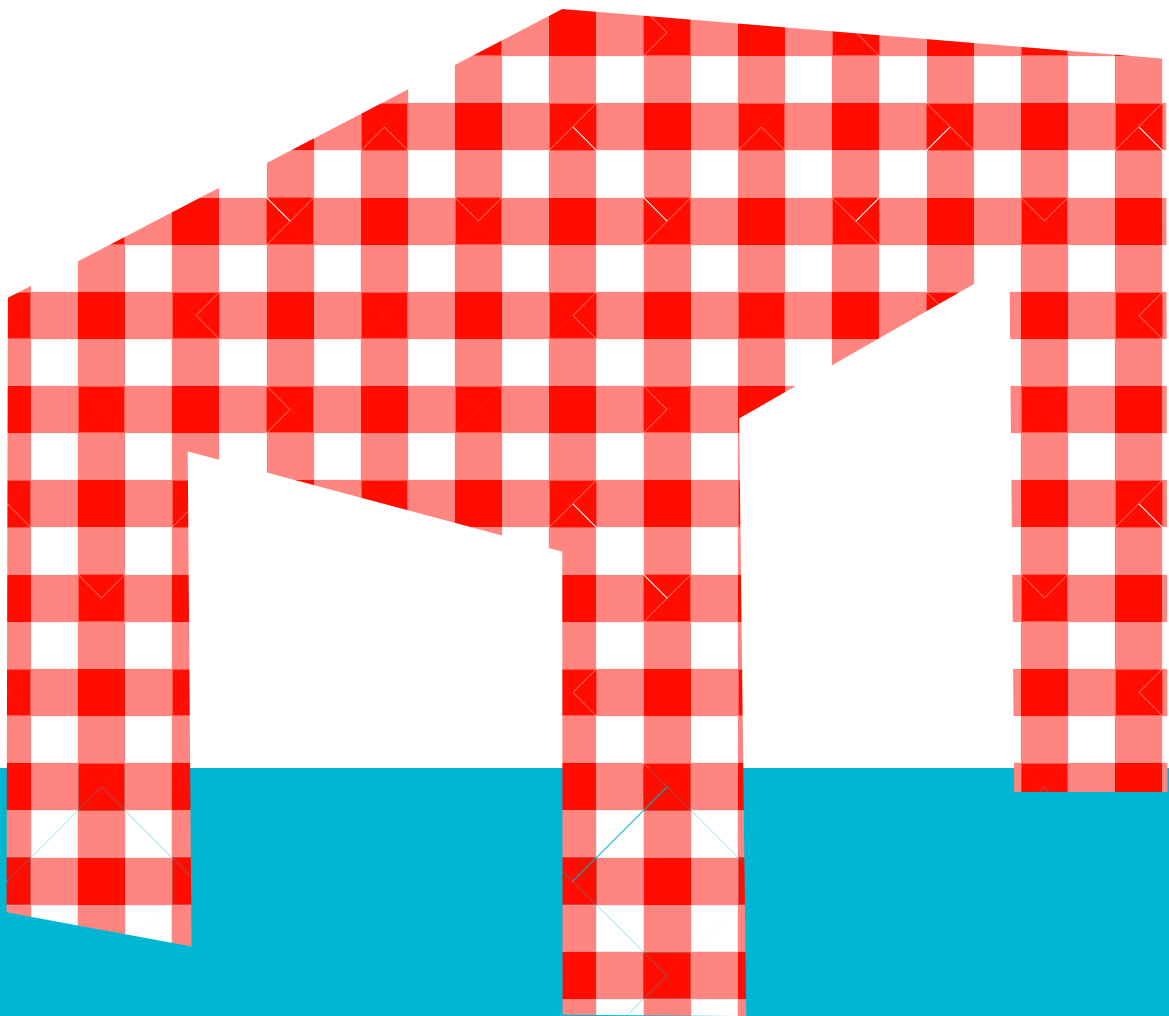# Determinants of successful adoption of the Dutch Social Support Act:

A multiple case study of Amsterdam, Breda, Enschede and Rotterdam

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Preface

I have been interested in everything that breathes 'public domain' since the start of my bachelor programme. It is a vibrant domain, not dull or 'dusty' as some of my friends in different studies would describe the study of public governance. Especially the different values that public organizations try to balance, such as equity, fairness, legitimacy whilst improving their responsiveness, effectiveness and overall service comes with several challenges. In previous studies I saw this happening in the social domain and it grasped my attention immediately.

In particular, I have been amazed by the resilience of those working in lower levels of government. The decentralizations in the Social Domain are massive reforms, with enormous implications for all involved stakeholders. The sheer size alone, poses multiple challenges. As will become clear from this study, it is too difficult to implement such policies at once, with a 'big bang' and everything will be fine. However, as all municipalities face these challenges, I wanted to found out how they implemented these reforms, to yield valuable insights for future reforms.

I could not have done this without the help of others. As young and perhaps somewhat naïve scholar, never did I except the social domain to be that complicated. However, I managed to navigate through this jungle of complexity, thanks to my supervisors Bert George and Laura van den Dulk. They provided a guiding hand whenever on a crossroad of difficult decisions and challenged me to make the most out of my data. Moreover, I am very grateful for the time the interviewed staff have taken to answer my questions and to provide me with additional (follow up) information. Additionally, I want to thank my supervisors at PwC who have provided me with additional insights and an extensive network. Last but not least, I would like to thank all my friends, family, classmates and colleagues for all their support, kind words, and feedback while writing this thesis.

I experienced the whole process as rewarding and gained a lot of insights, mostly processed at the 'kitchentable' (keukentafel), similar to the frontline workers under the Social Support Act. Enjoy your reading!

Abstract

Purpose –The Social Support Act, introduced in the Netherlands already in 2007, transferred practically all non-residential to municipalities. This reform is among the biggest recent operations within Dutch local administration and presented municipalities with a few challenges. Service-delivery had to be innovated and improved, and overall costs reduced. This reform was believed to entail profound organizational change. However, it remains unclear what change management practices municipalities have deployed to adopt the Social Support Act. The aim of this study is to deepen our understanding of the determinants leading to successful adoption of this Act.

Design/methodology/approach – A study of the course of change following the framework posed by Fernandez and Rainey (2006) is performed to address this aim. Four large municipalities were selected based on their size and geographical location. Departing from rational-adaptive theory, semi-structured interviews were conducted with 20 respondents involved in the implementation of the Social Support Act. Additional documentation was collected mainly through publicly accessible information systems. Data were analyzed based on initial and focused coding.

Findings – Findings indicate that vision, availability of sufficient resources, and support from both internal and external stakeholders leaded to a successful adoption of the Social Support Act. However, the pursuit of comprehensive change did not hold, due to the complexity of the Social Support Act. Officials did perceive institutionalize change by altering processes and organizational culture as important, but found incremental change to be more useful to get a better understanding of the interdependencies between internal and external actors.

Originality/value – This study breaks through several patterns currently existing in the field of organizational change. Most studies focus on organizational change in the private sector and often have a U.S./Anglo-Saxon origin. Furthermore, the content and context of change is often subject to debate, rather than the actual process of change. In contrast, this study examines the determinants of successful change among Dutch municipalities by focussing predominantly on the process of change.

Keywords – Organizational Change, Strategic management, Public Sector, Local Government, Municipalities, Managers, Officials

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1   Introduction

"The Social Support Act (Wet Maatschappelijke Ondersteuning 2015) is not well execu-ted. Although all politicians argue that citizens should come first rather than the system when developing policies, when actually implementing these policies the reality turns out differently" (Rusman, 2016).

A firm conclusion by the Dutch Ombudsman. Indeed, the implementation of the Social Support Act did not go down without a fight. Apart from financial constraints, the legislative framework allowed the then 393 municipalities to each implement the Act differently, leading to strong inequalities between citizens from different municipalities (Huisman, 2015). Moreover, a wave of bankruptcies of home care institutions followed due to uncertainty about the practical implications of the Act (Trouw, 2014).

Hence, it is safe to state that the Social Support Act not only sparked a fierce debate about the current state of the Dutch welfare state, but also presented municipalities with quite some new tasks. This challenge was presented as a change "from a welfare state towards a participatory or activating society." As part of a larger reform, recently adopted laws such as the Social Support Act (Wet Maatschappelijke Ondersteuning), Participation Act (Participatiewet) and Youth Act (Jeugdwet) together redefined the roles and tasks of municipalities. According to the government, (welfare) services should be brought closer to citizens. As local government know their citizens and local environment best, it is assumed that increasing their freedom of policy leads to better-tailored and thus more efficient service delivery. Hence, along with the decentralization went a budget cut up to 20 percent because all those tasks now transferred to municipalities (Nijendaal, 2014). It is therefore no wonder, that this administrative reform has presented municipalities a huge challenge (Pommer & Boelhouwer, 2017). Moreover, through the decentralization, the (local) government appealed to this self-reliance of citizens, changing the role between government and citizen (Trommel, 2012).

Since the Social Support Act went into effect, Dutch citizens are critical and sceptic about the delivered quality of Social Support-related care. It forms a remarkable contrast to those that receive actual assistance, the majority of recipients is satisfied (Huijsman, 2017). This seemingly conflicting opinions about the functioning of the new welfare system provides an interesting research setting. More specially, into the allegedly new role of local government.

1.1   Changed society, new welfare

The reforms within the Dutch welfare domain are illustrative for the bigger wave of administrative reforms throughout Europe. Since the 1980s, local municipalities have administered several reform which Bovaird (2005) calls the local governance movement. These were initiated to cope with economic pressures, coming forth from unpredictable tax revenues and the increasing urge for more and better service delivery (Bovaird, Löfller & Parrado-Diez, 2002). Characterized as 'New Public Management' (NPM), these reforms aimed to increase efficacy of control over policy implementation and the outcomes (Bannink, 2013). This was mainly done by aligning the interests of involved stakeholders through common problem definition and a performance measurement system based on incentives and penalties (see Osborne, 2006; Bannink, 2013).

However, societal problems have become increasingly complex. Technological possibilities allow innovation, opening everyday life from the grip of tradition, contesting 'the way we do things here' (Giddens, 2002). Due to technology, a space of flows emerges: we can communicate over long distances, reducing the meaning and importance of physical and territorial place (Castells, 2000). Moreover, through the infusion of knowledge, individuals become highly individualized and rationalized (Lash, 2003; Bauman, 2001). This has resulted in less acceptance of government authority and enabled horizontalization of society. Non-state actors such as multinationals have become so powerful that states cannot ignore them anymore (Van Erp, 2016). The expertise and means to solve problems lie not within the exclusive domain of the government anymore. These developments have resulted in higher expectations of citizens of governmental performance (Dunleavy et al., 2006; Osborne, 2006). Local governments are expected to be increasingly responsive and service-oriented (Dunleavy et al., 2006; Osborne, 2006). Moreover, technological possibilities allow to address so-called wicked problems through plural networks (Bovaird et al., 2002; Broucker, Steen & Hondeghem, 2015; Rusaw, 2007).

1.2   Paradoxes in the social domain

This shifting expectations of the role of the (local) government have been codified in the decentralizations. As a result of the Social Support Act, a large part of non-residential care has been shifted to local government. Municipalities in the Netherlands are now responsible for the self-reliance of their citizens. Self-reliance is actively promoted by facilitating actual co-production of social policy at local and regional levels, through cooperation with various stakeholders such as health providers, insurers and welfare organizations (Trommel, 2012). Offering tailored support is key in this respect. However, most of the individuals that cannot independently arrange the care or support they need, find themselves in a complex situation. Often, these individuals make use of various welfare services (CBS, 2017). Dutch municipalities are therefore forced to rethink their welfare policies.

As a result, the transitions in the social domain present the Dutch municipalities with a few paradoxes. First, due to the rapid development of technological applications, citizens expect that municipalities innovate and conduct reforms, yet the margins to do so are small because of budget cuts (Hartley, Butler & Benington, 2002). Second, Dutch muni-

cipalities are expected to meet the demands of its citizens, offering more responsive, tailor-made and service-oriented provisions (Hartley, Butler & Benington, 2002). But the Dutch municipalities are also constrained by the specific juridical frameworks implemented by higher governmental bodies. These frameworks focus on equal, fair and legitimate service-provision to all citizens (Dunleavy et al., 2006). Third, the quality of service-delivery is expected to improve, yet the means to 'produce' these services decrease (Hartley, Butler & Benington, 2002). To balance all these paradoxes, a municipality should be flexible and decisive but overall, be reliable.

These paradoxes are expected to present municipalities difficulties in the successful implementation of the Social Support Act. In previous reforms, municipalities have shown resilience by performing their tasks via creative ways (Korsten et al., 2009). Especially through outsourcing, hiring external capacity or through inter-municipality collaborations, the implementation capacity has been brought to an adequate level (Boogers et al., 2008). However, given the budget cuts associated with the reforms in the social domain, it is expected that the municipalities need to change more profoundly to provide sustainable change. How municipalities have done so, and what change management practices they have used to successfully adopt the various acts within the social domain, is unclear. Hence, to address this gap in the literature, this thesis examines the implementation of the Social Support Act in four municipalities.

1.3 Case selection and research questions

This study aims to shed more light into the determinants that appear to be important to successfully implement the Social Support Act in Dutch municipalities. A deliberate choice has been made to focus on the larger municipalities in the Netherlands. Four municipalities have been selected: Amsterdam, Breda, Enschede and Rotterdam. These municipalities are among the largest municipalities in the Netherlands (see table 1). As will be discussed below, these cases differ in size and geographical location, enhancing the possibilities of best practices to emerge and adding to our understanding of the successful adoption of the Social Support Act.

Ranking	City	No. of residents
1	Amsterdam	833.624
2	Rotterdam	629.606
9	Breda	181.611
12	Enschede	158.351

Table 1: Rank in size of Dutch municipalities and actual no. of residents (CBS, 2018).

1.3.1 Four big municipalities: Amsterdam, Breda, Enschede and Rotterdam
When assessing the percentage of inhabitants using one or more arrangements that fall within the scope of the Social Support Act, cities with >100.000 citizens stand out. Here, the amount of people applying for welfare provisions lies higher than the average in the Netherlands (Pommer & Boelhouwer, 2017). This effect is even stronger for popular

student cities and vital urban agglomerations.[1] Moreover, within these cities, the amount of clients that uses multiple provisions is significantly higher than the national average (Pommer & Boelhouwer, 2017). A remark should be made that within shrinking rural cities people claim the most social welfare provisions compared to any other type of city. This could partially be explained by the 'brain drain' taking place within the more rural provinces. Those higher educated tend to move to the 'Randstad'[2], leaving the lower educated behind. Within these rural provinces (in particular Drenthe, Groningen and Limburg), the percentage of citizens with a lower socio-economic status (SES) is higher, life expectancy is below national average and the percentage of children born with a physical or mental disability is above national average (Engbersen & Uyterlinde, 2017). Therefore, the Netherlands Institute for Social Research suggested that the high usage of welfare provisions within these rural cities was (at least partially) founded into the characteristics of the citizens and not necessarily related to the risk profile of the municipality (Engbersen & Uyterlinde, 2017). In other words, regardless of how the municipalities would adopt the Social Support Act, it will be more difficult for them to achieve success.

Therefore, attention will be directed towards the bigger municipalities. Notwithstanding their size, municipalities have shown to be creative when increasing their implementation capacity through (re)allocating funds, human capital or material resources (Boogers et al., 2008). However, it is expected that this maneuver space for larger municipalities is more likely to be higher. This could be translated in more possibilities to experiment and conduct 'trial-and-error' trajectories, thereby provide useful insights for other municipalities. As the 'G4' – the four biggest municipalities in the Netherlands – are significantly larger than the other municipalities, Breda and Enschede have been selected as a mean to reflect on the adoption of the Social Support Act in bigger municipalities outside the Randstad. Since Breda and Enschede are smaller in terms of number of residents and administrative organization, it can be examined whether other determinants of successful adoption emerge from the data.

Ultimately, the goal of this study is to assess the determinants of successful adoption of the Social Support Act by assessing the course of change through the framework posed by Fernandez and Rainey (2006). The focus on the four selected cities will offer an explanation that could be assessed in other (Dutch) large municipalities.

1.3.2   Research questions

Within an ever-growing complex society, case studies will be used to assess the relation between change management practices and the implementation of the Social Support Act. This will add to our understanding how municipalities deal with aforementioned double management challenge and yields valuable insights for future administrative reforms among local government.

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1   Vital urban agglomerations are Rotterdam (including Schiedam), Amsterdam (including Almere and Diemen), and The Hague (without neighboring areas. Popular student cities are those cities with an university, excluding Tilburg and including Arnhem (Pommer & Boelhouwer, 2016, p.129)

2   The Randstad is an economic area consisting of the four largest Dutch cities and their surrounding areas.

Accordingly, the following research question will be put central in this thesis:

Which change management practices contributed to the successful adoption of the Social Support Act in Amsterdam, Breda, Enschede and Rotterdam?

This main research question is divided into a theoretical and empirical part. For the theoretical part, the following theoretical questions will be answered:

- *What are change management practices in public organizations according to the literature?*
- *What is a successful change adoption according to the literature?*
- *What is the theoretical relation between change management practices and the successful adoption of change?*

Through several case studies, data will be collected to answer the following empirical questions:

- Which change management practices do the selected Dutch municipalities employ to implement the Social Support Act?
- To what extent has the Social Support Act been successfully implemented in the studied Dutch municipalities?
- Does the theoretical relation between change management practices and the successful adoption of change hold in the case of the Social Support Act within the selected Dutch municipalities?

Together, the theoretical and empirical questions will provide a compelling answer to the main research question. Consequently, this study contributes both to scientific progress and fuels the public debate. Below the expected academic and practical relevance will be further discussed.

1.4   Academic relevance

In the field of organizational change, several patterns can be witnessed. Multiple biases exist, as most studies focus on organizational change in the private sector and often have a U.S./Anglo-Saxon origin (Fernandez & Rainey, 2006; Kuipers et al., 2014). Moreover, most studies focus on content and context of change, rather than the actual process of change (Kickert, 2014). In various ways, this study tries to break through these patterns.

First, the notion of the public/private bias is important. Despite the presence of a vast body of studies on organizational change, relatively little studies assess change in the public domain (Fernandez & Rainey, 2006; Kuipers et al., 2014). Change management practices derived from private industries seemingly oversimplify the context in which public organizations operate and should not be copied. Public organizations differ fundamentally from private organizations in terms of ownership, funding and control (Chen, Yu & Chang, 2006; Karp & Helg, 2008; Perry & Rainey, 1988; Rusaw, 2007). Hence, these scholars stress the need for more focus on the public context when assessing or theorizing change management practices (Boyne, 2002; Chen, Karp & Helg, 2008; Mintzberg, 1994; Poister, 2010; Rusaw, 2007; Yu & Chang, 2006). As four Dutch municipalities are

the units of analysis, this study thus meets the critics of the 'privatized' field of organizational change.

Second, there appears to be an US/Anglo-centric bias within the change management literature (Kuijpers et al., 2014). However, the dominant political ideology within those countries significantly differs from the Dutch context (see Vis, Van Kersbergen & Becker, 2008). The prevailing political ideology in countries shape public policy and subsequently determine the institutional context in which change occurs (see Saint-Arnoud & Bernard, 2003), it is questionable to what extent literature with an US/Anglo-centric focus hold in the Dutch context . Assessing whether these findings (e.g. the points of consensus by Fernandez and Rainey, 2006) apply in the context of the studied Dutch municipalities thus adds to our understanding of the applicability of generic change models in various contexts.

Finally, most studies do not focus on the actual process of change, rather they focus on the context or content of change (Kickert, 2014). This study departs from the study of Fernandez and Rainey (2006), which puts the process of change central in their study. In particular, this thesis challenges the applicability of generic change management into local government. Popular theories will be tested to see whether these hold within the Dutch context and, if not, what additions need to be made. Hopefully, this will decrease the perceived gap within academic change management literature.

1.5   Practical relevance

Besides a contribution to the academic debate, this study aims to provide societal relevance. Despite the availability of numerous change management handbooks, various scholars claim that most of the change initiatives fail. Moreover, the roles of (local) governments are changing, redefining the relations with non-state actors and citizens. This presents additional challenges for municipalities. These themes will be discussed in this thesis and could lead to the emergence of best practices.

First, several scholars argue that change practices are often perceived not to be successful (Beer & Nohria, 2000; Knippenberg et al., 2006; Kotter, 1995). Some even claim that over seventy percent of change interventions fail (Beer & Nohria, 2000, p. 88). Karp and Helgo (2008) claim that this follows as most change theory underestimates the environment in which public organizations operate. As this study solely focuses on public organizations and the witnessed change practices along with the perceived outcome, it offers practical insights for Dutch municipalities why certain change management practices worked in a specific context. If not directly transferrable, it offers at least insights and invites other municipalities to visit the selected municipalities and discuss the findings.

Moreover, the Social Support Act is part of one of the biggest reforms taking place within the past twenty years in the Netherlands. It codifies changed citizens' expectations, since local government is expected to deliver high-quality, tailored services in a more efficient manner (Hartley et al., 2002). As discussed, this presents multiple challenges for municipalities. Through a qualitative approach, first lines of evidence will be offered, illustrating how four Dutch municipalities have adopted the Social Support Act. Additionally, this

might yield best practices for the implementation of future reforms. Indeed, the trend of transferring tasks and responsibilities from central to local government appears to continue. Within a few years, a new Environment and Planning Act will be implemented in the Netherlands. Some already call it the biggest administrative (legislative) reform since the Constitution (Rijksoverheid, 2015). Although it will take a few years before implemented, it will once again put municipalities on the crossroads of change (De Kluis, 2017). Hence, to see how the selected municipalities have transformed themselves to deal with the challenges within the social domain might also provide insights and best practices to municipalities when the transformation within the spatial planning domain will be implemented.

1.6   Reading guide

Aforementioned described research will be shown in the following six chapters. Chapter two presents a brief summary of the Social Support Act. Chapter three sets out the theoretical framework underpinning this study. Moreover, it addresses the first three theoretical questions. The used research design will be accounted for in chapter four. It provides a detailed account of the data collection and method of analysis. Subsequently, this has resulted in findings presented in chapter five. After discussing each empirical question, in chapter six these particular findings are critically evaluated using additional literature. This feeds into the final chapter where a comprehensive conclusion will be drawn.

2 Context: The Social Support Act

In the introduction, the Social Support act is presented in a broad sense. To fully grasp the results of this thesis, it is necessary to get a better understanding of what the Social Support Act actually entails and what consequences it has for municipalities. Moreover, it provides an opportunity to further demarcate the scope of the study. Therefore, this chapter discusses the Social Support Act more extensively.

2.1 Transition of almost all non-residential care

The Social Support Act placed more emphasis on individual responsibility, restructured the financial streams, the role of insurers and municipalities and recognized the importance of non-residential care (Trommel, 2012; Maarse & Jeurissen, 2015). It was expected that expenditures on care could be reduced if municipalities have sufficient discretionary space to offer tailored support to clients (Maarse & Jeurissen, 2015). At first, when the Social Support Act was introduced in 2007 it mainly upgraded the role of municipalities in non-residential care. It meant that municipalities suddenly became responsible for the coverage of housekeeping services as these were shifted from the Exceptional Medical Expenses Act (AWBZ) to the new Social Support Act. Moreover, municipalities became responsible for the offering of individual facilities such as stair lifts, enabling clients to live longer at their own residency. However, the financial crisis in 2008 opened a window of opportunity for an even more radical reform (Maarse & Jeurissen, 2015). Announced in the coalition agreement of 2010, the Social Support Act would be expanded (Rijksoverheid, 2010).

As of January 2015, municipalities are responsible for all non-residential care, assisting people who are unable to independently arrange the care and support they need (Rijksoverheid) Insurers remain responsible for contracting community nursing and 'body-related' personal care (Maarse & Jeurissen, 2015, p. 243). All other non-residential care is now a responsibility of the municipalities, offering various services to the elderly, handicapped individuals or to those with social psychiatric problems (Rekenkamer Breda, 2018). It is assumed that municipalities are best able to cater the needs of their specific local situation, enabling more efficient, tailored and integrated set of services within the social domain to support those not able to run their household or participate in society (Maarse & Jeurissen, 2015). Therefore, although outside the scope of this study, the new Social Support Act in 2015 was accompanied with the Youth Act and Participation Act to place all facets of social life into the hands of the municipalities. Since this ought to lead to better and more efficient service delivery, it went with a severe budget cut (CPB, 2013).

2007	2007-2014	2015

		Long-Term Care Act (Wlz) Residential care
Exceptional Medical Expenses Act (AWBZ) Residential and non-residential care	**AWBZ** Residential and non-residential care	**Healthcare Insurance Act** (ZVW) Community nursing and body-related personal care
	Social Support Act (Wmo) Housekeeping Individual facilities	**Social Support Act 2015** (Wmo 2015) Rest of non-residential care

Figure 1: The reforms within the long-term care over time. Blocks in orange mark responsibilities of municipalities.

In the Social Support Act 2015, starting point is therefore the so-called 'kitchen-table discussion' ('keukentafelgesprek') (CPB, 2013). The idea is that through these talks, first an appeal is done on the individual itself and his/her social network before being referred to support provided by the municipality. (CPB, 2013). Municipalities have the obligation to provide a solution, and the substantial budget cuts tied to the reforms, thus providing an incentive to first explore the options in the informal care sector (CPB, 2013). Transitional regulation has been included to ensure a smooth transition for municipalities (TSD, 2015B). Individuals that had an AWBZ indication in 2014 that continued in 2015, retained the rights and obligations originating from that indication (e.g. size of the entitlement and contribution to be paid) until the end of the indication, 1 January 2016 at the latest (See Transitiebureau, 2014). Hence, at first, all municipalities were focused on the transition period and the guarantee of care continuity. This went without major hiccups (TSD, 2015A).

2.2 Community shelters, sheltered housing and PGB

For community shelters and sheltered housing ('Maatschappelijke opvang' and 'Begeleid wonen') the transition period is five years since this affects the most vulnerable and these individuals need stability and continuity (Transitiebureau Wmo, 2014). Moreover, under the AWBZ regime, clients had the option to self-purchase health services and assistance with a cash transferor personal budget (persoonsgebonden budget: PGB) (Maarse & Jeurissen, 2015). The transition period as well as the procedure to receive care with a PGB also changed with the Social Support Act 2015. Due to practical reasons (time and scope of the subject), both the PGB, community shelters and sheltered housing will be left outside the scope of this thesis. These tasks and subsequently regulations are quite specific and in case of sheltered housing and community shelters, regulated

within regions (constructions where the largest municipality in the region functions as headquarter).

2.3   Implications of Social Support Act

To conclude, the reforms within the social domain had quite some implications for municipalities. Due to the Social Support Act, Dutch municipalities are now responsible for most non-residential care as of January 1 2015. It also means that they rely on partner organizations to implement policies and delivery of care services (Pommer & Boelhouwer, 2017, p. 42; Trommel, 2012). Therefore, this Act has led to the civic socialization of local government, presenting challenges to contemporary local governance (Denters, 2015; Hartley, 2005). The relative broad set-up of the Social Support Act enables experiments and collaboration, forcing rather than allowing municipalities to orchestrate the interest of different stakeholders (Hartley, 2005). In other words, municipalities have to direct and interact closely with partner organizations to provide the necessary care and support for its citizens.

3 Literature review and theoretical framework

Within this chapter, the theory underlying this study will be discussed. First, the concept of change management will be defined. Second, the conceptual work of Fernandez and Rainey (2006) will be discussed using a literature review of the latest change literature. This leads to a conceptual model and provides the foundation for the analysis of the empirical data in chapter four. This chapter concludes with a conceptualization of successful change in the context of the Social Support Act.

3.1 The study of change management

There is a vast body of literature concerning the study of change. However, various conceptualizations are used, deeming a precise definition important to situate this study within the broader field. In the literature, the concepts 'change', 'reform' and 'innovation' or 'innovativeness' often overlap or used interchangeably (Fernandez & Rainey, 2006). Hence, a careful definition is necessary to prevent misunderstandings. Moreover, sharper definitions create awareness of the differences among these concepts, allowing for a more fine-grained analytical framework.

First, organizational innovation is mostly defined as '*the adoption of an idea or behaviour that is new to the organization*' (Hage, 1999, p. 599). This can then either be a new (administrative) procedure, service, technology or service. Most importantly, innovations or innovativeness is often more about the *creation* of ideas, rather than the *implementation* of ideas (Fernandez & Rainey, 2006). It is here where the difference with change management can be witnessed.

Another concept that is often used exchangeable with change, is reform. Within public administration literature the term 'change' is not as widely used as the phrase 'reform'. The latter is a more narrow concept since it describes a process that is intentional and designed (Kuijpers et al., 2014, p. 2). It also differentiates from change management practices, since change management focuses on implementation of new procedures, structures or to change behaviour and thus consists of a more micro-level. Reforms focus more on those changes that affect a sector or domain as a whole and could therefore be seen as a macro-level concept. The Social Support Act affects the whole long-term care and welfare sector, thus can be characterized a reform.

Organizational change refers to '*a process that is aimed at improving ways of working, structures or even culture to address signalled problems'* (Broucker et al., 2015, p. 15). This implies that organizational change consists of a few elements. First, one should have

an idea of the current situation and problems. Second, a goal or direction should be put on the horizon. Third, it also consists of aligning visions, processes and organizational behaviour (Broucker et al., 2015). Rusaw (2007) therefore also argues that organizational change practices challenge the fundaments of organizations. Organization foster routines, norms and values that steer behaviour of employees, hence change management practices do not only touch upon processes or structures of the organization, but also on the opinions, perceptions and behaviour of those working in and around these organizations (Kotter, 1995; Rusaw, 2007). Hence, change management can be defined as the *"process of renewing an organization's direction, structure, and capabilities to serve the changing needs of internal and external stakeholders." (*See Morgan & Brightman, 2000, p. 66)

3.1.1 Preliminary conclusion

Aforementioned paragraphs have tried to make clear the differences and overlap between innovation, change and reforms. Moreover, it provided an answer to the first theoretical research question: 'What are change management practices in public organizations according to the literature?' Change management refers to those practices that aim to renew an organization's direction, structure, and capabilities to address signalled problems – changed needs of internal and external stakeholders. This is differs from innovation which focuses more on the *creation* of ideas, services or procedures. Moreover, the difference between organizational change and reform has been discussed. This illustrated that a reform is a particular kind of organizational change, namely a process of change that affects a whole sector or domain such as the Social Support Act.

3.2 Defining successful change management

Change management refers to those practices aiming to renew organization's direction, structure and capabilities to address signalled problems. The determinants of successful change as described by Fernandez and Rainey (2006), only tell us something about the change tactics or processes an organization should implement to successfully transform. But what constitutes as successful change, has not become clear yet. Remarkably, it is precisely the definition of success that is lacking in most articles addressing change management (Kuijpers et al., 2014; Fernandez & Rainey, 2006; Pettigrew et al., 2001). That makes it hard to assess the actual result of change processes and casts doubt upon statements arguing that most change initiatives fail (Beer & Nohria, 2000; Kotter, 1995).

"The fact that this is a notably difficult research area should not deter us from the challenge." (Pettigrew et al., 2001, p. 701). This resembles the findings of the literature review by Kuijpers et al. (2014). They outline that many articles include an evaluation of change outcomes using different criteria. What actually constitutes as failure or success is a normative issue often not discussed (Kuijpers et al., 2014). Most change studies emphasize change outcomes in terms of process- and output criteria (see Kuijpers et al., 2014; Fernandez & Rainey, 2006). But success can be defined in multiple ways – e.g. process, output, outcome-oriented performance. There could be trade-offs among these three; for instance, a carefully constructed process might lead to desired societal outcomes (e.g. fairness, equality, equity) at the cost of output, that might be relatively low.

With other words, what counts as success is conditional and is dependent on who judges and when these assessments are made (Pettigrew et al, 2001).

The aim of this study is to deepen our understanding of the determinants that have led to successful adoption of the Social Support Act. Those indicators relevant will be discussed in the forthcoming paragraphs, emphasizing the normative aspects of success through considering the perceived performance of the change initiatives by civil servants. This conceptualization is founded on the guiding principles that the four municipalities have put central in their design of their local health systems (see Gemeente Amsterdam, 2013; Gemeente Breda, 2014; Gemeente Enschede, 2014; Gemeente Rotterdam, 2014). These are:
- The citizen is central. Citizens should have freedom of choice when choosing a health provider.
- To organize services closely to the citizen, either at household-level or district-level.
- Cohesion (within the decentralizations) between offered services.
- In partnership with health providers. Together with the municipality they are responsible for the self-reliance of their citizens.

In the forthcoming paragraphs, the guiding principles and wider developments within the context of this study, will be translated into expectations with respect to the perceived success. These expectations inform the semi-structured interviews and data analysis, hence focus as lens for the scholar to make sense of the data. If the conceptualizations of success described below seem to explain the successfulness of the adoption of the Social Support Act that these can be translated into testable hypothesis to be assessed in future research.

3.2.1   Organizational performance
The Social Support Act is part of a bigger reform that transferred various tasks within the social domain from central to lower level government. This overarching reform aims to increase the discretionary space of municipalities, allowing integral approaches for complex societal issues. Most of the individuals that struggle to arrange the care or support they need, face issues at multiple life domains. This is reflected in the third principle that implies citizens should be offered an integrated package of support. To make this possible, the decentralizations have increased the discretionary space for municipalities so they can better cater to the needs of their residents whilst doing this in a more effective manner (CBS, 2017; Trommel, 2012). The municipalities are therefore expected to be increasingly responsive and service-oriented (Dunleavy et al., 2006; Osborne, 2006).

These guiding principles predominantly follow the policy rationale underlying the Social Support Act. However, the guiding principles as formulated suggest various assumptions or indicators that might lead to a more or less successful adoption of the Social Support Act. The emphases on partnership reflects the lack of required expertise and means to implement all necessary policies or healthcare services all by themselves (Pommer & Boelhouwer, 2017; Trommel, 2012). To successfully adopt the Social Support Act thus implicates successful orchestrating the interests of the different stakeholders (Hartley, 2005). To direct and interact better with partner organizations while offering tailored services, requires municipalities to become more responsive and adaptive (Hartley et al., 2002).

Hence, an indicator of success could be whether the municipalities are perceived to become more flexible and adaptive as a consequence of the deployed change tactics.

Moreover, the focus upon partnership also acknowledges the difficulty in disentangling the indicators leading to successful treatment or support for vulnerable citizens. With other words, a municipality might find they have organized it wonderful, but the causal chain leading to the actual delivery of the service is arguably influenced by much more indicators (i.e. available expertise or capacity at health organization). In addition, this is made even harder due the lack of a generic measurement instrument assessing the self-reliance of clients that is widely used among municipalities. There are no agreed-upon standards that provide clarity in the societal outcomes of local government policy (Pommer & Boelhouwer, 2016). As success is also conditional of who judges and when, this study will stick with the perceived success by the staff of the studied municipalities. This could still yield valuable insights. Indeed, despite the wide variety of actors involved in the creation of support services, the policies municipalities implement do affect the outcome at citizen-level. Various studies illustrate, among others, the importance of contract management as predictor for the quality of delivered services (Uenk & Telgen, 2015; Uenk, 2016; Uenk, 2017). Within a contract, the rules of the game are explicated, giving those involved clear boundaries and expectations of what performances are to be expected. Furthermore, as the municipalities are responsible for the design and governance of the local health systems, the perceived performance of the municipalities by their own administration could fill the void of other performance measurements.
Precisely because successful change could also be recalled as sustainable, persisting change (Kickert, 2014). Thus successful change implies the institutionalization of change, meaning that organizational behaviour is in accordance with the desired organizational behaviour.

Therefore, another indicator of success could be whether the municipalities are perceived to successfully adhere to the guiding principles throughout implementation of the Social Support Act according to the staff.

3.2.2   Behavioral change
Moreover, when assessing organizational change, one should also look to behavioural change (Armenakis & Bedeian, 1999). As argued, change can only be successful when sustainable. That also include whether employees support the change, leading to persisting behavioural change (Armenakis & Bedeian, 1999; Kotter, 1995; Van der Voet, 2014). Fernandez and Rainey (2006) argued that, if all determinants of successful change would be present, this would lower resistance and institutionalize change. Notions of feelings of stress, cynicism, denial and resistance could be used as markers of tracking whether it will be likely that employees will behave accordingly (Armenakis & Bedeian, 1999, p. 304).

Thus, it would be interesting to deduct notions of perceived (lack of) behavioural change by interviewed staff. Where possible, these notions will be checked by available documentation. That could be reports by the Court of Auditors, letters to the city council or internal memo's. A discrepancy or confirmation of such markers could then be used to generate hypothesis for future research.

3.2.3   Preliminary conclusion

To conclude, providing an answer to the second theoretical question – to define successful change within the context of this study – is to present oneself with a challenge. Successful change is hard to define. It is conditional as it dependents on who judges and when these assessments are made. Moreover, a wide array of actors contribute to the success of the actual services to vulnerable citizens. Hence, to assess the actual quality of services, is out of the scope of this study. However, the guiding principles the studied cities have used as foundation for their local health systems, can be translated into a normative definition of success.

A successful adoption of the Social Support Act will be illustrated through three conceptualizations or indicators, distinguishing into indicators at organizational and more individual level. First, success will be discussed in terms of whether the municipalities are perceived as more flexible and adaptive as a consequence of the deployed change tactics. Secondly, success will be reviewed in terms of whether the municipalities are perceived to successfully adhere to the guiding principles of their Social Support Act policies. Presumably, this would tell us something about the perceived performance of Social Support related-tasks. Third and finally, at an individual level, it will be discussed whether notions of perceived (lack of) behavioral change by interviewed staff are present. This will be put next to available documentation, to see whether there are discrepancies or if the sketched images of interviewed staff seem to be confirmed.

In the end, this conceptualization and operationalization of success might generate hypothesis that could be tested in future research.

3.3   Road to success in change management

The vast majority of change management literature prescribes various pathways organizations should take to successfully implement organizational change. Change management practices as defined in the previous paragraphs suggest the ability of managers to purposeful act to achieve organizational change. In turn, it emphasizes a planned approach to change, wherein development of the organization is directed towards a specific goal, initiated through observing and diagnosing, followed by the implementing, monitoring and adjustments of change interventions.

As the extent of change management literature is vast, first the underlying philosophy of science will be discussed. This provides the argumentation for the chosen theories. Moreover, it shows the demarcation of this study. Afterwards, the framework of Fernandez and Rainey will be presented. Through a review of the latest empirical change management literature, the theoretical relation between change management and successful adoption of change will be discussed, providing an answer to the third theoretical question: "What is the theoretical relation between change management practices and the successful adoption of change?"

3.3.1   Various paradigms in the theory of change

Burrell and Morgan (1979) were among the first to plot the various organization theory schools into a two-by-two table. Despite first published in the late 1970s, Due to the

ability to structure intellectual work through presenting tangible sets of believe, their work is still very popular (Hassard & Cox, 2013). In their ground-breaking work, Burrell and Morgan (1979) plot organizational theory on two axis: subjectivist versus objectivist and coercion versus consensus. This allows insights into specific assumptions underlying diagnoses and interventions in the study of change, thereby providing understanding for reached outcomes (see figure 2).

First, the subjectivist-objectivist axis is based on assumptions related to ontology, epistemology, human nature and methodology (Burrell & Morgan, 1979). Together, it explains the structure and order of the social world as well as how it should be studied. The subjectivist approach emphasizes that the reality, the world as we perceive it, is the product of our own mind. Contrarily, the objectivist stance argues that reality is 'out there' and not related to our own consciousness. Hence, knowledge is objective and can be observed. Through systematic research, knowledge about the social word, human interaction can be gathered (Burrell & Morgan, 1979).

Second, the coercion – consensus axis explain society either in terms of division (coercion) or cohesion (consensus) (Burrell & Morgan, 1979). Scholars that characterize society in terms of division will argue that society predominantly consists of contradictions and structural conflicts. Individuals or groups are constraint by organizational structures and discourses. Opposite, those stating that society is found on cohesion argue that the need to regulate human affairs leads to cohesion and solidarity among individuals. It assumes that human needs can be identified and satisfied within the context of existing social systems since these needs are reflected through society (Burrell & Morgan, 1979).

Combining these axes lead to a matrix consisting of four paradigms, each with a different perspective on organizations (see figure 2). Considering this matrix, implicates that the assumptions of the organization should be critically assessed. For a more comprehensive account of these paradigms, see Burrell and Morgan (1979).
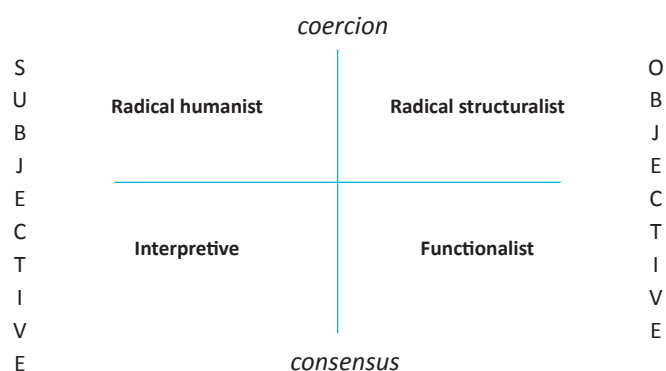
Figure 2: Paradigms of different perspectives on management theory (Burrell & Morgan, 1979)

3.3.2 Functionalist paradigm

Most attention within organization theory and change management literature is founded in the functionalist paradigm (See figure 3) (Gioia & Pitre, 1990; Burell & Morgan, 1979; Burnes, 2004; Grieves, 2006). This is arguably because the functionalist paradigm allows for possibility of social engineering, the idea that organizations are 'manufacturable' and human behaviour – to a certain extent – can be predicted (Burrell & Morgan, 1979).

Since it focuses on regulation of human affairs, it forces us to '*think about structural arrangements and functional interrelationships within organizations*' (Grieves, 2006, p. 4). Change management is then aimed re-establishing the relationships between various organizational components and its environment.

Radical humanist	**Radical structuralist**
Interpretive	**Functionalist**
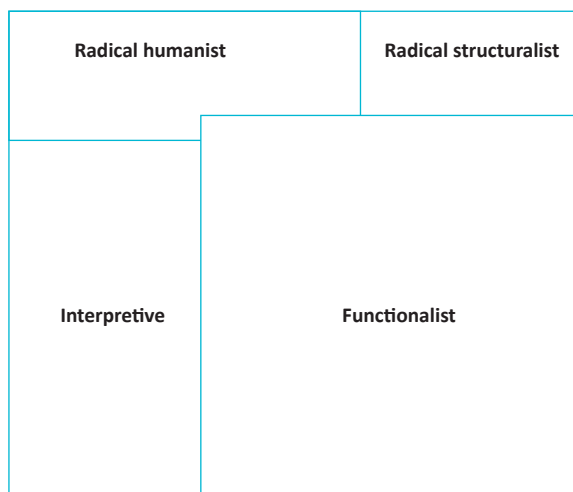
Figure 3: Representation of dominance of the functionalist paradigm in organizational theory and research (Gioia & Pitre, 1990).

This study will also assess the transformations within municipalities from a functionalist perspective, because management appears to matter in the process of change. As the decentralizations in the social domain have been imposed by central governments, from an institutionalist account one would expect a period of convergence, in which municipalities organize in a similar direction. That would make sense since local government need to comply with legislation. Hence, this would not only impose coercive isomorphism, but also mimetic isomorphism (Frumkin & Galaskiewicz, 2004; Asworth, Boyne & Delbridge, 2007). However, aside from compliance, no other strong evidence for convergence could be found in previous studies (Ashworth et al., 2007; Frumkin & Galaskiewicz, 2004). Frumkin and Galaskiewicz (2004) argue that despite the higher isomorphic pressures within the public sector compared to the private sector, still public sector managers use and capitalize these external pressures for their 'own' agenda of change (Frumkin & Galaskiewicz, 2004). In other words, these findings emphasize the importance of human agency in the process of organizational change.

Managers are therefore often seen as the agents of change within organizations. As part of their job, they have to aligning internal structures and processes to the organization's environment allowing the organization to thrive (Fernandez & Rainey, 2006). Municipalities are indeed forced to change as they need to comply with new legislation and changing citizen's expectation. Within such environmental, cognitive and resource constraints,

managers act to re-organize and re-align the organization (Pettigrew et al., 2001; Van de Ven & Poole, 1995).

This study follows aforementioned line of reasoning. Therefore, change management previously has been defined as the *"process of renewing an organization's direction, structure, and capabilities to serve the changing needs of internal and external stakeholders."* (Morgan & Brightman, 2000, p. 66)

Opting for this functionalist perspective has consequences for the kind of change interventions will be studied within the municipalities and therefore also color the perceived outcomes. The theory of Fernandez and Rainey (2006) is leadership-centric and interviewed staff have (predominantly) management positions, meaning that a management perspective is central in this study. This has consequences for the interpretation of this study, which will be given attention in the discussion.

3.3.3 Eight determinants of successful change

Based on all the above, one could conclude that *'management matters'*. However, the academic field of (public) change management has not really matured thus far. Despite the vast majority of change literature, some scholars argue that over 70 percent of the change initiatives fail (Beer & Noihra, 2000). In an attempt to bring literature on change management together, Fernandez and Rainey (2006) conducted a thorough literature review. They refer to eight points of consensus as determinants that all contribute to successful implementation of organizational change in the public sector. While their study consisted of a wide array in terms of change interventions and in terms of organizations (from business firms to public organizations), the intention has been to apply these insights to large-scale, planned, strategic and administrative changes in large public organizations. In line with earlier notions of Gill (2002) and other scholars, that stress the capacity of managers to enact change, Fernandez and Rainey (2006) have concentrates on those *'studies that emphasized the role of leaders, managers and other participants.'* (p. 5).

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1. **Managerial leaders must verify and persuasively communicate the need for change.**
2. **Leadership should develop a course of action or strategy for implementing change.**
3. **Build internal support and reduce resistance to change through widespread participation.**
4. **Support and commitment from top management should be ensured.**
5. **External support (from political overseers and key external stakeholders) should be ensured.**
6. **Sufficient resources (human, financial and technological resources) should be available to support the change process.**
7. **Institutionalize change. This involves both monitoring of change implementation but also employment of various measures to install and stimulate new patterns of behaviour.**
8. **Comprehensive change should be pursued. That means that also the subsystems of the organization should be involved in the change strategy**

Figure 4: Eight propositions (determinants) for implementing successful change, based on Fernandez & Rainey (2006).

The eight determinants that followed from this effort should not be mistaken as a road-map. "*Rather, we are arguing that each of them has a positive additive effect on the outcome of change. That is, each of these factors contributes to the successful implementation of change, or makes implementation smoother, adding to the effects of the other factors*" (Fernandez & Rainey, 2006, p. 8).

Despite being often cited, only a small minority of these articles have actually assessed these critical determinants Fernandez & Rainey (2006) proposed. Perhaps this follows from the perceived 'common-sense' nature of the propositions. However, that should never stop a scholar. Especially as Fernandez & Rainey (2006) found that leaders implementing organizational change often ignored, overlooked or underestimated these determinants. Hence, exploring the (lack of) presence of these determinants within a large-scale administrative reform in four Dutch municipalities will advance the theory or provide indications for more refined assumed relations between change tactics and their outcomes.

3.3.4   Literature review

Issued in 2006, the framework of Fernandez and Rainey might be subject to change itself. Society is rapidly changing (see Hartley et al., 2002), this might have led to new developments since their study was published. Hence, a systematic review has been conducted of those articles published after Fernandez & Rainey's article as a mean to incorporate additional insights. This would further strengthen the analytical framework. Assisted by the findings, the assumed causal relations between the various change management practices and related outcome will be discussed.

3.3.4.1 Design of literature review

An evidence-based framework has been used, to review and utilize the findings of previous studies (Pullin & Stewart, 2006). Only those articles presenting empirical evidence have been selected. Moreover, to ensure high quality research, the search was narrowed to peer-reviewed journals. This has been done by limiting the search on Scopus and Web of Science, thus excluding Google Scholar. The search strategy consisted of the phrase "Managing successful organizational change in the public sector", consistent with the title of Fernandez and Rainey's 2006 article.

It yielded 169 hits on Web of Science, and 290 on Scopus. After cross-checking article titles, 309 unique publications remained. Although all 309 referred to Fernandez and Rainey, only fifty-eight articles displayed evidence for the determinants of successful change. The vast majority of these articles did not address all factors. Hence, a distinction has been made by those articles that put all factors to the test (Kickert, 2014; McA-learney et al., 2015; Packard, 2017; Ziemba & Oblak, 2015; see table 2) and those articles that tested only one or a few number of determinants (see table 3).

Eight factors of successful change management among municipalities	Kickert, 2014	McAlearney et al., 2015	Packard, 2017	Ziemba & Obłąk, 2015	Total
Ensure the need		X	X	X	75%
Provide a plan		X	X	X	75%
Build internal support	X	X	X	X	100%
Ensure support from top-management	X	X	X	X	100%
Ensure external support	X	X	X	X	100%
Ensure sufficient resources		X	X	X	75%
Institutionalize change		X	X	X	75%
Pursue comprehensive change		X	X		50%

Table 2: Assessing determinants of successful change. If an X is shown, the article presents evidence that the presence of this factor could (partially) explain the change outcome.

3.3.4.2 Determinants of successful change in practice

The difference between the results, most notably between Kickert (2014) and the others, are striking yet illustrative for the field of change management in the public domain. It arguably follows from the fragmented focus in the studies. Both in terms of organizations and in the content of change. The studies of Kickert (2014) and Ziembla and Obłak (2015) reside in Europe, concerning Dutch Ministries and two Polish public organizations. Contrarily, McAlearney et al. (2015) and Packard (2017) studied health organizations in the United States. In terms of content, whereas Packard (2017) and Kickert (2014) assessed comprehensive reorganizations, McAlearney et al. (2015) and Ziembla and Obłak (2015) focused upon the implementation of information systems.

A fifth study that tested all propositions by Fernandez and Rainey (2006) assessed the perceived importance of these determinants by professional consultants (Fattore et al., 2018). Fattore et al. (2018) argue that consultants find a planned, well-thought and executed plan that considers all determinants important. However, it does not provide further empirical evidence whether these determinants actually have led to specific outcomes. Hence, their study has not been taken into account in the analysis.

Despite the differences in topic and kind of change, it raises strong support for the claim that support from top management, internal and external stakeholders are vital for change initiatives to succeed. For the other determinants, the findings of Kickert (2014) deviate from the other studies. As his study concerned Dutch public organizations, it might reveal insights also applicable for Dutch municipalities. Conditions that are deemed pivotal to success, such as the provision of a plan, availability of resources and the pursuit of comprehensive change, did not apply in the case change trajectories of the Dutch Ministries (Kickert, 2014). He argued that the 'grand visions' did not necessarily relate to a felt need to change nor felt by heart by public officials. Rather, due to the political nature of public organizations, plans are often just drawn for their political supervisors (Kickert, 2014). The condition of resources was operationalized as the availability of a social plan for necessary layoffs. These did not relate to the failure nor success of any reorganization. Moreover, Kickert (2014) findings suggest that incremental, gradual change is

more effective than planned and radical change. The latter is most prone to resistance, whereas the first form of change often goes unnoticed and is perceived by insiders as less threatening, thus should have more success. Finally, Kickert (2014) did not find support for the claim of institutionalizing change, as he argued it to be a tautology: *"A condition for successful implementation of a change is that in the end after the implementation the change is accomplished and remains so"* (p. 709).

However, whether the findings of Kickert (2014) also hold in the context of Dutch municipalities, is unclear. Moreover, the fragmented field of public change management literature indicates that the assumed causal mechanisms of the conditions of successful change should receive more attention to assess how these hold in various contexts. This will be done in the following paragraphs.

Eight factors of successful change management		Articles
Ensure the need	Alfes et al., 2010; Donahue & O'Leary, 2011; Packard et al., 2013; Van der Voet et al., 2015; Yang & Pandey, 2008; Metz & Kulik, 2008;	6
Provide a plan	Ayers, 2013; Andrews et al., 2011; Isett et al., 2011;	3
Build internal support	Alfes et al., 2010; Azzone & Palermo, 2009; Carassus et al., 2014; Conway & Monks, 2011; Cooksey-Cambell et al., 2013; Eliuz et al., 2017; Hammond et al., 2011; Hansen, Nørup, 2017; Isett et al., 2011; Lux & Petit, 2016; Metz & Kulik, 2008; Million & Bossaller, 2015; Packard et al., 2013; Packard et al.,2015; Schultz et al., 2016; Solstad & Pettersen, 2010; Van der Voet et al., 2014; Van der Voet et al., 2015; Weber et al., 2011; Wright et al, 2013; Yang & Hsieh, 2006.	21
Ensure support from top-management	Andersen, 2010; Campbell, 2018; Carassus et al., 2014; Cooksey-Cambell et al., 2013; Eliuz et al., 2017; Fernandez & Wise, 2010; Goltz & Sotirin, 2014; Hansen, 2011; Hansen, Nørup, 2017; Isett et al., 2011; Kassim, 2008; Khan et al., 2015; Mastrofski & Willis, 2010; Metz & Kulik, 2008; Packard et al., 2013; Ritz et al., 2012; Schultz et al., 2016; Serrano-Cinca et al., 2009; Solstad & Pettersen, 2010; Van der Voet et al., 2014; Van der Voet et al., 2015; Van der Voet et al., 2016; Van der Voet, 2014; Van der Voet, 2016; Weber et al., 2011.	25
Ensure external support	Asquer, 2015; Carassus et al., 2014; Donahue & O'Leary, 2011; Hansen, 2011; Henningsson & Van Veenstra, 2010; Lee & Kim, 2012; Lux & Petit, 2016; Van der Voet et al., 2015; Yang & Hsieh, 2006.	9
Ensure sufficient resources	Alfes et al., 2010; Azzone & Palermo, 2009; Bellou & Chatzinikou, 2015; Buick et al., 2015; Carassus et al., 2014; Conway & Monks, 2011; Cooksey-Cambell et al., 2013; Janssen et al., 2007; De Tormes Eby & Laschober, 2014; Fernandez & Wise, 2010; Fernandez, & Pitts, 2011; Hansen, Nørup, 2017; Kroll & Moynihan, 2015; Lee & Kim (2012); Mergel & Desouza, 2013; Serrano-Cinca et al., 2009; Velez-Lapão & Dussault, 2011; Pitts et al, 2010; Wiedner et al., 2017.	19
Institutionalize change	Isett et al., 2011; Antón et al., 2014	2
Pursue comprehensive change	Van der Voet et al., 2014	1

Table 3: Literature review of articles citing 'Fernandez & Rainey, 2006'. Some articles investigate or find evidence for multiple determinants to succesfull implementation of change

3.3.4.3 Assumed causal mechanisms

The vast majority of articles presenting empirical evidence and referring to Fernandez and Rainey (2006) only studies one or a small number of determinants of successful change. As table 3 illustrates, most focus is directed to overcome internal resistance, emphasize the position of top management and stresses the importance of sufficient resources. However, as Fernandez and Rainey (2006) argue that all factors positively contribute to successful change, all determinants will be discussed. The findings of the literature review will help to deepen our understanding the causal mechanisms underlying the assumed determinants of successful change. Moreover, a better understanding allows to translate these presupposed relations into a framework operating as a lens feeding into the analysis (see table 4 for the enumerated assumptions). These theoretical assumed causal relations have been used to construct the semi-structured topic-list and informed the coding process. This is discussed more elaborately in the method chapter. As the determinants are supposed to have a positive additive effect on each other *and* the outcome of change, they show some overlap and will therefore be discussed in groups (cp. Kickert, 2014).

Determinant	Assumed causal mechanism
Ensure the need:	• It is perceived important that the communicated need for change is in accordance with the felt need for change.
Provide a plan:	• It is perceived as important for successful implementation of change to transform the need for change in a course of action or strategy in written documentation.
Build internal support:	• Employees are actively involved in the change trajectory.
Ensure support from top-management:	• Employees perceived commitment and support from top-management. • Employees believed that leadership was distributed throughout the organizational change processes.
Political Support:	• Political support is perceived as important for the organizational changes according to the respondents.
External support from health providers:	• Relevant stakeholders (e.g. healthcare providers) should be actively involved in the implementation of the Social Support Act.
Availability of resources:	• Employees believed that sufficient support – both instrumental and emotional –to implement the Social Support Act successfully.
Institutionalize change:	• The change process should involve interventions on the processes, thereby altering the way individuals work. • Training and development should be given to facilitate the new way of working and desired behavior.
Pursue comprehensive change:	• The change trajectories should be comprehensive, affecting all departments within the social domain and related departments. • The interdependencies between the relevant organizational subsystems should be understood to prevent necessary 'corrections' or new (smaller) reorganizations.

Table 4: Overview of the eight determinants of Fernandez and Rainey (2006), translated in a framework to assess the data.

3.3.4.3.1 Ensure the need, provide a plan

The theory behind the planned change can be characterized as an approach to understand group behavior by mapping and through action research; as change requires action, interventions should be made based on a correct analysis of the situation and identification of all possible alternatives so that the best option can be put forward

(Burnes, 2004). Action research takes place throughout the three stage process of un-freezing, changing and refreezing the bureaucratic organization (Lewin, 1951). Conse-quently, tasks, responsibilities and authority are redesigned, meant to provide a better fit with the organization's goals and environment. The new structure then ought to facilita-te and institutionalize a specific new way of working.

To achieve the momentum for organizational change, it should be 'unfrozen', that is, the members should feel the need to change. As Donahue and O'Leary (2011) show, the presence of disconfirming information (e.g. crises or galvanizing events) or external pres-sure (legislation) does not automatically lead to a felt need to change. It needs to be ac-cepted. Thus the need for change should be translated in a desire for change (Alfes, Truss & Gill, 2011).

Translating the need for change often concerns oral and written communication. The latter can take form as starting document, where the current state is reviewed and a desired (end) state is envisioned (Alfes et al., 2010). To achieve the momentum to create change, this includes among others, a vision of the desired organizational structure, ways of working, and culture (Van der Voet et al., 2015). Such guiding values can serve as mantras in change projects (Packard et al., 2013). According to Fernandez and Rainey (2006) such visions should be translated into a roadmap with milestones, time path and possible deliverables.

Yet, some scholars argue that in governmental organizations operating directly under a political appointee, the need for change and its translation in a plan are not as vital for change to succeed (Kickert, 2014; Isett et al., 2011). Political accountability might require written plans, but that does not necessarily mean that the written need for change is in accordance with the perceived need for change (Kickert, 2014; Isett et al., 2011). Change might be perceived as ordinary budget cut rather than as a mean to work more efficient. But, as Kickert (2014) argues, as the civil servant is loyal to its political master, he will still follow.
Moreover, the extent of detailed planning is challenged. So-called '*blueprint-planning*' is often criticised in practice (Kickert, 2014; Isett et al., 2011). Indeed, various implementa-tion studies indicate that in reality, strategies and plans can change during the process (see Lipsky, 1980; Pressman & Wildavsky, 1984). Hence, relative little empirical evidence supports the condition of providing a plan other than the communication of a vision.

As the evidence is mixed concerning the importance of the need for change and corres-ponding felt need for change, this will be translated into a theorized assumption which will be used as lens when analysing the data. Moreover, as the need for change should be translated into a vision of desired state or direction, it will be assessed whether such written documentation was contributed to the outcome of change.

> *Ensure the need: It is perceived important that the communicated need for change is in accordance with the felt need for change.*
> *Provide a plan: It is perceived as important for successful implementation of change to transform the need for change in a course of action or strategy in written documenta-tion.*

3.3.4.3.2   Build internal support, ensure support from top-management

As can be witnessed from the literature review, most articles are concerned with influencing change attitudes of employees to overcome or lower resistance. These articles dwell upon communication and participation techniques or focus upon leadership styles. To create positive attitudes towards organizational change, one needs more than simply ensuring the need and presenting a binding vision. As employees might not feel share communicated the need for change, internal resistance can still be limited through continuous and adequate communication about the change processes and how employees are able to participate (Kickert, 2014).

Aside from communication trajectories, Hammond, Gresh and Vitale (2011) underline the importance of involving all stakeholders that are affected in the process of organizational change, by asking for their feedback and to assemble a project team of opinion leaders. Through involvement of employees, consistent with adequate information, they might act as the drivers of change. Moreover, if individuals participate more frequently in change activities and are more involved, they are more likely to perceive the organizational change as successful (Packard et al., 2015).

Some studies also differentiate among groups of employees (see Conway & Monks, 2011; Van der Voet, 2016). These scholars focused on middle managers, as they are often the targets of top-down initiated changes, while middle managers also can function as agents of bottom-up initiated change. This specific group can contribute positively to change commitment by providing high quality change information and through stimulation of employee participation in the implementation of actual change (van der Voet, 2016). Contrarily to top- or senior-management, direct supervisors are able to communicate more directly with their subordinates, through personal and informal channels on an everyday basis. Hence, they are also an important mean to overcome resistance and gain internal support for organizational change.

However, participation and empowerment only works if top management shows commitment towards these participatory strategies. When input is perceived as merely consultation rather than actively co-shaping the change strategy, resistance to change can increase (Ansell & Gash, 2008; Sminia & Van Nistelrooij, 2006). The quest for internal support for change is therefore also related to the commitment of top-management to change.

It seems self-evident that the support by top-management for change is crucial (Kassim, 2008; Serrano-Cinca et al., 2009; Fernandez & Wise, 2010; Ritz et al., 2012; Metz & Kulik, 2008; Van der Voet et al., 2016). Leaders are often hailed as catalysts for change, proposing new ideas or championing them, through inspiring others and by leading the transformation. Top managers often have the network to create a supporting coalition of change, or too encourage and reward innovative behavior. Moreover, the leadership is often in the position to allocate the resources necessary for the search, acquisition and implementation of initiatives (Fernandez & Rainey, 2006). Therefore, Borins (2002) pleads for supportive leadership. He found that bottom-up initiatives are happening more often than expected and argued that the initiator often acts as informal leader. (Top) management should give space to these initiators by fostering a supportive organizational climate. This can be difficult, as people need to feel confident that they will not

be punish if they attempt the change process and make mistakes along the way (Dona-hue & O'Leary, 2011). A supportive climate could be created by consulting staff frequent-ly, to recognize innovators (either formal or informal), or to promote, protect and public-ly championing innovators that are proven successful (Borins, 2002). By creating a supportive work environment, leaders are able to enhance affective commitment to change and able to prevent or lower resistance (Ritz et al., 2012).

This idea of supportive leadership could be ranked among the distributed leadership perspective. This seems to form a contradiction from the leadership perspective under planned change (see table 5). The more traditional and managerial forms of leadership seem to exclude more distributed, participative forms of leadership. Yet, it should be seen as a balance. Indeed, *'managerial authority remains necessary in order to provide direction and stimulate employees to take on a leadership role'* (Van der Voet et al., 2014; p. 188). Ultimately, participation and leadership thus becomes a two-way street; leader-ship should be willing to cede leadership to others while subordinates must be capable and willing to take this on.

Planned change	Emergent/Incremental change
*Traditional leadership perspectiv***e** • Leadership role concentrated in senior management	*Distributed leadership perspective* • Leadership role is divided over large number of individuals and hierarchical levels
Leadership activities Communication • Stressing the need for change • Making the content of change personal • Reducing ambiguity • Identifying and taking away resistance to change	*Leadership activities* Communication • Stressing the need for change • Stimulating discussion about change among employees
Being a role model • (Senior) management functions as the main role model during change	Highlighting role models • Highlighting employees as role models
Appointments and dismissal of employees • Dismissal of former culture champions • Formalizing selection procedures	Institutionalization the new leadership model • Applying the change on yourself • Activation of organizational members

Table 5: Leadership roles, responsibilities and behavior in planned and emergent change. Based on Van der Voet et al., 2014; p. 187

Following the presented evidence, the emphasis on participation feeds the expectation that those municipalities having invested in the involvement of their employees in the process of change, are less likely to encounter resistance towards change. Moreover, as commitment from top management is experienced key in various implementation and evaluation studies, it is expected that such support is also needed in terms of organizati-onal change in the studied municipalities. Finally, to foster wide-spread involvement and participation and support from top-management, it is expected that those municipalities experiencing distributed leadership are more likely to positively perceive the process of change and its outcomes.

Build internal support: Employees are actively involved in the change trajectory.
Ensure support from top-management: Employees perceived commitment and sup-port from top-management.
Ensure support from top-management: Employees believed that leadership was distri-buted throughout the organizational change processes.

3.3.4.3.3 Ensure external support

The support of external stakeholders in the process of change is important. If they do not understand nor accept the implications of change, it is more likely that change will not be sustainable (Donahue & O'Leary, 2011). Especially for outsiders, it is hard to see and understand what is going on in an organization. If the expectations of these external stakeholders are inconsistent with what will result from the organizational change, this could result in additional friction and pressure to prevent or rewind any change (Donahue & O'Leary, 2011; Kickert, 2014; McAlearney et al., 2015; Packard, 2017; Ziemba & Obłak, 2015).

Moreover, from the studies becomes clear that the concept of external stakeholders is quite broad and vague. For instance within the context of reforms among Dutch Ministries, Kickert (2014) distinguished external political support from external stakeholders' support. *'Support, or at least formal approval, by the political apex of a ministry is a necessary condition for success, both in a formal and practical sense.'* (Kickert, 2014, p. 707). He found that, besides the formal-juridical requirement of political top giving consent for organizational change, it is hard to create support for the changes if the Minister does not advocate in favor of change.

For most public organizations political support is regarded as important, yet it is no guarantee for successful implementation (Carassus et al. 2013, Henningsson & Van Veenstra, 2010; Lee & Kim, 2012). Public organizations might be more or less exposed to direct political oversight and vary in the extent to which they deal with supervisory agencies or with other partner organizations (Carassus et al. 2013, Henningsson & Van Veenstra, 2010; Lee & Kim, 2012).

For the studied municipalities, not only the political support from their respective councils will arguably be important, but also the partner organizations in the social domain. Delivery of these services requires expertise, not necessarily present in the administrative organization. Hence, municipalities increasingly rely on partner organizations to implement policies (Pommer & Boelhouwer, 2017, p. 42; Trommel, 2012).

To conclude, the support of external stakeholders seems a determinant of successful change. Studies showed that this condition should be translated into political overseers (i.e. City council) and relevant partner organizations to implement the Social Support Act.

> *Ensure support from external stakeholders: Political support is perceived as important for the organizational changes according to the respondents.*
> *Ensure support from external stakeholders: Relevant stakeholders (e.g. healthcare providers) should be actively involved in the implementation of the Social Support Act.*

3.3.4.3.4 Ensure sufficient resources

Often, the implementation of change is accompanied with substantial investments. The perceived importance of having sufficient resources is reflected in the amount of studies arguing that the (lack of) availability explained the outcome of change. Resources seems an all-purpose word. Among others, it has been defined as technical support, training and development, recruitment of (temporary) additional capacity or simply finances to acquire the needed implementation capacity (Alfes et al., 2010; Azzone & Palermo, 2011;

Bellou & Chatzinikou, 2015; Fernandez & Pitts, 2011; Fernandez & Wise, 2010; Hansen & Nørup, 2017; Serrano-Cinca et al., 2009; Velez Lapão & Dussault, 2011; Yang & Hsieh, 2007). A bit more narrowed is the conceptualization by De Vries and Balasz (1999). They argue that both instrumental and emotional support should be offered to staff. Instrumental support can be given by superiors through handing over resources to employees, helping them cope with the changes. This includes the ability to conduct pilots or experiments, acquire materials or to follow training. However, staff should also receive emotional support (De Vries & Balasz, 1999; (Bellou & Chatzinikou, 2015). Employees should experience sufficient space to discuss their concerns and should be reassured of the values of change, for instance through coaching. They show that employees are less likely to experience a burnout during episodic change, if they believe their training was well organized and effective and their support was ample (Bellou & Chatzinikou, 2015). This seems to fall in line with previously discussed notion of supportive leadership.

Hence, as a large number of studies suggests that resources providing instrumental and material support is important for change to sustain and succeed, it is expected that this pattern also emerges in the implementation processes of the Dutch municipalities.

> *Ensure sufficient resources: Employees believed that sufficient support – both instrumental and emotional –to implement the Social Support Act successfully.*

3.3.4.3.5   Institutionalize change, pursue comprehensive change

Kickert (2014) criticized institutionalization of change for being a tautology for success, rather than a condition. Institutionalization implies sustainability, thus if not institutionalized than the change is not lasting. However, Fernandez and Rainey (2006) predominantly meant that managers should actively intervene in the organization, among others by introducing new procedures or altering the organizational culture through training and development programs. By implementing practices that challenge the current routines of employees, these practices function as anchors for the new desired behavior (Kotter, 1995; Armenakis & Bedeian, 1999; Van der Voet, 2014; Packard, 2017). Institutionalization of change is predominantly fostered through monitoring (Packard, 2017; Ziemba & Obłąk, 2015). Monitoring allows to keep track of progress and to intervene if necessary. Moreover, it can be used to measure and value the change performance and present this to the staff to demonstrate its success. McAlearney et al. (2015) adds that time is also an important element when institutionalizing change. In their study, in the final stages of the change process the EHR deployment strategy was to allow their employees time to adapt. This aimed to consolidate the improvements while continuing the enactment of change, and successfully did so.

Despite these sound theoretical assumptions, theoretical evidence remains limited. It is takes time to alter the organizational culture and routines that steer day to day activities, making it difficult to assess for researchers whether changed behavior is really due to the organizational change. Isett et al (2011), studied the reorganization of a New York City health agency. They argued that indeed, interventions in the work processes, such as the introduction of swipe cards, model offices and new telephone systems changed the way the frontline workers did their work. It fundamentally altered their work, consistent with the 'why' of their work. At the same time, at the administrative level, alignment between the vision and intended effect of the change was not very thorough. Other than a mont-

hly staff meeting, there is not enough capacity to implement ideas resulting from the meetings (Isett et al., 2011). Their study illustrates the difficulty of institutionalization of change and the pursuit of comprehensive change.

Fernandez and Rainey (2006) assume that change cannot be institutionalized if not all subsystems of the organization are affected by change and realigned. Hence, the institutionalization of change coincides with the pursuit of comprehensive change. However, in practice, to understand all interdependencies between the various subsystems within organizations and their environment is very difficult. Especially in complex environments, it is hard to oversee all consequences of change processes. Therefore, the discussion whether comprehensive change should be pursued resembles the debate between the planned and incremental approach to change.

This is nicely illustrated in the study of Kickert (2014). He argued that, precisely because comprehensive change affects the whole organization, this would always be met with resistance. Contrarily, incremental and gradual change has the least dramatic consequences on the short-term. As most of these alterations would be small, these often go unnoticed and are therefore perceived as non-threatening to the bureaucratic organization and thus easier to realize (Kickert, 2014; Weick, 2000). Hence, it could be that the pursuit of comprehensive change is extra difficult in administrative organizations. The studies of McAlearney et al. (2015) and Packard (2017), situated in the healthcare domain, stated that the success of the organizational changes could be attributed to the institutionalization of change and the fact that it addressed the whole organization.
Rather, it seems that the approach to change should be congruent with the content of change (Van der Veer et al., 2014). In their study, an Engineering department from a municipality wanted to address and change its core values. Now paternalistic towards their environment, becoming more responsive was the goal. Moreover, the dominant management style of directive and top-down relations should be replaced by management through delegating responsibilities and participative decision-making (Van der Veer et al., 2014). Yet, a planned and comprehensive approach to change did not foster such transition. Contrarily, this reinforced rather than challenged the bureaucratic nature of the department (Van der Veer et al., 2014).

The conflicting findings on the perceived importance of institutionalization of change and the pursuit of comprehensive change encourages to further assess how this could be a determinant to the successful adoption of the Social Support Act among the studied Dutch municipalities. However, with respect to the pursuit of comprehensive change, this will be limited to those departments or subsystems relevant for the implementation of policies under the Social Support Act.

> *Institutionalize change: The change process should involve interventions on the processes, thereby altering the way individuals work.*
> *Institutionalize change: Training and development should be given to facilitate the new way of working and desired behavior.*
> *Pursue comprehensive change: The change trajectories should be comprehensive, affecting those departments or subsystems relevant for the implementation of policies under the Social Support Act.*

Pursue comprehensive change: The interdependencies between the relevant organiza-tional subsystems should be understood to prevent necessary 'corrections' or new (smaller) reorganizations.

3.3.4.4 Preliminary discussion

The insights from the literature review have been used to translate the determinants of successful change as proposed by Fernandez and Rainey (2006) into a framework that help to disentangle the variables emerging from the data (see table 4). Based on the lite-rature, it is expected that the presence of all these determinants has a positive additive effect on the outcome of the change trajectories. The outcomes of the changes have been defined in both organizational and individual levels of success. In terms of organi-zational success, this will be illustrated through the perceived performance of Social Sup-port-related task (following the four guiding principles of the municipalities) and whether the municipalities have become more flexible and adaptive as consequence of the de-ployed change tactics. In terms of successful change on individual level, it will be discus-sed whether notions of perceived (lack of) persisting behavioral change by interviewed staff is present.
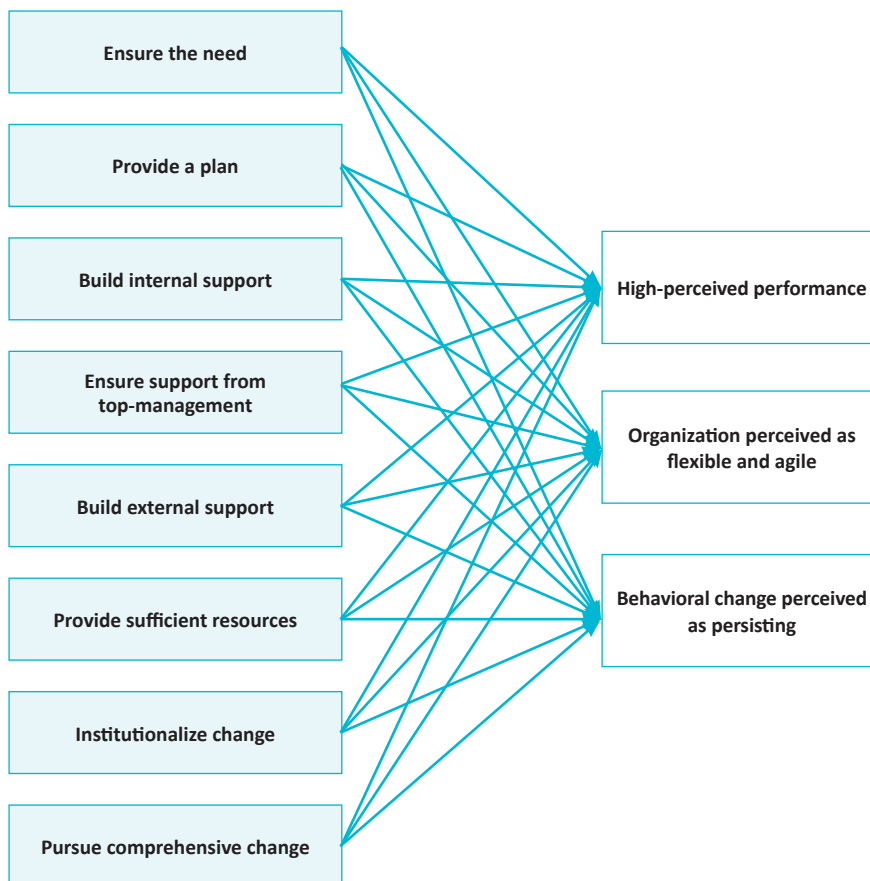
Figure 5: Conceptual framework, relating the determinants of successful change to the expected outcomes based on theory

4 Methodology

This chapter discusses the research design. It will be argued that a multiple case study design best fits the question at hand. Moreover, the manner in which the data – interviews and documents – have been collected and subsequently, analyzed, will be presented. Finally, an assessment is presented of the quality of the possible findings and how results should be interpreted.

4.1 Research Design: Multiple case study

This study has an explorative character, to assess whether the framework of Fernandez & Rainey (2006) holds in the context of the decentralizations in the social domain in the Netherlands and if so, how it functions. This requires to explore the nature of the accessed case. Therefore, a qualitative case study design has been chosen (Bryman, 2012; Blatter & Haverland, 2012). Usage of case studies allows to assess in-depth the presumed causal mechanisms between the independent variables (determinants of successful change) and the dependent variables (i.e. success of change) while leaving the possibility for other variables to emergence that might be (partially) responsible for successful adoption of the Social Support Act (Flyvbjerg, 2006; Gerring, 2006).

Every case is being treated separately to catch as many relevant details as possible. Not only does this lead to 'rich' data, it also increases the likelihood of finding variables that explain the nature and the course of the change trajectories. Ultimately, this leads to a rich overview of all the cases. Through carefully comparing, the most important variables and factors explaining the (lack of) success will be distinguished. Consequently, this might provide directions for future research.

4.2 Data collection

Within this study, two main sources of data have been used: interviews and documents. First, the respondent selection and implications for the sample will be discussed. Afterwards, the systematic manner to gather the documents will be described.

4.2.1 Respondent selection
To grasp the process of change trajectories, expert-interviews have been used. Respondents have been selected based on reputational criteria, that is, whether they were close to the decision-makers or being the decision-maker themselves in the implementation and policy-making procedure (Tansey, 2007). Based on the following criteria, the respondents have been chosen that met a minimum of two conditions:

- Employed by the municipality preceding, during, and after the process of change
- Involved in the change management practices related to the implementation of the Social Support Act
- Having a management position

Ideally, respondents met all three requirements. However, practical constraints render it impossible to select a sample that requires to all conditions. Some positions were temporary (e.g. leadership of project groups, respondent C and respondent O) and resolved quickly after the Social Support Act went into being. However, implementation might still continue. Also some persons were recruited or functions created after the transition on 1 January 2015 (e.g. the interviewed contract managers in Amsterdam, head of department at ABV). This should be considered when interpreting the results. See figure 6 for an anonymized list of respondents.

Municipality		Respondent	Position
Amsterdam	7	A	Senior Strategist Organizational development
		B	Strategic Advisor HR cluster Sociaal
		C	Director program Organizational development
		D	Advisor Social Support Act
		R	Contract manager
		S	Contract manager
		T	Manager Care
Breda	5	E	Policy Advisor Social Support Act
		F	Policy Advisor Social Support Act
		G	Head of service chain Social Support
		H	Contract manager
		I	Team leader 'Uitvoering' Wmo
Rotterdam	6	J	Controller at Rotterdam
		K	Head of department at ABV
		L	Team manager at PGW&Z
		M	Contract manager
		N	Rayon manager
		O	Deputy Director Project 'Access'
Enschede	2	P	Cluster Manager Care
		Q	Strategic Policy Advisor
Total	20		

Table 6: Respondents and their positions per case.

Aforementioned procedure led to a total of twenty interviews. There is no widespread consensus about the number of respondents that must be interviewed to enable good qualitative research (Bryman, 2012; Sandelowski, 1995). Ideally, one focuses on data saturation (Morse, 2004). Unfortunately, as this study took place after the local elections, data gathering coincided with the coalition negotiations. This meant that it was difficult to reach the civil servants involved in the implementation process of the Social Support Acts. In the case of Enschede, it meant that only two civil servants could be interviewed. This should be considered when interpreting the results.

To retrieve 'rich' data, the respondents were interviewed using a semi-structured interview-technique. The topics, derived from the theory and captured in the theoretical assumptions, provided structure throughout the interviews while leaving sufficient space for emerging topics deemed important by the respondent that might not have been reflected in the literature (Bryman, 2012; Silverman, 2011). The average duration of inter-

view was about one hour. See appendix B for the interview protocol.

A final remark should be made regarding the number of respondents per case. Due to practical constraints, only two officials in Enschede could be interviewed. Still, the case is considered relevant. As it concerns a large municipality yet located outside the Randstad (just as Breda), it presents a different case than Amsterdam and Rotterdam. It offers additional insight in the change management practices deployed to adopt the Social Support Act. Moreover, the officials interviewed can be recalled as experts, as they have a long tenure at the municipality and were well-involved in the implementation of the Social Support Act. This is supported by the documentation, consulted to verify their claims. This triangulation of findings led the scholar to believe that the case could still be used in this study. However, one should be extra careful when drawing conclusions from the findings in Enschede due to the limited number of respondents.

4.2.2 Document selection

The second source of data was derived from documents and included among others: presentations, evaluation reports, and policy documents. These documents reflect the change management procedures and/or indicate possible outcomes. Hence, these illustrate the change trajectory and therefore help to capture the written reality of the change as well (Bryman, 2012).

These documents were mainly retrieved via the publicly accessible council information systems. Information has systematically been collected, through examining all publically reported council meetings and relevant committees (for instance Commission Healthcare in Amsterdam) since January 2012 up to May 2018. Documents referring to the (progress of the) implementation of the Social Support Act have been retrieved and coded into Software program Nvivo. In total, the search yielded over 200 documents that have been coded.

In addition to the publically accessible documentation, respondents have been asked to send policy documents they perceived important in the change procedure. However, most of these documents were already publically accessible. A small number of documents contained sensitive information or documents were not archived at the computer of the respondent, hence could not be shared. To conclude, this only yielded a few additional documents. An overview of the used documentation can be found below, sorted per case.

Amsterdam

Code	Type of Document	Author (org.unit)	Document Name	Year of publ.	Pages
DA-01	Policy document	Administrative organization	Kadernota 2013	2012	78
DA-02	Report	LPBL	Indicatieve MKBA SamenDOEN – version 2.2, Oktober 2012.	2012	35
DA-03	Council decision	City Council	Instemmen met de extracomptabele begrotingswijziging '1 stad, 1 opgave' 2013	2013	5
DA-04	Letter	Executive Board	Afspraken verdere uitwerking van 1 Stad 1 Opgave	2013	2
DA-05	Addendum	Administrative organization	Programma van eisen en centrale kaders voor de Aanpak Wijkzorg 20141	2013	13
DA-06	Policy document	Administrative organization	Koersbesluit. Amsterdamse Zorg: Noodzaak Voorop. Herinrichting Wmo	2013	38
DA-07	Letter	Executive Board	Spoorboek organisatieontwikkeling Gemeente Amsterdam	2013	18

Continuation Amsterdam

Code	Type of Document	Author (org.unit)	Document Name	Year of publ.	Pages
DA-08	Report	Court of Auditors Boroughs Amsterdam	Vernieuwing in het sociaal domein	2013	56
DA-09	Addendum	Administrative organization	De nieuwe Wet maatschappelijke ondersteuning (Wmo 2015) in het kort	2014	9
DA-10	Letter	Alderman	Samenvatting wettekst; financiële doorrekening nieuwe Wmo voor Amsterdam	2014	4
DA-11	Letter	Administrative organization	Aanpassingen nav advies Wmo-adviesraad	2014	2
DA-12	Minutes	Council committee	Uitvoeringsbesluit Amsterdamse Zorg Noodzaak Voorop (eerste fase)	2014	15
DA-13	Minutes	Council committee	Uitgangspunten voor het contracteren van Hulp bij het huishouden voor 2015 en 2016	2014	6
DA-14	Report	Administrative organization	Voortgangsrapportage Samen DOEN in de buurt 2014	2014	19
DA-15	Policy document	Administrative organization	Eén organisatie, in dienst van Amsterdam. Van buiten naar binnen, met één gezicht naar buiten.	2014	2
DA-16	Policy document	Administrative organization	Bijlage 1: ambulante ondersteuning	2014	2
DA-17	Minutes	Administrative organization	Bestuurlijke werkconferentie Wijkzorg 6 december 2013	2014	4
DA-18	Addendum	Administrative organization	Samenvatting plannen in de eerste 5 wijken	2014	6
DA-19	Policy document	Administrative organization	Meerjarenbeleidsplan Sociaal Domein 2015 – 2018	2014	46
DA-20	Policy document	Executive board	Verordening maatschappelijke ondersteuning Amsterdam 2015	2014	15
DA-22	Presentation	Administrative organization	Organisatieontwikkeling 2014 – 2016. Werk in uitvoering. Beantwoording raadsmotie 'masterplanning'	2014	32
DA-23	Policy document	Executive board	Nota van Beantwoording op de Concept Wmo-verordening 2015	2014	84
DA-24	Addendum	Executive board	Bijlage 1C: Vaststellen van wijzigingen ten opzichte van het collegebesluit over de hoofdstructuur en het voorgenomen collegebesluit over fijnstructuur (periode medio februari t/m medio augustus).	2014	27
DA-25	Letter	Executive board	Reactie op Advies COR over de fijnstructuur van de nieuwe organisatie	2014	4
DA-26	Letter	Administrative organization	Besluitvorming fijnstructuur van de gemeentelijke organisatie	2014	6
DA-27	Infographic	Administrative organization	Organisatie ontwikkeling 2014-2016	2014	1
DA-28	Policy document	Administrative organization	Programmaplan Doorontwikkeling Financiële Administratie	2015	56
DA-29	Letter	Alderman	Beëindiging van de RRP status voor de 3 decentralisaties	2015	2
DA-30	Letter	Alderman	Inkoop Ambulante ondersteuning, Dagbesteding, Kortdurend verblijf en Hulp bij het huishouden 2016	2015	4
DA-31	Policy document	Administrative organization	Samenvatting. Voortgangsrapportage Q1 2015: Programma decentralisatie AWBZ en herinrichting Wmo	2015	2
DA-32	Policy document	Alderman	Ervaringen met nieuwe Wmo taken eerste kwartaal 2015	2015	6
DA-33	Policy document	Administrative organization	Voortgangsrapportage Q1 2015. Programma Decentralisatie AWBZ en Herinrichting Wmo	2015	12
DA-34	Policy document	Executive board	Plan van aanpak evaluatie Verordening en nadere regels maatschappelijke ondersteuning 2015	2015	2
DA-35	Policy document	Alderman	Inkoop Wmo 2015 e.v.	2015	6

Continuation Amsterdam

Code	Type of Document	Author (org.unit)	Document Name	Year of publ.	Pages
DA-36	Letter	Alderman	Europese aanbesteding Wmo indicatieadvisering	2015	2
DA-37	Policy document	Administrative organization	Evaluatie RRP 3 decentralisaties en voorstel tot beëindigen RRP status 3 decentralisaties	2015	10
DA-38	Policy document	Administrative organization	Uitvoeringsoverzicht bij de Agenda informele zorg en vrijwillige inzet 2015-2017	2015	12
DA-39	Policy document	Council committee	Voortgangsrapportage nieuwe en gewijzigde taken Wmo 2015	2015	7
DA-40	Policy document	Administrative organization	Voortgangsrapportage nieuwe en gewijzigde taken Wmo-2015	2015	55
DA-41	Policy document	Council committee	Stand van zaken en ervaringen met Wijkzorg	2015	7
DA-42	Letter	Alderman	Ontwikkelingstraject Kwaliteit Wmo ondersteuning	2016	4
DA-43	Policy document	Administrative organization	Evaluatie Wmo 2015. Vervolg op de 'Voortgangsrapportage nieuwe en gewijzigde taken Wet maatschappelijke ondersteuning (Wmo) 2015'	2016	18
DA-44	Policy document	Council Committee	Duur van contracten in de Wmo	2016	7
DA-45	Policy document	Administrative organization	Verantwoording Wmo en Jeugdwet 2016	2016	8
DA-46	Letter	Council committee	Evaluatie Wmo 2015	2016	5
DA-47	Report	Administrative oragnization	Monitor Wijkzorg 2015	2016	13
DA-48	Policy document	Council committee	Subsidieregeling basisvoorzieningen in de stadsdelen	2016	4
DA-50	Report	Administrative organization	1e bestuursrapportage 2016. Maatschappelijke ondersteuning	2016	16
DA-51	Letter	Alderman	Consequenties intrekken inkoopprocedure Wmo	2016	3
DA-52	Factsheet	Administrative organization	Resultaatgericht werken: Van tijd naar resultaat	2017	1
DA-53	Slide	Administrative organization	Cluster Sociaal. Organigram per 1 september 2017	2017	1
DA-55	Addendum	NSOB & Utrecht University	Met vereende kracht vooruit. Analyse van en aanbevelingen voor de organisatieontwikkeling van de gemeente Amsterdam. Bijlagen	2017	21
DA-56	Report	NSOB & Utrecht University	Met vereende kracht vooruit. Analyse van en aanbevelingen voor de organisatieontwikkeling van de gemeente Amsterdam.	2017	26
DA-57	Slides	Administrative organization	Werkkring. Van Kwaliteitszorg naar Kwaliteitscultuur.	2017	15
DA-58	Report	Administrative organization	1ste bestuursrapportage 2017. Maatschappelijke ondersteuning.	2017	18
DA-59	Policy document	Council Committee	1e bestuursrapportage 2017 Maatschappelijke ondersteuning.	2017	5
DA-60	Letter	Alderman	Aanvullende toelichting op het collegebesluit Doorontwikkeling Samen DOEN	2017	5
DA-61	Policy document	Administrative organization	Bouwstenen voor doorontwikkeling sociaal domein	2018	22
DA-62	Factsheet	Administrative organization	Factsheet allianties Wijkzorg	2018	2
DA-63	Minutes	Council committee	Verslag expertmeeting, 12 januari 2018	2018	11
DA-64	Policy document	Administrative organization	Stedelijk kader Wijkzorg 2018	2018	14
DA-65	Policy document	Alderman	Afdoening toezeggingen inzake Organisatieontwikkeling	2018	4
DA-66	Factsheet	Administrative organization	Klanthouder Wijkzorg	2018	3

Breda					
Code	**Type of Document**	**Author (org.unit)**	**Document Name**	**Year of publ.**	**Pages**
DB-01	Letter	Executive board	Beantwoording vragen ex art 41 RvO inzake reorganisatieproces Stadskantoor	2012	5
DB-02	Policy document	Administrative organization	Wmo Beleidsplan 2015. Goede zorg doen we samen.	2014	74
DB-04	Policy document	Council Committee	Bespreeknotitie 'De Bredase plus' over onder-steuning van mensen die vanwege financiële situatie slechts beperkt kunnen meedoen in de samenleving	2014	3
DB-05	Policy document	Administrative organization	Beleidsplan en verordening Wmo 2015	2014	7
DB-06	Letter	Alderman	Stand van zaken moties	2014	3
DB-07	Coalition agree-ment	Executive board	Ruimte en verbinding. Coalitieakkoord Breda 2014-2018.	2014	34
DB-08	Minutes	KBG Wmo	Inspreker klankbordgroep Wmo	2014	2
DB-09	Policy document	Administrative organization	Begroting 2015	2015	170
DB-12	Addendum	Administrative organization	Aanpak 'Breda Doet' 2016-2018	2015	2
DB-13	Letter	Executive board	Uitnodiging bijeenkomst Breda Doet	2015	2
DB-14	News article	Administrative organization	Cees Vermeer nieuwe secretaris gemeente Breda	2015	2
DB-15	Policy document	Council Committee	Actieprogramma Informele zorg 2015	2015	16
DB-16	Letter	Administrative organization	Actieplan Zorginnovatie Breda	2015	3
DB-17	Policy document	Administrative organization	Samen bewegen voor een gezonder en geluk-kiger leven. Actieplan Zorginnovatie Breda.	2015	15
DB-18	Policy document	Administrative organization	Tweede Bestuursrapportage 2015	2015	28
DB-19	Infographic	Administrative organization	Wijkplatforms	2016	1
DB-20	Letter	Alderman	Breda Doet	2016	2
DB-21	Policy document	Administrative organization	'Aan tafel!' De thematafel en het wijkplatform als ontmoetingsplaatsen voor het realiseren van de doelen uit 'Breda Doet, samen ver-der!'	2016	22
DB-22	Letter	Alderman	Stand van zaken Thematafels	2016	2
DB-23	Addendum	Administrative organization	AANPAK 'BREDA DOET' 2016 - 2018	2016	4
DB-24	Letter	Alderman	Aanpassen Uitvoeringsbesluit Wmo 2015 wijziging tarieven begeleiding Wmo	2016	4
DB-27	Policy document	Administrative organization	Kader, Breda Doet, samen verder!	2016	26
DB-28	Policy document	Administrative organization	Spelregels thematafels: Zo zijn onze (tafel) manieren	2016	2
DB-29	Policy documents	Administrative organization	Spelregels wijkplatforms: Zo zijn onze manie-ren	2016	2
DB-30	Letter	Executive board	Eerste bestuursrapportage 2016	2016	13
DB-31	Letter	Council committee	Aanpassing subsidieplafond sociaal domein thematafel opgroeien	2016	2
DB-32	News article	Hendrison, Q.	Dienstverleningsproject Breda kent geen geheimen	2017	4
DB-33	Slides	Administrative organization	3e Update Top Dienstverlening Terugblik 2016 en vooruitblik 2017	2017	13
DB-34	Policy document	Administrative organizati-on/Thema tafels	Advies Bouwgroep 'Breda Doet' over de aanpak 'Aan Tafel!'	2017	16
DB-35	Letter	Alderman	Publieke innovatie	2017	2
DB-36	Letter	City council	Rekenkamer Rapport: 'Subsidiebeleid van de gemeente Breda'.	2017	5
DB-37	Minutes	City council	Begrotingsprogramma Vitaal & Sociaal	2017	4
DB-38	Slides	Administrative organization	Begroting 2018	2017	404
DB-39	Report	Court of Auditors Breda	De Wmo in Breda: integrale hulp op maat?	2018	80
DB-40	Minutes	City council	Op werkbezoek bij IMW en SMO Breda, 8 februari 2018	2018	3
DB-41	Letter	Executive board	Bestuurlijke reactie op Rekenkamerrapport 'De Wmo in Breda'	2018	4

Continuation Breda

Code	Type of Document	Author (org.unit)	Document Name	Year of publ.	Pages
DB-42	Report	PwC	Informeel in control? Uitkomsten 30-dagen-scan	2017	10
DB-44	Slides	Administrative organization	Organisatieontwikkelingen keten Participatie	2017	14

Enschede

Code	Type of Document	Author (org.unit)	Document Name	Year of publ.	Pages
DE-01	Policy document	Administrative organization	Frontlijnsturing. Wijkteams voor activering en ondersteuning	2011	12
DE-02	Policy documents	Administrative organization	Meedoen naar vermogen. Gedeelde uitgangs-punten voor werk, talentontwikkeling en ondersteuning	2012	44
DE-03	Policy document	Administrative organization	Streefbeeld 2017. Maatschappelijke onder-steuning in Twente.	2012	34
DE-04	Policy document	Administrative organization	Compacte en Flexibele Organisatie. Krimp van de organisatie 2013-2014.	2012	12
DE-05	Policy Document	Administrative organization	Burgers maken hun buurt.	2013	60
DE-06	Letter	Executive board	Beleidsplan Invoering Wmo 2015-2016	2014	6
DE-07	Letter	Executive board	Begrotingswijziging voor rechtmatige subsidie 2015 SMD E-H	2014	2
DE-08	Letter	Executive board	Kwaliteitscriteria en wijze van tariefstelling voor inkoop Jeugdzorg en Wmo 2015	2014	7
DE-09	Letter	Executive board	Wijziging Regeling Regio Twente en instellen Bestuurscommissie t.b.v. jeugdhulp en maat-schappelijke ondersteuning	2014	4
DE-10	Policy documents	Administrative organization	BELEIDSPLAN INVOERING WMO 2015	2014	65
DE-11	Letter	Executive board	Voortgangsbrief transities sociaal domein	2014	10
DE-12	Letter	Alderman	Stand van zaken Ondersteuning bij het huis-houden	2014	4
DE-13	Letter	Alderman	Positionering regionale jeugdhulptaken in Twente	2014	5 / 4
DE-14	Letter	Executive board	Advies Nota inrichting en sturing Jeugdzorg en Wmo vanaf 2015	2014	
DE-15	Policy document	Administrative organization	Nota inrichting en sturing Jeugdzorg en Wmo vanaf 2015	2014	38
DE-16	Letter	Executive board	Voortgangsbrief transities Wmo en Jeugdwet en inrichting wijkteams	2014	14
DE-17	Policy document	Administrative organization	Concept-gemeenterekening 2013 (Enschede Verantwoordt)	2014	351
DE-18	Vacancy	Administrative organization	Functiebeschrijving wijkteammanager	2014	3
DE-19	Vacancy	Administrative organization	Wijkcoaches	2014	1
DE-20	Policy document	Administrative organization	Beleidsplan Jeugdhulp 2015-2018	2014	51
DE-21	Minutes	Administrative organization	Eindverslag inspraakprocedure met betrek-king tot Verordening maatschappelijke onder-steuning Enschede 2015	2014	11
DE-22	Report	Saxion	MKBA Multiprobleemhuishoudens	2014	49
DE-23	Policy document	Administrative organization	Toelichting op Verordening maatschappelijke ondersteuning Enschede 2015	2014	28
DE-24	Vacancy	Administrative organization	Werving en selectie van generalisten/profes-sionals in wijk/gebiedsteams	2014	2
DE-25	Policy document	Administrative organization	Beleidsplan invoering Wmo 2015	2014	65
DE-26	Policy document	Stuurgroep Heroriëntatie Twentse Samenwerking	Samenwerken doen we zelf	2015	29
DE-27	Policy document	Administrative organization	Kadernota kwaliteit Wmo en Jeugdhulp	2015	19
DE-28	Policy document	Administrative organization	Transformatieagenda Maatschappelijke Ondersteuning. Investeringsprogramma 2015-2017	2015	10

Continuation Enschede

Code	Type of Document	Author (org.unit)	Document Name	Year of publ.	Pages
DE-29	Letter	Administrative organization	Impuls stadsdeelgewijs werken: werken vanuit de benadering van de samenleving	2015	4
DE-30	Policy document	Administrative organization	Bouwen aan burgerkracht.	2015	6
DE-31	Letter	Executive board	Annotatie Regioraad 11 november 2015	2015	4
DE-32	Letter	Executive board	Voortgangsbrief transformatie sociaal domein	2015	12
DE-33	Letter	Alderman	Kadernota Kwaliteit Wmo en Jeugdhulp	2015	4
DE-34	Policy document	Administrative organization	Actieplannen vrijwillige inzet en mantelzorg	2015	7
DE-35	Report	I&O Research	Is het resultaat goed?	2015	61
DE-36	Policy document	Administrative organization	Nieuw Enschedees Welzijn. Richting welzijns-werk 2017-2022	2016	28
DE-37	Policy document	Administrative organization	Evaluatie Inkoop- en Aanbestedingsbeleid 2013-2016	2017	23
DE-38	Letter	Executive board	Evaluatie samenwerking Gemeente Enschede - SMD in Wijkteams Enschede	2017	2
DE-39	Policy document	Administrative organization	Aanvullende evaluatie (inkoopdeel) Wijkwel-zijn 2016	2017	26
DE-40	Letter	Alderman	Implementatie aanpassing Ondersteuning bij het Huishouden	2017	9
DE-41	Letter	Executive board	10e en laatste voortgangsbrief sociaal domein	2017	9
DE-42	Report	Kennispunt Twente	Samenwerken in wijkteams Enschede. Onder-zoek naar de samenwerking gemeente en SMD.	2017	28
DE-43	Letter	Executive board	Reactienota op advies Inkoop Jeugdhulp en Maatschappelijke Ondersteuning	2018	4
DE-44	Report	OZJT/Samen14	JAARVERSLAG 2015	2016	11
DE-45	Article	Samen14	Monitoring en Reflectie. Leren transformeren, opbrengsten in beeld	2018	2

Rotterdam

Code	Type of Document	Author (org.unit)	Document Name	Year of publ.	Pages
DR-01	Report	Administrative organization	Jaarverslag Wmo 2011. 'Zelfredzaamheid is de basis.	2011	76
DR-02	Policy document	Administrative organization	Concern Rotterdam. Overheidsorganisatie voor Rotterdammers.	2012	40
DR-03	Letter	Alderman	Stand van zaken transitie AWBZ - Wmo	2013	13
DR-04	Letter	Executive board	Afdoening motie: Familie bij indicatiegesprek.	2013	2
DR-05	Report	Administrative organization	Eerste Bestuursrapportage 2013	2013	133
DR-06	Policy document	Administrative organization	Visie op toegang tot activering, welzijn & zorg - Consultatie versie	2013	17
DR-07	Letter	Executive board	Losgelaten in Rotterdam	2013	4
DR-08	Letter	Executive board	Vernieuwing (Jeugd)zorg, Welzijn en Active-ring / 3D's	2013	16
DR-09	Letter	Executive board	Voortgang vernieuwing (jeugd)zorg, welzijn en activering1 / 3 decentralisaties.	2013	31
DR-10	Policy document	Administrative organization	Het Wijkteam Maatschappelijke Ondersteu-ning en VraagWijzer	2013	24
DR-11	Policy document	Administrative organization	Inkoop & voortgang Transitie AWBZ - Wmo	2013	40
DR-12	Report	Panteia	Decentralisatie AWBZ Rotterdam: Aard en omvang van persoonlijke verzorging, verpleging, woonzorg ZZP 4 en arbeidsmatige dagbesteding	2013	69
DR-13	Letter	Alderman	Voortgangsbrief 30: samenhangende onder-werpen van de vernieuwing (jeugd)zorg, welzijn en activering^ en de drie decentralisa-ties.	2014	19

Continuation Rotterdam					
Code	Type of Document	Author (org.unit)	Document Name	Year of publ.	Pages
DR-14	Letter	Agenda22	Advies 'Wmo Rotterdam 2015-2018 : Van verzorgingsstaat naar verzorgingsstad naar verzorgingsstraat': Startdocument voor consultatie.	2014	15
DR-15	Slides	Administrative organization	Technische sessie verordeningen en beleids-plannen Nieuwe Wmo en Jeugdhulp	2014	56
DR-16	Letter	Alderman	Inkoop Transitie AWBZ - Wmo	2014	13
DR-17	Letter	Executive board	Update voortgang	2014	29
DR-18	Coalition agreement	Executive board	#Kendoe	2014	44
DR-19	Resolution	Administrative organization	Vaststelling Verordening maatschappelijke ondersteuning 2015 {herziene versie)	2014	54
DR-20	Policy document	Administrative organization	Rotterdammers voor elkaar. Van verzorgings-staat naar verzorgingsstraat. Wmo-kader Rotterdam 2015	2014	49
DR-21	Policy document	Administrative organization	Rotterdammers voor elkaar. Van verzorgings-staat naar verzorgingsstraat	2014	40
DR-22	Letter	Executive board	Verzoek tot vaststelling Wmo-kader Rotter-dam 2015 Rotterdammers voor elkaar	2014	6
DR-23	Letter	Executive board	Herijking Nieuw Rotterdams Welzijn	2015	15
DR-24	Policy document	Administrative organization	Kwaliteit in samenhang. Kwaliteitsbeleid Wmo 2015. Werkdocument	2015	92
DR-25	Infographic	Administrative organization	Stroomschema casusregie wijkteam	2015	1
DR-26	Letter	Executive board	Kwaliteitsbeleid Wmo 2015	2015	3
DR-27	Policy document	Administrative organization	NIEUW ROTTERDAMS WELZIJN 2016 – 2019	2015	53
DR-28	Letter	Alderman	Stappenplan doorontwikkeling zorg welzijn & jeugdhulp 2018	2015	10
DR-29	Letter	Alderman	Beantwoording toezegging 15bbS811	2015	5
DR-30	Letter	Executive board	Beantwoording van de schriftelijke vragen van L.P.M. de Kleijn (SP) en J.W. Verheij (WD); over 'Hogere kosten reorganisatie' en 'Na-ijl effec-ten en 27 miljoen voorinvesteríng reorganisa-tie'.	2015	20
DR-31	Letter	Executive board	Beantwoording van de schriftelijke vragen van mr.drs. R.C.J. de Roon (D66); over problemen bij aanvragen en herbeoordelingen Wmo.	2015	5
DR-32	Letter	Alderman	Samenwerking W&I in het sociaal domein	2016	6
DR-33	Letter	Executive board	Stand van zaken Nieuw Rotterdams Welzijn per 1 januari 2016	2016	18
DR-34	Letter	Executive board	Toezicht Wmo 2015	2016	3
DR-35	Policy document	Administrative organization	Zorg voor elkaar. Het Rotterdamse plan voor de doorontwikkeling zorg, welzijn en jeugd-hulp 2018	2016	67
DR-36	Policy document	Administrative organization	Wmo toezicht- werkplan 2016 voor de regio van de GGD RR	2016	6
DR-37	Policy document	Administrative organization	CONCEPT Plan van Aanpak Organisatieont-wikkeling PGW&Z Fase 2: Totaalplan	2016	56
DR-38	Letter	Executive board	Uitgangspuntennotitie doorontwikkeling welzijn, zorg en jeugdhulp 2018	2016	21
DR-39	Letter	Executive board	Voortgang [3] decentralisaties	2016	32
DR-40	Report	Ecorys	Business case Wijkteams Rotterdam 2016. Eindrapport	2016	38
DR-41	Letter	Alderman	Aanbieding uitvoeringsmonitor wmo en jeugdhulp januari - juli 2016	2016	3
DR-42	Letter	Alderman	Implementatie maatregelen n.a.v. uitspraak Centrale Raad van Beroep	2016	3

Continuation Rotterdam					
Code	Type of Document	Author (org.unit)	Document Name	Year of publ.	Pages
DR-43	Letter		Beantwoording van de schríftelijke vragen van de raadsleden J.C. Gonçalves (PvdA) en P.M. Wijntuin (PvdA) over de dienstverlening van VraagWijzer en Wijkteams.	2017	3
DR-44	Letter	Alderman	Voortgang Inkoop 2018/2021 - Dóórontwikkeling Zorg, welzijn en jeugdhulp	2017	2
DR-45	Report	Gemeentelijke ombudsman	Het hemd van het lijf. Onderzoek van de gemeentelijke ombudsman naar de bescherming van de persoonlijke levenssfeer van burgers die zich met een hulpvraag in het sociaal domein tot de gemeente Rotterdam wenden.	2017	100
DR-46	Letter	Alderman	Toegenomen bereik en intensiveringen Wmo en jeugdhulp en publicatie Uitvoeringsmonitor	2017	4
DR-47	Letter	Executive board	Doorontwikkeling Welzijn, Jeugdhulp en Zorg	2017	7
DR-48	Report	Court of Auditors Rotterdam	Het komt niet in de buurt.	2018	140

Table 7: Used documentation to assess the determinants of successful change within Amsterdam, Breda, Enschede and Rotterdam. After numbering the documents, those related to sheltered and community housing were deleted. Hence, interruptions in the numbering can be witnessed. Author refers either to owner of the product or to those responsible (often an alderman or the executive board sign the letters to the city council, hence they are mentioned as authors).

4.3 Analysis

The data gathered from the obtained documentation and interviews has been organized and structured. This process followed from initial and focused coding (Boeije, 2014). As this study departs from a functionalist paradigm, it aims to seek a better understanding of the process of change within the municipalities using the framework of Fernandez and Rainey (2006) as lens to see whether this also holds in the context of the Dutch municipalities and their adoption of the Social Support Act. Hence, during the first coding phase, codes were derived from the literature, consistent with the topic list. The determinants of Fernandez and Rainey have been translated into coding categories and sub-categories and aim to capture the assumed theoretical relations as written in the theoretical chapter. Second, during the focused coding phase, the data was restructured again to ensure it would reflects the perspective of the respondents (Bryman, 2012). In practice, this meant that specific codes from the first phase or coded data were re-evaluated. As a consequence, some were deleted, shifted or merged. Additionally, as the interviews were semi-structured to get a better grasp of the respondents understanding of the change trajectories, during this phase, the initial coding scheme was supplemented with additional codes. These additional codes revealed additional determinants that might have influenced the process (and thus outcome) of change. Consequently, the details deemed important by respondents could be taken into account. A likewise procedure was applied when coding the obtained documentation. If a passage appeared to contain important information not covered by the initial coding scheme, a new code was created.

This process resulted in the final coding scheme which feeds the actual analysis of the

data and subsequently presented findings. Software program Nvivo has been used for the coding of data. Table 8 provides an overview of this coding procedure. The difference in lay-out illustrates the two phases of coding. The first coding phase yielded those codes that are underlined. Those codes that are crossed out and/or added in italic represent the second coding phase, revealing other determinants than those mentioned by Fernandez & Rainey (2006) as possibly relevant to the outcome of change. Moreover, this second coding phase allowed more contextual factors, as these did not necessarily came forward from the literature review nor the framework of Fernandez and Rainey (2006).

General coding scheme

Determinant from Fernandez and Rainey (2006)	Expectations informed by literature review	Main code	Sub-codes
Managerial leaders must verify and persuasively communicate the need for change.	• It is perceived important that the communicated need for change is in accordance with the felt need for change.	Urgency - Need for change	
Leadership should develop a course of action or strategy for implementing change.	• It is perceived as important for successful implementation of change to transform the need for change in a course of action or strategy in written documentation.	Blueprint planning ~~Deliverables~~ *Course of action* Milestones Time path Vision	
Build internal support and reduce resistance to change through widespread participation.	• Employees are actively involved in the change trajectory.	Bottom-up initiated Communication trajectories Consultation of staff Employees agents of change Lay-offs Participation of staff ~~Project Groups~~ *Project or Work groups* ~~Resistance~~ Top-down initiated	 Emotional Grievance
Support and commitment from top management should be ensured.	• Employees perceived commitment and support from topmanagement. • Employees believed that leadership was distributed throughout the organizational change processes	Managers agents of change ~~Top management support~~ *Support administrative management*	
External support (from political overseers and key external stakeholders) should be ensured.	• Political support is perceived as important for the organizational changes according to the respondents • Relevant stakeholders (e.g. healthcare providers) should be actively involved in the implementation of the Social Support Act	Consultation Other external stakeholders Participation Political Support Support from healthcare organizations	
Sufficient resources (human, financial and technological resources) should be available to support the change process.	• Employees believed that sufficient support – both instrumental and emotional –to implement the Social Support Act successfully.	Human Resources Material Support Technological Support	Coaching External support (consultants etc.) ~~New colleagues~~ *Hiring new colleagues* Quartermaster Time freed for change-related tasks *Conferences* Financial support Pilots or Experiments ~~Training~~ *Training and development* Working procedures (Changed) Systems Technical Capacity Technical Training
Institutionalize change. This involves both monitoring of change implementation but also employment of various measures to install and stimulate new patterns of behaviour	• The change process should involve interventions on the processes, thereby altering the way individuals work. • Training and development should be given to facilitate the new way of working and desired behavior	Changed behavior Changed working procedures *Incremental change* Monitoring *Organizational culture* Planned change Time	Management Information Reparations or corrections in change process

Determinant from Fernandez and Rainey (2006)	Expectations informed by literature review	Main code	Sub-codes
Comprehensive change should be pursued. That means that also the subsystems of the organization should be involved in the change strategy	• The change trajectories should be comprehensive, affecting all departments within the social domain and related departments • The interdependencies between the relevant organizational subsystems should be understood to prevent necessary 'corrections' or new (smaller) reorganizations.	*Further Development necessary* Interdependencies between departments *Learning by doing* Multiple trajectories *Partially affects the organization* Affects whole organization	
Outcome	• Municipalities are perceived to become more flexible and adaptive as consequence of the deployed change tactics • Municipalities are perceived to successfully adhere to the guiding principles throughout implementation of the Social Support Act • Perceived (lack of) behaviour change as consequence of change practices	Flexible and agile Innovation *Collaboration* *Shift of subsidiary to contract relationships with partner organizations* Successful Unsuccessful Costs Way of working Changing behavior Organizational commitment *Stress*	
Case specific		*Amsterdam* *Breda* *Enschede* *Rotterdam*	*Ouder-Kind Teams* *Participatieteams* *Samen Doen* *Wijkzorg* *Wijkzorg allianties* *Indicatieadviesbureau Amsterdam* *Sociaal Team* *Thematafels* *Wijkplatforms* *Wijkteam* *Zorg voor Elkaar* *Frontljinsturing* *OZJT* *Samen 14* *SMD E-H* *System (Stelsel)* *Twentebedrijf* *Wijkteam* *Kwaliteitsmedewerkers* *Multiproblematiek* *New professional* *Privacy* *System (Stelsel)* *Taskforce Zorg* *Vraagwijzer* *Wijkteams*
Context		*Austerity* *AWBZ* *Budgets* *Complexity* *Existing networks* *Earlier Reorganizations* *Health care continuity* *Labour market* *Legal Requirements* *Organizational size* *Pioneering* *Political nature of municipality* *Pressure at work* *Wijkverpleging (Community Care)* *'Zorgval'*	
Contract management		*Controls* *Effect* *Pricing system* *Supervision* *Systems*	

Table 8: Determinants of successful change, reflected in codes. Those codes that have been crossed out or are displayed in italics, reflect the second coding phase where additional texts or views of respondents relevant to the course of change have been coded.

4.4 Quality of the research

Several measures have been taken to assure the quality of the study. That is, increasing the reliability and validity of the findings. Because of the reflexivity of science – that is, the influence of 'popular' or dominant scientific discourses on our daily behaviour - scholars have to take full responsibility for their produced work (Lindblom & Cohen, 1979). Hence, this chapter will conclude with an assessment of the used methods and its limitations that should help interpret the findings.

4.4.1 Reliability

First of all, all choices made in the design, methodology, analysis and usage of sources have been as transparent as possible described throughout this thesis. Providing such transparency enhances the reproducibility, a core principle of scientific progress (Muma, 1993). After granted permission, the interviews were recorded and transcribed verbatim. The officials received their personal transcripts to check for any flaws. No major changes to any of the transcripts occurred. Along with the transcripts, a written summary and analysis has been sent to the respondents. This additional check by the respondents ensured that their perception was rightfully captured and positively contributed to the quality of the final analysis.

Secondly, reliability dwells upon the research procedures as applied by the scholar. As the interviews form important data sources, the topic list used in the semi-structured interviews have been pre-tested and discussed with several practitioners. This ensures that the questions were clear and provided the scholar with additional information whether and how the topic list should be adjusted (Silverman, 2010). No major adjustments followed this pre-testing phase.

Finally, all respondents have been asked whether they felt the interviewer missed something that should be included in the analysis. This revealed contextual issues, such as organizational size and juridical developments. These conditions or issues have been included in the analysis and discussion of the results, contributing to the accuracy and consistency of the determinants of successful change (Van Thiel, 2010).

4.4.2 Validity

Validity here is discussed in terms of internal validity. That is, the extent by which the scholar is confident that the findings correspond with the truth. Internal validity is usually quite high in case study research (Gerring, 2007). Focusing on a limited number of cases allows to carefully examine the empirical observations with the more abstract theoretical concepts and provide an explanation (Blatter & Haverland, 2012; Hall, 2006). However, the subjective nature of qualitative research puts the interpretations of the scholar central. Hence, such interpretations should be valid. Therefore, several safeguards have been implemented. First, the collection of different data sources – interviews and documents - enabled data triangulation (Van Thiel, 2010). That is, the extent to which the findings from interviews correspond with the data gained from the policy documents and additional secondary sources. If other data and competing theory supports the counterfactual argument why specific results have been found, the normative validity of the proposed determinants of Fernandez and Rainey will be questioned and discussed (Kickert, 2014). Secondly, to check whether the inferences made by the scholar

are valid, critical checks with academic peers and other experts are vital (Whittemore, Chase & Mandle, 2001). This has been done via regularly meetings with academic supervisors, as well as involving several practitioners as discussed in previous paragraph.

4.4.3   Limitations

The chosen research design has a few limitations that should be considered when interpreting the results. First, a limitation inherently connected to case study research, is the limited external validity. That is the extent to which inferences can be drawn and applied in other contexts. Because small-case studies allow for context sensitivity, there are a lot of variables. However, controlling for the influence of these variables is difficult because that only becomes possible when adding more cases necessary to control for the interaction effects of the various context variables (Hall, 2006; Gerring, 2007). It is therefore that, in terms of generalization, this is limited to those municipalities that operate in environments similar to those under study (Flyvbjerg, 2006).

Second, the design of the study should not be mistaken with a comparative case study. To compare cases, one should select cases strategically by trying to control for all variables that might affect the variation in the dependent variable (Blatter et al., 2016; Lijphart, 1975). This emphases on case selection in comparative analyzes can be problematic (Frendreis, 1983; Blatter & Haverland, 2012). Logically speaking, to what extent are similar cases really that similar? Hence, albeit a general pattern might seem to emerge, one should be careful interpreting any indications of causal relations. This study does not meet the requirements for a comparative design. Suggested effects of the determinants of successful adoption of the Social Support Act should be further tested before a causal effect should be claimed.

Third, this study departed from the perspective of the manager, stressing their capacity to enact change. Managers have been interviewed within various layers, higher, middle, and lower management. However, regular employees have not been interviewed. Through the use of policy documentation, the discourse of regular employees has somewhat been grasped (e.g. evaluation documents). Nonetheless, it is likely that the results contain a bias towards management. Precisely because the theoretical perspective focused on the role of management and predominantly managers have been interviewed, there is the danger of 'what you see is what you get'. Assessing organizational change and the role of management through another paradigm (e.g. radical humanism in Burrell & Morgan (1979) arguably lead to different results. Hence, this should be considered when interpreting the results.

5   Findings

Within four large municipalities in the Netherlands, the process and change management tactics used to adopt the Social Support Act have been studied. As the findings show, the implementation often consisted of a long and complex trajectory, involving multiple smaller trajectories and a variety of deployed tactics. To provide an overview, first, a brief summary per case will be given. Accompanied with a timeline with milestones, it clarifies the various steps undertaken to adopt the Social Support Act. Moreover, the timeline adds some context necessary to understand the change processes. Afterwards, for each separate empirical question, the specific cases will be discussed to illustrate what change management practices were deployed and how it was received. The main goal of this study is to examine the determinants of successful adoption of the Social Support Act in four Dutch municipalities and thus focuses on each case separately. However, if general patterns emerge from the data, these will also be carefully mentioned.

5.1   Case summaries

5.1.1   Amsterdam

2010   2012   2013   2014   2015   2018

Wmo Indicatiebureau

Start pilots 'Samen Doen' Teams

Start reorganization 1S1O

Start Projectteam 3D's Track AWBZ - Social Support Act accompanied with several pilots

First round procurement.

Drafting of regulations, Quality Policy.

Start of Social Support Act 2015. Further development of e.g. contract-management, project-based working, network 'Wijkzorg' with quartermasters.
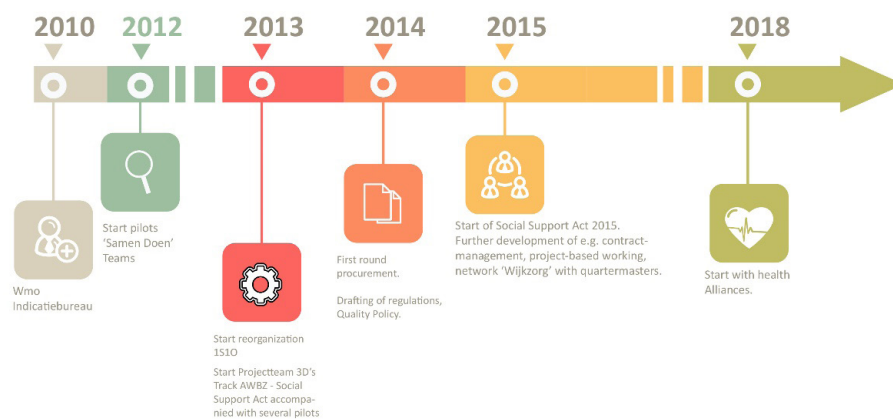
Start with health Alliances.

Figure 6: The implementation of the Social Support Act in Amsterdam.

The municipality of Amsterdam already started in 2012 to experiment with social support teams called 'Samen Doen' teams. Within these teams, various health providers seconded personnel to take care of those families with problems on multiple domains of life. While continuing to experiment with this way of working, in 2013 project teams were established to ensure Amsterdam would be ready for their legal obligations from January 2015 onwards. Three large projects groups were established, one per decentra-

lized act: Youth Act, Participation Act, and the Social Support Act. An overarching project group called 3D's oversaw all developments.

Parallel to this trajectory, a large reorganization affecting the whole municipality called 1S1O ('1 Stad 1 Organisatie') kicked off. This restructured the municipality into clusters and result-responsible units (RVE's: resultaatverantwoordelijke eenheden). Those concerned with progress of the overall reorganization saw the link with the developments in the social domain. Contrarily, within the departments of the Cluster Social the greater reorganization was experienced as another hindrance onto the road to compliance. The project groups compiled the required legislative documents (e.g. concerning quality management, access to services) and worked on partnership with health providers. Building on the networks already present, they found 'Wijkzorg' as the gateway into the Social Support services in Amsterdam.

Wijkzorg can best be described as network of contracted health providers. They provide support themselves and if there are multiple issues, the 'Samen Doen'-teams – in which most of these health providers take place – take care of these individuals or families and offer an integrate package of assistance. Quartermasters paid by the municipality facilitated the networks in the first years. As Amsterdam choose for a flexible network structure, more emphases is placed on the achieved results. This meant that new systems and ways of working were introduced to facilitate performance-based services. As it continuously developed since the start in 2015, the latest major change is the introduction of the so-called 'District alliances' (Wijkzorgallianties). These alliances take over the role of the quartermasters and function as linking pin between the policy makers of Amsterdam and the health providers based in 'Wijkzorg'.

The interviewed individuals evaluate the changes positively but also acknowledge that much remains to be done. They feel supported by their mayor and city council, despite severe budget deficits. So far, these deficits have been supplemented by means of general funding.
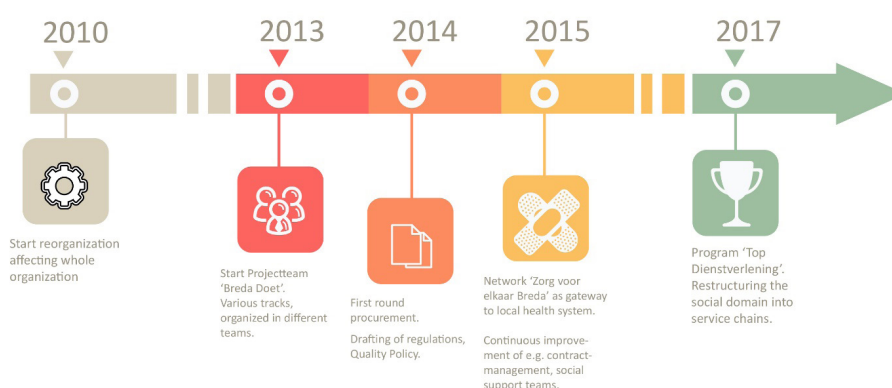
5.1.2   Breda

Figure 7: The implementation of the Social Support Act in Breda.

In Breda, 2013 marked the start of project 'Breda Doet'. Consisting of various tracks, it aimed to prepare Breda for the decentralizations effective from January 2015. By crea-

ting a vision, a direction for the future was set, the actual implementation of the plans was not extensively documented. The interviewed individuals recalled the vision of the clerk that "to organize is more important than organization". Partnerships with health providers were sought, innovative ways to distributed grants while improving performance-based steering followed. It resulted in the adoption of a network formed by health providers which further developed into Zorg voor Elkaar Breda (ZvEB: Care for Each other Breda). It consists of welfare providers and volunteers and functions as gateway into the local health system. They may refer to the social support teams, which are all employed by the city of Breda. As Breda already had employees working under the old Social Support Act, a division emerged between those already working before 2015 and those recruited to work with the new Social Support Act. In 2017, with the program Top Dienstverlening (Top Service-delivery), customer journeys were mapped and improved with LEAN tactics. It lead, among others, to chains in the social domain, were all departments now involved with the Youth Act, Participation Act or Social Support Act are clustered.

The incremental changes in Breda are well received according to those interviewed. They perceive the collaboration internally and externally as improved. How to control for the increasing health expenditures is experienced as difficult and something not entirely within the scope of the municipality.
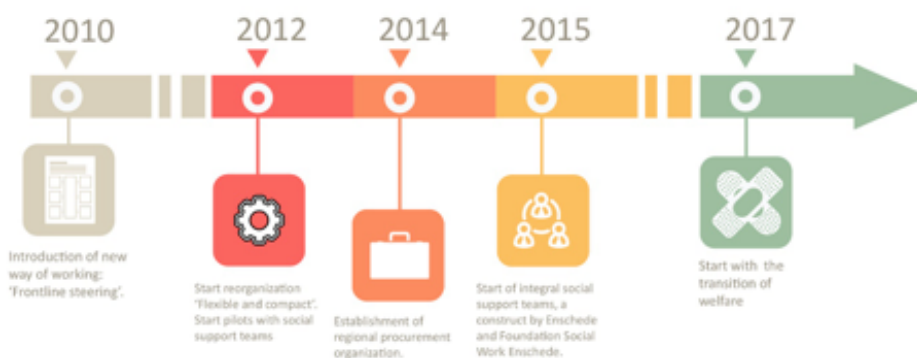
5.1.3   Enschede

Figure 8: The implementation of the Social Support Act in Enschede.

Enschede, as pioneering municipality, was among the first to introduce the concept of social support teams. Already in 2010, they started to experiment with frontline steering to become more service-oriented. The experiences, written down in a booklet, ultimately founded its way in the coalition agreement of the national government. The administrative organization continued to improve in 2012 by conducting a reorganization to enhance the flexibility of the organization. At the same time, more pilots and experiments concerning social support teams started, exploring the opportunities to provide integral services (covering all three Acts). For the procurement of youth- and non-residential care, Enschede partnered up with thirteen other municipalities. As they already had a fruitful cooperation, they expanded this with the establishment of a board committee responsible for the contract management and administration of the contractors under the Youth and Social Support Act. After the initial transition period in 2015 and 2016, Enschede decided to focus on the welfare sector to reduce the demand of care.

The respondents argued that since the changes were incremental and have tried out over time, it worked out quite well. The collaboration with the Social Work Foundation that co-owns the social support teams, is positively evaluated. Enschede experiences financial pressure resulting from nationally imposed cutbacks on social domain expenditures, but nevertheless feel supported by their council to do whatever necessary to provide needed care.
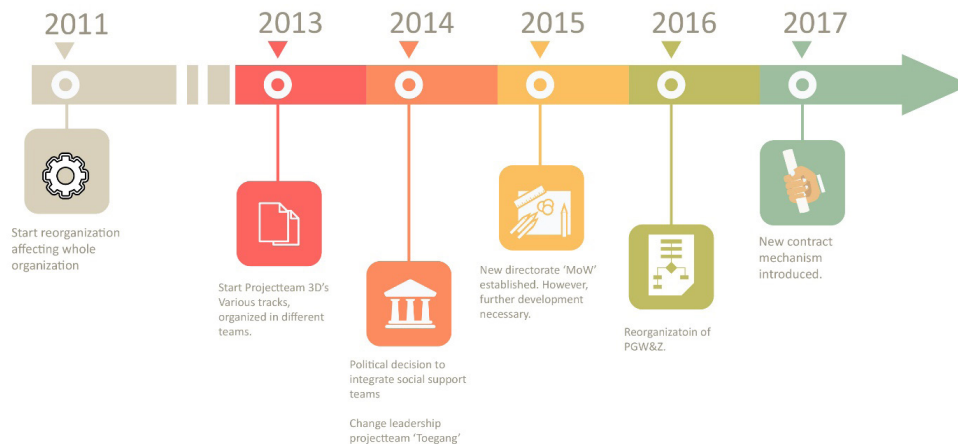
5.1.4   Rotterdam

Figure 9: The implementation of the Social Support Act in Rotterdam.

Rotterdam changed quite severely in 2011. Several departments and units were combined into clusters, the organization needed to shrink. From this overall reorganization, the cluster Social was formed, bundling the various departments and organizational units into various policy and executive directorates. With the announced decentralizations, project teams started to prepare the municipality for the reforms in 2013. Under the overarching project 'Three decentralizations' ('3 decentralisaties'), multiple trajectories started. Initially, it was expected that the different Acts would lead to separate systems, only to integrate from 2018 onwards. However, when the new coalition revealed their plans in 2014, it became clear that Rotterdam would work with integrated social support teams from January 2015 rather than 2018. In the preparing phases, pilots were conducted with separate social support teams for youth and adults. Now, these teams were supposed to cater both. As these teams would function as the gateway into the newly designed health system, new management was brought in to force a change.

Within a few months, this project group designed a new executive organization that was ought to manage the social support teams and social counters referring to these social support teams. Since they had little time, the leaders of the project group decided to work with the heads of the departments that were going to be affected by this change. It lead to a new directorate called Maatschappelijke Ontwikkeling in de Wijk (MoW) that experienced various teething problems from the start in January 2015. They ran into various management issues with health providers that seconded personnel to the social support teams. Moreover, the span of control turned out to be problematic: the various teams and departments within the directorate developed their own work styles and preferences. Furthermore, it took some time before collaboration improved between those

operating in the frontline, and policy makers in the city office. In addition, the rapid experienced political turnaround to move forward with integrated social support teams resulted in fragmented information systems. Since 2015, the directorate is continuously improving to correct these (unforeseen) errors. The directorate concerned with the implementation of new policies in the Social Domain also felt the need to restructure to become more flexible and adaptive to respond to new challenges.

In terms of success, the officials experienced the improvements implemented since the start of the transition as positively, although the first years after the actual transition were also experienced as very stressful and difficult. Along with various policy documentation, a report of their local Court of Auditors acknowledged these difficulties and how this negatively affects their performance within the social domain to date. The scale of the administrative organization makes it harder to enact a quick and thorough implementation according to the interviewed staff. Additionally, this makes it harder to become more flexible and adaptive. To conclude, despite severe budget deficits, the civil servants feel supported by their mayor and city council to actually invest in various improvement measures to deliver the needed care to their citizens.

5.2 Deployed change management practices

Within the four cases, various change management practices have been employed to implement the Social Support Act. For each municipality, a brief overview will be presented, along with exemplifying quotes. Note that the described change management practices were those mentioned by respondents and found in the documentation. Change trajectories are often complex and difficult to reconstruct in detail. Hence, the focus remains to those change management practices recognized or described by respondents. In the end, the general pattern that seems to emerge will be discussed. Moreover, an answer to the first empirical question will be given: *"Which change management practices do the selected Dutch municipalities employ to implement the Social Support Act?"*

5.2.1 Amsterdam: Two tales of change

In analyzing the interview data, it became apparent that two change trajectories manifested, which ran parallel to each other. These were the overall reorganization '1 City 1 Organization' (1S1O) and the project groups preparing Amsterdam for the decentralizations in the social domain.

First, in 2013, the city council established a city-wide austerity task. The overall reorganization was deemed necessary due to the lack of governance. It was experienced as too fragmented and compartmentalized. There were 52 organizational departments, each with their own operational management (Respondent A, B, C, DA- 04, DA-07). A reorganization was ought to foster cooperation between departments and to eradicate double procedures. Moreover, merging the various operational management systems should lead to enhanced control of the administration (Respondent A, B, C, DA-04). Finally, the new organization should be able to foster new ways of working, such as 'district-oriented' work (respondent A, B, C, D). This should lead to better service delivery, better catered to the needs of citizens (respondent A, B, C, D). To conduct a thorough reorganization, the board of major and alderman brought in a new town clerk, experienced in leading

reorganizations in municipalities (respondent A, B, C, J). Accompanied with the vision 1 City, 1 Organization, Amsterdam reorganized towards four clusters –Social, Economic and Spatial – and a Cluster Operational Management. Moreover, due to legal changes, the municipal districts were lifted and replaced by district committees. The sheer size of the reorganization led to a methodology that can best be described as top-down implemented, where quartermasters were appointed per cluster and responsible with their management to write blueprints of their new clusters (respondent A, B, C). Because of the short time span, the change program team decided that managers had to translate the change processes to their employees (respondent A, B, C). As of July 2014, the new organizational units in their respective clusters went into effect (respondent C, DR-07).

Despite some of these respondents argued that the coming decentralizations were also a reason to pursue a city-wide change (respondent B and C), this was not felt by the respondents operating in the social domain (Respondent D, R, S, and T). As the overall project organization that prepared the municipality for the reforms, they perceived the change trajectory 1C1S mostly as causing nuisance and something not related to the facing challenges in the social domain (Respondent D, R, S, T).

Therefore, for now, the focus will be on the change management practices used to implement the Social Support Act. This change process, can best be characterized as a participative and fragmented process.

The need to change, addressed in various policy documents, have been communicated throughout the years. Although the decentralizations in the social domain legally require municipalities to comply from 1 January 2015, these reforms were also presented as an opportunity to organize more efficient and effective (DA-01, DA-05, DA-06, DA-08, DA-21). Moreover, documents were drawn up translating the vision into tangible conditions, both within the municipality as for the interaction with stakeholders: e.g. rules, ways of working, factsheets, procurement documents (Respondent A, C, D, R).

Within the Cluster Social, it seemed that the employees felt part of the change. To set up the local healthcare system, several smaller project- or workgroups emerged, where employees participated alongside some hired externals (Respondent D, R, DA-41). Rather than operating as agents of change themselves, it appeared from the interviews that the managers' facilitated employees to be the agents of change (Respondent D, R, S, T).

> *"Being transparent also means that you get criticism when you, yes, that are things, eh, reflection and also intervision and things like that. These are also means that are important. That you can make mistakes. Because, of course, management plays a role in this, to create such a culture, to create such an atmosphere that everything is possible and that is a balance."* Respondent D

In terms of seeking support from the city council throughout the transition phase, the council had been periodically informed about the progress and was regularly asked for approval (Respondent D; DA-22, DA-33, DA-34, DA-40). This was partially mandatory, as of 2013, the three decentralizations have been covered under the Regulation of Risk Projects ('Regeling Risicovolle Projecten) (DA-22; DA-37). This meant that the project

organization concerned with the decentralizations accounted periodically to College of Mayor and Aldermen (DA-22).

Moreover, throughout the change process, the cooperation with the healthcare providers and insurers was sought. The role of these parties was seen as critical for the implementation to succeed, as respondent T notes:

"We especially searched for the connection with the field, so we all had working groups and administrative consultations, with all parties that provided that care in the city. And also with the preparation of the purchase, we have done a lot together with the healthcare providers."

Since the announcement of the coming decentralizations, various project and experiments have been carried out to test the soon-to-be implemented local health system (DA-05, DA-06, DA-14, DA-17, DA-18, DA-21, DA-39, DA-41, DA-43). Continuity of care was important, just as freedom of choice (Respondent D, R, S, T). Therefore all contracts were extended with healthcare providers that were already contracted before 2014, in line with the transitional regulations. These networks of providers in the districts were used as the foundation for the Amsterdam idea of 'district care' (Wijkzorg) (Respondent D, R, S, T). As these providers together would function as gateway for clients into the Social Support Act, these networks needed to be strengthened. To help this process, Amsterdam invested in quartermasters that facilitated the cooperation between healthcare providers (Respondent D, respondent T; DA-40, DA-41, DA-43, DA-57, DA-63). Moreover, various courses, a temporary expertise team, as well as communication tools (newsletters, factsheets) were meant to help these external stakeholders work within the newly designed local health system (Respondent D, R, S and T; DA-33, DA-43, DA-46, DA-56, DA-57, DA-66). Considering most of the system was designed along with the external stakeholders, some aspects of the new system appeared to be more forced onto health providers, such as usage of the Self-reliance Matrix allowing to monitor client's progress and IT-systems RIS (Respondent D, R, S, T).

This was necessary as role of contract management became more important due to the expanded horizon of the Social Support Act; the municipality now has to provide more services and progress needed to be monitored (Respondent B). Hence, additional colleagues were recruited with experience in the health sector (Respondent R and T). All contract managers received additional training and development. Moreover, assisted by two hired externals, together they continuously develop and professionalize their 'craft' and team. Moreover, as the decentralizations consisted of various domains (youth, employment and healthcare), project-based working was introduced (respondent A, R). These project, in which employees from various teams participate, coexist next to the regular line structure. This new way of working was meant to benefit the internal cooperation and to make Amsterdam more responsive.

Determinants of successful change	Summary deployed tactics
Ensure the need for change	Communication of the need for change as opportunity to organize more efficient and effective
Provide a plan	Translated vision on social domain into tangible documents; e.g. desired ways of working, procurement documents
Build (internal) support	Participative, invited employees to be part of the change
Ensure support from top management	Management facilitated the change
Build external support	Collaboration was sought with external stakeholders such as health insurers and healthcare providers throughout implementation of the Social Support Act
Provide sufficient resources	E.g. Courses, factsheets, quartermasters, additional hired capacity to facilitate employees (e.g. contract managers) and (collaboration between) healthcare providers
Institutionalize change	Introduced monitoring systems, IT systems, introduction of new working procedures
Pursue comprehensive change	Practically the whole cluster Social was affected through the changes

Table 9: Deployed change management tactics in Amsterdam

Breda: 'Breda doet'

In the interviews with the civil servants of Breda, two dominant themes emerged when discussing the change trajectory. First, the emphasis on the ability to organize rather than organization itself. Secondly, the notion of learning by doing, and gradually build further on experiences.

The legal character of the reforms in the social domain - Breda will be hold accountable for additional tasks and responsibilities – were communicated as the need for change in Breda (DB-02). Moreover, a vision was created to translate the reforms as opportunities to improve service-delivery (Respondent E, I, DB-02). This vision remained abstract, not translated into a detailed process or description to implement the Social Support Act (Respondent E, G, I). It appears to follow from the motto of the town clerk: 'organize rather than organization' (Respondent E, F, I, DB-14). Rather than relying on blueprint planning, the use of a common vision appeared to be the red line throughout the organization developments[3], as the following fragment shows:

> *"No use has been made of a large master plan. We have established a policy framework, "Breda Doet, Samen Verder". We do not say, this is how the organization should look like. We know the direction, we have also communicated this in image and sound. Parts have been published in which we monitor the progress of this change movement, the 'Staat van Breda'. The WC has at some point requested an advice, this is legally required when you change the formation. This then worked through in the organizational structure. But otherwise there was no major written plan, it was more a matter of 'muddling through', it is so complex that you cannot foresee everything. So we develop step by step." (Respondent G).*

Central to aforementioned policy framework is the idea of assistance or self-reliance of

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[3]   DB-02, DB-12, DB-15, DB-21, DB-27, DB-28, and DB-29).

citizens and 'finding the best possible solution for the client', 'together with the client' (DB-02, DB-39).

Following this general framework, the municipality has made use of existing networks present in the welfare domain (Respondent F and H). A result from cutbacks in 2010, welfare providers already organized themselves in a network called 'Meedoen en samenleven'. As part of a strategy ('Aan Tafel') to alter the way Breda allocated subsidiary, this network evolved into 'Zorg voor Elkaar Breda', funded by the municipality (Respondent H, DB-21, DB-22, DB-28). This network got assigned the task to refer individuals to either Social Support-provisions (e.g. social support team) or to provide another solution (e.g. allocating a volunteer to provide assistance with financial administration).
Whenever a client was referred to Social Support Provisions, from November 2014 onwards, these would be helped by the social support teams (DB02). As Breda opted to manage the social support teams in-house, new colleagues from various healthcare providers were recruited and got to work alongside the already present Social Support consultants (respondent G and I). This led to a 'split' in specialists (Social Support Consultants distributing the 'old provisions' such as individual facilities and housekeeping) and generalists (the newly recruited colleagues that already had experience with the new domains of the Social Support Act) (respondent G, I).

Aforementioned example illustrates the organic manner in which Breda implemented the Social Support Act. Rather than comprehensive and radical change, they seem to change more incremental. From the start, officials have stated that the actual implementation of the Social Support Act and the Social Domain is still subject to change. Hence, the organization should continuously learn, as the following quote shows:

> "That means that there is far less control on the process, rather let people start using their own expertise. And then experience, learning by experience. What you see then, it that is more difficult to immediately get all the information from what you have done. Because you learn through experience. At the start, the process may be not as clear yet, and that must gradually emerge. What is the best way to help these individuals?" (Respondent I)

Individuals could report bottlenecks and other things that did not go well at all at a 'Verbeterpunt' (Centre of Improvement), a contact point (D-39). From their own experiences, as well as feedback gained from meetings with external stakeholders and through the 'Verbeterpunt', it became clear that further development was necessary (Respondent E, F H, DB-02, DB-04, DB-08, DB-12, DB-18). In the first years after the transition, the exact mandates and responsibilities were unclear and Breda failed to provide integrate packages of assistance (Respondent I, E, G). Still, under the overarching project 'Breda Doet', various development tracks have taken place since, involving all departments in the social domain (DB12, DB-20, DB-21, DB-23, DB25, DB-31).

In 2017, this lead to a restructuring of the social domain, the reorganization mentioned in the fragment by respondent G on the previous page. Program 'Top Dienstverlening' (Top Services) introduced the concept of 'customer journey'. Through LEAN-management tactics, all teams or departments concerned with the Social Support Act have been placed in a service-chain (respondent G, H, F). A likewise procedure has been carried out for teams involved with the Youth Act and Participation Act (respondent G). Consequent-

ly, the frontline worker has a stronger mandate to provide the best possible solution for his or her client (respondent G and I). Due to the structuration in chains, it is now easier for the frontline worker to send their clients 'up' or 'down' the scale of support. To assist the frontline worker in this new way of working, they are offered training and development, intervision and coaching (respondent E, G, H, I). It is likely that this lowered or even removed any resistance, as the officials did not mention large-scale resistance towards these incremental changes.

During the process of structuring into chains, most supporting business units remained centrally organized (respondent G, E). Only small tasks such as administrative support was reorganized within the service chains.

Determinants of successful change	Summary deployed tactics
Ensure the need for change	Communicated need to change because of changing legislation.
Provide a plan	Rather than drawing extensive plan, a vision document 'Breda Doet, Samen Verder' provided the direction of change.
Build (internal) support	Employees were regarded as agents of change, learning by doing
Ensure support from top management	The motto of the town clerk 'organize rather than organization' was widely shared throughout the management.
Build external support	Collaboration was sought with external stakeholders such as health insurers and healthcare providers throughout implementation of the Social Support Act
Provide sufficient resources	Recruiting of frontline workers. Provision of additional training, intervision and coaching to assist the frontline workers.
Institutionalize change	Introduced monitoring systems, in-house social support teams, service-chains, introduction of new working procedures
Pursue comprehensive change	Practically the whole cluster Social was affected through the changes

Table 10: Deployed change management tactics in Breda.

5.2.3   Enschede: 'Pioneering'

Data painted an image of a municipality that was well prepared for the transition of the Social Support Act. The secret to this seemingly smooth transition might follow from the pioneering status of Enschede. The municipality was among the first to introduce the concept of frontline steering and social district teams (respondent P). Moreover, the early decision to move towards an integrated social domain and through timely phase the implementation are likely to explain the positively experienced transition.

Already before the decentralizations were announced, Enschede experimented with frontline steering and social district teams (DE-01, DE-02, DE-17). Given the decentralizations and associated cutbacks, Enschede communicated this as an opportunity to work towards an integrated approach in the social domain. Already in 2012, Enschede published the policy paper 'Meedoen naar Vermogen' (Participate according to Ability). This consisted of a vision, translated into tangible starting points and provided an overall direction, accompanied with a time-path and milestones (Respondent P, DE-02).

Since the municipality of Enschede already worked with community teams and a district-based way of operating, they could fine tune the design of the social support team

in the district Velve-Lindenhof (Respondent P, DE-05). Assigned by the executive board of the municipality, this was done in an interactive manner with policy-makers, frontline workers and external stakeholders (e.g. healthcare providers, insurers, welfare organizations) (Respondent P, Q, DE-02, DE-08, DE-11, DE-15, DE-16). This went rather smooth:

> *"(...) it was just a further development from the community care teams that were already there in Enschede, to a vision, from the municipality. An interpretation, a concrete interpretation of social support teams. But actually that was not very exciting, because that development in Enschede had already taken shape in those community teams."* (Respondent Q)

Along these experiments, Enschede commissioned various studies to assess the effectiveness of integrated social support teams (DE-17). Results indicated that integrated social support teams would offer the best results. These were finally constructed in 2014, in cooperation with Social Support Foundation Enschede (SME) (Respondent P, Q, DE-42). A hybrid construction has been installed, where the district coaches of SME are seconded to the municipality and the social support consultants (still from the 'old social support act') were seconded to SME. Also in terms of management, one is mutually seconded (Respondent P, DE-18, DE-19, DE-38, DE-42).

To support the district coaches in the social support teams, transformation coaches were hired and additional training was given. These additional modules focused on the desired way of working, to assist citizens with their problems. Moreover, they received technical training to understand the newly implemented IT systems (respondent P, Q, DE-24, DE-34). It's a continuous cycle of further refinement:

> *"I think that you are constantly talking to each other about 'what is possible', 'how can you organize it as efficiently as possible'. 'How can you optimize the processes?' That is a continuous line. It also does not stop in 2020 or something."* (Respondent P)

Moreover, in terms of procurement, Enschede cooperated with neighboring municipalities. Cooperated within Samen 14 (Together 14), the fourteen municipalities already established a Shared Service Centre. Through bundling their efforts regarding procurement for the Youth and Social Support Act, it was expected that this would reduce the administrative burden for healthcare providers and lower costs. In February 2014, a quartermaster was appointed by the 14 municipalities to set up the board committee Organization for Health- and Youth-care in Twente (OZJT) (Respondent Q, DE09, DE-12, DE-16, DE-37). On January 1 2015, this board committee became operational. OZTJ also commissioned a consulting company (Kennispunt Twente) to set up a monitor for the Social Domain in Twente (DE-45). This is an additional monitoring tool besides the monitoring tools (e.g. client satisfaction questionnaires) Enschede implemented themselves (DE-06).

Although most of the procurement of care was coordinated by OZJT, a large portion of contract management remained within the scope of the municipalities themselves. Enschede invested in the professionalization of contract management and brought additional contract managers in (Respondent Q). This fitted within a broader strategy, as Enschede deliberately choose to further develop the welfare domain only after the social support teams were fully operational (respondent Q, DE-36). The municipality opted for a different strategy within the welfare domain, by shifting from subsidies to contracts. This allowed for more performance-based management and required additional con-

tract management capacity (respondent Q). To reduce the demand for Social Support provisions, the contracted welfare suppliers were ordered to seek cooperation with the local support teams (respondent Q).

Determinants of successful change	Summary deployed tactics
Ensure the need for change	Communicated need to change because of changing legislation.
Provide a plan	The document 'Meedoen naar Vermogen' functioned as starting point the establishing of integral social support teams.
Build (internal) support	Employees were regarded as agents of change, learning by doing
Ensure support from top management	The executive board commissioned early on to implement the first integral social support team.
Build external support	Collaboration was sought with external stakeholders such as health insurers and healthcare providers throughout implementation of the Social Support Act. Most notably with Social Work Foundation Enschede.
Provide sufficient resources	Recruited additional district coaches, team managers and contract managers. Invested in additional training, intervision and coaching (transformation coaches) to assist the district coaches in the social teams. Invested into the professionalization of contract management.
Institutionalize change	Introduced integral social support teams, mutually seconded personnel, and establishment of board committee OZJT.
Pursue comprehensive change	Practically the whole cluster Social was affected by the changes.

Table 11: Deployed change management tactics in Enschede.

5.2.4 Rotterdam: From bottom-up to a rigid top-down approach

In the implementation process of the Social Support Act, the influence of the political nature of the municipality showed. After a concern-wide reorganization in 2011, cluster Social was preparing the organization for the tasks arising from the decentralizations. However, as a consequence of the boards' coalition agreement in mid-2014, another reorganization seemed unavoidable.

Already in 2011, the city council demanded a blueprint planning of the concern-wide organizational change trajectory (DR-02). Administered with the task to reduce 20 percent in formation, the administration changed from dozens separate organizational units into a cluster formation (respondent J). Rapidly following this reorganization was the announcement of the decentralizations, requiring the cluster Societal Support (MO) to change once again. This was deemed necessary given the budget cuts associated with the decentralizations (DR-03). A meticulous time-path was constructed, a project group organized in various subgroups prepared the transition (DR-03). In the crafted vision of the healthcare system in Rotterdam, two social support teams would function as the gateway: parent-child teams and 'regular' social support teams (Respondent J, M, N and O; DR-06). In the course of 2013 and 2014, experiments and pilots with these teams took place (respondents J, N and O; DR-03 until DR-11).

However, coalition agreement of the local political parties, presented in May 2014, sta-

ted that there would be integrated social support teams (respondents J, N and O; DR-18). Shortly after, a new program manager responsible for the social support teams, was appointed. The new coalition wanted the integrated social support teams to be operational at the beginning of January 2015, so little time was left. It presented the project group with a challenge (Respondent O). Due to the limited time, the department heads were asked to fit in their teams within a prescribed framework. The radical change caused uncertainty of the positions of involved individuals and resistance. Not all of the department heads shared the need to change, rather felt forced to cooperate. Hence, it was not experienced as interactive nor were the changes translated enthousiastically to their employees.

This illustrates the fragile support within the cluster for the reorganization. The fact that the nature of the social support teams changed, also meant that other organizational units within the cluster Social needed to change (Respondent J, K, and O; DR-26, DR-37). But it had also implications for external stakeholders. Especially for the Centre for Youth and Family (CJG: "Centrum voor Jeugd en Gezin) it was an unexpected turn of events (respondents O and N). Previously, CJG was promised to manage the Youth teams. The move towards integrated teams meant that a compromise needed to be sought. As a result, CJG would provide team leaders for half of the social support teams and replacement team leaders for the other teams (respondent O and N).

The new executive organization Social Support (MOW) that hosted the newly created social support team also compromised of the social counters (Vraagwijzers) located in the districts and an administrative department called Administration, Business operations, and Professional Development (ABV: 'Administratie, Advies & Implementatie, Bedrijfsvoering, en Vakontwikkeling'). Contract management was placed in the policy-making directorate Public Health, Welfare and Care (PGWZ).

To smooth the transition process, various actions have been taken. A Taskforce has been introduced to support professionals with jammed cases (DR-17). Besides recruiting new experienced colleagues (e.g. to staff contract management department), temporary personnel has been hired to staff the social counters (DR-17). Moreover, extensive training and development trajectories have been established, tailored to functions/tasks (respondent J, K, L, M, N, O; DR-17, DR-20, DR-24, DR-32, DR-35, DR-38). These trainings are meant to guarantee a high quality of service delivery.

However, from the start in 2015, it became apparent that the governance model of the new created directorate MOW did not function. A long list can be made (DR-48):
• The links between the social counters, social support teams, ABV (directorate MOW) and the policymakers / contract managers (directorate PGW&Z) did not function well (Respondents K, L, N and O; DR-31, DR-45).
• The quality assurance officers of ABV seemed not able to train the employees at the social counters adequately (DR-31, DR-45).
• The cooperation between social counters and social support team was laborious (respondent J, K, L, M, N, and DR-45).
• The different professionals (youth and adult care) found it difficult to cooperate (e.g. different registrations, privacy) (Respondent K and N).
• Professionals in the social support team were only hired by the city of Rotterdam. This led to various practical coordination difficulties and misunderstandings (Respondent

N).
- (Replacement) Team leaders were supposed to handle caseload, yet it was a full time job to manage their team (respondent O and N).
- The municipality uses three IT systems (for the 'old' Social Support tasks, for youth care and adult care), frustrating an integrated way of working and preventing reliable management information (Respondent J, K, N).
- Conditions such as housing were not adequate (e.g. office space, guarded/safe, availability of PC's) (Respondent N, O; DR-29, DR-45).
- Social support teams and social counters were managed differently, whereas more uniformity was desired (respondent N).

Hence, from 2015 onwards, a lot of effort has been directed to smooth things out (Respondent J, K, L, M, N and O). It asks resilience from the employees and a different attitude towards change, as the following quote illustrates:

"Yes that caused resistance, it frightened [people]. Like, oh, when does the change stop? Well, the theorem is, the change never actually stops. Because that change, that development, that will continue. It is, of course, a very young system, we exist for three years. That is very short when you see which laws have all been implemented. That has really been a lot. It is, I think, one of the biggest transitions of recent years. And we are also trying to explain people that means that we have to reinvent ourselves every now and then. If something does not work, we will have to make adjustments there." Respondent N).

Determinants of successful change	Summary deployed tactics
Ensure the need for change	Before the coalition agreement, the need to change followed from the decentralizations. After the coalition agreement, the urgency of the short timespan to integrate the social support teams was communicated as need for change.
Provide a plan	The reorganization of the executive directorate built upon previously written vision documents. Moreover, an overall framework for the new organization was provided by project team.
Build (internal) support	Managers were viewed as agents of change, responsible for communicating change to their employees as well as providing the building blocks for the new organization.
Ensure support from top management	The rapid political turn led to a change of plans and forced the integration of social support teams. This also led to a change in leadership in the respective project teams.
Build external support	Collaboration was sought with external stakeholders such as health insurers and healthcare providers throughout implementation of the Social Support Act. Most notably with Centre of Youth and Family (CJG). Agreements with CJG had to be renegotiated.

Determinants of successful change	Summary deployed tactics
Provide sufficient resources	Training courses were offered, implementation capacity has been increased by hiring temporary personnel, recruiting additional expertise and installing a temporary Taskforce.
Institutionalize change	Processes and procedures changed, new roles for social support team members and social counter personnel.
Pursue comprehensive change	Practically all directorates within cluster Social were affected due to the establishment of directorate MOW.

Table 12: Deployed change management tactics in Rotterdam.

5.2.5 Preliminary conclusion

The data displayed a wide array of change management practices deployed by the municipalities of Amsterdam, Breda, Enschede and Rotterdam to implement the Social Support Act. Hence, an answer can be formulated to the first empirical question:

"Which change management practices do the selected Dutch municipalities employ to implement the Social Support Act?"

The municipalities of Amsterdam, Breda and Enschede opted for a more incremental approach. Not only did these municipalities experiment with the composition of the social support teams (in Breda and Enschede) or healthcare-networks (Amsterdam), most importantly, guided by vision documents, they built upon already existing structures. The rapid political turn in Rotterdam, pushing for integrated social support teams, meant that a rigid, top-down change process was initiated. Whereas in the other three municipalities employees were seen as the agents of change, arguably due to the short time span, in Rotterdam the managers were the agents of change. They needed to translate their teams or departments into the new reality with establishment of directorate MOW. Aside from these differences, each municipality sought the cooperation with external stakeholders. Healthcare providers, insurers and other instances such as Centre for Youth and Family or Foundation of Social Work in Enschede played a pivotal role in the realization of the social support teams.

5.3   Implementation of the Social Support Act: Success or failure?

It is now three years since the Social Support Law went into effect. One might wonder whether the decentralizations already brought what the legislator hoped for: providing tailored care, in a more effective and efficient manner.

The lack of agreed-upon standards to assess the outcomes of the implemented policies in the social domain, make it difficult to compare or value the success of each municipality. Hence, success is expressed in terms of the beliefs held by the officials: the perceived organizational performance, perceived changed organizational behavior or culture and the perceived performance on Social Support related tasks.
It was expected that, if the change trajectory met all eight determinants of successful change, this would make it more likely that respondents would have a more positive perception of the organizational responsiveness, behavior and performance of their municipality.

5.3.1 Amsterdam

The interviewed civil servants in Amsterdam differ in their opinions on the outcome of change. They perceive their own organization not necessarily as being more flexible nor responsive. It still seems difficult for the officials to work 'outside the usual line of command' in a more project-based manner. However, in terms of the Social Support Act, respondents perceive the municipality as successful. They acknowledge that there is still room for improvement, but experience the cooperation and commitment to continuously develop in partnership with internal and external as positive.

Organizational flexibility
First, in terms of the organization perceived responsiveness, there are ambiguous results. One of the goals of the 1S1O city-wide reorganization was to change those preconditions that would make the city more flexible and adaptive (respondent A, B, C). According to some respondents, the cooperation between departments already has improved (respondent B, C), yet some remain more cynical.

That this aspect of cooperation needs further attention, was also reflected in the opinions of respondents D and S. They noted that their departments ran into difficulties when cooperation with the district committees who responsible for the welfare provisions. After the reorganizations and decentralization, 'linking officers' were introduced to strengthen cooperation (respondent S). Moreover, supporting services were now centrally organized rather than in the line-organization. However, respondents stated that as a result, important experienced signals such as complaints or financial matters, barely reached them. They felt a distance previously not present (respondent D, R, S). In general, the introduction of new ways of working, such as project-based working on policy-transcending issues proven to be difficult, as line management is still dominant (respondent A, R). This arguably follows from the directors of result-responsible units (RVE's), which have close ties with their aldermen. They discuss budgets and policies with their political appointees directly, rather than involving their administrative top-management. The latter predominantly governs on policy-transcending issues, yet in practice, this overall management team is mainly putting out fires (respondent A).

Organizational culture: persisting behavior
Arguably, as the interdependencies between departments and teams altered and processes and operational management changed, this would emphasize different or new competences of staff. The experiences of respondents revealed mixed experiences. In line with the notions of laborious cooperation, some argued that it simply takes time to acquire new competences (respondent A, D, T). Moreover, through experiences and learning, and changed ways of working, officials expand their competences (respondent A, D, R, S). Mainly through repeated communication, new ways of working are promoted (respondent A, B).
The respondents working at the top of the administration, seemed to perceive managers as the agents of change. They argued that managers should promote new routines, among others through continuous coaching (respondent A, B). In contrast, the interviews with respondents from the department Care and Procurement and Contract management indicated that employees already have grown into their responsibilities and competences (respondent D, R, S, T):

"(...) on both sides, there was a specific type of individual (...) that does large projects, but then from start until the end. It doesn't stop when the ink runs dry, it does stop when it works in actual practice. And that is of course the type of official that is needed, as result of the decentralizations. That is why, in our department, have changed a lot. We are now all policy and realization-employees, not just policy or implementation." (Respondent D)

With additional help by coaches (respondent T) the employees took it upon themselves to further professionalize (respondent D, R, S).

Perceived performance on Social Support-related tasks
Whether Amsterdam is successful in the social domain could not be answered by some respondents as they did not directly work with relevant external stakeholders (respondent A, B, C). However, the officials that operate closer to the health organizations are mainly positive. They stress the importance of facilitating the care providers to achieving the best solution for the '*Amsterdammer*' in need (Respondent D, R, S, T). Whereas first the municipality took on more responsibility in facilitating collaboration between healthcare providers, over time, the providers themselves increasingly take ownership. This is positively evaluated and seen as successful (respondent D, S and T).

5.3.2 Breda
It seemed that Breda went throughout the transition phase without major interruptions. The respondents hold positive views regarding the flexibility of the organization, the persistency of implemented changes and their overall performance.

Organizational flexibility
From the start of the decentralizations, within the process of change, most internal stakeholders were or felt involved (respondent E, F, G, H, I):

"Actually, we have, and I think that is also a well given within the Social Support Act, we actually had a consultation from the beginning onwards in which all disciplines were involved. So contract management, policy advisors, the team management, the quality assurance employee, someone from IT, someone from the administration, a financial advisor ... At the moment that there is a problem, you all know more." (Respondent H)

Moreover, through organizing in service chains, the preconditions for an even more flexible organization have been created (respondent E, G). The officials were already quite satisfied with the present status of the organization. Nevertheless, further improvements are needed to make the workforce more malleable (respondent G). Among others, this involves increasing mutual replicability (respondent G, H, E).

Organizational behavior: persisting behavior
The way Breda implemented the Social Support Act, changed the work of the officials profoundly and institutionalizing the desired behavior (respondent E, F, G, H, I). More emphasizes is now placed on the client need rather than what the rulebook says:

"And what we already did, with that "tailored-assistance triangle", so not only look at the regulations but also, what is the effect we are going to achieve. And what will it cost. That is now also widely propagated by the organization. So I think that's nice steps." (Respondent I).

A critical remark should be added. When the new Social Support Act came into effect and newly hired colleagues started, a split emerged between client manager working in the 'old Social Support Act' and those operating under the renewed Social Support Act. These new colleagues worked from the start in the implemented system and are able to assist clients in the new Social Support tasks (e.g. assistance of handicapped individuals or to those with social psychiatric problems). The procedures for the 'old' client managers did not change as much (Respondent G, H). It is yet unclear whether this will have consequences for the extent of success of the organizational changes.

Perceived performance on Social Support-related tasks
In terms of performance of Breda within the Social Support, the employees are rather positive. The collaborations with external stakeholders, varying from health insurers, welfare organizations and healthcare providers are experienced as good (respondent E, G, H, I). They operate in close partnerships:

"(…) last year, we have conducted an evaluation of our contract management. Also externally, where people are very positive about our approach. And I get that, because it's nice for companies, of course, if you can really say something yourself at the negotiating table." (Respondent H).

A report by their local Court of Auditors takes a more critical stance on the performance of Breda in the social domain. Assessing the Social Support Act-policies from the perspective of the client, they argued that despite the majority of clients is satisfied with the support they receive, clients experience various barriers to request tailored support. One of the main problems was the lack of information. Clients did not necessarily know what 'Zorg voor Elkaar Breda' was. Moreover, the self-reliance of clients is overestimated as 60 percent argued that they received too little assistance (DB-39). This mainly involved household assistance. However, the Court of Auditors also noted that an experienced shortage of household assistance was part of a wider trend, witnessed in all Dutch municipalities (DB-39). That might explain why interviewed staff did not make any notions of such experienced shortcomings, as it seems to be part of a wider-experienced problem among municipalities.

5.3.3   Enschede
The administration of Enschede seemingly adopted the Social Support Act like a knife through butter. Keeping the small sample size in mind, the two respondents both point to the relatively calm continuous development Enschede has found herself in.

Organizational flexibility
A relatively long time, Enschede already implemented frontline steering and community teams. It is highly likely that because of these early-on experiences, the transition to adopt the Social Support Act was relatively easy:

"(…) if you really state as municipality that you want to connect with society and to the needs of residents, then you have too. This means that from the start, with all developments you encounter and the policy that you make, that you do this together with your residents and with your partners. So in the last few years, this has been increasingly on

the horizon in all our policy developments." (Respondent Q).

Moreover, the data revealed that the governance model of the social support teams worked well. The good cooperation with Social Support Foundation Enschede (SME) ensures that the social support team, the neighborhood coaches, health care consultants and policy staff have got to know each other and are able to find each other (respondent P). This enables them to connect the right people and hence increase the capacity to quickly solve problems (DE-42).

Organizational behavior: persisting behavior
Within the renewed social domain, a different attitude and work method is expected. Not only from officials, but also from their partners, welfare organizations, Social Support partners, Youth care partners and so (respondent Q). However, this requires continuous attention (respondent P, DE-42). For instance, the frontline workers asked for more guidance (respondent Q). Hence, to argue that the desired behavior is already persisting, cannot yet be concluded.

Perceived performance on Social Support-related tasks
The officials positively evaluate the efforts of the municipality within the social domain (respondent P, Q). Both within and outside the municipality, the different collaborations have seemingly improved. An evaluation study presents supportive evidence, illustrating that their current health-system functions satisfactory of the various stakeholders (DE-42).

5.3.4 Rotterdam
In Rotterdam, practically every respondent was able to write a large list of improvement points. Hence, not all efforts could be recalled a success. However, standing out were feelings of pride. The politically motived decision to opt for integrated social support teams led to a rapid succession of change, which has been succeeded by a process of continuous development.

Responsiveness
In general, the respondents were critical on the perceived responsiveness and flexibility of Rotterdam. Although some argued that this slightly improved as result of the various reorganization efforts, most still recalled Rotterdam an unwieldy organization (Respondent J, K, L, M, N, O). This appears to follow from the laborious collaboration that demands continuous attention:

"Well, sometimes, you just have not been in the picture. Experienced that a couple of times. Particularly at the interface between policy and implementation. They have set up a process team Care to facilitate and ensure that the [central organized specialized care] counters and the social counters of MOW [gateway into Social Support Act] (…) they are better attuned to each other, to ensure some uniformity in their decisions. It was then when we said, it would be convenient if someone from the policy department would be involved, to at least have a look at the used frameworks, finances, cooperation with external providers… We have a number of aspects, based on which it would be good to hook us up. But at this moment, they [implementation] keep the door closed." (Respondent L)

It is likely that this perceived lack of cooperation follows from the flaws that became apparent when Rotterdam started to work in the current system (DR-48). Respondents speak of multiple trajectories of further development and the need to prioritize in this regard. It appears that in the initial years, the focus was mainly on ensuring their citizens continuity of necessary assistance, rather than focus on improving their own organization.

Organizational behavior: persisting behavior
Hence, with respect to the organizational behavior, the new desired organizational culture in which policy-makers and frontline workers work together in a well-oiled machine has not yet come about. Increasingly, by means of the administrative supporting department ABV, policy and implementation departments find each other and seem to secure better alignment (respondent J, K, L, M, N, O). However, as already has been mentioned, there is still room for improvement (DR-48). The wide variety of used IT-systems, work procedures and lack of sufficient alignment is experienced as an obstacle towards more successful cooperation and to institutionalize the desired organizational behavior/culture (respondent J, K, M, N, O; DR-48).

Perceived performance on Social Support-related tasks
As various policy documents show, in the first years it was difficult to handle all cases within the legal required time of eight weeks, resulting in long queues (DR-31, DR-45). Moreover, the bureaucracy for the frontline workers has significantly increased, hampering good service-delivery (DR-48). But despite these and other challenges (e.g. as mentioned in paragraph 5.2.4.), employees of Rotterdam seemed to be very proud. According to a civil servant, citizens do not see the compartmentalization experienced within the municipality as they receive an integrated package of support (respondent M). While such claims are disputed by evidence laid out by their local Court of Auditors (DR-48), it seems that predominantly because of the magnitude of the changes and the fact that they sort of managed implement these changes and cope with following difficulties, is experienced as a great achievement. (Respondent J, K, N, O). Officials experienced little time to ensure a quick turn-around, getting integrated social support teams operational as of January 2015. They seem proud about the fact that they managed to do this all together while providing continuity of care (respondent J, K, N, O).

5.3.5 Preliminary conclusion
Aforementioned sections provided a thorough answer to the second empirical question. That is, to what extent has the Social Support Act been successfully implemented in the studied Dutch municipalities?
Within the evaluations of the change trajectories and perceived outcomes, the official's responses reflected differences between and within municipalities. First, in Amsterdam officials were divided whether the organization became more flexible and responsive and to what extent behavioral change was persisting. The cooperation between various organizational units were characterized as difficult and horizontal line management still appeared to be dominant in the organization. However, with respect to the Social-Related tasks, officials perceive their network approach mainly successful. Secondly, the officials of both Breda and Enschede perceived their organizations as more flexible and adaptive. Albeit both municipalities have introduced different governance models to achieve this flexibility, both find support among their external stakeholders in the provi-

sion of Social-Support related tasks. Moreover, the changed behavior seems to be persisting. Nevertheless, as the municipality of Breda experienced a distinction in employees working in the old, and new Social Support Act, this might lead to difficulties in the foreseeable future.

Finally, the findings in Rotterdam indicate that, despite the desire to become more effective and efficiently, the internal cooperation was still experienced as laborious. Moreover, as various subsystems are still intact, new ways of working are not yet institutionalized. Arguably, this has caused that the desired behavior of professionals and staff is not yet persisting. Nevertheless, the officials seemed proud that they managed to achieve continuity of services amidst all turmoil and work hard to continuously improve their service-delivery.

Hence, despite the differences among the municipalities, in general staff perceived their municipalities having made a lot of progress with their responsibilities following from the Social Support Act.

5.4   Relation between change practices and outcomes

The first empirical question focused on the deployed change management practices, followed by the perceived outcomes of the change trajectories. The third and final empirical question concerns the presupposed theoretical relationship between change management practices and its outcomes: *"Does the theoretical relation between change management practices and the successful adoption of change hold in the case of the Social Support Act within the selected Dutch municipalities?"*

In the theoretical chapter, the success factors have been translated into assumed theoretical relations between change management practices and the success of change (see table 4). Based on the responses, an indication could be made per case, whether the determinant indeed contributed as theorized to the course of the change trajectory (see table 13 for an overview). In appendix D, a detailed account of the overall perception of each respondent per case about the relevance of each determinant in the change process. Consequently, the process in which the total 'scores' have been assigned become transparent. Note that these 'scores' per determinant per respondent are not the result of counting, but are subject to the interpretation of the scholar. To ensure that the interpretation reflected the experiences of respondents, every respondent has been sent a transcript with a summarizing analysis. Consequently, if they felt a misinterpretation occurred, they had an opportunity to reflect and provide additional explanation.

Table 13: Indication of respondent's perceived contribution of the determinant to successful change. Yes = predominantly positive, No = predominantly negative, Mixed = different views held.
*N/A = too little data collected to give an indication.
**The notion of success is based on the overall tendency of the findings per case as described in chapter 5.3.

As the results in the table suggest, a pattern seemed to emerge while analysing the data. Officials argued that political support, external support from health providers, the availa-

Determinants	Theoretical assumptions:	Amsterdam	Breda	Enschede	Rotterdam
Ensure the need:	• It is perceived important that the communicated need for change is in accordance with the felt need for change.	Mixed	Yes	Mixed	Mixed
Provide a plan:	• It is perceived as important for successful implementation of change to transform the need for change in a course of action or strategy in written documentation.	No	No	No	Mixed
Build internal support:	• Employees are actively involved in the change trajectory.	Mixed	Yes	Yes	No
Ensure support from top-management:	• Employees perceived commitment and support from top-management.	Yes	Yes	*n/a	Mixed
	• Employees believed that leadership was distributed throughout the organizational change processes.	Mixed	Yes	*n/a	Mixed
Political Support:	• Political support is perceived as important for the organizational changes according to the respondents.	Yes	Yes	Yes	Yes
External support from health providers:	• Relevant stakeholders (e.g. healthcare providers) should be actively involved in the implementation of the Social Support Act.	Yes	Yes	Yes	Yes
Availability of resources:	• Employees believed that sufficient support – both instrumental and emotional –to implement the Social Support Act successfully.	yes	Yes	Yes	No
Institutionalize change:	• The change process should involve interventions on the processes, thereby altering the way individuals work.	Mixed	Yes	Yes	Mixed
	• Training and development should be given to facilitate the new way of working and desired behavior.	Yes	Yes	Yes	Yes
Pursue comprehensive change:	• The change trajectories should be comprehensive, affecting all departments within the social domain and related departments.	Yes	Yes	Yes	Yes
	• The interdependencies between the relevant organizational subsystems should be understood to prevent necessary 'corrections' or new (smaller) reorganizations.	Mixed	No	No	No
Succesful?**		Mixed	Yes	Yes	Mixed

bility of resources and the institutionalization of change was or is important in the course of changes leading to the current situation. Moreover, although almost every official noted that for sustainable change it is important to review all processes and interdependencies with other departments, they also experienced this to work best if timely and incrementally changed. Given the fact that the design of this study is not strong suited to produce evidence for comparisons and causal claims beyond the individual cases (see limitations chapter 4.4.3.), these general patterns are still mentioned as they yield interesting information. Although they should be interpreted carefully, they offer concrete directions for future research, to test whether these assumed causal relations indeed hold in a similar context among (Dutch) municipalities.

5.4.1 Amsterdam

In Amsterdam, some discrepancies show when assessing each determinant for its relative contribution in the course of change. This appears to follow from the fact that some saw the city-wide reorganization as overarching and necessary project (respondent A, B, C), while those operating in the social domain perceived this overall reorganization as additional hindrance in the implementation of the Social Support Act (respondents, D, R,

S and T). The city-wide organization was seen as distraction, something that also could take place at another time (respondent D, R, S, T). Hence, there was no widespread consensus on the *need for change*.

It is plausible that the city-wide reorganization met with large resistance because *managers were marked as the agents of change* (respondent A, B, C). Seemingly, this was the result of the *appointed town clerk*, that was associated with blueprint planning and top-down directed reorganizations (Respondent A, C, D, R, S). Managers needed to translate the implications of the overall change projects to their own teams. However, not all managers supported these changes, hence officials implied that these managers did not encourage their employees to support the change (respondent A, B, C). An evaluation study of Utrecht University reflects aforementioned course of events (DA-56).

Most important, all respondents noted that the planned, *comprehensive change* approach of the city-wide reorganization did not deliver as promised. Technically, Amsterdam reorganized within the tight timespan (Respondent A, C). But the challenges within the cluster Operational Management turned out to be larger than expected, causing stress, a high overturn and a lack of adequate management information and various supporting systems (Respondent A, B, C; DA-28, DA-56). At the same time, the municipality districts were lifted and transformed into district committees, causing staff to be moved. Due to all the turmoil, officials not only lacked adequate management information but also noticed that 'their' points of contacts at either departments or teams had changed (respondent B, D, S, DA-56). Moreover, besides training or development, staff argued that simply takes *time* for these departments, teams and individuals to settle and re-connect (respondent A, B, D, T). Time that was not foreseen in the course of change (respondent A, C).

Therefore, those operating in the cluster Social did not understand why the reorganization needed to happen that particular time, just as they were preparing for the various decentralizations (respondent D, R, S, T):

"Indeed, in the scope of new tasks that came to the municipality, I thought that a reorganization at the same time in the administrative organization would not be a good idea. So, of course we had a lot of problems with that. To absorb all those new tasks as administration, to ensure that you are prepared, to do the right things already requires a big deal of the organization. And in the meantime you are also going to completely redesign the municipal organization, remove all functions from the services and position them elsewhere. Yes, that was really a thing." (Respondent T)

In stark contrast, the change trajectory in the social domain *interacted more closely with all their employees*. Respondents describe a process and culture *where individual employees claim ownership for dossiers and parts of the change process* (respondent D, R S, and T). It seems that positively contributed to the overall progress of implementation of the Social Support Act. Another determinant that arguably benefitted a successful implementation was the *availability of financial, material and human capital resources*. Respondents noted that additional implementation capacity was hired and new colleagues experienced in non-residential care were recruited to assist the respective teams and departments, most notably contract management (Respondent D, R and S).

Moreover, the *various pilots and experiments* improved the collaboration with *external*

stakeholders and provided the municipality with an opportunity to examine their idea of care networks. Because of the complexity of the decentralizations, the support of and cooperation with these partners was seen as important (respondent D, R, S, T). Arguably, the complexity prevents all interdependencies to be fully understood, hence trail-and-error trajectories are inevitable (Respondent T). Hence, the Social Support Act has been implemented in phases. This *incremental* approach was perceived as important (respondent D, R, T) as this bought time to get used to the new ways of working. That is nicely illustrated in the development of the district alliances. The first couple of years, the municipality invested in quartermasters that supported and facilitated the networks. Afterwards, the health organizations themselves acknowledged that they should take responsibility for these networks and continued the district alliances (respondent D, T).

5.4.2 Breda
Throughout the implementation in Breda, almost all determinants of successful change seem to be present. That might lead to the conclusion that the implementation went without a fight. However, the findings add a bit more nuance.

The need to change, translated in a compelling vision, was widely shared throughout the organization. Moreover, seemingly inspired by the *creed of the town clerk*, the implementation process was not characterized by *blueprint planning*. Contrarily, the experienced complexity of the decentralizations led to believe that the change trajectory should be *incremental* and *participative*, with *close interactions with relevant external stakeholders* such as health providers, insurers and welfare organizations (respondent E, F, G H, I). However, close ties also remained with their *political overseers* to *ensure their support* (respondent E, G).

Moreover, the *availability of sufficient resources* such as human capital, material and financial support, were perceived to be important in the adoption of the Social Support Act. As execution of this Act required expertise not yet present in the administration, additional expertized practitioners were hired. Additional training and development has been offered since. Furthermore, sufficient discretionary space has been experienced to conduct pilots and experiments that benefitted adoption of the Act (respondent E, F, G, H, I).

But arguably most important has been the incremental approach. The budget cuts associated with the decentralizations forced the administration to think of innovative ways to decrease the demand for non-residential services (respondent F, H). First they started with the networks already available, making these partner of the new social domain and ensured continuity of care. Only afterwards, further improvements were made, based on feedback by internal and external actors (respondent F, G H, I).

> *"While you might [have decided], if you thought ahead, no, we have to draw that differently. But the organization was not ready for that either, so that did not work at that moment. Or at least, that was the general feeling, that's how we should proceed, we can go this far and not go any further. Then, we have to be able to work our way out of it" (Respondent J)*

As a consequence of an incremental approach, the organization is continuously developing. It was not until 2017 that the social domain was restructured in service-chains.

This process of continuously development and improvement has been described as 'learning together' (respondent I). It is highly likely that this participative approach caused little resistance (respondent F, G, H, I). If anything, the reorganization made mandates and structures clearer, allowing the client managers to intensify or lower assistance for their clients if necessary and were evaluated quite positive (respondent G, H, I).

5.4.3   Enschede

In Enschede, the city council established a documented vision on the social domain in 2012. This established the *need for change* which seemed to be shared in the administration of Enschede (respondent P). Afterwards, more documents and notions have been written, but the already documented vision was experienced as the red line throughout, providing a direction for the officials. Hence*, extensive blueprints* and other plans were not perceived as crucial in the course of change (respondent P, Q).

Emphasizes is placed on continuous development (respondent P). The management of the department Social Support and Foundation Social Work Enschede govern the social support team and use a *participative model*. With teaching tables, dialogues with target groups they interact closely with their frontline workers (respondent P). The directorate and management are leading by example, collecting information and solving bottlenecks (DE-42). An evaluation study concerning the governance structure of the social support teams indeed supported these claims of *facilitating or supportive leadership* (DE-42).

Moreover, the *availability of resources* seemed important. Officials experienced a broad mandate from their executive board to conduct pilots and experiments, enabling them to fine-tune the social support teams (respondent P, Q). New, experienced colleagues were recruited from care and welfare organizations for the new tasks in the Social domain. Furthermore, transformation coaches were hired to help the district coaches in the social support teams with their new tasks (respondent P).

Still, there is always room for improvement. However, the respondents revealed that the pursuit of *comprehensive change* would not work (respondent P, Q). The reforms already administered a comprehensive set of new responsibilities to municipalities, an incremental change makes that more manageable. It allows to realign policies and to smooth the folds:

> *"That's when we said, that's too much to take that with a quick decision to the social support teams. So, two years ago, after the decentralizations, we have started with a new policy vision and a new perspective how we want to shape welfare. And how that fits with our societal goals and how it fits within the cooperation of the social support teams."* (Respondent Q).

5.4.4   Rotterdam

The implementation of the Social Support Act in Rotterdam is characterized by the far-reaching political intervention in the summer of 2014. Staff perceived this as turning point. Indeed it seems that the decision to speed up the integration of social support teams and youth teams into one integrated team caused a chain of events that has led to a situation where Rotterdam is still picking up the pieces from that top-down initiated process of change.

At first, the *need for change* was translated to and associated with a vision that presented the decentralization as opportunity to improve service delivery (Respondent J, N, O). A large project organization in which all departments or teams were represented, prepared the organization for the upcoming changes (Respondent J, L, M, N, O). *Pilots* and *experiments* took off, agreements with various *external stakeholders* were made (Respondent N and O). Until 2018, social support teams and youth teams would co-exist next to each other. Apparently, officials had not expected that the newly elected coalition would insist that from January 2015 already integrated social support teams needed to be operational (respondent N, O).

This rapid political turn meant that the *need for change* altered. The intervention was clearly seen as political decision and not necessarily shared among staff (respondent J, L, M, N, O). Moreover, the limited amount of time and the preferred style of the newly appointed program manager led to *a planned approach* that *pursued comprehensive change* (Respondent J, N, O). A whole new directorate was established, with its own back office and caused changes to other directorates in the cluster Social Support (K, N, O). This led to resistance, as previous studies predicted. *Managers were seen as agents of change*, making the changes personal to their respective teams. Through communication trajectories employees were *informed* but *did not participate* in this stage of change (Respondent M, O).

After the start in January 2015, it turned out that the cooperation within and between the different departments nor with external stakeholders did not work as hoped (respondent J, K, L, M, N). It appears that there was a significant misalignment in IT-systems, contracts and agreements, expertise and ambition (respondent J, K, M, N). Throughout the implementation documentation towards the city council presents supportive evidence for these unforeseen and other unintended consequences (DR-17, DR-31, DR-29, DR-45; DR-48).

The painfully implementation of the Social Support Act seems to conflict with earlier notions that staff carefully yet positively evaluate the performance of Rotterdam of Social Support-related tasks. However, a sharp contrast can be witnessed from 2015 onwards, when the Social Support Act went into effect. Effectively, the implementation has continued since then. However, the difference is that nowadays, the administration has opted incremental approach and that seems to work much better. Although still overspending, the officials feel *supported* by their *political* overseers (respondent J, M, and N):

> *"The urgency is felt in such a way that if there is a well thought-out measure, then that is honored. It is also literally said, going ahead of the costs. With this approach investments will returned in the long term."* (Respondent K).

Funds are disclosed for additional investments, e.g. in new systems and more training and development (respondent J, H, N). Priorities for further developments are made in cooperation with employees, "*enhancing the capacity to learn*" but thereby also lowering resistance (respondent K, L, M, N). Cooperation within and between the various departments still seems to require constant attention, as the consequences of the organizational size of the administration should not be underestimated.

> *"(...) what I wanted to say about it, is how complicated culture change, and the disadvantage of such a large and complex reorganization. (...) you just have very passionate,*

very good colleagues in terms of content, which is really a pleasure to work with but the practice of turn such an oil tanker, to adjust it, that is just super complicated. So yes, I notice that this receives attention, but in practice, it quickly lose out because other priorities, from politics, from the executive department, often have the upper hand." (Respondent J)

5.4.5   Preliminary conclusion

Despite the differences in the cases, the results do indicate that some determinants are more important than others. In all four municipalities, the importance of the *support from health providers* and *their city councils* as well as having *sufficient resources* was perceived as importance to achieve successful change. Moreover, it was unanimously agreed that *the pursuit of comprehensive change* would not work in the context of the decentralizations. The expanded set of tasks of municipalities already proven difficult on its own. Furthermore, officials seemingly struggle with the interdependencies within and between departments, let alone with other organizations. Hence, the civil servants stressed the importance of incremental change since that allows for more trial and error trajectories, testing and redesigning links within and between organizational units. Subsequently, the emphasis on *incremental change* paves the way for a more loosely documented vision rather than extensive blueprint planning. Moreover, they emphasize the creation of conditions that foster learning rather than prescribing everything. The support from *top (administrative) management* in this respect seemed to be important, as especially the case of Breda and Enschede illustrated. The employees were stimulated to participate in the change process and regarded as agents of change. These notions of distributed leadership was also positively related to the implementation of the Social Support Act in Amsterdam. Within the municipalities, this seemingly effectively lowered organizational resistance and enhances *internal support*. Contrarily, in Rotterdam and Amsterdam, preferred top-down reorganization style of the administrative top management was experienced as contributing negatively to the implementation of change. Finally, contextual factors such as organizational size and the time to implement the changes were experienced as important for the extent of successful implementation.

6 Discussion

The findings will be further discussed and contextualized in this chapter. Several scholars suggest that findings are meaningless without attention to the context (Pettigrew et al., 2001; Armenakis & Bedeian, 1999; Kuijpers et al., 2014). Through an assessment of the critics of the planned theory approach, the findings will be reevaluated and an extension of the framework on Fernandez and Rainey will be proposed. Recommendations for future research will be presented, after reflecting on the implications of the findings for practice and academia.

6.1 Extension on Fernandez and Rainey

The framework of Fenandez and Rainey (2006) should be recalled for what it is: A set of determinants that each add a positive effect on the outcome of change. The presence of each determinant should smoothen implementation or have a positive additive effect on other determinants. Yet, various scholars seem to mistake their article for presenting a roadmap (Kuijpers et al, 2014). Moreover, the fact that each determinant should be translated to the context of the respective case is seen as problematic (Pollit, 2009). Criticists of this more 'generic' change management approach argue that most of the research on organizational change and management of change is '*acontextual, ahistorical, and aprocessual*' (Pettigrew et al., 2001, p. 697).

Therefore, this criticism will be discussed conform the proposed analytical framework by Armenakis & Bedeian (1999) and Pettigrew et al. (2001). This framework focusses on the context, content, and process of witnessed changes. This reevaluation illustrates several implications for practice and extends the initial framework of Fernandez and Rainey.

6.1.1 Context

Forces or conditions existing in an organization's internal and external environment, act as drivers of change and constrain managers' range of change tactics (Armenakis & Bedeian, 1999). For instance, these contextual issues can be dissected into external factors related to governmental regulations or technological advances. Whereas internal conditions include the level of expertise required by present technology, organizational slack and experiences with previous changes (Armenakis & Bedeian, 1999). There is no single best strategy of change as the context, and thus drivers of change can vary. Ultimately, it should fit the context (Kickert, 2014; Van der Veer et al., 2014; Sminia & Van Nistelrooij, 2006). Within the cases, various forces were witnessed that affected either the internal or external environment of the municipalities and thus influenced the process and subsequently outcome of change.

6.1.1.1 Internal environment
The concept of time helps to reveal those forces affecting the internal environment of

the municipalities. Temporality is exclusively seen as an essential component of organizational behaviour (Grzymala-Busse, 2011). Not only do actions unfold over time, the sequence in which these individual or collective events take place restricts future interventions or poses opportunities for alternative pathways (Pettigrew et al. 2001). Certain events can mark abrupt changes and speed up or slow down processes. Earlier organizational changes can negatively affect change receptivity, causing change fatigue making successful change harder (Frahm & Brown, 2005). Thus, as Pettigrew et al (2001, p. 700) state: 'History matters'. The factor of time reveals various forces in the internal environment og municipalities. These forces will be discussed in terms of duration and tempo.

Duration concerns the temporal length of an event (Grzymala-Busse, 2011). It appeared that, for instance in the case of Breda and Enschede, the seemingly endless development did not lead to change fatigue (Respondent G, H, I, P, Q). Contrarily, the relatively quick process of initial change in Rotterdam (from mid-2014 to beginning January 2015) led to a higher experienced *tempo* of change. That is, the (relative) amount of change per given unit of time (Grzymala-Busse, 2011). This was experienced much higher than after 2015, when further improvements were prioritized and incrementally implemented (respondent K, N, O). It is likely that this changed tempo negatively affected the receptivity to change. Leading to resistance and resulting in a difficult implementation of the Social Support Act.

Timing seemed quite an important factor in the case of Amsterdam. *Timing* can either refer to the occurrence of an event on a specified timeline or refer to the occurrence of an event relative to a specific timeline (Grzymala-Busse). The latter has been seen observed in Amsterdam. The overall reorganization that ran (or was perceived as running) parallel to the implementation of the Social Support Act was perceived as distracting and contributed to an unstable internal environment. Arguably, this has led to problems in the implementation phase (respondent D, R, S and T).

6.1.1.2 External environment
Municipalities meet various external forces and conditions, since they do not operate in a vacuum. Higher levels of government, or composition of the population could be examples of such external force or condition. These external forces and conditions were, to a certain extent, the same for all studied municipalities. The studied cities all consisted over a large population (>100,000 inhabitants) and were obliged to meet the (additional juridical) criteria of the Social Support Act, as has been discussed in the case selection. However, the impacts of these external forces and conditions seemed to differ per case.

First, the process of drafting the Social Support Act seemed to have influenced the implementation in the cases. The exact interpretation of the Social Support Act was still unclear in 2013 (respondent D, T, DA-05, DR-09). For instance, Amsterdam still anticipated that personal-related care would remain in the Social Support Act and foresaw a central role for the community nurse (Respondent D, T; DA-05, DR-09). However, personal and body-related care were transferred to the Health insurers Act, when the final drafted version of the Act passed in April and July 2014 in the House of Representatives and Senate. Moreover it seems logical that the relative short timespan between the time when the Act was actually finalized and went into effect, forced municipalities to look for networks or initiatives already present, although there is no conclusive evidence. The Social

Support Act provided the municipalities with the right to transfer and renew the contracts of clients that already had an AWBZ indication, to smoothen the transition. Hence, the administration first focused on 'guaranteeing continuity of care' before improvements or innovations could be implemented (Respondent D, H, L, M, R, S). This left little time to set up entire systems, and arguably stimulated the municipalities to use network-structures ('Breda Doet', District care Amsterdam') or partnerships (Social Work Foundation Enschede) that already existed.

Secondly, the Administrative High Court can intervene in governmental regulations. The High Court not only decided that household assistance remained within the realm of the Social Support Act, but also that performance domains should be made explicit in 2016.[4] A 'clean house' was deemed too vague. Policies had to be adjusted in the municipalities (DA-51, DB-39, DE-40, DR-42, DR-47). Subject to European Public Procurement rules, this was said to cause stress throughout the process of contract management. The desired procurement strategy in Amsterdam was even found to be conflicting with European regulation, leading to the withdrawal of a tender (Respondent R, H, M, DA-51). The conflict with European regulation eventually led to the renewal of previous signed contracts and (temporarily) kept them from innovating as they needed to redirect their tender (respondent R).

Third, the city council has quite some influence. As previously argued, officials are loyal to their political appointees (Kickert, 2014). This seems likely in the context of municipalities as well, due to the dualisation of their governance (VNG, 2007). The administration in the case of Rotterdam, seemed hesitant to integrate the social support teams. Yet, they integrated the teams as the coalition agreement requested (Respondent O). While the study of Fernandez and Rainey (2006) sees external stakeholders as entity to be persuaded when enacting change, here the political top ordered the direction of change. With other words, external stakeholders such as the political overseers also define the playing field that lead to organizational change.

> *"We work for the city, we work for the citizen, I work for the alderman. Yes, actually, I work for the city council, eh, that whole dual system, yes, if the city council finds something, comes with a motion, than we will have to do something with it." (Respondent N)*

6.1.2 Content

Content is a second important characteristic of the study of change (Pettigrew et al., 2001). The content of change can be easily mixed up with the process of change. However, the concepts do differ. Content describes what actually changes within the organization, while process only refers how change occurs (Barnett & Caroll, 1995). Kuijper et al. (2014) distinguish various orders of change: First-order change concerns sub-system change, second-order involves organizational change and third-order change affects whole sectors or multiple organizations.

The Social Support act restructured practically the whole welfare domain, as part of a larger administrative reform. Hence, it could be characterized as third-order reform. Fernandez and Rainey (2006) predominantly focus on first and second-order changes, sta-

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[4] See, Centrale Raad van Beroep, May 18, 2016, ECLI:NL:CRVB:2016:1402.

ting that organizations should change comprehensively to achieve success. Their points of consensus do not necessarily reflect on the relations between various orders of change. However, below will be discussed how the analysis of the process of change through the various orders of change strengthens the argumentation that the chosen incremental and plural approach to change is most likely to succeed.

6.1.3   Process

Fernandez and Rainey (2006) seem to suggest that a top-down approach, initiated by management works best. Their intention has been to apply these insights to large-scale, planned, strategic, and administrative changes in large public organizations (Fernandez & Rainey, 2006). It assumes that the interdependencies between organizational units in- and outside the organization can be understood. This assumption implies that a uniform assessment of the problem and its solution can be made. But the idea that change can be planned, overseen and predicted has met criticism (Chen et al, 2006; Rusaw, 2007; Steenbekker, 2012; Bannink, 2013; Kuijpers et al., 2014).

However, society has become increasingly complex. Bannink (2013) argues that this changed society has several unintended consequences and points to a prominent issue he coined 'double-management challenge'. This issue assumes societal problems (such as high demand of care) are that complex, requiring specific knowledge and expertise to provide a solution. However, this required expertise is often not present within the governmental organization (Bannink, 2013). Non-state actors have become more powerful, and possess considerable amounts of resources and expertise (Van Erp, 2016). Hence, the government increasingly needs to rely on non-state actors, to solve complex societal issues (Van Erp, 2016; Bannink, 2013; Steenbekkers, 2012; Rouse, 2008). However, as interests of the involved parties do not necessarily align, not only does the complexity of the problem need to be managed, but also the complexity of various interests: the 'double-management challenge'. Exemplifying is the following quote of a manager in Amsterdam, explaining why a more incremental and participatory approach has been chosen to implement the Social Support Act:

"We also do not have the knowledge and expertise to know, in ten years' time we have to be there exactly, you know which big movement can achieve something in the Social Support Act, but you just need partners who can do that and are willing to develop with us. And we have put a lot of effort into that." (Respondent T)

The complexity constrains the establishment from well-defined planning and detailed strategy making, rendering it more effective to adopt an incremental approach. Indeed, Amsterdam, Breda, Enschede and even Rotterdam (after the establishment of directorate MoW) seem to work closely with relevant stakeholders and are continuously improving. Learning through experience is perceived as a necessary condition to succeed in the social domain (respondent, D, J, K, N, P, Q, R, S, T). Hence, a clear vision providing direction and allowing for the various stakeholders to find common ground, were perceived as more helpful than prescribing blueprint planning (Respondent A, E, G, H, M, N, Q, D, T). This idea of incremental, pluralist change increasingly finds support among scholars (Bovaird, 2005; Rouse, 2008; Steenbekkers, 2012; Torfing & Triantafillou, 2013; O'Flynn, 2007; Osborne, 2006).

The findings of more intensive collaboration pointed to a possible paradigmatic change in (local) government. Public organizations were characterized in the NPM-era as '*both*

postbureaucratic and competitive with a clear and dominant focus on results where public managers built goals around the achievement of performance targets' (O'Flynn, 2007, p. 360). However, this focus on effectiveness and results, in the public value or new public governance paradigm, are revisited by the traditional public administration values resulting in the Public Value Management (PVM) paradigm (Osborne, 2006). This paradigm acknowledges the plural and pluralist state and is more broadly concerned with public value creation through steering of networks, creating and maintaining trust, and responding to the preferences of its citizens (O'Flynn, 2007; Torfing & Triantafillou, 2013; Stoker, 2006). Hence, an important governance mechanism witnessed in this paradigm is relational contracting (Torfing & Triantafillou, 2013). Assumed is that, to solve societal issues and to truly innovate, partners (organizations) should work together as partners and trust each other's contribution to a specific goal (Bovaird, 2005; Osborne, 2006). The shift from NPM to PVM therefore radically redefines the roles of civil servants. Under the NPM-era, they were mainly concerned with the implementations of political plans or the pursuit of results and efficiency gains. Now, under the PVM paradigm, officials are concerned with the *claim the value of they try to create* (O'Flynn, 2007). It presumes that civil servants need to be able to *'manage through networks, to be open for learning in different ways and to make use of a wide range of resources'* (Stoker, 2006, p. 41).

The findings suggest that this paradigm gains increasingly popularity among practitioners. Moreover, data indicate that the idea of a 'new civil servant' is widely shared in the administrative organization, as they stress the importance of communication with and consultation of partner organizations to implement the Social Support Act (respondent D, E, F, G, H, N, R, S, T, O).

Yet, the data indicate that this cooperative working with partner organizations is sometimes experienced as difficult, especially by the contract managers (respondent D, F, H, L, M, S, T). This partially seems to follow from the balance between partnership and commissionership. Municipalities received additional implementation funds from central government to assist in the transition phase in the first years after the decentralizations. Meanwhile, partnerships with external providers seemed to have a more horizontal character, understanding that could only be achieved by cooperation success. When the implementation funds are running low and the financial situation becomes dire, these horizontal relations are pressured (respondent D, G J, K, T). It appears that municipalities steer more proactive through performance-based contracts with their health providers and subsequently, with their welfare partners, to get more grip on the system (Respondent D, E, F, G, H, L, K, M, N, Q, R and S; DB-34, DB-36; DE-36, DE-37, DR-23; DR-27; DR-44). This shift from subsidies towards more performance-steered contracting could result in more 'vertical' and hierarchical experienced cooperation. This resulting experience seems to conflict with the efforts of officials concerned to retain the feeling of trust and partnership.

6.2 So what? Implications for theory and practice

Contributing to a better understanding of change management practices and the implementation of administrative reforms among local government, specifically the implementation of the Social Support Act in four large Dutch municipalities, was within the

aim of this study. Due to the relatively small evidence of studies of successful change in the public domain, the framework of Fernandez and Rainey (2006) has been used to explore its applicability in a Dutch context and to what extent it could explain a successful adoption of the Social Support Act. This study has resulted in various implications for theory, methods and practitioners. First, this study will be discussed in light of contribution to the field of organizational change. It will clarify whether this study succeeded in breaking through the patterns witnessed in organizational change literature. Secondly, the design of the study, used perspectives, and data collection has various implications for the results. Especially the operationalization and conceptualization of success could benefit from different methodological choices, as was learnt from this study. Hence, it will provide future research directions. Third and final, despite the explorative character of this study, it does raise some interesting points practitioners should consider when emerging in organizational change in complex policy domains.

6.2.1 Implications for theory

The study aimed to contribute to the theory of organizational change by presenting empirical evidence on the determinants of successful change, in a Dutch context among four Dutch municipalities. Subsequently, it offers weight against those studies that focus on organizational change in the private sector and those having a U.S./Anglo-Saxon origin. However, it remains questionable to what the extent this study focuses more on the process of change, rather than content and context of change like the majority of organizational change studies. The data suggested various 'blind spots' that with the current research design could not fully be examined. These 'blind spots' provide an agenda for future research.

The discussion emphasizes sensitivity to the contextual factors that can act as drivers of change. These can emerge both in the internal and external environment of the organization. In terms of external environment, the juridical developments seemed to constrain the pathways of change. The Social Support Act was relatively late finalized with respect to the moment it went into effect. This increased the uncertainty for the administrative organizations, potentially explaining municipalities trying to maximize usage of present networks and partnerships present rather than immediately start innovating. Moreover, the intervention of the Administrative High Court led to adjustments in policies. Furthermore, political leadership might differ with the administrative leadership with respect to the strategic course and demanding change. The municipality of Rotterdam illustrated how the politically motivated decision to implement integrated social support teams changed the implementation of the social Support Act, rendering the previously initiated incremental and pluralist approach practically impossible. This was replaced by a top-down coordinated trajectory.

Yet, Fernandez and Rainey (2006) stress the human agency in the process of organizational change. Public managers and civil servants can use and capitalize these external pressure for their 'own' agenda of change (Frumkin & Galaskiewicz, 2004). However, these studies do not prescribe how managerial leaders should develop support from political overseers and key external stakeholders. To what extent this agency reaches, does not become clear from this study. The findings do suggest that local government officials have limited influence on large-scale administrative reforms, exerting their influence through lobbying or by functioning as pioneering sites. Future research should

therefore direct more attention towards the capacity of actors to influence their perceived drivers of change, as these constrain the range of change tactics that can be applied.

Finally, as previously discussed in the limitation section in the methodological chapter, this study departs from the perceptive of management, assuming that they are the main agents of change. However, as the findings illustrate, change processes involving the employees as agents of change, seemed to function better. It suggests that more attention should be directed towards the internal environment of the municipality. Rather than providing a plan and the pursuit of comprehensive change, a gradual and incremental approach found upon a binding vision seems to lead to a better implementation. This alteration or adjustment to the determinants of Fernandez and Rainey (2006) could be interpreted as a consequence of an emerging new paradigm in the Dutch local governments. However, to assess whether this assumption holds, additional research is needed. Useful information on a more meso- or organizational level has been gathered due the research design of this study. A more interpretive approach where one would use a more 'ground-up' approach, might have yielded different results (Bryman, 2012). One could then focus on the dynamics and the meaning employees give to deployed change tactics. Such an approach could be placed in the interpretive or radical humanist paradigm (see Burrell & Morgan, 1979). An additional benefit is that it would offer some weight against the dominance of the functionalist paradigm in the field of organizational change (see Gioia & Pitre, 1990). This will deepen our understanding of successful change management within Dutch municipalities.

6.2.2 Implications for methods

Several lessons can be drawn to inform future research from the focus and used research design. To start, the choice to opt for a qualitative approach and demarcation of success in this respect will be discussed. Subsequently, a different methodology would allow to focus more on the time path of change trajectories, and normative evaluation of success. First, the operationalization of success was predominantly focused upon the administrative organization, assessed through the eyes of their own civil servants and verified through available documentation. A normative evaluation of success had been chosen, whereas a more quantitative approach (i.e. questionnaires) could also provide a more 'objective' and numerical expression of deployed change tactics and its experienced success. This would benefit a possible comparison in change outcomes between municipalities and subsequently can enhance learning. Moreover, a quantitative approach would lead to a larger sample size and could incorporate more easily multiple organizational layers within the municipalities. Now, the sample consisted of predominantly higher management, while focusing on the agency of management. Yet, the findings of the study suggested a variation in experienced change tactics in relation to the expected outcomes. The research design did not allow to produce strong claims for a specific value and hierarchy of change tactics and its outcomes per position. Hence, future studies should consider a survey-design. Such research design allows to incorporate the different perspectives and value them per position or organizational layer. Several scholars already suggest the existence of hierarchy, yet studies that put this to the test are lacking (Kickert, 2014; Fattore et al., 2018).

Secondly, the course of change could last several years, leading to variation in the expe-

riences of individuals regarding the change trajectory. A longitudinal design is required to assess those possible changes. This study assessed the perception of respondents just once. This was considered a practical choice, as the study is part of a graduation project. However, that should be considered when interpreting the results, as the perceived outcomes of change might differ over time.

Third, success has now been defined in terms of perceived performance on organizational and individual level. A thorough document analysis revealed perspectives of other involved parties, yet proven too little to incorporate their opinion in all cases. The main focus in this study lied on management in the administrative organizations and whether they succeeded in the implementation of the Social Support Act. Hence, the operationalization was narrowed to their experienced performance. However, since municipalities increasingly rely on other stakeholders for the successful implementation of policies in complex domains, to truly assess the outcomes of change, a different approach could must be chosen. In line with Kuijpers et al. (2014), this study suggests that multiple indicators could be relevant in the conceptualization and operationalization of success in complex policy domains. Hence, a more fruitful approach would be to study the effects of the deployed change tactics by the municipalities on a variety of relevant actors (i.e. clients, partner organizations, city council). As this would be time-costly, future research preferably focuses on a single case. This allows for an even more in-depth approach which might generate hypotheses that can be further tested among a bigger sample of municipalities.

6.2.3 Implications for practice

Finally, this study presents some implications for practitioners as it does yield some interesting insights for practice. The findings do not imply a specific order in which the determinants should be considered, nor provides conclusive evidence what factor can't be left out. However, it seems likely that the pursuit of comprehensive change in complex policy domains is not desirable. The Social Support Act transferred a broad set of tasks to municipalities and required a lot of specific expertise not necessarily present. It was experienced as difficult and rendered a planned approach less efficient. Indeed, the findings suggested that an incremental approach that fosters learning and cooperation leads to a more positive perceived organizational performance.

Although future research should test whether the conclusions of this study hold in other policy domains or municipalities, it adds to the growing evidence that incremental change suits public organizations well. Ultimately, the process of change should fit the context. As society is becoming increasingly complex, this thesis provides various lessons for public managers and employees when conducting change in complex policy domains. They could benefit from a focus on developing and ensuring support from external stakeholders and political leadership. To create more internal support, it is likely that a more participative approach yields good results. Achieving such participative approach requires commitment from (top) management and distributing leadership among the various organizational layers. Moreover, by granting staff more autonomy and discretionary space to perform their tasks and participate in trial and error trajectories, this is likely to help fine-grain policies and to improve the governance of the complex array of stakeholders. Along with continuously coaching, training and development, the conditions for a learning organization are then created.

7   Conclusion

The aim of this study was to explore the determinants of successful implementation of the Social Support Act in four Dutch municipalities. Conducting such a study breaks with the patterns witnessed in the field of organizational change. Most change literature have a U.S./Anglo-Saxon origin, focus on the private sector and discuss the content and context of change, rather than the actual process. By analyzing the course of change events in four Dutch municipalities, indications of new paradigms are revealed and offer additional insights into change management techniques that might lead to success in current society.

The study departs from the perspective that public manager's purposeful act to enable organizational change. Suggesting a planned approach to change, wherein the manager redirects the organization towards a goal. The organization develops after a diagnoses, through implementation of change interventions, followed by monitoring and adjustments. The exact change management practices have been interpreted using eight critical determinants to successful change of Fernandez & Rainey (2006).

Given the article was issued in 2006, a literature review was conducted to assess whether the change management practices of Fernandez and Rainey (2006) led to a revised model. However, only few articles address all determinants and therefore did not produce strong claims for the dismissal of specific determinants. The following eight determinants of successful change were used in a framework to assess the data: 1) ensure the need, 2) provide a plan, 3) build internal support, 4) ensure top-management support, 5) ensure external support, 6) provide sufficient resources, 7) institutionalize change, and 8) pursue comprehensive change. Assisted by the literature review, these determinants were translated into a framework, leading to an initial coding scheme to analyze the data. This coding scheme was supplemented by those factors the interviewed experts deemed important in the explanation of the (lack of) success of change.

The study focuses on the reforms in the Dutch Social domain. Municipalities were already assigned with several forms of non-residential care since 2007. The Social Support Act 2015 expanded these tasks, transferring practically all non-residential care to local governments. A sizeable budget cut took place, alongside these reforms. The underlying policy rationale was that municipalities, if offered sufficient discretionary space, would be able to understand better the local needs. This should lead to more effective and efficient service provision. Four large municipalities – Amsterdam, Breda, Enschede and Rotterdam – have been selected for this study. Various studies show that these cities have significantly more citizens claiming welfare provisions and clients with issues on multiple life domains. These were supposed to provide interesting insights in the implementation of the Social Support Act.

Expert interviews and document analysis have been conducted to grasp the change process and highlighted those interventions deemed most important by officials themselves. The main research question was: *Which change management practices contributed to the successful adoption of the Social Support Act in Amsterdam, Breda, Enschede and Rotterdam?*

A compelling vision, internal and political support, as well as external support from health providers, and the availability of sufficient resources seemed to be pivotal to implement the Social Support Act successfully within the municipalities. However, as the reform presented the municipalities many challenges due to its complex nature, the pursuit of comprehensive change and subsequently institutionalization of change, did not contributed to successful adoption of the Social Support Act. The complexity made it difficult to fully grasp the interdependencies between internal and external actors, rendering extensive planning less effective. Moreover, comprehensive change trajectories were predominantly top-down coordinated, in Amsterdam and Rotterdam. These top-down initiated interventions tried to realign the organizational units. This approach did not work out as intended, because these municipalities seem to underestimate the complexity, and failed to actively involve their employees. This seemed to cause more resistance and troubled the institutionalization of change. The domain of non-residential care is experienced as too complex to fully oversee and to recognize all (un)intended consequences of change. Hence, the ability to learn was emphasized. The municipalities implemented and further developed the Social Support Act predominantly through gradual and incremental change. Consisting of participatory processes, the actual project groups preparing the implementations of the Social Support Act (mostly in Amsterdam, Breda and Enschede) perceived employees as the agents of change rather than management. Consequently, interdependencies between organizational units could be experienced and tested. If necessary, further improvements followed. Hence, officials emphasized the importance of having sufficient resources, such as additional experienced colleagues or hired support, time and room for experiments and pilots and financial resources – e.g. ability to invest in new systems.

The findings were reevaluated to meet the often expressed criticism that most change studies are acontextual, ahistorical, and aprocessual. This allowed incorporating those determinants, deemed important by the interviewed experts and to build on the study of Fernandez and Rainey. From this reevaluation, several implications for theory, methods, and practitioners followed.
Starting with the implications for theory, the reevaluation of the contextual factors revealed various drivers of change in both the internal and external environment of the organization. Juridical developments and political decisions constrained the range of change tactics to be deployed. Due to the chosen management perspective, only little attention has been directed towards internal environmental forces. However, as the interviewed officials stress the importance of creating participative change processes, this provides a useful direction of future research. Scholars could continue on these findings by assessing the specific mechanisms of change on a more micro or individual level, leading to more fine-grained and testable hypotheses.

Moreover, the study suggested that the perceived contribution of each determinant of successful change differs per position within the organization. Contrarily to the current research, a quantitative approach would provide more insight in these mechanisms. Ad-

ditionally, combined with a longitudinal design, changes in perceived success can be measured. Furthermore, future research should incorporate the effects of deployed change tactics on a broader variety of actors. This would benefit the evaluation of success and hence our understanding of a successful adoption of the Social Support Act.

Finally, the findings entail some implications for practitioners. It suggests that in complex policy domains, a participative and incremental approach to organizational change fosters learning and continuously improvement. The development of relevant external stakeholders and political leadership through regular consultation and communication contributes to the success of change. Moreover, incorporating staff throughout the process, allowing them to make mistakes and participate in pilots, was perceived as positively contributing to the governance of all stakeholders and thus the institutionalization of change. To conclude, the findings emphasized the importance of resources, e.g. of coaching, training and development to create sustainable change.

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Appendix A: Literature Review

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Appendix B: Interview protocol

Start: Introducing the project, aim of the study and requesting permission to record. Instruction how proceedings go after the interview: respondents receive the transcript including analyzing summary, quotes are sent to request additional approval as well.

- In welke mate maakt de volgorde van de organisatieontwikkeling uit voor het verloop van deze laatste?
- In hoeverre was deze volgorde uit noodzakelijkheid geboren of wat zou een alternatieve aanpak kunnen zijn?
- Wat was volgens u de noodzaak tot verandering?
- In hoeverre vindt/vond u het ontwikkelplan belangrijk? Hielp het?
- In hoeverre vindt/vond u het ontwikkelplan realistisch/haalbaar?
- In welke mate werden de organisatie veranderplannen breed gedragen binnen de organisatie?
- In welke mate ervoer u support van topmanagement in het verandertraject?
- Gedurende het verandertraject, hoe zou u de leiderschapsstijl van het management omschrijven?
- In hoeverre waren externe partijen betrokken bij het ontwerpen en realiseren van het verandertraject?
- In welke mate is de steun van externe partijen belangrijk voor de implementatie van de ontwikkelplannen?
- In hoeverre ervoer u emotionele support tijdens het verandertraject?
- In hoeverre was er ruimte voor pilots en experimenten binnen het verandertraject?
- Heeft u het idee dat u voldoende middelen – geld, mensen, tijd – tot uw beschikking had om de organisatieverandering te implementeren?
- In welke mate zijn oude werkprocessen nu vervangen door nieuwe?
- In hoeverre ervaart u een cultuurverandering?
- Zo nee, wat is er volgens u nodig om deze verandering te weeg te brengen?
- In hoeverre ervoer u het verandertraject als allesomvattend? Raakte het elk onderdeel van de organisatie?
- In hoeverre zijn 'correcties' of nieuwe ingrepen nu wenselijk?

Succes:
- In hoeverre is de gemeente volgens u nu beter in staat aan haar taken binnen de WMO te voldoen?
- Waarom wel/niet?
- In hoeverre is de gemeente volgens u nu flexibeler en wendbaarder?
- Waarom wel/niet?
- In hoeverre denkt u dat er sprake is van een blijvende gedragsverandering binnen de organisatie?
- Waarom wel/niet?
- In welke mate denkt u dat de betrokkenheid van medewerkers naar de organisatie is toegenomen of afgenomen?
- Waar ligt dit aan volgens u?

Appendix C: Quote booklet

Quote booklet with the original quotes. As the individuals were Dutch, discussing Dutch policy, it seemed to make most sense to stick with the native language. Quotes have been translated carefully. However, with translating words or underlying meaning can be unintentionally changed. Hence, the original quotes are provided as a mean to be fully transparent.

Paragraph	Respondent	Quote
5.2.1.	D	"Transparant zijn betekent ook dat je kritiek krijgt als je, ja dat zijn wel dingen hè, reflectie en ook met elkaar intervisie en dat soort dingen. Dat zijn ook middelen die belangrijk zijn. Dat je fouten mag maken. Want, daar speelt het management natuurlijk wel een rol in. En zo'n cultuur te creë- ren, zo'n sfeer te creëren dat het ook allemaal kan en dat is een balans"
	T	"We hebben vooral heel erg gezocht naar de verbinding met het veld, dus we hadden allemaal werkgroepen en bestuurlijke overleggen, met alle partijen die die zorg leverde in de stad. En ook met het voorbereiden van de inkoop, hebben we heel erg samen gedaan met de zorgaanbieders."
5.2.2.	G	"Er is geen gebruik gemaakt van een groot masterplan. We hebben een beleidskader vastgesteld, Breda Doet, Samen Verder. We hebben niet gezegd, dit is hoe de organisatie eruit moet komen te zien. We weten wel een richting, dat hebben we zo ook in beeld en geluid gecommuniceerd. Er zijn wel stukken verschenen waarin we de voortgang van deze veranderbeweging monitoren, de 'Staat van Breda'. Aan de OR is op een gegeven moment wel een advies aangevraagd, dit is wettelijk verplicht wanneer je de formatie aanpast. Dit werkte vervolgens door in de organisatorische struc- tuur. Maar verder was er dus geen groot uitgeschreven plan, het was meer een kwestie van 'mud- dling through', het is dermate complex dat je toch niet alles kan voorzien. Dus we ontwikkelen stapje voor stapje."
	I	Dat betekent dat er veel minder op het proces gestuurd is maar mensen vanuit hun expertise aan de slag laten gaan. En dan ervaren, ervarend leren. Dat hebben we gedaan. Wat je dan wel ziet, is dat het dan lastiger is om, meteen al de informatie te halen uit dat wat je hebt gedaan. Want je gaat ervarend leren. Aan de voorkant is het proces misschien nog niet zo helder, en dat moet gaandeweg nog gaan ontstaan. Wat is nou de manier om deze mensen te helpen?
5.2.3.	Q	"Op hoofdlijnen is het zo dat de huidige wijkteam zijn voortgekomen uit de wijkzorgteams die er al waren in Enschede. Vanuit een bredere visie heeft een doorontwikkeling plaatsgevonden naar de sociale wijkteams in de huidige vorm. Maar eigenlijk is dat niet zo heel spannend geweest, omdat die ontwikkeling in Enschede al vorm had gekregen in die wijkzorg teams."
	P	"Ik denk dat je voortdurend met elkaar in gesprek blijft over wat is er mogelijk, hoe kun je het zo efficiënt mogelijk inrichten. Hoe kun je het proces optimaliseren. Dat is een doorgaande lijn. Die stopt ook niet in 2020 ofzo."
5.2.4.	N	"Ja dat zorgde voor weerstand, voor schrik. Voor, oh, wanneer stopt de verandering? Nou de stel- ling was, de verandering stopt eigenlijk nooit. Want die verandering, die doorontwikkeling, die zal blijven. Het is natuurlijk een heel jong stelsel, we bestaan drie jaar. Dat is heel kort als je ziet, welke wetten allemaal naar binnen zijn gefietst. Dat is echt heel veel geweest. Het is denk ik een van de grootste transities geweest van de afgelopen jaren en wij proberen mensen ook uit te leggen, dat betekent dus, dat we onszelf dus af en toe opnieuw moeten uitvinden. Wanneer iets niet werkt, dan zullen we daar aanpassingen moeten doen."

Paragraph	Respondent	Quote
5.3.2.	D	"(…) je zag het aan allebei de kanten, zat een bepaald type mens, waar ik ook aan toe behoor, die gewoon grotere projecten doet, maar dan wel vanaf het begin tot einde. Het stopt niet bij het papieren beleid, het stopt pas bij als het in de praktijk werkt. En dat is natuurlijk wel het type ambtenaar waar veel meer behoefte aan is gekomen, door de decentralisaties. Daarom hebben wij ook onze afdeling, zijn ook wel heel veel dingen veranderd. Wij zijn nou allemaal beleid en realisatie-medewerker en niet meer alleen beleid of alleen uitvoering"
	H	"We hebben eigenlijk, en dat vind ik ook een groot goed binnen de Wmo, al vanaf het begin een overleg gehad waarin alle disciplines zaten. Dus contractbeheer, beleid, de teamleiding, de kwaliteitsmedewerker, iemand van applicatiebeheer, iemand van de administratie, een financieel adviseur... Op het moment dat er een probleem er is, weet je met z'n allen meer."
	I	"En wat wij al deden, met die maatwerkdriehoek, dus niet alleen kijken naar de regelgeving maar ook van hé, wat is het effect wat we daarvan gaan bereiken. En wat gaat het kosten. Dat wordt nu ook wel door de organisatie breder uitgedragen. Dus dat vind ik wel mooie stappen."
	H	"vorig jaar hebben we een evaluatie gehouden van het contractmanagement, ook extern, en daar zijn mensen wel heel positief over onze aanpak. En dat snap ik ook wel, want het is voor bedrijven natuurlijk wel prettig als je zelf aan de onderhandelingstafel ook echt je zegje kan doen."
5.3.3.	Q	"We zijn in Enschede al een aantal jaren bezig om als gemeente echt aan te sluiten bij de samenleving en bij wat inwoners nodig hebben. We noemen dat samenlevingsgericht werken. Dat betekent punt één al dat je de ontwikkelingen die je ingaat en het beleid dat je maakt, samen met je inwoners en je partners doet. Dus dat staat eigenlijk de laatste jaren bij al onze beleidsontwikkelingen al steeds meer op het netvlies."
5.3.4.	L	Nou, het is soms zo dat je gewoon niet in beeld bent geweest. Gewoon wel een aantal keren gehad. Met name op het raakvlak beleid en uitvoering, op de uitvoering hebben ze een procesteam zorg ingericht waarin ze gaan zorgen dat de verschillende stedelijke loketten en loketten bij MOW - dus bij de uitvoeringsorganisatie, hè, de maatschappelijke ontwikkeling in de wijk, dat die op eenzelfde manier gaan werken, dat dat beter op elkaar afgestemd wordt, en dat je dan in de uitvoering dezelfde besluiten neemt. Toen hebben wij gezegd van, het zou handig zijn als daarvan vanuit beleid ook iemand aan tafel zit, om in ieder geval even kijken, hoe gaat het met de kaders, hoe gaat het financieel, hoe gaat het richting aanbieders... We hebben een aantal, ja, aspecten, waarop het goed is om die aanhaking te hebben. Maar op dit moment wordt daar de deur dicht gehouden.
5.4.1.	T	Ik dacht inderdaad, in de omvang van nieuwe taken die naar de gemeente kwam, op hetzelfde moment een reorganisatie laten landen in de gemeentelijke organisatie is gewoon geen goed plan. Dus natuurlijk hebben we daar heel veel last van gehad. Sowieso al die nieuwe taken absorberen als gemeentelijke organisatie, zorgen dat je daarop voorbereid bent, daarin de goede dingen doen vraagt al gigantisch veel van de organisatie. En ondertussen ga je ook nog de gemeentelijke organisatie helemaal opnieuw inrichten, allemaal functies weghalen bij de diensten en ergens anders bij positioneren. Ja, dat is echt wel een dingetje geweest.
5.4.2.	J	"Terwijl je misschien, als je vooruit zou hebben gedacht, nee, dat moeten we toch anders intekenen maar daar was de organisatie ook echt niet klaar voor, dus dat lukte op dat moment nog niet. Tenminste, dat was het algemene gevoel, van zo moeten we, we kunnen tot zover gaan en niet verder en dan moeten we er werkende weg er wel uit te kunnen zien komen."
5.4.4.	Q	"We hebben indertijd in Enschede niet gekozen om welzijn op te nemen in de sociale wijkteams. Vanuit de visie dat het wijkteam is gericht op individuele vraagstukken waarbij men welzijn en voorzieningen nodig heeft. We hebben twee jaar geleden, kort na de decentralisaties een nieuwe beleidsvisie en nieuwe kijk ontwikkeld op hoe we welzijn willen vormgeven. En hoe dat dan aansluit bij de maatschappelijke doelen die we hebben en aansluit in de samenwerking met de sociale wijkteams."
5.4.5.	K	"De urgentie wordt zo gevoeld, dat als er een goed doordacht maatregel is om, dan wordt dat gehonoreerd. Er wordt ook letterlijk gezegd, voor de kosten vooruit lopen. Daarmee ga je op lange termijn ga je dat terug verdienen. Dus dat is er wel. (…) Dat is de context van Rotterdam. Enerzijds is dat je kracht, je uitdaging, maar anderzijds is dat zo een niet te onderschatten onderdeel."

Paragraph	Respondent	
5.4.5.	J	"Verder, de meeste dingen die ik erover zeggen wilde, hoe ingewikkeld cultuurverandering ook is, en het nadeel van zo'n grote complexe reorganisatie. Dat is wel echt groots. Ja, je hebt gewoon heel gedreven, inhoudelijk ook heel goede collega's, wat echt een plezier is om mee te werken maar de praktijk van zo'n oceaantanker, om die bij te sturen, dat is gewoon super ingewikkeld. Dus ja, ik merk dat er wel aandacht voor is, maar dat het in de praktijk snel ondersneeuwt, omdat andere prioriteiten, vanuit de politiek, vanuit de uitvoering, vaak de overhand hebben. Volgens mij is dat goed aan bod gekomen in ons gesprek."
6.1.3.1.	T	"Wij hebben ook niet de kennis en pacht om te weten, van goh, over tien jaar moeten we daar precies zijn, je weet inderdaad welke grote beweging wat bereikt in de Wmo maar je hebt gewoon partners nodig die dat kunnen gaan uitvoeren en met ons willen gaan ontwikkelen. En daar hebben wij heel erg op ingezet."
6.1.3.3.	N	""Wij werken voor de stad, wij werken voor de burger, ik werk voor de wethouder. Ja, eigenlijk werk ik voor de gemeenteraad, dat hele duale stelsel, ja als de gemeenteraad iets vindt, met een motie komt, dan nemen we onze verantwoordelijkheid."

Appendix D: Overview determinants, presence and importance for change.

Amsterdam

Determinant	Theoretical assumptions:	A	B	C	D	R	S	T	Score
Ensure the need:	• It is perceived important that the communicated need for change is in accordance with the felt need for change.	+	+	+	-	-	-	-	Mixed
Provide a plan:	• It is perceived as important for successful implementation of change to transform the need for change in a course of action or strategy in written documentation.	-	-	-	+/-	-	-	+/-	No
Build internal support:	• Employees are actively involved in the change trajectory.	-	-	-	+	+	+	+	Yes*
Ensure support from top-management:	• Employees experience support from top-management.	+	+	+	+	+	+	+	Yes
	• Employees experience distributed leadership throughout the organizational change processes.	-	-	-	+	+	+	+	Mixed
Political Support:	• Political support is perceived as important for the organizational changes according to the respondents.	+	+	+	+	+	+	+	Yes
External support from health providers:	• Health providers are actively involved in the implementation of the Social Support Act.	n/a	n/a	n/a	+	+	+	+	Yes
Availability of resources:	• Employees have experienced sufficient support – both instrumental and emotional –to implement the Social Support Act successfully.	+/-	+/-	-	+	+	+	+	yes
Institutionalize change:	• The change process involved interventions on the processes, thereby altering the way individuals work.	+/-	+/-	+/-	+/-	+/-	+/-	+/-	Mixed
	• Training and development has been given to facilitate the new way of working and desired behavior.	+	+	+	+	-	-	+	Yes
Pursue comprehensive change:	• The change trajectories should be comprehensive, affecting those departments or subsystems relevant for the implementation of policies under the Social Support Act.	+	+	+	+	+	+	+	Yes
	• The interdependencies between the relevant organizational subsystems should be understood to prevent necessary 'corrections' or new (smaller) reorganizations.	+	+	+	-	-	-	n/a	Mixed

Breda							
Determinant	**Theoretical assumptions:**	**E**	**F**	**G**	**H**	**I**	**Score**
Ensure the need:	• It is perceived important that the communicated need for change is in accordance with the felt need for change.	+	+	+	+	+	Yes
Provide a plan:	• It is perceived as important for successful implementation of change to transform the need for change in a course of action or strategy in written documentation.	-	-	-	-	-	No
Build internal support:	• Employees are actively involved in the change trajectory.	+	+	+	+	+	Yes
Ensure support from top-management:	• Employees experience support from top-management.	+	+	+	+	+	Yes
	• Employees experience distributed leadership throughout the organizational change processes.	+	+	+	+	+	Yes
Political Support:	• Political support is perceived as important for the organizational changes according to the respondents.	+	+	+	+	+	Yes
External support from health providers:	• Health providers are actively involved in the implementation of the Social Support Act.	+	+	+	+	+	Yes
Availability of resources:	• Employees have experienced sufficient support – both instrumental and emotional –to implement the Social Support Act successfully.	+	+	+	+	+	Yes
Institutionalize change:	• The change process involved interventions on the processes, thereby altering the way individuals work.	+	+	+	+	+	Yes
	• Training and development has been given to facilitate the new way of working and desired behavior.	+	+	+	+	+	Yes
Pursue comprehensive change:	• The change trajectories should be comprehensive, affecting those departments or subsystems relevant for the implementation of policies under the Social Support Act.	+	+	+	+	+	Yes
	• The interdependencies between the relevant organizational subsystems should be understood to prevent necessary 'corrections' or new (smaller) reorganizations.	-	+/-	n/a	-	-	No

Enschede

Determinant	Theoretical assumptions:	P	Q	Score
Ensure the need:	• It is perceived important that the communicated need for change is in accordance with the felt need for change.	+/-	+/-	Mixed
Provide a plan:	• It is perceived as important for successful implementation of change to transform the need for change in a course of action or strategy in written documentation.	-	-	No
Build internal support:	• Employees are actively involved in the change trajectory.	+	+	Yes
Ensure support from top-management:	• Employees experience support from top-management. • Employees experience distributed leadership throughout the organizational change processes.	n/a n/a	n/a n/a	n/a n/a
Political Support:	• Political support is perceived as important for the organizational changes according to the respondents.	+	+	Yes
External support from health provi-ders:	• Health providers are actively involved in the implementation of the Social Support Act.	+	+	Yes
Availability of resources:	• Employees have experienced sufficient support – both instrumental and emotional –to implement the Social Support Act successfully.	+	+	Yes
Institutionalize change:	• The change process involved interventions on the processes, thereby altering the way individuals work. • Training and development has been given to facilitate the new way of working and desired behavior.	+ +	+ +	Yes Yes
Pursue comprehen-sive change:	• The change trajectories should be comprehensive, affecting those departments or subsystems relevant for the implementation of policies under the Social Support Act. • The interdependencies between the relevant organizational subsystems should be understood to prevent necessary 'corrections' or new (smaller) reorganizations.	+ -	+ -	Yes No

Determinant	Theoretical assumptions:	J	K	L	M	N	O	Score
Ensure the need:	• It is perceived important that the communicated need for change is in accordance with the felt need for change.	+/-	+	+/-	+	+/-	+/-	Mixed
Provide a plan:	• It is perceived as important for successful implementation of change to transform the need for change in a course of action or strategy in written documentation.	+	-	-	+/-	+/-	+	Mixed
Build internal support:	• Employees are actively involved in the change trajectory.	-	-	-	-	-	-	No
Ensure support from top-management:	• Employees experience support from top-management.	+	+/-	+/-	+/-	+/-	+/-	Mixed
	• Employees experience distributed leadership throughout the organizational change processes.	+/-	+/-	+/-	+/-	+/-	-	Mixed
Political Support:	• Political support is perceived as important for the organizational changes according to the respondents.	+	+	+	+	+	+	Yes
External support from health providers:	• Health providers are actively involved in the implementation of the Social Support Act.	n/a	n/a	+	+	+	+	Yes
Availability of resources:	• Employees have experienced sufficient support – both instrumental and emotional –to implement the Social Support Act successfully.	+/-	-	-	+/-	-	-	No
Institutionalize change:	• The change process involved interventions on the processes, thereby altering the way individuals work.	+/-	+/-	+/-	+/-	+/-	+/-	Mixed
	• Training and development has been given to facilitate the new way of working and desired behavior.	+	+	+	+	+	+	Yes
Pursue comprehensive change:	• The change trajectories should be comprehensive, affecting those departments or subsystems relevant for the implementation of policies under the Social Support Act.	+	+	+	+	+	+	Yes
	• The interdependencies between the relevant organizational subsystems should be understood to prevent necessary 'corrections' or new (smaller) reorganizations.	-	+/-	-	-	-	n/a	No