

Summary

In contemporary health care systems organizations are increasingly subjected to change. Consequently, a lot of studies are being conducted which aim at identifying factors that contribute to successful change. In addition, it is important to gain insight in the factors that play a role in preserving change and accompanying results, so that these can be taken into account during the implementation process. By adopting a qualitative research approach, this thesis aims at identifying these factors.

This study was conducted within the setting of the project *Working without Waiting lists* (Werken zonder Wachttijst). The main goal of this project has been achieving reductions in access time of participating outpatient clinics by applying several logistical principles. The purpose of this thesis has been to investigate whether the clinics that achieved significant short-term reductions in access time have succeeded in preserving these reductions in the long run as well (i.e. a few years after the project was initiated), thereby specifically focusing on identifying success factors. Since special attention is given to the factor leadership, the problem definition in this thesis reads as follows: ***What is the role of leadership in preserving change within the project Working without Waiting lists?***

To identify outpatient clinics which have succeeded in preserving successful change and to assess which factors have contributed to this process, face-to-face interviews were conducted at three Dutch outpatient clinics. Analysis shows that six factors are of influence on preserving change, namely: clear-cut mission/goals, creating sense of urgency, making results visible, keeping employees motivated/giving feedback, proving clarity with respect to responsibilities, and adjusting to developments in the external environment. These factors can all be linked to the most important factor, *leadership*. The results further show that these different factors are mutually linked as well. Therefore, the factors should not be analyzed in isolation but in conjunction, with leadership as the key factor. In this regard, it is important to take into account the different layers inherent in the factor leadership ('transactional', 'transformational', and 'clinical' leadership). Without strong leadership, it is impossible to convince employees and to make them aware of the necessity of change. Moreover, especially after the project has ended, a strong leader is vital in keeping employees focused and motivated. Furthermore, in *Working without Waiting lists*, physicians play an important role which should not be underestimated. Without participation and support of physicians, it is impossible to implement measures which aim at preserving achieved reductions in access time.

It is important that in future projects with similar characteristics and in which physicians play an important role in introducing changes, one is aware of the importance of the participation and support of physicians. With this finding, this study not only provides new insights for the project *Working without Waiting lists*, but also for projects that are going to be conducted in health care sectors in the future.