Department of Health Administration and Human Resources

University of Scranton

3 credits

Spring 2020

Tuesday 4:30-7:10 pm

413 McGurrin Hall

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Office Hours: Monday 2:30-3:30 pm and Tuesday 2:30-4:30 pm
(You may contact me to schedule office visits at other days and times)

This course uses a systematic approach to study organizations, with special interest in health care organizations. Topics include organizational strategy, goals, technology, size, design, adaptation, decision making, control, culture, processes, politics, conflict, learning, and inter-organizational relations. Conceptual foundations are drawn from organizational theory, management science, systems theory, sociology, and psychology. This course is required; it has no pre-requisites.

*The challenges are organizational, not just clinical. (*Ranga Ramanujam and Denise Rousseau)

It all depends.   (Common expression)

The schedule has been planned to enable you to meet course objectives. It may change, based on factors that evolve during the semester. Changes will be discussed with the class as much in advance as possible. Please promptly inform me if you foresee any problems or concerns with the course schedule.

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Class Purpose
State and describe the purpose, methods, resources, expectations, and grading for this course.
Introduce organization theory and show how managers use organization theory to manage HCOs.

Class Content
* Syllabus and course orientation
* What is an organization?
* Levels of organizational analysis
* Framework for the book

Reading
Syllabus
Designing healthcare organizations to reduce medical errors and enhance patient safety (Reserve reading)

Reading
Daft, ch. 2

Class Purpose
Understand how to design an organizational structure based on specific design elements.
Analyze, compare, contrast, and evaluate alternative organizational design structures.

Class Content
* Organization structure
* Organizational design alternatives
* Functional structure
* Divisional and geographical structure
* Matrix structure
* Horizontal structure
* Virtual network structure
* Hybrid structure

Reading
Daft, ch. 3

Class Purpose
Conceptualize and analyze the external environment of organizations.
Explain how organizations respond and adapt to their external environments.

Class Content
* The external environment and sectors
* Changing environment and uncertainty
* Simple-complex environment
* Stable-unstable environment
* Adapting to environmental uncertainty and change
* Framework for responses to environmental change
* External resources

Reading
Daft, ch. 4

Class Purpose
Explain and critique the purposes and types of relationships among organizations.
Describe the work of managers in interorganizational relationships.

Class Content
* Organizational ecosystems
* Interorganizational framework
* Resource dependence and supply chain
* Collaborative networks
* Population ecology
* Institutionalism

Reading
Daft, ch. 5

Class Purpose
Conceptualize production technology and explain its relationship to organizational structure.

Bisognano, M. (2017). New ways to lead the workforce of the future. In *Futurescan 2017: Healthcare Trends and Implications 2017–2022*, edited by Morrison, I. Chicago: Society for Healthcare Strategy & Market Development and Health Administration Press. 27-31.

Buell, J. M. (2018). The health continuum: Leveraging IT to optimize care. *Healthcare Executive* 33(1), 10-18.

Buell, J. M. (2017). The dyad leadership model: Four case studies. *Healthcare Executive*, 32(5), 32-40.

Gulati, R., Mikhail, O., Morgan, R. O., and Sittig, D. F. (2016). Vision statement quality and organizational performance in U. S. hospitals. *Journal of Healthcare Management*, 61(5), 335-50.

Hegwer, L. R. (2016). Building high-performing, highly diverse teams and organizations. *Healthcare Executive* 31(6), 10-19.

Hegwer, L. R. (2015). Leading change from the C-suite. *Healthcare Executive* 30(6), 10-18.

Kaufman, K. (2017). The new role of healthcare integration. In *Futurescan 2017: Healthcare Trends and Implications 2017–2022*, edited by Morrison, I. Chicago: Society for Healthcare Strategy & Market Development and Health Administration Press. 2-6.

Kessler, C., Tsipis, N. E., Seaberg, D., Walker, G. N., and Andolsek, K. (2016). Transitions of care in an era of healthcare transformation. *Journal of Healthcare Management*, 61(3), 230-41.

May, E. L. (2015). Achieving physician-led clinical integration. *Healthcare Executive* 30(1), 10-16.

Olden, P. C. (2016). Contingency management of health care organizations: It depends. *Health Care Manager* 35(1), 28-36.

Olden, P. C. and J. Haynos. (2013). How to create a health care organization that can succeed in an unpredictable future. *Health Care Manager* 32 (2): 193 200.

Radick, L. E. (2018). Integrating Care Across the Continuum for Four Major Conditions. *Healthcare Executive* 33(1), 20-30.

Radick, L. E. (2016). Improving the patient experience, *Healthcare Executive* 31(6), 32-8.

Ryan, C. (2017). Sustaining and growing a winning culture. *Journal of Healthcare Management*. 62(6), 361-5.

Swenson, S., Kabcenell, A., and Shanafelt, T. (2016). Physician-organization collaboration reduces physician burnout and promotes engagement: The Mayo Clinic experience. *Journal of Healthcare Management*, 61(2), 105-27.

Van Dyke, M. (2017). Strengthening post-acute care partnerships: 8 factors for success. *Healthcare Executive* 32(1), 18-26.

Van Dyke, M. (2016). Leading in an era of value 3 key strategies for success. *Healthcare   Executive 31(6), 20-28.*

Wagner, K. (2015). Putting patients at the center of care. *Healthcare Executive* 30(4), 11-19.