



AUSTRALIAN INSTITUTE OF  
HEALTH INNOVATION  
*Faculty of Medicine and  
Health Sciences*



**MACQUARIE**  
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# Role behaviours spreading more resilience across gaps dividing complex clinical networks

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# Everyday work

- In their everyday work performance people typically flex, adjust, or modify what they do.
- Habitual activities—regularities, routines, practices; as well as deviations, nonconformities, workarounds—are at the heart of clinical care.
- The emergent outcomes of these collective actions is successful care, *where so many things go right*.

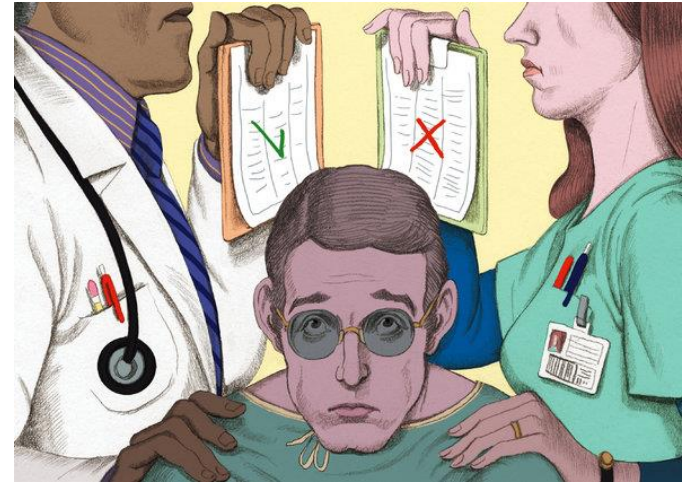
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# A puzzle



The clinical coalface is punctuated with absent ties, social spaces, heterarchies, organizational silos, and weak coupling.

But, it also provides safe, effective care through collaborative group efforts most of the time.



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# How does this work?

# How do gaps get bridged?

# One Answer: Mediators

Specific kinds of mediators plug these kinds of gaps, facilitate relationships, and enable work groups to coherently contribute to joint activities across the divides.



# Mediators

There are a surprising numbers of extant nouns available to describe the variety of these roles:

**Boundary Spanners**  
**Strong Ties**  
**Mavens**  
**Bridges**  
**Weak Ties**  
**Influencers**  
**Connectors**  
**Tertius lungens**  
**Opinion Leaders**  
**Cosmopolites**

# Wittgenstein

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- The famous philosopher might say these are “language games” or “forms of life”
- But are they more than that?



# Closing gaps



How do those in these roles help narrow, bridge, jump or join up the gaps which would otherwise inhibit the smooth discharge of group tasks?

How do they spread resilient practices across the naturally occurring divides?

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# “Problems”

# Social Spaces

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The gaps, holes or weak  
ties between social  
entities.

# Organisational Silos



Bounded organisational arrangements with limited interaction with other groups, units, or divisions.

# Gaps

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The spaces, breaks or openings between two or more social entities.

# Structural Holes

Interpersonal gaps in networks; in Burt's theory, they provide opportunities for players in competition to bridge the discontinuities and create social capital or improved relationships with other players.

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# “Solutions”

# Groups

Individuals conjoined or located proximally, or considered or classed together as a social entity, typically sharing a common identity and creating mutually recognised obligations.



# Ties

**Tie:** Connections between people (individuals or groups) such that they can readily share or transmit information, culture, goodwill or enmity.

**Absent Ties:** Where individuals or groups are in close proximity but remain disconnected, or have the opportunity to connect, but do not do so.

# Ties

**Weak Ties:** Those with whom people are relatively poorly connected, e.g., acquaintances.

**Strong Ties:** Where two or more individuals or groups are directly connected in a close relationship.

# Coupling

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Links, connections, or pairings  
between individuals or groups.  
They can be tight or loose.

# Coupling

**Loose Coupling:** More distal links, connections, or pairings between individuals or groups.

**Tight coupling:** Social entities which are closely adjacent or tightly connected to each other. Tightly coupled groups are typically seen as rules-bound and prescriptive.

# Collaboration

The act of working together over time to share information, knowledge or resources in order to achieve mutual aims, goals or objectives.

# Networks (Social)



Sets of connections, relationships or ties amongst individuals; social structures comprising nodes representing individuals or groups describing relationships and flows of information between them.

# Boundary Spanners



People who bridge two or more social entities, enabling exchange of information or communication.

# Bridges

Those who join up  
otherwise isolated social  
entities.



# Connectors

People linking two or more social entities.

# Cosmopolites

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Persons with wide-  
ranging interests and  
interactions.

# Influencers

Individuals with the capacity or actuality of exercising power in order to shape, control or manipulate something or someone.

# Mavens

Folks with a wide circle  
of contacts across  
multiple social entities.

# Opinion Leaders



Influential individuals to  
whom others turn for  
advice or information.

# *Tertius lungens*



“The third who joins”:  
the party who connects  
network members.

# Papers

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1. Braithwaite, J. (2010) Between-group behaviour in healthcare: gaps, edges, boundaries, disconnections, weak ties, spaces and holes. A systematic review. *BMC Health Services Research*, 10: 330.
2. Braithwaite, J. (Under review) Bridging gaps to promote networked care between teams and groups in health delivery systems: A systematic review of non-health literature. *BMJ Open*.

# Discussion

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- This is work in progress
- I'll continue my obsession with gaps
- How does this feed into what we do  
in RHC?



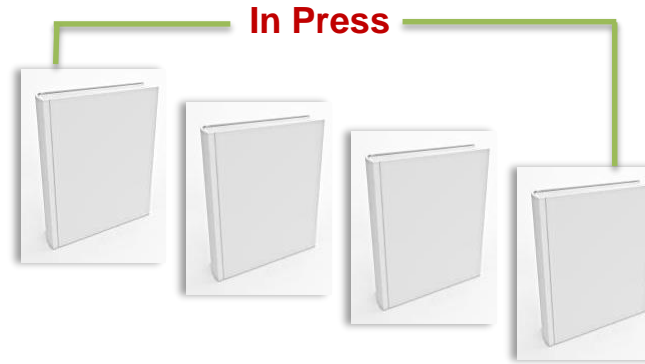
# Acknowledgements

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# Recent Books



- Culture and Climate in Health Care Organizations
- Resilient Health Care
- The Resilience of Everyday Clinical Work
- Healthcare Reform, Quality and Safety

- Reconciling Work-as-imagined and Work-as-done
- The Sociology of Patient Safety
- Successful Health Care: the Experience of 60 Countries
- Gaps: the Surprising Truth Hiding in the In-between