

Street-level Bureaucrats: Can they deliver?

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Abstract

This paper used Social Exchange Theory to examine the impact of the supervisor-subordinate relationship on different types of street-level bureaucrats' (SLB) perceptions of autonomy and role clarity. The findings challenge Lipsky's (1980) theory about the autonomy of SLBs because they felt only somewhat autonomous in the workplace. Moreover, they are only slightly satisfied with their supervision but their supervision practices significantly affect their perceptions of autonomy as well as their levels of role clarity. The findings therefore indicate that present management practices are not ideal for promoting effective workplace relationships or for addressing the current skills shortage. By contrast, private sector nurses were found to have comparatively higher levels of satisfaction with supervisor-subordinate relationships and therefore of autonomy and consequently, of role clarity. The implications for public sector managers responsible for ensuring SLBs do have the conditions in place to deliver appropriate services to the Australian public are discussed.

Keywords: street-level bureaucrats, professionals, Social Exchange Theory, autonomy, role clarity

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Three decades ago, Lipsky argued that 'street-level bureaucrats' (SLBs) were powerful instruments affecting implementation outcomes because of their 'substantial discretion in setting their work priorities' (Weatherley and Lipsky, 1977: 193) - autonomy given to them from hierarchical authority. There has recently been a renewed interest in reflecting on Lipsky's (1980) notion of 'SLBs after decades of reform aimed at increasing accountability in order to reduce their autonomy in the workplace. Many authors argued that the autonomy of SLBs has been curtailed as a result of the implementation of recent reforms encompassing a wide range of organisational measures aimed at improving the efficiency and effectiveness of public organisations (Ferlie, Ashburner, Fitzgerald, and Pettigrew, 1996; Pollitt and Bouckaert, 2000). Whilst public sector autonomy has been attacked at multiple levels - managerial, policy, structural, financial, legal and interventional dimensions (Verhoest, Peters, Bouckaert and Verschuere, 2004) - the instrument of change most affecting SLBs is argued to be the new-found power of first level managers. However, the resultant autonomy of SLBs is not uniform across countries or sectors or types of SLB.

In a review of the literature, three broad reasons are identified for the variations in autonomy of SLB. Firstly, Ackroyd, Kirkpatrick and Walker (2007: 10) argue that the degree of change imposed on SLBs has depended largely on the 'professional values and institutions against which reforms were directed and the extent to which different groups locked themselves into strategies either of resistance or accommodation'. As a consequence, many SLBs- particularly professionals - in countries such as the UK, NZ and Australia have experienced 'increasing bureaucracy and managerial supervision... leading to shifts in the nature and quantity of work' (Ackroyd, et al., 2007: 18).

A second perspective suggested by Verhoest, et al. (2004) is that the degree of change in autonomy experienced by SLBs has depended on the rules and regulations embedded within the organisation as well as the degree to which decision-making responsibility is delegated along hierarchical lines. Hence, some SLBs now operate in very controlled workplaces where their practices are strongly influenced by policy directives and limited decision-making responsibility, whilst others work in relatively autonomous workplaces with high decision-making responsibility.

A third reason identified as contributing to inconsistent levels of autonomy for SLBs is the complexity of the tasks undertaken and the extent to which role clarity is present in the workplace (Hupe and Hill, 2007). According to Hupe and Hill (2007), the more complex the task (such as attending to a patient's physical wounds who also has a debilitating mental illness affecting his/her perception of the severity of the physical wounds) and the more ambiguous the circumstances (such as limited organisational knowledge and policy directives for dealing with such complex cases), the greater the discretionary power of the SLBs. When such conditions exist, then, as Lipsky (1980: 3) argued, SLBs still have the autonomy to control 'the benefits or the allocation of public sanctions' in relation to public goods and services given to clients. Whilst previous research provides a glimpse of the work practices of different types of SLBs, there appears to be minimal focus on examining the organisational *outcomes* for SLBs after years of reform. Instead the focus has been on examining the

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organisational *processes* and mechanisms governing the practices of SLBs, as well as outcomes for specific stakeholders – for example, policymakers and clients.

According to Buchan and Calman (2004), there is minimal research linking the growing shortage of some professional SLBs (such as doctors and nurses) across numerous OECD countries with the implementation of organisational processes associated with reduced employee autonomy – often as a consequence of increased managerial autonomy. Whilst there is public sector research acknowledging that increased accountability has changed the nature and substance of the supervisor-subordinate relationships and in turn, SLBs' perceptions of autonomy, Ackroyd et al. (2007) argue that there has been little attempt by government to evaluate the success, or otherwise, of the management reforms for all stakeholders concerned. It seems likely that if the reforms have been successful, then there would not be a shortage of employees required to provide the public good or service. Moreover, Boyne (2003: 212) argues, 'discussions of what public sector improvement actually means are usually missing [from research]' and hence, it is not surprising that the impact on SLBs' organisational outcomes has been largely ignored.

The context of this research is that numerous OECD countries are facing a shortage of skilled labour (OECD, 2003), particularly in the healthcare industry, and poor management practice is one factor identified as contributing to the present shortage (Buchan and Calman, 2004). On the other hand, management research has identified that the retention of skills is a key factor affecting organisational effectiveness (Gollan, 2005; Ostroff and Bowen, 2000; Ostroff, Kinicki and Clark, 2002). Moreover, whilst public sector reforms have increased accountability and reduced the autonomy of SLBs over the past thirty years, management academics such as Drucker (2006) and Covey (2006) have begun advocating for the opposite situation, particularly for those managers supervising knowledge workers. Knowledge workers are those employees who have education, skills and tacit knowledge that can be used to create innovations in the workplace if the right organisational conditions exist. In particular, Drucker and Covey both argue for a change from the traditional command management style evident in many organisations to more empowering supervisory relationships based on trust, autonomy and empowerment as the first step to creating 'better' conditions for facilitating creative behaviour in the workplace. Their argument is that knowledge workers strongly determine organisational effectiveness/competiveness; however, management culture either facilitates or thwarts knowledge workers' ability to be effective, depending on their management approach. If present supervision practices negatively affect SLBs' perceptions of autonomy, which in turn negatively affects how effectively they can service the public, then public sector researchers must examine this issue. Hence, this paper examines the relationship of supervision practices and consequent SLBs' perceptions of autonomy with organisational outcomes and the implications for delivering public goods and services.

One possible reason for the lack of research about the impact of different supervision practices upon SLBs - particularly for professionals - is that there appears to be a lack of understanding about the importance of workplace relationships on public sector organisational outcomes. To address this void in the literature, this paper uses the Social Exchange Theory (SET) as a lens for examining how one workplace relationship - the supervisor-subordinate relationship - impacts upon different types of SLBs' perceptions of autonomy and subsequently, their levels of role clarity in

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relation to clients. This measure is used because one of the reasons for public sector reform was to make SLBs more responsive to clients' needs (Ferlie et al, 1996; Pollitt and Bouckaert, 2000). Hence, SLBs' level of client clarity is a good indicator of whether reforms have achieved their aim of improving SLBs' ability to deliver goods and services more effectively to clients.

SET argues that when employees and supervisors/managers develop good workplace relationships, a reciprocal arrangement develops that not only benefits the individuals involved, but also benefits the organisation as a whole (Cole, Schaninger and Harris, 2002; Wayne, Shore and Linden 1997). This is because, as Bernerth, Armenakis, Feild, Giles, and Walker (2007) argue, SET rests on the assumptions of perceived equivalence in mutuality and reciprocity in turn leading to increased stability in the workplace. These same conditions are also likely to optimize employees' perceptions of autonomy. When supervisor-subordinate relationships are effective, the benefits for the street-level bureaucrat include greater access to information, resources, emotional support, trust and goodwill and therefore they can solve workplace problems efficiently and effectively (Haskins, 1996). The benefit for the organisation is that when employees are effective, and once they feel more satisfied with their job, their productivity increases. Whilst effective workplace relationships would benefit any workplace that relies on sharing knowledge and resources to solve workplace problems, the benefits are probably even greater for professionals working in cost constrained environments (Brunetto and Farr-Wharton, 2007). This paper uses mixed methods to address the following primary research questions:

PRQ1: What is the impact of the supervisor-subordinate relationship upon SLBs' perceptions of autonomy and in turn, role clarity in relation to the client?

PRQ2: Is the impact of the supervisor-subordinate relationship the same upon different types of SLBs' perceptions of autonomy and in turn, role clarity in relation to the client?

This paper has three parts. The first part provides a targeted review of the literature from which the hypotheses emerge. The second part describes the sample and methods use to test the hypotheses and address the research questions. The third part reports the results, uses the discussion section to identify pattern-matching with relevant past research, then highlights implications for public sector managers and policymakers, finishing with the conclusions.

Social Exchange Theory (SET)

As stated, SET argues that when workplace relationships are effective, then the organisation benefits and therefore it is an important management task (particularly, for first level managers - supervisors) to ensure that effective workplace networks develop (Graen and Scandura, 1987; Graen and Uhl-Bien, 1991). Using SET, SLBs who experience mutual reciprocity of resources, information, respect and power with supervisors in particular and management generally should also experience high perceptions of autonomy. Moreover, they would be satisfied with the resources, information and support offered by the supervisor, as well as the job generally. Hence, they would be committed to staying in the organisation. In contrast, those employees operating in a workplace dictated by a poor flow of information and resources within a hierarchical bureaucratic workplace would be more likely to have

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a low level of satisfaction with their supervision. It is expected that such SLBs would also experience a low level of autonomy and would therefore experience high levels of role clarity in relation to the client.

Operationalising the model

The SET is operationalised by examining the impact of the support given by supervisors upon perceptions of autonomy and subsequently upon organisational outcomes. This measure should be a product of their perception of the quality of reciprocity of physical (such as information) and psychological resources (such as respect, trust and empowerment) from their supervisor (Gerstner and Day, 1997). This dimension is operationalised using a Leader Member Exchange (LMX) instrument (see Figure 1).

The Quality of LMX

LMX theory argues that supervisors manage employees differently, which in turn leads to different outcomes from different groups of employees. Over time, the quality of 'social exchanges' leads to a diverse quality of relationships between supervisors and subordinates. Effective (high quality) LMX relationships are characterised by a high level of mutual support, trust and respect (Gerstner and Day 1997; Mueller and Lee 2002) where staff appear to be liked by their supervisors, irrespective of their performance (Graen and Uhl-Bien, 1995). As a result, such an 'in-group' receives increased access to information, support and participation in decision-making, which in turn, makes it easier for them to undertake tasks and solve work-related problems. This may lead to tangible benefits such as promotions and bonuses and/or intangible benefits such as interesting work assignments and greater control over workloads. The benefits for supervisors include dedicated employees who show initiative in the workplace as well as providing extra support for the supervisors' decisions (Wayne et al., 1997). In contrast to the in-group, the 'out-group' tends to suffer from poor levels of information-sharing and involvement in decision-making and in turn, lower perceptions of autonomy.

The LMX concept is useful to examine within the public sector because as stated, recent reforms specifically aimed to curb the power of SLBs using managerial autonomy to increase their accountability measures (Ackroyd et al, 2007). According to Hoggett (1994), the strategy has not been to attempt to directly control professionals; rather it has been to convert professionals into managers – thereby placing the responsibility for management tasks firmly in their domain. Subsequently, middle and senior professionals were expected to use their professional status to ensure that junior professionals embraced the required organisational changes necessary for professional managers to achieve efficiency indicators (Avis, 1996). The result is that for a range of professionals across a range of sectors such as healthcare, housing and social work in the UK, USA, NZ and Australia, the theme has been standardizing the delivery of the service, based on resource utilization, with resultant work intensification for those SLBs (Ackroyd, et al, 2007).

However, the extent to which SLBs have experienced reduced autonomy appears to be dependent on the ability of supervisors for 'mediating the excesses of NPM [new public management]' (Ackroyd et al, 2007: 21; Kirkpatrick and Ackroyd, 2003).

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Moreover, Butterfield, Edwards and Woodall (2005) argue that the ability of supervisors to mediate between organisational and professional goals has been constrained by the increased managerial autonomy imposed by higher level of management dictating specific objectives to be met by supervisors. Hence, supervisor-subordinate relationships are not homogenous; instead they differ across sectors and/or types of SLBs (Boyne, et al., 1999) in turn providing a collage of different impacts such that for example, the case for doctors may be quite different to that of police officers or scientists.

Using the lens provided by SET, the ideal situation would be when all employees experience high quality LMX, because this will deliver the greatest benefits to both the individual and the organisation. A high quality LMX is associated with increased information flow and empowering relationships as a result of supervisors allocating increased levels of organisational resources (time) towards each subordinate (Sparrowe and Linden, 1997). In addition, when high quality LMX relationships are present, supervisors provide employees with meaningful feedback (consequently increasing their access to relevant information about the organisational changes), and delegate decision-making and power to them (Wayne, et al., 1997; Yrie, Hartman, and Galle, 2003). Hence, using SET, it seems likely that the quality of LMX could affect street-level bureaucrats' perceptions of autonomy.

Autonomy

Within the public sector literature, Lipsky (1980: 3) first identified that SLBs have autonomy in the workplace to determine 'the benefits or the allocation of public sanctions' three decades ago and their discretionary power was used to stereotype clients as a 'psychological coping mechanism' against a persistent situation of overwork and poor resourcing. This discretionary power determined those clients who would require only routine work and those who might require more resources. Ten years later, Winter (1990: 31) argued that SLBs coped by 'limiting information' or 'making access difficult' as a rationing technique to those clients who might require more resources than exist, and 'giving priority to easy, programmed routine cases at the expense of more complicated, non-programmed, and time-consuming cases'. However, Nielsen (2006) argued that Danish SLBs engage in limiting supply to some clients so as to enhance their own level of job satisfaction. This implies that Danish SLBs still possess such power and have maintained their autonomy in the workplace. However, in striking contrast to the Danish findings, research from British, US, NZ and Australian academics suggests that SLBs experience reduced autonomy (Ackroyd et al, 2007; Brunetto and Farr-Wharton, 2006; 2007; Buchan and Considine, 2002; Ferlie, et al, 1996). This suggests that the autonomy of SLBs varies widely across countries, sectors and types of SLBs.

In a recent review of the empowerment literature, Spreitzer (2007) identified two conceptualisations of empowerment. These were structural empowerment (whether the organisational structures and processes facilitate optimal employee performance) and psychological empowerment (employees' responses and outcomes from working within a particular organisational empowerment context). Further, Kanter's (1993) theory of structural empowerment argues that organisations determine the quality of structural empowerment experienced by employees by influencing their access to resources, information, guidance and support. This in turn determines how much

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power an employee has in the workplace. Psychological empowerment refers to employees' perceptions of their level of power to make decisions in the workplace.

Hence, Seibert, Silver and Randolph (2004) argue that the quality of structural empowerment is evident in employees' perceptions of psychological empowerment. According to Spreitzer (1995; 1996), psychological empowerment can be conceptualised using four constructs: 'meaning' (which refers to a work goal moderated against an employee's own beliefs and values), 'competence' (self-efficacy about an employee's capabilities to undertake tasks), 'self-determination' (an employee's sense of autonomy about workplace choices) and 'impact' (an employee's beliefs about their impact in the workplace). Previous research has already identified that employees' perceptions of autonomy (also referred to as self-determination) is an important construct affecting organisational outcomes (Conger and Kanungo, 1988; Gomez and Rosen, 2001; Seibert, et al, 2004; Spreitzer, 1995; 1996; Thompson, and Prottas, 2006).

Applying SET to this empowerment literature, SLBs would feel most autonomous when they have adequate information, resources and trust to solve problems, are empowered to make relevant decisions about work-related matters, and work in an environment embedded in mutual respect. This will in turn affect their perception of self-determination in deciding how and when to undertake job tasks. These same ingredients are also likely to affect their perception of how to best treat the client who presents with a problem (likely affected by their access to appropriate information and resources) and how competently they can attend to the needs of the client. To examine this premise, the following hypothesis is proposed:

Hypothesis 1: There is a significant positive relationship between LMX and SLBs' subsequent perceptions of autonomy.

Role Clarity in relation to clients

Role clarity occurs when employees have the social networks to find information needed to know how to address problems encountered when servicing the client (Jolke and Duhan 2000; Rhoads et al. 1994). When employees are clear about their role expectations (sufficient and relevant information), the consequent role clarity is likely to result in high quality service. For example, one of the aims of recent government reforms was to standardise practices. This meant that members of the public presenting with similar requests/ailments to SLBs would receive similar treatments/responses. On the one hand, if a SLB experiences a client/patient with non-routine or multiple issues that require extra time, resources and support to address, but operates in a work context that has accountability processes in place, ensuring the delivery of a service in a stated time, then role clarity will assist in relation to addressing the needs of their client effectively. On the other hand, the SLB experiencing role ambiguity (the converse of role clarity) is likely to become frustrated in such circumstances is likely to become unsatisfied with the work context. Further, if that SLB has discretionary autonomy in the workplace, then s/he could meet the needs of the patient and explain his/her actions later. However, if the SLB does not have discretionary autonomy, then s/he can both meet the needs of the client and provide an explanation to his/her supervisor (depending on the supervisor-subordinate relationship), or s/he could provide minimal assistance to the

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client/patient to meet the stated time limits. Such conditions are hardly congenial for retaining knowledge SLBs (Brunetto and Farr-Wharton, 2006, 2007; Johlke and Duhan, 2000). The following hypotheses test these propositions:

Hypothesis 2: Role clarity in relation to clients is positively affected by SLBs' perceptions of autonomy.

Hypothesis 3: Role clarity in relation to clients is positively affected by SLBs' perceptions of autonomy and satisfaction with their supervisor-subordinate relationship.

Public sector versus private sector employees

As stated, the implementation of public sector reforms have aimed at replacing the public sector management model, which relied on the power and professionalism of its SLBs to ration the distribution of public goods and services, with a private sector model focused on delivering outcomes (Pollitt and Bouckaert, 2000). This new model relied on increased managerial autonomy to reduce the power of SLBs. However, Hoque, Davis and Humphries (2004) challenge whether the changes have delivered a more effective form of management. They argue that public sector managers have been ill equipped in terms of resourcing or management up-skilling to motivate their subordinates to deliver greater effectiveness in the workplace (Butterfield, et al., 2005; Hoque, et al, 2004). Further, Currie and Procter (2002) argue that public sector managers have more managerial power compared with their private sector counterparts. It is therefore important to examine whether the workplace experience of SLBs is similar to that of their private sector counterparts.

Using the SET framework, private sector employees would be expected to experience higher levels of satisfaction with LMX, high perceptions of autonomy and as such would experience higher levels of role clarity in relation to the client. Since the introduction of reforms, SLBs would be expected to experience lower levels of satisfaction with LMX, lower perceptions of autonomy and as such would experience lower levels of role clarity in relation to the client. Therefore, it is hypothesised that:

Hypothesis 4: Private sector employees experience higher levels of satisfaction with LMX, higher perceptions of autonomy and higher levels of role clarity in relation to the client than SLBs.

Street-level bureaucrats

Lipsky (1980) argued that all SLBs had discretionary power because of their specialized knowledge and therefore they behaved like professionals. In contrast, other authors argued that professional SLBs were different from other types of employees because they have their own form of authority, culture and ethical codes and place more importance on professional authority than formal hierarchical authority (Ferlie, et al., 1996; Kirkpatrick and Ackroyd, 2003). Another characteristic of professionals is a relatively high level of personal autonomy, because of the specific skills and extensive education and training required to be a professional (Ferlie et al., 1996). As stated, Drucker (2006) referred to such employees as knowledge workers and argued that management practices should aim at empowering such employees rather than trying to control them.

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However, recent reforms have affected the autonomy of professional SLBs more than other SLBs and some, such as doctors and nurses, are in short supply in many OECD countries (Buchan and Calman, 2004; Fitzgerald, 2002). Nurses are examined as one type of SLBs because they are in short supply and governments in numerous OECD countries have been developing specific policies aimed at importing, recruiting and retaining them. Moreover, management practice has been identified as one factor contributing to the retention problem. In response, the USA has had some success in various hospitals by implementing the 'Magnet Hospital' management model, which has as one of its cornerstones: the re-empowering of nurses as a means of retaining them (Buchan, 1999; Laschinger and Wong, 1999).

However, nurse SLBs in the UK, USA (except for some), Australia and NZ do not operate in such a management model. Instead, whilst nursing is a new and upcoming profession in many OECD countries, suggesting that they should have discretionary power; previous research suggests that nurses operate in a control management environment (Buchanan & Considine, 2002; Newman, Maylor & Chansarkar, 2002). According to the Anglo-American model, any employee group is called a professional group if they are eligible to belong to professional associations that work with universities and the government to control the number of employees gaining the skills and accreditation into the profession (Evetts and Buchner-Jeziorska, 1997). Even in countries where formal university qualifications are not a requirement, such as the UK, Robinson, Murrells and Clinton, (2006) argue that there is an increasing trend towards more nurses gaining professional qualifications. Hence, nurses in Australia are examined as professional SLBs who have experienced the implementation of reforms aimed at curbing their levels of autonomy.

In contrast, police officers are not mandated to hold university qualification. Police officers differ from other SLBs because they operate within a strict hierarchical structure and a long-established organisational culture determining their behaviour and values (Butterfield, et al., 2005). However, police officers in countries such as the UK, Australia and NZ have also experienced increased managerial autonomy as a result of the implementation of reforms increasing their accountability and consequential paperwork (Brunetto and Farr-Wharton, 2005; 2007; Butterfield, et al, 2005).

Because nurses are professionals, it is expected that they would experience greater autonomy than police officers. However, since the implementation of reforms, it may be that neither type of SLB experiences high levels of autonomy. If so, this is likely to have negatively impacted upon both groups' satisfaction with their supervisor-subordinate relationships and in turn, their perception of role clarity in relation to the client. To examine these premises, the following hypothesis is proposed:

Hypothesis 5: Nurse SLBs experience higher levels of LMX, autonomy and role clarity in relation to the client compared with police officer SLBs.

METHODS

This paper uses a mixed methods approach, within a Social Exchange Theory framework, to examine the impact of supervisor-subordinate relationships on different

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types of SLBs' perceptions of autonomy and in turn, role clarity in relation to the client. This research uses a cross-sectional design to gather data in order to test whether the quality of relationships between nurses or police officers and their supervisors affects their perceptions of morale and in turn, their levels of affective commitment. Data was collected using a survey-based, self-report strategy (Ghuri & Gronhaug, 2002). The emerging patterns of data were then compared with the findings of previous research. Survey data was collected from:

1. Professional SLBs: Nurses (N=237)
2. SLBs: Police Officers (N=358)
3. Private sector nurses (N=901)

Measures

The measures were generated from the extant literature:

1. The satisfaction of employees with the quality of the relationship with their supervisor was operationalised by using Mueller and Lee's (2002) measure.
2. Autonomy was operationalised using Spreitzer's (1996) measure of self-determination because it has the strongest correlation to organisational effectiveness.
3. The dependent variable, role clarity, was measured using Jolke and Duhum's (2000) instrument.

Sample

Sampling choices were made based on typicality in order to ensure representation of:

1. Public and Private hospitals
2. Urban and regional hospitals and police stations
3. Big (metropolitan), medium and smaller hospitals and police stations

To obtain data from nurses, 4,800 anonymous surveys were distributed to 10 hospitals (3 public hospital and 7 private sector hospitals) chosen to meet the criteria. The response was 1138 useable surveys, inferring a response rate of approximately 23%. To obtain data from police officers, two methods were used. Each Australian state is divided into several regions. Each urban region comprises at least one city and several towns and smaller settlements. In one police region, 400 anonymous surveys were distributed at training sessions over a period of a month. Brief explanations were provided and participation invited, with completed questionnaires placed in a sealed box. In total, 180 useable questionnaires were obtained - a response rate of 45%. In a second region, 400 anonymous surveys were sent to a random selection of police officers of the same ranks as the first region within fifteen police stations. Of the 400 hundred surveys sent, 178 completed surveys were returned - a response rate of 44.5%.

Analysis of the Surveys

Path analysis is used to test the impact of supervision practices on firstly, employees' perceptions of autonomy and secondly, job satisfaction. In particular, path analysis

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using an ordinary least square (OLS) approach is used to test the hypotheses. OLS is an explanation of variance and the overall R^2 measure identifies the goodness of fit overall for the proposed model (Ahn, 2002). The advantage of path analysis is that it permits more than one equation to predict the dependent variable (i.e. job satisfaction) and therefore it includes the indirect impact of LMX into the bigger equation. The OLS approach also estimates parameters within an independent system, which could avoid the problem of multi-co linearity (Grapentine, 2000).

RESULTS

The sample comprised 383 males and 1113 females, with 302 respondents aged less than thirty years, 607 aged between 30 and 45 years and 587 aged over forty-five years. Of the nurses, 58 were Nurse Unit Managers (NUM), 764 were Registered Nurses (RN), and 132 were Enrolled Nurses (EN). Of the police, 222 were constables, 80 were senior constables and 56 were sergeants (see Table 1).

[Insert Table 1 here]

Correlation Matrix

Table 2 details the correlation coefficients for each variable. All variables were significantly related to one another except for the control variable – location. The Cronbach's Alpha scores measuring reliability ranged from 0.86 to 0.93.

[Insert Table 2 here]

Results from quantitative analysis

Hypothesis 1: A linear regression was undertaken and the results support the hypothesis proposed. The data showed that, for police, 28.7% of the variance of autonomy is explained by LMX. For private nurses, 21.9%, of the variance was explained by LMX, for nurse SLBs it was 7.6% and for combined SLBs, 12.9%. This means that the relationship with supervisors had a greater impact on police officers' SLBs' perceptions of autonomy compared with the other groups. Interestingly, the impact of LMX upon private sector nurses' autonomy was stronger than for nursing SLBs or combined SLBs.

[Insert Table 3 here]

Hypothesis 2: A linear regression was undertaken and the results support the hypothesis. The findings suggest that 22.4% of the variance of role clarity in relation to clients is predicted by police officers' perceptions of autonomy. This means that the impact of autonomy on role clarity in relation to clients is much lower for combined SLBs ($R^2 = 9.8\%$), nurse SLBs ($R^2 = 5.2\%$) and private sector nurses ($R^2 = 14.7\%$) (see Table 4).

[Insert Table 4 here]

Hypothesis 3: A linear regression was undertaken and the findings suggest that the hypothesis is accepted. The R^2 value suggests that the impact of both LMX and autonomy on their perception of role clarity in relation to clients was greater for police officers (22.7 %) compared with the impact on nurse SLBs (17.6 %). This means that 22.7 percent of the variance of police officers' perception of role clarity in relation to clients can be accounted for by their satisfaction with their supervision as

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well as their perception of autonomy. The amount of variance of role clarity predicted by both LMX and autonomy was 21.9% for combined SLBs and 9.6% for private nurses (see Table 5).

[Insert Table 5 here]

Hypothesis 4: An independent t-test was undertaken as well as individual regressions and the findings show that the hypothesis is accepted because the means for private sector nurses were significantly higher compared with the means for combined SLBs (See Table 6a) and SLB nurses in particular (see Table 6b). This means that private sector nurses were significantly more satisfied with their supervision, felt they were more autonomous and had higher level of role clarity compared with the combined SLB sample (Table 6a) in general as well as the nurse SLB sample in particular (Table 6b). In addition, Tables 3, 4 and 5 indicates the difference in impact of supervision on autonomy and role clarity in relation to clients for SLBs compared with private sector nurses.

[Insert Tables 6a and 6b here]

Hypothesis 5: An independent t-test was undertaken as well as individual regressions and the findings are somewhat supportive. The findings suggest that there is a significant difference in the means for each variable except autonomy (see Table 7) with nurse SLBs being more satisfied with supervision compared with police officers and experiencing higher levels of role clarity in relation to clients. In addition, Tables 3, 4 and 5 indicates that there was a difference in impact of supervision on autonomy and role clarity in relation to clients for nurse SLBs compared with police officers.

[Insert Table 7 here]

DISCUSSION

Using the OLS procedure, the 'goodness of fit' of the model identified that supervision and autonomy accounted for approximately a fifth of the variance of SLBs' levels of client role clarity, which was higher than for private sector nurses. That is, for SLBs the quality of workplace relationships is important because it not only contributes to perceptions of autonomy, but also it is significantly positively related to role clarity. As such, this paper contributes new knowledge about the factors impacting on private and public sector nurses' perceptions of role clarity, as well as other SLBs - police officers. Secondly, the findings provide knowledge about the similarities and differences for nurse SLBs and private sector nurses in terms of how supervision affects their levels of autonomy and role clarity. As such, this paper contributes to the wider contemporary debate about the retention of healthcare sector workers by revealing the relationship between these three variables. Further, this paper builds on the work of Ackroyd, et al., (2007) in relation to nurse SLBs and Butterfield, et al., (2005) in relation to police officer street-level bureaucrats.

The findings challenge Lipsky's (1980) version of SLBs' levels of autonomy in the workplace because Australian SLBs appear to have a similarly somewhat low perception of autonomy. Moreover, the findings identify a variation between SLBs (police officers and nurses) in the impact of supervision and autonomy in explaining role clarity. However, both groups of SLBs were only somewhat satisfied with their supervision. Whilst that may or may not be related to an increase in managerial autonomy, it does suggest that the present state of workplace relationships between

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supervisors and subordinates is not contributing to a free flow of resources and information. More importantly, such relationships are not facilitating reciprocal trusting-empowering work contexts.

Because past research has already established a significant positive relationship between the quality of supervisor-subordinate relationships and organisational effectiveness (Gerstner and Day, 1997), it seems unlikely that the present conditions are ideal for achieving organisational effectiveness in these public organisations. Worse, these same conditions appear less than optimum for retaining SLBs – particularly those who are well-trained and in high demand in the private sector, as is the case for nurse SLBs. Nurses who report dissatisfaction with management policies and practices have a 65% higher probability of intending to quit than those reporting to be satisfied (Gray and Phillips, 1994; Secombe and Smith, 1997). The situation appears similar for police officers. The supervision of police officers, like nurses, strongly contributes to perceptions of autonomy, and subsequently, their perception of role clarity.

In relation to the nursing profession, the findings indicate there are significant differences in the perception of role clarity in relation to clients between private sector nurses and nurse SLBs. Satisfaction with supervision, autonomy and particularly role clarity was significantly lower for nurse SLBs than for private sector nurses. However, both groups were only somewhat satisfied with supervision (although private sector nurses were more satisfied). Therefore, it seems likely that poor supervisor-subordinate relationships in hospitals are contributing to the shortage of nurses in both the public and private systems. This finding may also provide one explanation as to why nurses are leaving the profession. For example in 1996, 19.8% of persons (aged 15-64 years) with a highest qualification in nursing were not nursing in Australia (Productivity Commission, 2005).

These findings challenge the value in continuing management practices that have increased managerial autonomy and led to significant increases in the workloads of SLBs, coupled with a deterioration in their perceived overall work conditions (Buchan and Calman, 2004; Buchanan and Considine, 2002). Of greater concern are the implications for managers concerning retaining those SLBs in short supply, such as nurses and doctors, because previous research has identified the significant relationship between organisational effectiveness and turnover (Goris, Vaught and Pettit, 1997; Petty, McGee and Cavender, 1998). Further, according to Drucker (2006) and Covey (2006), control management practices traditionally used in bureaucratic organisations are not congenial for retaining knowledge workers whose skills and knowledge provide them with greater employment alternatives. Whilst those who promote management reforms aimed at increasing managerial autonomy often promise large benefits for the government and public sector organisations, they appear silent in identifying the cost of high turnover coupled with the cost of trying to attract, train and develop new staff members (Fitzgerald, 2002; Buchan and Calman, 2004). Moreover, a comparison between private and public sector nurses' results provides support for Hoque et al.'s (2004) assertion that the implementation of private sector management practices into the public sector may not have provided a more effective form of management. Whilst supervision, autonomy and role clarity were significantly higher for private sector nurses, all were reported as relatively low.

Limitations

This study has a number of limitations. The main limitation is the use of self-report surveys causing common methods bias. However, Spector (1994) argues that self-reporting methods is legitimate for gathering data about employees' perceptions, as long as the instrument reflects an extensive literature review and pattern-matching is used to support interpretations of the data and triangulation is used to support research findings.

Another limitation is the predominance of females in the nursing samples and males in the policing samples. Further research exploring the impact of gender in these circumstances may be worthwhile, as there are well-acknowledged differences in workforce participation for men and women, possibly affecting the development of effective supervisor-subordinate relationships. Further research is also needed to determine the strength of the relationship between the quality of workplace relationships and turnover for professional SLBs in short supply in affected countries.

Implications

Of the three groups, private sector nurses were the most satisfied with their supervision, autonomy and role clarity. This means that private sector nurses experienced higher level of role clarity compared with nurse SLBs suggesting they are more able to meet the needs of clients. The implications for nurse SLBs is that they appear to operate in work contexts that are frustrating for them and these organisational conditions are unlikely to stem the flow of SLB nurses leaving the profession. When nurses leave, the high costs of replacing them is borne by the public who have to pay for more nurses to be trained as well as suffering the consequences of reduced health provision generally, and especially when hospitals wards are closed because of lack of trained staff. Without replacements available, as is already the case in many OECD countries, the public healthcare sector will not survive. The findings from this paper underline the crucial need to examine and improve current supervision practices in the healthcare sector so that nurses can continue to provide services to the public.

In contrast to nurses, whilst increased accountability has probably curtailed police officers' autonomy in the workplace, they are examples of SLBs not in short supply in most OECD countries. Therefore, the outcomes for police SLBs are potentially less important to police managers compared with nurse managers, because of the relatively lower cost of retaining or replacing police. Yet it is still noteworthy that police SLBs were considerably influenced by their supervisor-subordinate relationships and the consequent impact upon their levels of autonomy and role clarity. This result suggests the strong hierarchical management structure and processes are significant to the retention of police officers.

CONCLUSION

Within a context of shortages of healthcare professionals in most industrialized countries, attraction and retention strategies have been widely discussed in the literature and throughout the healthcare industry. There has been less of a focus on SLBs' ability to service the client effectively. Despite the depth of discussion in the

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extant literature, limited consideration has been given to the exploration of autonomy and supervisor-subordinate relationships as they impact upon client clarity. In an attempt to further understand how client role clarity is affected by factors at work, this study sought to investigate how supervisor-subordinate relationships and autonomy impact upon the client role clarity of two different groups of SLBs and to compare these results with private sector employees.

The findings from this paper contribute to a better understanding of SLBs in countries and work contexts strongly affected by the implementation of recent reforms increasing managerial autonomy so as to curtail employees' autonomy. Using SET as the lens, these findings provide a picture of the state of supervisor-subordinate relationships in Australia, and the resultant perceptions of autonomy by nurse and police SLBs, as well as by private sector nurses. The findings suggest that nurse and police SLBs are at best only slightly satisfied with their supervision; yet supervision practices significantly affect their perceptions of autonomy and thereby, their levels of client role clarity. The findings therefore indicate that present management practices are not ideal for promoting the very workplace relationships linked to greater role clarity.

The lesson for managers must be to promote the development of empowering supervisor-subordinate relationships. For all SLBs, but particularly for professionals, not only will they be more productive when they experience high quality supervision (information and resource-sharing as well as participatory decision-making), but these same conditions will also enhance their perception of role clarity and will also likely encourage them to remain.

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TABLES

TABLE 1: Demographics of the sample

	Private sector nurses (N = 901)	Nursing street-level bureaucrats (N = 237)	Police street-level bureaucrats (N = 358)	TOTAL (N = 1496)
GENDER: Male	33	90	260	383
Female	868	147	98	1113
AGE: <30 years	74	41	187	302
30 - 45 years	340	113	154	607
>45 years	487	83	17	587

TABLE 2: Correlations and Cronbach's Alpha Reliability

Variable	Mean	Standard Deviation	1	2	3	4
1. Position (control)			1			
2. LMX	4.535	1.1	-.008	1	(.93)	
3. Autonomy	4.24	1.03	.048	.177**	1	(.895)
4. Role Clarity	5.001	1.001	-.044	.216**	.155**	1 (.868)

^a N = 1496. Numbers in parentheses on the diagonal are the Cronbach's alpha coefficients of the composite scales.

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

TABLE 3: Regression analysis detailing relationship between LMX and perceptions of autonomy

Independent Variable	Autonomy Combined street-level bureaucrats Statistically significant beta scores	Autonomy Nursing street-level bureaucrats Statistically significant beta scores	Autonomy Police street-level bureaucrats Statistically significant beta scores	Autonomy Private sector nurses Statistically significant beta scores
	F=84.89 p<.001 R²=12.9%	F=14.432 p<.001 R²=7.6%	F=142.993 p<.001 R²=28.7%	F=251.49 p<.001 R²=21.9%
LMX	.36 (p<.001)	.24 (p<.001)	.5 (p<.001)	.47 (p<.001)

** Correlation is significant at the 0.01 level (2-tailed).

* Correlation is significant at the 0.05 level (2-tailed).

TABLE 4: Regression analysis detailing beta scores showing relationship between perceptions of autonomy and role clarity in relation to the client

Independent Variable	Client role clarity Combined street-level bureaucrats Statistically significant beta scores	Client role clarity Nursing street-level bureaucrats Statistically significant beta scores	Client role clarity Police street-level bureaucrats Statistically significant beta scores	Client role clarity Private sector nurses Statistically significant beta scores
	F=27.591 p<.001 R²=9.8%	F=11.149 p<.001 R²=5.2%	F=102.109 p<.001 R²=22.4%	F=41.556 p<.001 R²=14.7%
Autonomy	.3**	.23**	.47**	.34**

TABLE 5: Regression analysis detailing relationship between satisfaction with LMX, perceptions of autonomy and client role clarity

Independent Variables	Client role Clarity Combined street-level bureaucrats Statistically significant beta scores	Client role Clarity Nursing street-level bureaucrats Statistically significant beta scores	Client role Clarity Police street-level bureaucrats Statistically significant beta scores	Client role Clarity Private sector nurses Statistically significant beta scores	Client role Clarity All nurses Statistically significant beta scores
	F=72.172 p<.001 R²=21.9%	F=47.244 p<.001 R²=17.6%	F=51.559 p<.001 R²=22.7%	F=21.537 p<.001 R²=9.6%	F=41.144 p<.001 R²=13.2%
LMX	.4 (p<.001)	.32 (p<.001)	.109 (p<.05)	.163 (p<.001)	.167 (p<.001)
Autonomy	.19 (p<.001)	.24 (p<.001)	.48 (p<.001)	.106 (p<.05)	.166 (p<.001)

TABLE 6a: Results from Independent Samples Test: Combined SLBs and private sector nurses

A= Street-level bureaucrats (N= 595) B= Private sector nurses (N= 901)	Mean* (Standard Deviation)	Levene's For equ. Variance * Equal variances assumed		t-test	Equality Means
	A B	F	T	Df	Sig (2 tailed)
Satisfaction with Supervision (LMX)	4.2571 (1.1) 4.7165 (1.1)	1.652	7.782	1492	.001
Autonomy	4.040 (1.1) 4.384 (.97)	5.378**	6.564	1159	.001
Client role Clarity	5.636 (.54)	723.38**	27.67	615	.001

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	3.913 (1.35)				
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*Mean: 1 =Strongly Disagree, through to 6=Strongly Agree

TABLE 6b: Results from Independent Samples Test: Nurse SLBs and private sector nurses

A= Nurse Street-level bureaucrats N= 237 B= Private sector nurses N= 901	Mean* (Standard Deviation)	Levene's <i>For equ. Variance</i> * Equal variances assumed		t-test	Equality Means
	A B	F	T	Df	Sig (2 tailed)
Satisfaction with Supervision (LMX)	4.43 (1.33) 4.7165 (1.1)	31.18**	5.537	322	.001
Autonomy	3.98 (1.1) 4.384 (.97)	2.731**	5.924	1136	.001
Client Role Clarity	4.95 (.95) 5.637 (.54)	43.65**	9.919	436	.001

*Mean: 1 =Strongly Disagree, through to 6=Strongly Agree

TABLE 7: Results from Independent Samples Test: SLBs- nurses and police officers

A= Nurse Street-level bureaucrats N= 237 B=Police Street-level bureaucrats N= 358	Mean* (Standard Deviation)	Levene's <i>For equ. Variance</i> * Equal variances assumed		t-test	Equality Means
	A B	F	T	Df	Sig (2 tailed)
Satisfaction with Supervision (LMX)	4.43 (1.15) 4.295 (.9)	7.018**	-2.418	358	.05
Autonomy	3.98 (1.1) 4.06 (.97)	-.1	1.226	594	Not Sig
Client role clarity	4.95 (.96) 3.39 (1.2)	38.086	-16.086	510	.001

*Mean: 1 =Strongly Disagree, through to 6=Strongly Agree

FIGURES

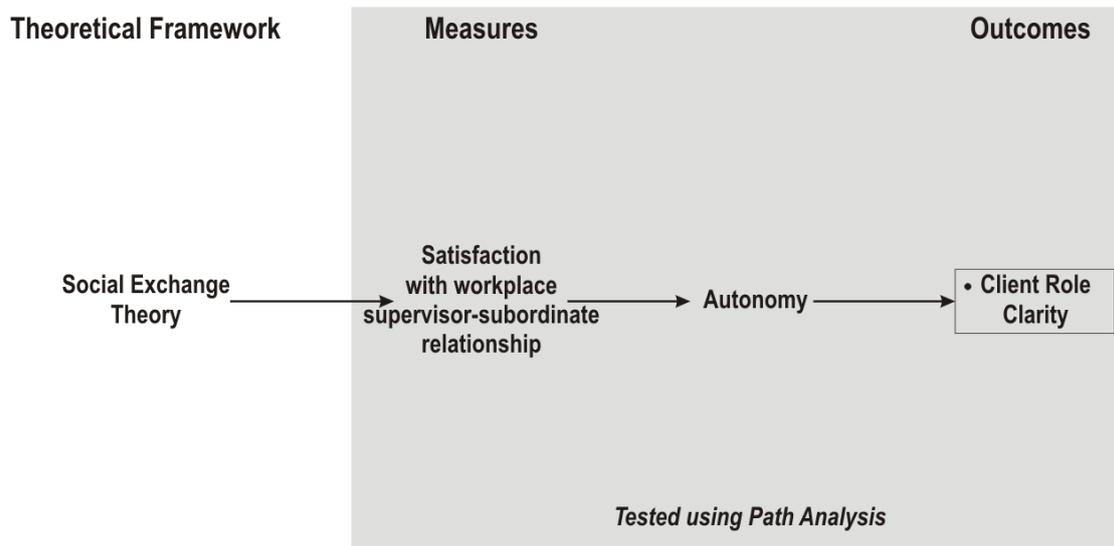


FIGURE 1: *Using SET to operationalise the impact of the supervisor-subordinate relationship upon organisational outcomes*

FIGURE 2: *The impact of the supervisor-subordinate relationship and autonomy upon role clarity*

