



**HERBERT CHITEPO SCHOOL OF LAW AND BUSINESS SCIENCES**  
*Department of Management and Hospitality*

**EXAMINATION PAPER**

**MASTER OF COMMERCE**

**PART 1 SEMESTER 1**

**MODULE NARRATION**

**MANAGEMENT OF ORGANIZATIONAL  
BEHAVIOUR**

**CODE**

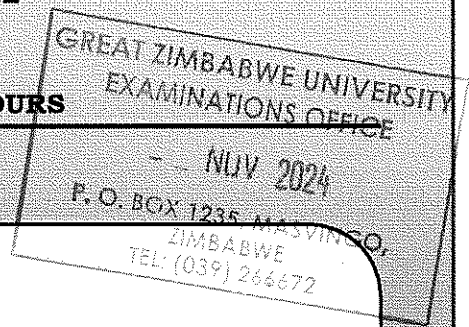
**MSM612**

**DATE**

**2024**

**DURATION**

**3 ½ HOURS**



1. SECTION **A** IS COMPULSORY
2. ANSWER **ANY THREE** QUESTIONS IN SECTION B
3. AS MUCH AS POSSIBLE **CITE RELEVANT** EXAMPLES

## **SECTION A: COMPULSORY AND CARRIES 40 MARKS**

### **Subcultures, professional cultures and the power balances in the National Health Service**

There are few organisations where differences between definable groups are more strongly evidenced than in the National Health Service (NHS) in the United Kingdom, Europe's largest employing organisation. Despite the claims that medical personnel work as a care team to ensure quality patient care, numerous subcultures exist and strive for power. A complex 'pecking order' ensures that each group struggles to maintain or enhance its power base. This is not normally an overt, planned and callous undertaking (although it can be), but an ongoing subtle process maintaining or securing the relative power imbalances.

In a typical hospital ward, for example, there are cleaners or domestics, ward clerks, assistant nurses, staff nurses, sisters, junior doctors, registrars and consultants. Additionally, patients on that ward are often visited by physiotherapists and radiologists, to name just two of the many professions allied to medicine (PAMs), and rely on pharmacists and numerous specialists to ensure recovery and quality treatment. Each of these groups represents a professional subculture in the broader hospital culture or medical community. Power differentials exist and are often obvious. These differentials are based on many of the sources of power, such as access to resources, expertise, legitimate power, access to information and to networks and coalition building.

Of additional interest is the complexity of power interdependencies in NHS hospitals and the role and power position of managers and managerialism. Managerialism, promoted by government-inspired reforms, has enhanced the power of managers with the result that managerial pay, particularly at senior levels, has increased more rapidly than that of, for example, nurses (a relatively powerless group), and their influence has increased significantly. Nurses have attempted to address this position by union or association action (e.g. by Unison and/or the Royal College of Nursing). The same is true regarding junior doctors who have engaged NHS and government reforms often with outrage, leading to strike action in 2016.

Between these professional subcultures, rituals, medical jargon and precedent are all used to hold on to power and to reinforce existing social divisions. Only certain grades of personnel or those holding particular qualifications are allowed to conduct certain tasks. Demarcation between groups, even when there is little or no rational reason for it, is strong and pervasive. Attempts to remove differences are fraught with difficulties. For example, a recent attempt at a Midlands hospital to issue identical uniforms and to unify pay levels for ward-based domestics, ward clerks and unqualified assistant nurses was greeted with considerable opposition, particularly from ward clerks, who consider the clerical responsibilities they hold to be greater than the domestic responsibilities of cleaners. The uniform symbolised that change, and although the staff chose the actual uniform, it was almost universally disliked (except by many of the ex-domestics who were net gainers in the change).

1.

- a) Suggest a possible vision statement for National Health Service and justify. **(5marks)**
- b) Demonstrate the importance of a mission statement to National Health Service. **(10 marks)**

c) Why do power differentials exist in an organization? (12 marks)

d) Recommend strategies that National Health Service could adopt to deal with social divisions. (13 marks)

**SECTION B: [60 MARKS] ANSWER ANY THREE QUESTIONS ONLY**

2. Discuss why culture can make one group of people behave, think and even look different from another. (20)

3. Critique the merits of any change to multi-skilled teams with practical examples. (20)

4. Using an industry with which you are familiar, examine the sources and bases of power of each of the main players. (20 marks)

5. Critically evaluate how organisational structures affect the levels of innovation and creativity shown by employees. (20)

6. Assess some of the factors that influence organizational structures. (20)