upon engaging in 'genuine' relationships and interactions with staff. This focus suggests that SM were accessing both hierarchical management factors and informal interaction systems, and that the framework for thinking about frontline management/leadership (Deveau & McGill, 2016a) is equally applicable to SM.

Research in ID suggests that organisations providing support are currently largely focussed upon management - administrative responses to challenges and opportunities (Bradshaw et al., 2018; Orellana et al., 2017; Deveau & McGill, 2016a). This is reinforced by significant demands for administrative outputs from care providing organisations e.g. from regulatory and inspection agencies. McEwen et al. (2014) suggested that regulatory

requirements (State of Victoria, Australia) whilst couched in observational terms, in practice require inspectors examining services' paper based organisational evidence.

Frontline social care managers who have a *practice leadership* style of management feel the need to know through personal observation and contact what staff are doing with service users (Deveau & McGill 2016a). This study suggests that some senior managers also feel the need for interaction/observation based evidence from staff. Spicer (Professor of organisational behaviour, Cass Business School, City University, London) suggests that many senior managers know little about what actually happens in their organisations "They spend far more time talking to external (audiences) than finding out what is happening internally. The result is they give underlings lots of space to hide things (from) them" (cited in Financial Times 8/9 September 2018). The senior managers in this study appeared to be aware of a need to access the interactions and cognitions between staff and service users where potentially harmful behaviours and attitudes may be developing.

Further research

In addition to the themes described the activities described by SM suggest areas for further research. For example, contacts with staff were conducted through personal visits to services and through social media, by all participants. Research focused upon the purpose and impact of personal visits and social media should evaluate the effectiveness and models for personal visits and more distant social media influences upon staff practice and experiences. Three panel felt formalised visits to services (and other formal communication activities) may not produce 'real' shared communication. The data for service visits does not allow for meaningful conclusion about how many, what proportion and how often, services

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in organisations were visited. The results suggest service visits are a very variable activity, from being a central activity for one CEO (large organisation, 10 services visited a week) and potentially not so central for other CEO (e.g. small organisation, 'I visit each establishment minimum once a year'). The organisations involved in this study provided services in many dispersed settings which would have influenced the potential for direct observation by senior managers of staff practice. Delphi methodology was useful in describing a wide range of activities considered important by senior managers. However, other research methods are better suited to exploring many aspects arising from this study in greater depth e.g. observational and/or interview methods for investigating impact of face-to face contacts and use of social media as part of 'culture building'.

Limitations

The sample was small, represented the UK only and was self-selected i.e. likely to comprise SM interested in the research topic, these suggest the results may not be representative of SM in general. The focus for questions was determined by the researchers upon staff experience and practice, interactions between SM and staff and SM decision making. This focus may have hidden a wider range of potential responses e.g. that CEOs have much greater focus upon organisational sustainability and promotion. For example, meeting regulatory requirements. In this respect a limited range of SM activities were gathered in the results, rather than the wider range of potentially important SM activities. The questions also focused upon behaviour rather than cognitive variables e.g. personal attitudes. The study relied upon panel perceptions of their own behaviour which is potentially unreliable. The expertise of the panel was not assessed in any structured way. None of the panel were in post through being part of a 'family' organisation, thus an

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element of competitive selection for leading their organisation suggests a level of expertise. Individuals in the panel, have served in various capacities e.g. sitting on Government groups and supporting important nationally funded research, suggesting additional interests and skills were present in the panel.

In conclusion, to the authors knowledge this is the first such published study in ID exploring the most senior managers' activities and views and it suggests important areas for further research, to potentially influence leadership and management practice. Consensus was reached regarding: the importance of understanding and accessing informal cultural aspects of their organisations and linking short term reactive decision making with long term strategic decisions with involvement of staff. Improvements in measuring the effectiveness of decisions whilst perhaps new, was in progress. The results suggest a framework for understanding and thinking about two predominant (and potentially opposing) challenges and opportunities facing SM; meeting the demands of external agencies e.g. regulation, and understanding/influencing frontline staff practice and experiences. The framework summarises the complexity of context and opportunity for innovative management practices to promote positive links between the two challenges and opportunities.

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Table 1 Panel characteristics

Variable	No (%)	Mean
Female	6 (55.0)	
Male	5 (45.0)	
Age		54 years
Working in ID		24.6 years
Working in current role		6.2 years
Range		1 – 24 years
Current role		
Chief executive	8	
Management Board Director	3	
Qualifications		
Doctorate	1	

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Master's degree	9	
Batchelor's Degree	5	
PG Diploma & professional	5	
Organisations managed		
Charities/voluntary	6	
Independent/private	5	
No service users/organisation		
Categories as below in results		
Small (S)	1	98
Medium (M)	3	295 (sd 90)
Large (L)	4	863 (sd 69)
Very Large (VL)	3	2,500 (sd 660)

Note: all organisations provided support in small and large community homes, 10 provided supported living and 7 single person services

Table 2 Responses for potential theme from contacts regarding informal aspects of organisations, frequencies

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Nearly all SMT contacts with FLS would be in formal organisational settings	1
SMT contacts with FLS would be more balanced between formal and 'water cooler moments'	2
SMT members would get a better idea of how their organisation is working by having more 'water cooler moments'	6

Table 3 Decision making, emerging thematic focus

Thematic focus (n)	Examples
Strategic longer term decision making focus (8) Organisation wide structural responses to opportunities and challenges	BJ52(VL) "strategy and market positioning"
Shorter term responses to 'events' (4)	BS11 (M) "reactive decisions on day to day issues.... Distract from focus away from long term decision making"
Other varied categories suggested (6)	Management board governance issues (2)
Theme linking long term decisions to short term events/decisions (3)	TB02 (L) "Most of the decisions in round 1 for me are, to use particular circumstances to consider a more long term goal... use particular examples to change the organisation long term"

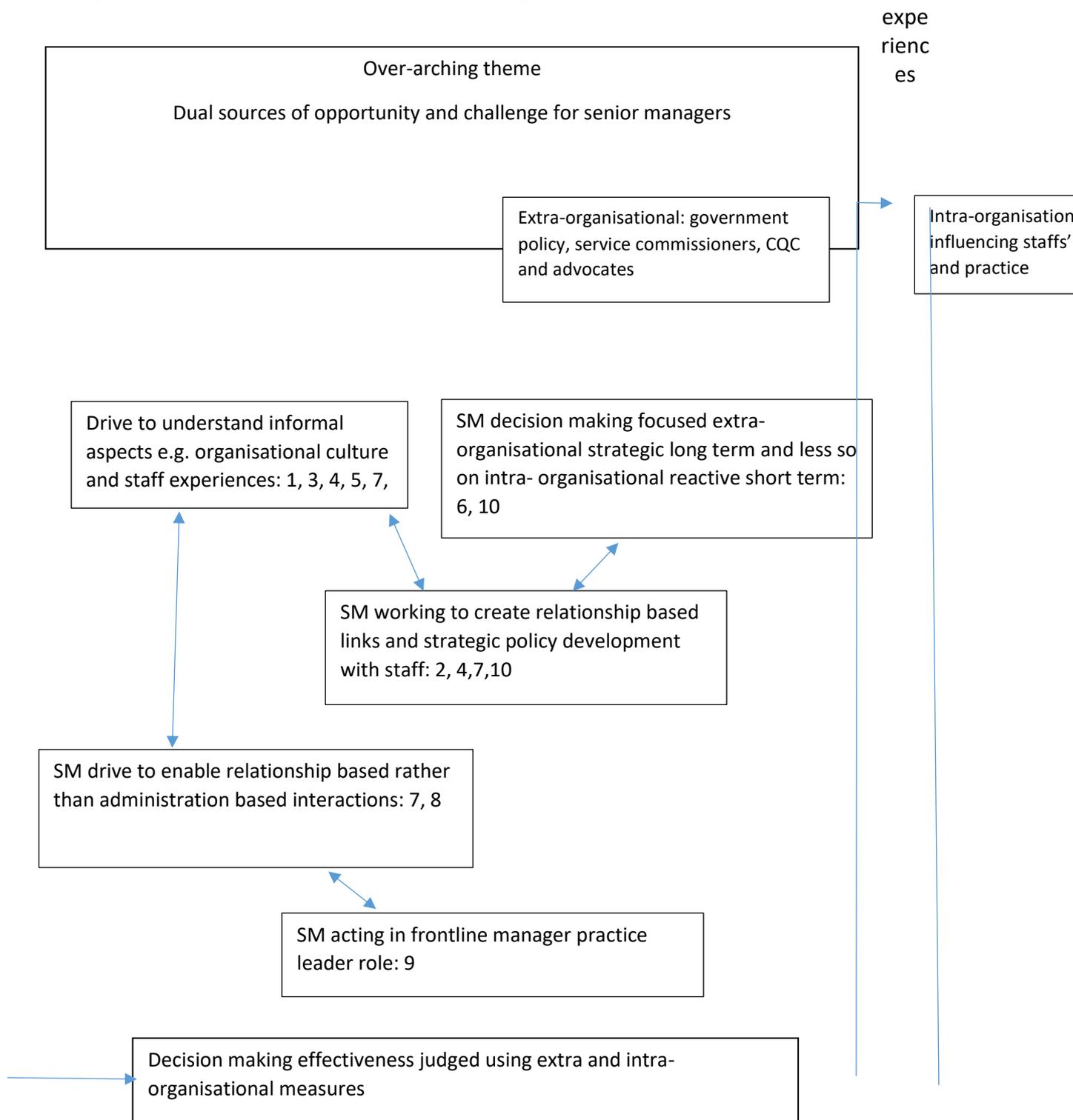
Table 4 Panel consensus statistical analysis

Items	consensus	Theme
1. Senior leaders/managers in large organisations should be very concerned with the difficulties of knowing what is happening on the frontline of their organisations	Yes	Senior managers accessing informal aspects of their organisations
2. The distinction between formal and informal organisational cultures and the difficulty of influencing or knowing, in detail, what is happening in the informal sphere is important	Yes	
3. Achieving genuine sharing of views and goals in a relaxed atmosphere is very difficult between SMT and FLS	Yes (disagree)	
4. Trying out new ways of accessing/understanding the informal organisational culture through exploring different 'water cooler' moments will be something I will explore and promote amongst other senior managers.	Yes	

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5. Formal methods of communication e.g. announced visits to services or CEO bulletins/briefings, may not, in practice, be very useful in achieving genuine two way communication between SMT and FLS.	No	Links between SM and staff: difficulties in accessing informal aspects of their organisations, different experiences by SM led to no consensus.
6. Unannounced 'drop in' visits to services by SMT are likely to be more influential than announced visits	No	
7. The individual behaviour/actions of senior managers are very important to how they influence FLS practice and experiences	Yes	Links: between SM and staff: taking personal responsibility for creating links through actions and acting as frontline practice leaders
8. During senior manager's contacts with FLS they should focus upon how FLS interact with service users and provide feedback on this, as well as keeping up with administrative demands	Yes	
9. Involving FLS in decision making and service development may be best done by linking immediate reactive decisions, involving service users and FLS, to longer term goals and developments in all members of the organisation's thinking	Yes	Links: strategic senior managers involving frontline staff + linking long term and short term decision making
10. Decision making, which links short term reactive decisions to longer term strategic planning, are likely to be useful in focusing the organisation upon improving day-to-day FLS interactions and practice with service users	Yes	

Figure 1 Thematic framework for senior managers' influence upon staff practice and



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