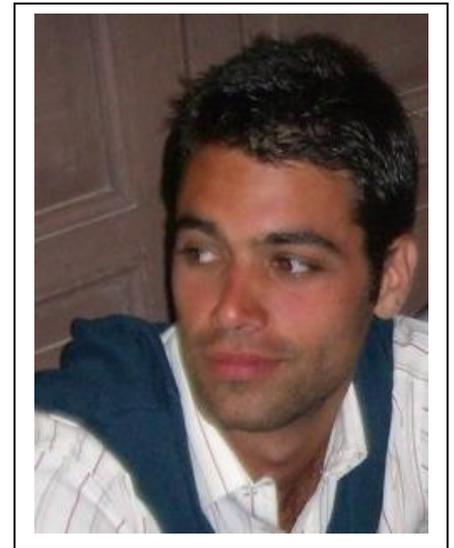


SCIENTIFIC REPORT

SHORT TERM SCIENTIFIC MISSION

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PhD

Topic: Coordination mechanisms and performance in inter-organizational settings

Field of study: Public Management

Supervisor: Prof. Dr. Riccardo Mussari

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In the framework of the COST Action IS1207, I went on a Short Term Scientific Mission (STMS) to the KU University of Leuven (Belgium) from December 1st 2013 till February 28th 2014. The hosting supervisor was Prof. Geert Bouckaert, KU Leuven Public Governance Institute.

My research project and my planned STSM focused on the “external” dimension of NPM reforms (inasmuch I analyzed how reforms such as privatization, contracting-out and competition re-allocated the tasks between local governments and the market or civil society) as well as on the “internal” dimension of (Post-) NPM reforms (inasmuch as I focused on strategies of internal re-organization pursued by local governments, namely on the implementation of new steering instruments, such as performance management).

During the three months I spent at the University of Leuven I improved my research on performance management and measurement in the Public Sector. Continuous suggestions and almost weekly assignments by Prof. Bouckaert allowed me to operationalize my research (by starting to integrate case my theory-driven approach with case studies analysis) and to refine the research focus of my future dissertation (by relying on a wider perspective on coordination mechanisms – not only network-type ones – employed to enhance performance in inter-organizational settings).

Therefore, I agreed with Prof. Bouckaert to provide, as an output of my STSM, the paper “ARE NETWORKS THE ONLY WAY TO ENSURE COORDINATION IN INTERORGANIZATIONAL SETTINGS? THE CASE OF THE HEALTH-CARE SERVICE PROVISION IN ITALY” (working

title), which I am going to present (abstract accepted) during the 10th Transatlantic Dialogue, scheduled in Lugano (Switzerland) from 5th to 7th June 2014.

The aim of this paper is to understand whether and to what extent different coordination mechanisms (namely hierarchy type mechanisms, market-type mechanisms and network-type mechanisms) are employed to enhance performance of public organizations. In fact, the reform processes affecting the public sector over the last decades (namely those inspired to the NPM) could be considered as a stimulus-response process regarding specialization (as a way to enhance public efficiency) and coordination (as a way to reduce the unwanted effects ensuing from specialization, i.e. fragmentation).

The field of analysis is the Italian Health-Care sector, inasmuch it is expected to encompass the three coordination mechanisms introduced above. I focus mostly on the evolution of health-care architecture at two specific government levels (regional and local ones), which have been deeply affected by several reforms (most of them inspired to the NPM ideologies) over the last decades. The health care sector is particularly interesting also because the degree of implementation of *coopetitive* (some combination of cooperation and competition) mechanisms is deeply different depending on individual regions, which are the institutional levels responsible for healthcare services. Moreover, the Italian Health-Care Sector presents some distinctive features, namely having been pioneer (among Italian public organizations) in the adoption of accrual accounting and of cost-calculation systems, as well as of specific set of performance indicators (in particular, *diagnosis-related groups* - DRGs).

More in detail, I would answer to the three main (related) research questions:

- Which types of coordination mechanisms are most employed to deal with public service provision in inter-organizational settings (namely, in health-care service provision at the decentralized level)?
- Do (and to what extent) NTMs work better and in a more efficient way than other coordinating mechanisms (quasi-markets and hierarchies)?
- Does cooperative mechanisms activate automatically or they need specific actors boosting them? Who are these actors? The Local Health Authorities (ASLs)? Could ASLs be considered as *network brokers* (Lawless & Moore, 1989; Mandell, 1984) or as *Network Administrative Organizations* (Provan & Milward, 2001)?

In order to answer the research questions, I performed a diachronic analysis which outlines the evolution of healthcare service provision at the decentralized level in the light of reform processes implemented and coordination instruments expected by different theories (namely, NPM and network theory). I assume a positive relation linking specialization and coordination (Verhoest & Bouckaert, 2005; Ongaro, 2009; Bouckaert, Peters & Verhoest, 2010), inasmuch as coordination patterns are employed to balance centrifugal trends deriving from the increased specialization (fragmentation) in implementation processes. The diachronic analysis is organized alongside four main time-spans (selected according to major reform processes affecting the Italian health-care system) and relies on the “mapping” framework developed by Bouckaert, Peters & Verhoest (2010), pinpointing both management instruments (namely strategic management instruments and financial management ones)

and structural instruments (reshuffling of competences and/or of lines of control, regulated markets, negotiation and advisory bodies, etc.) in order to highlight the predominant coordination mechanism(-s) employed either in a specific sector or at specific level of the public sphere.

This STSM was very inspiring for me as well as for my scientific work. Moreover, it represented an opportunity for networking with scientists from the KU Leuven Public Governance Institute as well as with PhD students and professors from other institutions that are spending their visiting period at the Public Governance Institute.

I am very grateful to the Management Committee of the COST Action IS1207, to Prof. Mussari and to Prof. Bouckaert for giving me the opportunity to have this experience and I hope to further collaborate with Prof. Bouckaert and his group in order to foster my future research in a comparative perspective.