The Correspondence Of Supervisor And Subordinate Perspectives

During Major Organizational Change

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Abstract

Staff members (2605) and supervisors (55) of 39 administrative units in two health care organizations completed a survey measuring confidence in the organization, engagement with their work, and occupational hazards. A correlational analysis determined correspondence between the perspectives of supervisors with those of staff reporting to them as their facilities adjusted to major organizational changes. Supervisors scores were significantly and positively correlated with the corresponding scores of members on cynicism, meaningfulness, acceptance of change, goals, hospital reputation, and health risks. Regression analysis found that relationships were relatively domain-specific: supervisor engagement with work was positively related to that of their staff members while supervisor evaluations of the organization was positively related to that of their staff members. Supervisor assessment of occupational hazards was related to all three areas of staff perception.

The Correspondence Of Supervisor And Subordinate Perspectives

During Major Organizational Change

Front-line supervisors provide leadership during times of major organizational change by articulating the relevance of organizational values to issues confronting their workgroups. To be relevant to the diverse components of a large organization, statements of organizational missions and objectives are necessarily abstract and free of references to a specific work context. However, staff members have their greatest involvement with their day-to-day worksetting. It is here that they put values into action by providing services, making products, or developing ideas. The translation of broad values into day-to-day work activity is a critical point in organizational performance as well as in staff members' experience of work. Supervisors play a critical role in this process as the first-line representatives of management as well as by their capacity to allocate resources and rewards in accordance to organizational objectives.

Leadership During Change

It is during times of change that staff most need confidence in the ability of management to make sound decisions about the necessity of change along with encouragement from supervisors to be involved in the change process (Sagie, Elizur, & Koslowsky, 1989; Sagie & Koslowsky, 1994). Effective supervision can provide the vital link between management goals and the daily work of staff. Perceived instrumental and emotional support from supervisors has been positively related to trust in the company and commitment to the company following the announcement of a plant closing (Armstrong-Stassen, 1993). Supervisors' experience of their own work has an impact on their staff members.

Daley (1991) noted that supervisors must be involved in their jobs if they are to motivate workers. In a study of over 7000 federal civilian employees with supervisory positions, Daley noted a positive relationship between supervisors' involvement, in terms of change orientation and organizational trust, and supervisors' perceptions of administrative practices, such as the frequency and quality of performance appraisals supervisors' had received, the amount of

autonomy and participative decision making they were allowed, and the resolution of intergroup conflict. Further, there was a positive relationship between supervisors' organizational trust and supervisors' ratings of the effectiveness of their own work groups. The lack of involvement middle managers experience when they do not receive the support they need from administration may trickle down to their subordinates.

Evidence for the importance of supervisor support has prompted a search for mechanisms through which supervisor support has an impact. This work has examined the relationships of supervisors with subordinates in terms of consideration and initiating structure behavior (Schnake, Cochran, & Dumler, 1995), employee commitment to supervisor (Becker, 1992; Becker & Billings, 1993), leader-member exchange (Kinicki & Vecchio, 1994), and organizational goal congruence between supervisor and staff (Vancouver, Millsap, & Peters, 1994; Vancouver & Schmitt, 1991). While this research explores the supervisor-subordinate relationship from a number of interesting angles, it highlights the difficulty of linking data from supervisors and their subordinates. As well, it leaves open questions about the degree of correspondence between the perspectives of supervisors and subordinates on issues confronting the organization during major change.

Supervisors' Confidence In The Organization

It follows from a transactional model of stress (Lazarus & Folkman, 1984) that members of organizations undergoing major change assess their social environment for cues that will help them to predict outcomes for themselves personally, their workgroup, and for the organization as a whole. They consider their immediate supervisor to have an important perspective on the organization's prospects in that supervisors are generally more experienced and have greater contact with senior management. Their position gives them access to information about policy and financial matters affecting the organization. In light of their importance during turbulent times, the confidence front-line supervisors have in an organization's future has an impact on staff members reporting to them. This confidence is evident in supervisors' evaluation of changes

in the organization's operations and performance, their enthusiasm for its mission and objectives, as well as their commitment to the organization.

Supervisors' acceptance of major organizational change provides a perspective distinct from the official communications of senior management within a large organization. First, the impact of a major change on an immediate supervisor is likely to be similar to its impact on the staff members who report to that supervisor: staff expect the fortunes of the workgroup's members and its leader to rise and fall together. If the unit is eliminated in a downsizing operation, various combinations of lay-offs and transfers are possible. However, everyone associated with the unit will be affected. Second, supervisors share with staff members an allegiance to the day-to-day work of the unit. Third, staff members generally interact with their immediate supervisors regularly, providing a basis for assessing supervisors' attitudes towards the organization as expressed explicitly in discussion or implicitly in the supervisors' approach to work.

Engagement With Work

A supervisors' engagement with work provides a model for staff members. It indicates the value of the unit's contribution. Engagement with work is an energetic involvement with activities that build professional effectiveness (Leiter & Schaufeli, 1996; Maslach, Jackson, & Leiter, 1996). It is at the opposite end of a continuum from burnout, a state of cynical distance from exhausting work that provides few occasions for personal accomplishments. Although originally focused on public sector human service professions, recent work (Leiter & Robichaud, 1997; Leiter & Schaufeli, 1996) has provided evidence that the continuum from burnout to engagement with work pertains to any occupation that requires a personal commitment. Research has demonstrated that this state predicts professionals' relationship with their work as indicated by organizational commitment and turnover intentions, as well as physical and psychological well-being. The continuum from burnout to engagement with work has a strong interpersonal component in that it is closely related to the social climate of a worksetting, especially to the prevalence of personal conflict or social support. In addition, the energy, involvement, and

effectiveness that staff members bring to a job has an impact, both instrumental and affective, on those working with them. Part of a supervisor's leadership role within a workgroup is to provide to staff members a model of engagement with work.

Providing a role model to staff members becomes an increasingly important part of a supervisor's leadership role during times of major organizational change. During transitions, staff members are sensitive to information that signals the significance of their work in the context of the larger organization and its broader community. Through their involvement with meaningful work, supervisors confirm its value to staff members. By demonstrating a productive engagement with work, supervisors provide supportive leadership to staff members, facilitating their engagement with work, and building confidence in their career development.

The influence of supervisor support on staff burnout has been examined in many settings. A negative correlation has been found between perceived support from supervisors and exhaustion for intensive case managers (Carney et al, 1993), child and youth workers (Savicki, 1993), and nurses (Robinson et al, 1991). Support from supervisor made a distinct negative contribution to predicting both exhaustion and depersonalization, and a distinct positive contribution to predicting personal accomplishment for university centre counselors (Ross, Altmaier, & Russell, 1989). Uncertainty regarding supervisors' expectations or success in meeting supervisors' expectations were associated with increased exhaustion and depersonalization and decreased personal accomplishment for hospital nurses (Firth, McKeown, McIntee, & Britton, 1987). Conversely, hospital nurses whose supervisors had been trained to give positive feedback reported less exhaustion than nurses whose supervisors had not been involved in the intervention (Eastburg, Williamson, Gorsuch, & Ridley, 1994). This research demonstrates that supervisors play a consequential role in the development and alleviation of burnout. To some extent this influence appears to be related to the instrumental role supervisors play in relation to subordinates in that supervisors determine some aspects of workload and access to some organizational support systems. There has been little examination of the extent to which supervisors influence subordinates' evaluation of the organization or their work. A

supervisor's perspective on major organizational change may influence a subordinate's susceptibility to exhaustion, cynicism, and discouragement.

Health Risks

An important consideration for staff members in assessing the viability and future of their workgroup is the organization's management of workplace hazards. The extent to which staff members feel at risk of illness, injury, or abuse at work suggests a lack of confidence in the workplace's viability and the effectiveness of its management. Health hazards are of special concern to health care providers who confront risks of infection in their work as well as back injury, especially in nursing (Ferguson, Cox, Farnsworth, Irving, & Leiter, 1994). Some areas of health care work, such as emergency, psychiatric, and critical care, present risks of physical and verbal harassment. Workplace health hazards, which are of concern to staff members at any time, gain an added significance during times of major organizational change, contributing to the overall stress experienced by staff members during transition. Supervisors' assessment of health risks for themselves and their staff members provide a perspective distinct from their engagement with work and their confidence in the organization.

Consistency In Perspectives

This study hypothesized consistency of supervisors attitudes and perceptions with those of staff members in their units. It was expected that (1) supervisors' engagement with work would be positively correlated with that of staff members in their units, (2) supervisors' confidence in the organization would be positively correlated with that of staff members in their units, and (3) supervisors' assessment of health risks would be positively correlated with that of staff members in their units. It was further expected that each of these three qualities of supervisors— engagement with work, confidence in the organization, and assessment of health risks—would make a distinct contribution to predicting staff members' perceptions.

<div align="center">METHOD</div>

Settings and Participants

Setting 1: Tertiary Care Medical Hospital. From 4000 potential participants (comprising full-time staff, part-time staff, and volunteers of a 800 bed tertiary care hospital in central

Canada), 3312 (83%) completed surveys were returned. Data were collected as part of an employee survey requested by hospital management to assess the impact of integration of two hospital sites.

The study used data of participants who identified themselves as primarily assigned to one of 30 administrative units (hospital wards and departments) for which data were available from supervisors. These units included 1533 staff and 45 supervisors. The staff sample included 1228 females, 230 males and 75 who did not specify gender. Participants had worked at the hospital for varying lengths of time: 0 to 6 months (36); 7 to 12 months (42); 1 to 2 years (66); 3 to 5 years (285); 6 to 10 years (488); 11 to 15 years (230); 16 to 20 years (121); and more than 20 years (261) with 4 not indicating. They had held their current positions for varying times: 0 to 6 months (65); 7 to 12 months (92); 1 to 2 years (174); 3 to 5 years (450); 6 to 10 years (440); 11 to 15 years (126); 16 to 20 years (79); and more than 20 years (97) with 10 not indicating. The participants included 674 Registered Nurses, 30 Clinical Nurse Associates, 74 Certified Nursing Assistants, 39 Ward Aides, 59 Technicians and Technologists; 28 Maintenance Personnel; 55 Social Service Staff, 43 Therapists; 65 Nutrition Staff, 118 Clerical Staff, 40 Educators, and 63 Physicians with the remainder in various other occupational groups.

From a potential sample of 47 supervisors, 45 (95%) participated. All indicating gender were female. This is in keeping with the fact that the majority of hospital staff were female, and at the time of this survey all nurse managers of clinical units were female. They had worked at the hospital for varying lengths of time: 7 to 12 months (1); 3 to 5 years (2); 6 to 10 years (8); 11 to 15 years (8); 16 to 20 years (6); and more than 20 years (20). They had held their supervisory position for varying lengths of time: 7 to 12 months (3); 1 to 2 years (8); 3 to 5 years (14); 6 to 10 years (16); 11 to 15 years (1); 16 to 20 years (1); and more than 20 years (2).

The hiring of a new CEO 9 months earlier ushered in a team-building approach during which the two hospital sites developed their joint mission and vision in keeping with their pride in their history and the radical changes occurring in Canadian health care. Formerly protected from environmental demands by government funding, the hospital needed to address the

paradigm shift in delivery of health care as well as the decrease in financial support. Well-defined psychological contracts were threatened by downsizing and altered relationship patterns.

The integration was a step in maintaining quality regional service under budgetary constraints. Senior management teams were attempting to deal with the external environment while involving all levels of staff in initiatives identified as important goals. The hospitals requested the survey to assess the impact of the changes implemented over the preceding six months and to encourage communication of staff perceptions and concerns on an organization-wide basis. The entire range of professions and occupations participated on a voluntary basis with full encouragement from a survey team and time made available during working hours to complete the questionnaire.

Setting 2: Residential & Outpatient Psychiatric Center. From 800 potential participants (comprising full-time staff, part-time staff, and volunteers of a 200 bed psychiatric facility in eastern Canada), 417 (52%) completed surveys were returned. The facility provided a full range of mental health services to the local urban community, and provided specialized mental health services on a provincial level. Data were collected as part of an employee survey requested by hospital management to assess the impact of changes in the hospital's occurring mandate during the previous 3 months in response to anticipated decreases in government funding and developments in provincial health care policy. In addition to an overall downsizing of staff associated with a reduction in patient numbers, the organization was undergoing a change from departmental to program management. These changes had an extensive impact on staff who experienced change in their primary workgroup. The organization undertook this survey in an effort to facilitate this change for staff members.

The sample for this study included staff from the nine units for which a supervisor provided data. The 115 staff for these units included 74 females, and 38 males and 3 who did not specify gender. Participants had worked at the hospital for varying lengths of time: 0 to 6 months (6); 7 to 12 months (3); 1 to 2 years (8); 3 to 5 years (19); 6 to 10 years (55); 11 to 15 years (9); 16 to 20 years (11) with 4 not indicating. They had held their current positions for varying times:

0 to 6 months (23); 7 to 12 months (10); 1 to 2 years (25); 3 to 5 years (16); 6 to 10 years (31); 11 to 15 years (5); 16 to 20 years (2) with 3 not indicating. The participants included 49 Registered Nurses, 1 Certified Nursing Assistant, 16 Psychiatric Nurse Orderlies, 3 Ward Aides, 19 Social Service Staff, 4 Nutrition Staff, 4 Clerical Staff, 3 Educators, 7 Physicians, 7 Technicians and Technologists with 2 not indicating.

The study used data of 10 of 14 supervisors (71%) who identified themselves as primarily assigned to one of nine administrative units (hospital wards and programs). The supervisors included one male and nine females. They had worked at the hospital for varying lengths of time: 1 to 2 years (2); 6 to 10 years (6); 16 to 20 years (2). Many had held their supervisory position for a brief period because of a change of the hospital's administration from a department to a program structure in the previous months: 0 to 6 months (5); 1 to 2 years (2); 6 to 10 years (2); 11 to 15 years (1).

In both settings, participants completed surveys individually and voluntarily. Completed surveys were returned in sealed envelopes to the researchers via the internal mail systems of the facilities.

Combined Sample

The analysis for this study included data form 1950 staff members and 55 supervisors who identified themselves as associated with one of 39 administrative units in the two hospitals. The units include general medical and post-surgical units, critical care units, psychiatric units, geriatric units, emergency, and outpatient units as well as clinical support units from laboratory and radiology.

Measures

Maslach Burnout Inventory–General Survey. The MBI–GS (Schaufeli, Leiter, Maslach, & Jackson, 1996) is a 16-item measure which produces three scores: exhaustion, cynicism, and professional efficacy. Developed from the Maslach Burnout Inventory (MBI, Maslach, Jackson, & Leiter, 1996), the MBI–GS evaluates burnout among professionals with and without the direct client contact that characterizes human service professions (Leiter and Schaufeli, 1996). With a

more team-based approach to health care, the influence of the less visible members of the hospital is being appreciated. While the original MBI would have focused on the service roles of hospital staff providing direct patient care, use of the MBI–GS allowed assessment of all staff members including those who provide indirect care or support services. On the MBI–GS , participants replied using a 7-point scale from 0 (<u>never</u>) through 3 (<u>a few times a month</u>) to 6 (<u>daily</u>).

With exception of the last scale, participants used a 5-point scale from 1 (<u>strongly disagree</u>) to 5 (<u>strongly agree</u>) on all of the following measures.

<u>Organizational Commitment.</u> Organizational Commitment was measured by five items from the organizational commitment questionnaire (Mowday, Steers, & Porter, 1979). This scale has been found to be a reliable and valid measure of organizational commitment through a large body of research over the past two decades.

The following scales are part of the Staff Survey (Leiter, 1996) developed and tested with 2000 hospital employees at two time periods (Centre for Organizational Research & Development, 1991, 1992).

<u>Meaningfulness of Work.</u> From the Conditions for Self-Management Scale (Leiter, 1992), five items measured the meaningfulness of work. Sample item: "This job provides me with opportunities to do work which I feel is important."

<u>Confidence in Management.</u> Eight items asked for participants' perception of management's encouragement of quality and decision-making and delegation of authority on a 5-point scale. Sample item: "From my point of view, management encourages staff to become involved in decision making."

<u>Goals.</u> Participants' awareness of and allegiance to the mission and goals of the hospital was assessed with six items. Sample item: "The Hospital's goals influence my day to day work activities."

<u>Reputation.</u> Participants' awareness and assessment of the hospital's reputation was assessed with three items, e. g.: "[Hospital Name] is one of the top teaching hospitals."

Health Risks. The health risks measure was the average rating of the riskiness of five occupational health hazards: infections, back injury, poor air quality, latex sensitivity, and physical or verbal abuse. This section followed a format Leiter and Robichaud (1997) developed to assess occupational hazards among aircraft technicians.

Job Insecurity. A single item rated job insecurity as an occupational hazard following a format Leiter and Robichaud (1997) developed to assess occupational hazards among aircraft technicians.

Acceptance of Change. Using a 5-point scale from 1 (much worse) to 5 (much better), participants responded to the question "How do you perceive changes over the past six months" for 10 issues, including quality of patient care, job security, and the morale of people working at the hospital.

Results

Relationship Of Supervisor And Staff Perspectives

Table 1 displays the average scores on each measure for staff in the 39 organizational units with the corresponding score for the supervisor for that unit. When there is more than one supervisor indicated for a unit, Table 1 displays the average score for the supervisors. Supervisors scored significantly higher than staff members on six of the 11 variables: meaningfulness, commitment, acceptance of change, goals, management, and health risk.

Table 1

Comparison of Staff and Supervisors

	Staff		Supervisors				
	M	SD	M	SD	t(42)	p	α
Exhaustion	2.73	0.47	2.80	1.10	-0.38	n.s.	.89
Cynicism	1.67	0.29	1.53	1.03	0.89	n.s.	.80
Efficacy	4.49	0.22	4.64	0.77	-0.38	n.s.	.76
Meaningful	3.86	0.36	4.23	0.72	-4.06	.001	.74
Commitment	3.36	0.18	3.95	0.46	-8.37	.001	.74
Change	2.79	0.17	2.98	0.29	-4.14	.001	.83
Goals	3.65	0.22	4.19	0.34	-10.24	.001	.72
Reputation	3.26	0.43	3.38	0.67	-1.61	n.s.	.73
Management	2.97	0.31	3.40	0.61	-4.56	.001	.73
Health Risk	3.60	0.59	2.92	0.85	6.22	.001	.81
Job Insecurity	3.47	0.30	3.48	0.72	-0.08	n.s.	n/a

Note: Cronbach aplhas are computed for the full sample including both staff and supervisors

Table 2 displays the correlations of supervisors' scores with the average scores of people on their units. Supervisors and staff members were consistent in their assessment of the organization and their experiences at work in that all of the 11 correlations between corresponding scores displayed on the main diagonal of the table were in the positive direction. Supervisors scores were significantly and positively correlated with the corresponding scores of members on six measures: cynicism (r=.36, p<.05), meaningfulness (r=.59, p<.01), acceptance of

change ($\underline{r}$=.53, $\underline{p}$<.01), goals ($\underline{r}$=.35, $\underline{p}$<.05), hospital reputation ($\underline{r}$=.73, $\underline{p}$<.01), and health risks ($\underline{r}$=.58, $\underline{p}$<.01).

Table 2

Correlations Between Supervisor And Staff Members Variables

	Exhaustion	Cynicism	Efficacy	Meaning	Commit	Change	Goals	Reputation	Manage	Health	Job
Exhaustion	.16	.01	-.08	.25	-.03	-.44**	-.09	.29	.15	.49**	.09
Cynicism	.29	.36*	-.32*	-.16	-.15	-.33*	.00	-.09	-.19	.40*	.29
Efficacy	-.32*	-.20	.27	.25	-.03	-.07	-.13	.22	-.01	-.07	-.09
Meaningful	-.12	-.20	.32*	.59**	.23	-.16	-.12	.60**	.26	.03	-.20
Commitment	-.05	-.24	.32*	.37*	.15	-.07	.02	.39*	.05	-.26	-.22
Change	-.18	-.26	.17	-.07	.27	.53**	.44**	-.17	-.07	-.29	-.18
Goals	-.03	-.18	.02	-.19	.07	.47**	.35*	-.26	-.16	-.15	-.12
Reputation	-.07	-.03	.23	.51**	.21	-.44**	-.14	.73**	.24	.15	.02
Management	-.07	-.18	.18	.15	.08	.37*	.11	.00	.22	-.06	-.19
Health Risk	.28	-.01	.01	.30	.02	-.18	.09	.24	.35*	.58**	.07
Job Insecurity	.17	.17	-.42**	-.47**	-.38*	.09	.16	-.53**	-.19	.10	.22

*p<.05. **p<.01.

Four supervisor variables were correlated with four or more staff variables. Supervisor professional efficacy was correlated with staff members' cynicism (negatively), meaningfulness, commitment, and job insecurity (negatively). Supervisor meaningfulness was correlated with staff members' meaningfulness, commitment, hospital reputation, and job insecurity (negatively). Supervisor acceptance of change was correlated with staff members' exhaustion (negatively), cynicism (negatively), acceptance of change, goals, hospital reputation (negatively), and confidence in management. Supervisor hospital reputation was correlated with staff members' meaningfulness, commitment, hospital reputation, and job insecurity (negatively). In light of the central role of these supervisor variables, they were entered at an early stage of the multiple regression analyses.

Distinct Relationships Between Supervisor And Staff

A series of multiple regression analyses determined the extent to which supervisor variables made a unique contribution to predicting the staff member variables. Table 3 and 4 display the results of stepwise multiple regression analyses in which the supervisor variables were regressed on each of the staff variables. The sequence for the multiple regression was to enter on the first step the corresponding management measure for the staff measure. For example, supervisor exhaustion was regressed first on staff exhaustion and supervisor cynicism was regressed first on staff cynicism. The second step for each regression included supervisor acceptance of change, meaningfulness, efficacy, and reputation (unless one of these three was the predictor variable in the first step). The third step in the regression included all of the remaining supervisor variables.

Table 3

Regressions Of Supervisor Variables On Staff Members Variables: Beta Weights

	Exhaustion	Cynicism	Efficacy	Meaning	Commit	Change	Goals	Reputation	Manage	Health	Job
Exhaustion						-.45				.49	
Cynicism		**.38**								.44	
Efficacy	-.32										
Meaningful				**.40**				.41			
Commitment				.29				.36		-.42	
Change						**.53**				-.29	
Goals						.47	**.35**				
Reputation				.51				**.73**			
Management						.37					
Health Risk										**.58**	
Job Insecurity				-.28				-.40			

Supervisor acceptance of change (negatively) and health risk predicted staff exhaustion, while supervisor cynicism and health risk predicted staff cynicism. Supervisor exhaustion (negatively) predicted staff professional efficacy. The prediction of staff meaningfulness by supervisor meaningfulness was enhanced by supervisor reputation. Three supervisor variables—meaningfulness, reputation, and health risk (negatively)—predicted staff commitment. Supervisor acceptance of change and health risk (negatively) predicted staff acceptance of change. The prediction of staff goals by supervisor goals was enhanced by supervisor acceptance of change, while the prediction of staff reputation by supervisor reputation was enhanced by supervisor meaningfulness. Supervisor acceptance of change predicted staff perception of management and supervisor health risk predicted staff health risk. Supervisor meaningfulness (negatively) and reputation (negatively) predicted staff job insecurity.

Table 4

Regressions Of Supervisor Variables On Staff Members Variables: Total Variance

Explained

	df	F	p	Adj R^2
Exhaustion	2,36	14.15	.0001	.41
Cynicism	2,36	7.83	.005	.26
Efficacy	1,37	4.21	.05	.08
Meaningful	2,36	16.75	.0001	.45
Commitment	3,35	6.50	.005	.30
Change	2,36	10.41	.0005	.33
Goals	1,37	10.38	.005	.20
Reputation	1,37	12.85	.001	.24
Management	1,37	5.95	.05	.12
Health Risk	1,37	18.49	.0001	.32
Job Loss	2,36	9.44	.0005	.31

As indicated in Table 4 the largest amount of predicted variance in staff variables by supervisor variables was with staff meaningfulness (R^2=.45, p<.0001) and exhaustion (R^2=.41, p<.0001). The weakest, although still significant, prediction was for efficacy (R^2=.08, p<.05) and perception of management (R^2=.12, p<.05). All other regression analyses accounted for 20 to 33 percent of the variance in the staff variables.

Discussion

This study demonstrated clear correspondence between the perspectives on organizational change of front-line supervisors and members of their unit. It identified three qualities of supervisors that were distinctly related to staff members' views about the organization, its future,

and the day-to-day work. Supervisors' confidence in the organization, their engagement in work, and their assessment of occupational risks in their areas all made a contribution to predicting staff members' attitudes. These findings are discussed in terms of their implications for change management and for developing interpersonal perspectives on human resource and strategic management issues.

Consistency between supervisors and staff members was evident in the positive correlations between their scores on corresponding measures. The greatest degree of consistency was on their perspective on hospital reputation, the meaningfulness of their work, the riskiness of their work environment, and the impact of change in the organization. The study could not identify the direction of influence behind these correlations. It most likely reflects various influences. First, both supervisors and staff are influenced by the shared work context. For example, the critical care mandate of the tertiary care hospital coupled with the considerable expense required to build and staff critical care units builds the confidence of both staff members and supervisors. Second, the attitudes and morale of staff members influence supervisors. Third, supervisors influence the attitudes and perspectives of staff members through their leadership and role modeling. The high degree of consistency found on important attitudes about the organization and its prospects for the future might be due to supervisors and staff communicating with one another on these issues, developing a shared view of them. The actual dynamic between supervisors and staff members represents the mutual influence that plays a significant role in the transactional model of stress.

Engagement In Work, Confidence In The Organization, And Occupational Hazards

The multiple regression analyses for all variables except professional efficacy, confidence in management, and health risk indicated that additional supervisor measures enhanced the prediction of staff members' perspectives by the corresponding supervisors' measure. In general, measures of supervisors' engagement with work were related to that of their staff members while supervisors' view of the organization predicted staff members' view of the organization. Health risks contributed to the predictions of both. Specifically, supervisor cynicism and exhaustion

contributed only to the prediction of staff member cynicism and professional efficacy respectively and not to any of the measures of staff member confidence in the organization. There are two exceptions to the general pattern: supervisor acceptance of change contributed to the prediction by health risk of staff member exhaustion, and supervisor meaningfulness of work and hospital reputation predicted staff perception of job insecurity.

Three qualities of supervisors' confidence in the organization were most closely associated with staff members' perceptions. Meaningfulness of work, and hospital reputation assessed the extent to which supervisors perceived the organization to make a contribution to furthering what they valued in their work. Those who perceived the hospital to be a place where people did important work resulting in high quality services worked with staff who had a more positive view of the organization and its contribution. In addition, supervisors who perceived the hospital to be holding its own in the face of pressures towards deteriorating services and operations worked with staff who were more confident in the hospital's future. In contrast, supervisors' organizational commitment and confidence in management failed to enhance the prediction of any staff member measures, and supervisor acceptance of goals contributed only to the prediction of its counterpart among staff members.

This pattern of results suggests that supervisors and staff members share perspectives on their day-to-day work rather than on the abstract ideals of the organization. One reason people value organizations is that they provide opportunities for doing meaningful work. Organizations gain credibility with their staff members when they fulfill that expectation. The consistency found between supervisors and staff members regarding the meaningfulness of work and hospital reputation underscore the extent to which these are social constructs: they are defined to some extent through discussion and observation within workgroups, not solely through private experience.

The two occupational hazards considered had very different relationships with the corresponding variables. Supervisors and staff members agreed on the prevalence of health risks in their work environment. Supervisors who assessed their worksetting to be safe worked with

staff members who were more committed and accepting of change, and less exhausted and cynical. The safety of the work environment is an issue that pertains to the day-to-day work of staff members as well as their confidence in the organization. Employees perceive a safe work environment to be more resilient and more likely to be considerate of employees during a difficult transition. In contrast, supervisors' assessment of potential job loss was not related to that of their staff members, and did not contribute to the prediction of staff members' engagement with work nor their confidence in the organization. Further, supervisor perception of hospital reputation and meaningfulness of work predicted staff perception of job insecurity. To some extent this may reflect an awareness that different parameters influence the job security of supervisors and staff members. It may also indicate that the confidence and engagement shown by supervisors in their day-to-day interaction with staff members may be more influential than any information they may have received about job security within the organization.

Limits & Future Directions

This study provides a distinct perspective on consistency in attitudes between supervisors and their staff members through (1) a survey that permitted the use of identical measures across a variety of occupational groups, (2) its capacity to differentiate data from supervisors and staff members, and (3) its capacity to associate staff members and supervisors with specific units within three large hospital settings. One limitation of the study arises from the use of cross-sectional questionnaire data which does not permit investigation of causal relationships. Its design is consistent with the role of mutual influence in the transactional model of stress. The extent to which correlations reflect supervisors influencing staff members, staff members influencing supervisors, or both being influenced by their shared worksetting remain unclear. Indeed, untangling such influences in a definitive fashion among groups who work closely together in a turbulent work environment would require a considerable body of information collected on many occasions. This admirable goal remains beyond the aspirations of the present study which focuses solely on consistencies between the responses of different people with a defined work relationship with one another.

A second limitation is a finite number of organizational units. To protect the confidentiality of participants the participating hospitals requested them to identify only large organizational units, not all of which had an identifiable supervisor. As such, the nearly 3800 participants across the settings was reduced to an N of 39 units for the analyses described here. While this N was sufficient to examine strong correlations and stepwise multiple regressions with a limited number of predictor variables, it did not permit more ambitious regressions and model testing. With a larger N (i. e., over 100) it would be possible to test models that focused on the distinct contribution of supervisors to staff members attitudes beyond their relationships with other staff member variables. For example, an analysis could test the extent to which supervisor cynicism predicted staff member cynicism beyond its relationship with staff member exhaustion. With an N of 39 units, it was not reasonable to include so many predictor variables in a model.

<u>Implications for Management</u>

The consistency identified in this study between supervisors and their staff members on engagement with work, confidence in the organization, and occupational hazards provides direction for change management in large organizations. Regardless of the direction of causal influences, supervisors' perspectives on their work and the organization provides information about the more general state of things among staff of an administrative unit. A cynical supervisor with severe misgivings about the organization's prospects during a major transition may well represent a predominant view of that unit's membership.

During major organizational transitions the confidence of staff and their engagement with work are essential resources for an organization, especially one in the public or private service sector. Supervisor attitudes towards the work and the organization are a potential source of support for building staff members' confidence in the organization's survival and its potential to make a significant and meaningful contribution to the larger community. By serving as a role model and a source of positive perspectives on the day-to-day work of a group, front-line supervisors provide leadership on a local level that plays a central role in an organization's

strategy for managing change. Organizations can enhance that potential by keeping supervisors informed, including their participation in the change management planning, and responding seriously to their assessments of the impact of change on their work units. Often front-line supervisors play only a minor role in a change process, because they are seen as being excessively attached to organizational structures in need of change. As full partners in the change process, however, front-line supervisors are a potential source of influence on a significant proportion of the organization. It is a potential that may make a real contribution to the organization's ability to thrive during turbulent times.

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