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Organizational Analysis of Institutions for the Aged

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Institutions for the aged represent an organized effort on the part of society and various individuals, groups, and organizations to provide for and capitalize on the service needs of elderly persons no longer able to live independently in the community. These settings have been brought into existence and are maintained by various commercial, civic, voluntary, government, and other interest groups. The motives and interests of such groups vary; nevertheless, these settings offer services to consumers, provide employment to members of various professional and occupational groups, provide an arena for the involvement of various scholastic disciplines and professional associations, and benefit individuals and families related to the residents who live temporarily or permanently in institutions or otherwise also utilize the services offered in such settings. Institutions for the aged provide opportunities for business profits, and involvement for legislative, administrative, and regulatory public agencies.

Viewing institutions for the aged with an organizational analysis frame of reference, therefore, should enhance our understanding of the salient factors which facilitate or constrain the operation of such settings and the services provided which, in turn, affect the level of well-being of elderly and disabled persons utilizing these services on a temporary or permanent basis. Using organizational analysis as a guiding framework, a model for the comprehension and better understanding of institutions for the aged will be developed and discussed. In the gerontological literature, institutions for the aged include homes for the aged, nursing homes, domiciliaries, chronic care facilities, and other congregate care environments serving older persons unable to live independently in the community.

SEARCH FOR A MODEL

The approach adapted in this paper is one which views residential care settings for the aged as complex organizations, comprised of interdependent parts or subunits engaged in exchange relationships with each other and with relevant parts of the surrounding environment. The organization as a whole and its subunits are receiving inputs in various forms from various sources and are disposing of certain outputs on an ongoing basis. The imported resources (financial, human, and other) are transformed into an ongoing operation of service which, in turn, generates certain outcomes (salaries, profit, prestige, and others) for members of the organization as well as for those interested in its activities. The organization as a whole and its subunits
have to continuously anticipate and adjust to internal and external changes. These changes and exchanges between various organizational members and sub-units may be facilitative as well as hindering in nature. Organizations and their sub-units tend to develop mechanisms for the transformation and processing of inputs into forms which are congruent with organizational objectives (1, 2).

Institutions for the aged vary with regard to their goals. Some of these facilities aim to provide a living situation for elderly and disabled persons unable to care for themselves while other facilities aim to generate profit by providing a living environment for persons in need of such services. In both of these instances the continued operation of service and survival of the organizations is contingent on the continued flow of consumers, finances, and other resources. These organizations also have a stated aim to provide services which will maintain and/or improve the level of well-being of their consumer populations. In order to attain these goals, institutions for the aged engage in the performance of routine tasks of feeding, sheltering, nursing, entertaining, and otherwise caring for large numbers of elderly and disabled persons. These institutions also have to handle and react to personal and interpersonal behaviors which are complex and idiosyncratic in nature and often unpredictable. The complexity of these organizational factors necessitates the application of a model for the organizational analysis of institutions for the aged which can incorporate into one schema these diverse elements of organizational and personal phenomena. There is a need to consider personal and interpersonal variables, typically the subject matter of psychology and social psychology, as well as elements of productivity, effectiveness, efficiency, and survival, typically the subject matter of economy and business administration. In organizational analysis such subject matters have been handled separately by two traditions: (a) the natural system tradition, and (b) the rational tradition (3). There have also been attempts to reconcile these two diverse elements of organizational life into a new and more complex model following the repeated criticisms of the disadvantages and shortcomings of the separate models (4, 5, 3).

Strauss and his associates express, probably better than others, some of the difficulties encountered when they searched for an appropriate model for the analysis of mental hospitals. Their criteria seem also appropriate in the search for a model for the organizational analysis of institutions for the aged.

We needed a model that would permit us to focus upon both cooperative and conflicting actions; rational and nonrational actions; structured and emergent behavior; ruled and nonruled behavior; formal and informal or spontaneous division of labor; overall institutional commitment; intra-organizational and extra-organizational pressures; social action, social organization and social process (6, p. 14).
TRADITIONS IN ORGANIZATIONAL ANALYSIS

Traditionally, two approaches in organizational analysis were clearly discernible. Gouldner and Thompson labeled them as the (a) rational model and (b) the natural system model, and their labels are indeed descriptive of their interests and approaches to the analysis of complex organizations. Both traditional models tended to focus on some aspects of the organization and ignore others. In the rational tradition, three schools can be distinguished: (a) scientific management; (b) administrative management; and (c) bureaucracy (Weber). All three of these schools tended to use a closed-system logic. They deliberately chose those ingredients of the organization mostly contributing to the attainment of the specified organizational goals. Effectiveness and efficiency have been the "favorite" dependent variables in such investigations. Goals, resource acquisition, disposition of the product, and technology were viewed as nonproblematic and subject to organizational control and manipulation. In most of these investigations, nonrational elements were ignored or at best dealt with as interfering or outside organization subject matter.

The natural system tradition, in contrast to the rational model, focused primarily on personal variables and on variables associated with ongoing social processes. These variables were not selected because of their contribution potential to the attainment of organizational objectives in an organizationally anticipated manner. The natural system approach regarded organization-environment and intraorganizational interdependence as natural and inevitable. Investigations and theoretical schemes in the "Human Relations" school and in the "Social System" tradition are representative of this approach (3, 4).

Much criticism has been leveled against both traditions. The rational schools have been accused of dealing with organizations without people while the nonrational schools are said to have focused on people without organizations. To this day, both of these polarized traditions and approaches to organizational analysis and research are still much in vogue. However, there is also a growing evidence of attempts to reconcile these polarized approaches into one conceptual framework (5, 7, 8, 9).

Needless to say that organizations provide the arena for organizational membership to engage in various roles and functions. Members acting in these roles organize organizational properties and resources into ongoing operations which produce goods and services. The production and marketing of goods and services are more clearly discernible in industrial and business concerns. In human service organizations the specification of organizational objectives and the identification of the organizational products or outcomes are more problematic; nevertheless, it is apparent from this discussion that all organizations are concerned with the acquisition of needed resources, engaging in an ongoing operation which produces goods and/or services, and marketing of their products. In order to advance our understanding of the organizational factors
which shape the nature and quality of services offered in institutions for the aged we need to examine, therefore, these three cyclical phases in organizational life: (a) the resource acquisition phase; (b) the service performance phase; and (c) the service outcome phase.

CYCLICAL PHASES IN ORGANIZATIONAL LIFE

Cyclical phases in organizational life have been advanced by scholars working in the "Social System" tradition. Parsons views organizations as engaged in input-output transactions with relevant parts of their environment. These exchanges, viewed in this perspective as essential for the continued performance of a primary function by the organization, are also taking place between organizational subunits. The transformation of the acquired resources into disposable outputs becomes in this view the primary goal—and as such the defining characteristic of the organization (10). The organization, social system in this view, is said to be characterized by a shared normative orientation regarding goals and functions, derived on a consensual basis (10, 2). This tradition has been criticized for its failure to consider and adequately deal with conflicts in organization. This criticism has been well-warranted for in reality it is difficult to view organizations as conflict-free entities.

However, if one extends the framework advanced by Parsons to include conflicting and hindering exchange patterns as well, his notion of interactive entities and subunits is indeed useful. Furthermore, the input-output cyclical exchange patterns can be expanded on to include the throughput phase which constitutes that phase in organizational life in which the transformation of the acquired resources into organizational products in the form of goods and services takes place. Indeed, this is the conclusion derived at and advanced by Katz and Kahn. They have identified three cyclical phases in organizational life: (a) input phase; (b) throughput phase, and (c) output phase. The input phase consists of that phase in organizational life in which the resources, human and otherwise, necessary for the operation are acquired and imported. The throughput phase in their view consists of that phase in organizational life in which input resources are transformed into goods and services, utilizing technologies, equipment and other forms of energy. The output phase is that phase in organizational life in which goods and services are disposed of to the environment (2). These phases may and do occur simultaneously in organizational life, and their distinction is primarily an analytical one. Empirically, however, there is a tendency in organizations to develop specializations and specialized subunits along these cyclical lines (intake, service departments, marketing). The subunits dealing primarily with input and output related phenomena are the ones that deal with the environment while the service performance related subunits are dealing primarily with intraorganizational phenomena.

The cyclical phases identified from the organizational analysis of human service organization appear to be also useful for the analysis of institutions for the aged. These settings need to acquire and secure the continued flow of resources in order to initiate and maintain an ongoing
operation of services. The adequacy and stability in the flow of needed resources are important determinants of the ongoing organizational operation and the nature of work situation which will prevail in such settings. The range and quality of services offered and the quality of work situation, in turn, will affect the personal and social well-being of elderly and disabled persons living in such settings. We can speak, therefore, in the organizational analysis of institutions for the aged of the following cyclical phases: (a) organizational input phase, (b) service performance phase, and (c) organizational outcome phase.

In the presentation and discussion of the cyclical phases in organizational life it was apparent that organizational members are engaged in various activities and that the actions engaged in by members of one organizational level may affect members of another organizational level. There may also be interaction between members of the same organizational level or between members of different organizational levels. Furthermore, the meaning of cyclical phases in organizational life for the analysis of institutions for the aged takes greater importance when the organizational levels are also specified.

ORGANIZATIONAL LEVELS

In organizational literature, organizational levels have been developed along analytical as well as empirical lines. Organizational functions, hierarchical levels, beneficiary status, and power positions were among the criteria used for analytically derived organizational levels.

Using power position as a basis, Etzioni differentiated between higher and lower level participants as a first step toward the development of an organizational compliance structure. In his view higher level participants exercise control and power over lower level participants who can exercise varying degrees and types of involvement in organizational life. In Etzioni's schema there is no differentiation between groups comprising the higher level and the lower level participants, even though he mentions in passing that lower level participants can include employees, inmates, customers, parishioners, clients, and members-at-large. He did not seem to be concerned that several of these groups may be in differing power and interest positions simultaneously (11).

Blau and Scott differentiated between four categories of persons or levels in organizations. Their criterion was the beneficiary status, namely who is the primary beneficiary of the organization. The identified groups or levels included: (a) rank and file membership; (b) owners or management; (c) clientele or the public in contact; and (d) the public-at-large. These identified groups served the purpose for the derivation of their organizational typology (7).

Examples of functional system levels can be found in organizational literature written in the "Social System" tradition. Three functional system levels in complex organizations were advanced by Parsons and further elaborated
on by Thompson: (a) the institutional level; (b) the managerial level; and (c) the technical level (10, 3). Working in the Parsonian tradition, Katz and Kahn suggested five organizational subsystems: (a) production subsystem, concerned with the work to be done; (b) supportive subsystem, for procurement, disposal and institutional relations; (c) maintenance subsystem, for typing people into roles; (d) adaptive subsystem, concerned with organizational change; and (e) managerial subsystem, for the direction, adjudication and control of the many subsystems and activities of the structure (2).

In human service organizations references are made to empirically found groups and levels, which include: legislative bodies, sponsoring groups, Boards of Directors, administration, staff, clients or consumers, other beneficiaries, and the public-at-large. For the analysis of institutions for the aged the following levels appear to be the more salient ones: (a) institutional level; (b) sponsorship level; (c) managerial level; (d) service performance level; (e) service consumer level; and (f) interest group level.

ORGANIZATIONAL LEVELS IN INSTITUTIONS FOR THE AGED

The institutional level, the sponsorship level, and the interest group level are not physically part of the organization. Their decisions, however, have a considerable degree of impact for members of the organizational levels which are physically part of the organization: the managerial level, the service performance level, and the service consumer level.

The institutional level consists of legislative, fiscal, and administrative bodies on the local, state, and national levels. Since the greatest share of institutional care cost is provided for by the public sector, legislative actions, fiscal policies, regulatory procedures and administrative practices are very important determinants in shaping the quality of care in long term care facilities. This level, then, sets the mandates and legitimizes patterns of care, sets rules and regulations and enforces them, sets guidelines for types of care and care standards, and sets fiscal policies and reimbursement rates.

The sponsorship level in institutions for the aged consists of the ownership in the proprietary sector and of representatives of the sponsoring group or association in the nonprofit sector. Board of Directors, Advisory Council, Board of Commissioners, and Board of Trustees are among members of this level. Members of this organizational level set policies and general directions for the development, implementation, and modification of the service network in specific settings. This level is also concerned with budgetary matters, and with the policy issues related to service consumers and personnel in their respective settings.

The managerial level consists of the administrative and supervisory staff. Their functions include: (a) implementation and supervision of the overall organizational effort; (b) relating the organization to relevant individuals and organizations in the environment in order to assure the necessary supplies and equipment; and (c) evaluation of the organizational
effort. Empirically, there may be variations with regard to the extent to which members of the managerial level participate in one or more of these functions.

The service performance level consists of members of the professional and occupational groups engaged in the performance of various activities on behalf of the service consumers. Empirically, there may be great variations with regard to the size of the professional and occupational groups employed and with regard to the staff/resident ratio.

The service consumer level consists of those elderly persons who utilize the services offered by institutions for the aged on a temporary or permanent basis.

The interest group level consists of family members, friends, and professionals who are interested in the well-being of particular residents and the general consumer population of institutions for the aged. This group may also include individuals, groups, and associations that profess to have an interest in the conditions which prevail in long term care facilities and would like to see those conditions changed or improved.

The review of cyclical phases in organizational life and organizational levels is useful for the development of the organizational model which takes into account what is being done in organizations as well as those who work in organizations and how their actions affect the lives of those who work or live in organizations. This model should advance our understanding of organizational forces in long-term care since institutions for the aged are complex organizations in which environmental societal, organizational, social, and personal variables interact in various configurations. To date, much of the gerontological literature on institutions for the aged has been discipline-determined (psychology, sociology, economics, political science, etc.) and restricted in focus. This model offers a more comprehensive perspective about human service organizations generally and also about institutions for the aged. The configuration of the cyclical phases with the organizational levels provides a useful organizing framework for the categorization of the many variables which have been used extensively in gerontological literature and research (12).
### Organizational Levels

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Several illustrative examples will be provided for each one of the model categories derived from the configuration of cyclical phases and organizational levels. Institutional Level-Input phase variables include legislative and administrative actions on the local, state, and national levels which provide for the legitimacy, organization, and funding of institutional care. Land and equipment acquisition, securing financial resources, setting policies, communicating and negotiating with regulatory agencies, and setting the general framework for the development and continued operation of specific institutions for the aged are Sponsorship Level-Input phase variables. The development of a master plan including operational strategies, personnel policies, staff composition, admission criteria and intake processing, and rules and regulations are Managerial Level-Input phase variables. This category also includes background, personal characteristics, education and orientation of the management in institutions for the aged. Structural features of the building, decor, landscaping, richness or scarcity of equipment and supplies, staff composition, staff background and attitudes are among Service Performance Level-Input phase variables. Residents' background and characteristics, their attitudes toward the institution and
staff and their service needs are among Service Consumer Level-Input phase variables. Interest Group Level-Input phase variables include the background, attitudes, and interests of residents' family members, relatives and friends, volunteers who offer their services in the facility as well as those of interested parties in the community.

Regulatory procedures, enforcement practices, and other administrative practices of public officials related to type and quality of service offered in institutions for the aged are Service Performance Phase-Institutional level variables. Specific rules and regulations related to work behavior and residents' lives in institutions for the aged, developed by members of elected or appointed boards or by owners of institutions for the aged, are among Sponsorship Level-Service Performance phase variables. Administrative and supervisory practices, grievance procedures, and relating the organization to other organizations are among Managerial Level Service Performance phase variables. The performance of work activities, the exchanges of staff members with one another and with residents are Service Performance Level-Service Performance phase variables. Residents' service utilization patterns, including the degree of privacy and personal life space available to them, their utilization of facilities within and outside the home, the degree to which they exercise choices and responsibilities, and the extent to which they continue to hold interpersonal relationships are among the Service Consumer Level-Service Performance phase variables. Visiting patterns of family members, friends and professionals, and their activities on behalf of residents are among Interest Group Level-Service Performance phase variables.

Outcome phase variables are more difficult to identify for members of the institutional and sponsorship levels who belong to the nonprofit sector and offer their services free of charge. Prestige is probably one such variable. Elected and appointed officials involved in regulatory functions earn salaries and get other benefits from their work and as such these can be seen as Institutional Level-Outcome phase variables. In the proprietary sector, profit is the major Sponsorship Level-Outcome phase variable. Other variables in this category are organizational effectiveness and efficiency, and prestige and satisfaction of individual owners or Board members. Salary and benefits, promotions, profit sharing (in the proprietary sector), turnover, and work satisfaction are Outcome phase variables for both Managerial level and Service Performance level members. Contentment, morale, life satisfaction, social well-being, survival, morbidity, and other aspects of personal well-being are among Service Consumer Level-Outcome phase variables. Interest group-Outcome phase variables for residents' relatives include the benefits of a relative being cared for in a safe environment. For the wider community, the jobs and other economic advantages are the accrued benefits. For the professional and scientific community, institutions for the aged provide the opportunity to engage in research and other scholastic activities.

It is obvious from the review of this model that this perspective is rather comprehensive; therefore, conceptualization of research on institutions for the aged within an organizational analysis framework will require a more comprehensive perspective in the future. Large scale organi-
zational research on institutions for the aged will also require that design, units of observation, and units of analysis be developed in light of organizational analysis criteria. Such research, however, will most certainly advance our understanding of the organizational forces which affect the quality of work environment and residents' living situation in institutions for the aged more than small scale studies with a limited scope and perspectives.

REFERENCES


