

Practical Wisdom

in

Ambiguity,
Politics and
Democratization
in Supervising
Care Institutions



Governance

Henk den Uijl

Nederlandse
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Openbaar
Bestuur

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Practical Wisdom in Governance

Ambiguity, Politics and Democratization in Supervising Care Institutions

Henk den Uijl

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PRACTICAL WISDOM IN GOVERNANCE

Ambiguity, Politics and Democratization in Supervising Care Institutions

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In memory of

Prof. dr. Frans Vosman (1952-2020)

Dr. Ton van Zonneveld (1954-2018)

Dr. Han van Diest (1951-2016)

The Doubter

Whenever we seemed
To have found the answer to a question
One of us untied the string of the old rolled-up
Chinese scroll on the wall, so that it fell down and
Revealed to us the man on the bench who
Doubted so much.
I, he said to us
Am the doubter. I am doubtful whether
The work was well done that devoured your days.
Whether what you said would still have value for anyone if it
were less well said.
Whether you said it well but perhaps
Were not sure of the truth of what you said.
Whether it is not ambiguous; each possible misunderstanding
Is your responsibility. Or it can be unambiguous
And take the contradictions out of things; is it too
unambiguous?
If so, what you say is useless. Your thing has no life in it.
Are you truly in the stream of happening? Do you accept
All that develops? Are you developing? Who are you? To
whom
Do you speak? To whom is what you say useful? And, by the
way:
Is it sobering? Can it be read in the morning?
Is it also linked to what is already there? Are the sentences
that were
Spoken before you made use of, or at least refuted? Is
everything verifiable?
By experience? By which one? But above all
Always above all else: how does one act
If one believes what you say? Above all: how does one act?
Reflectively, curiously, we studied the doubting
Blue man on the scroll, looked at each other and
Made a fresh start.¹

1 Bertolt Brecht, *Poems 1913-1956*, 270–71. Translated by John Willet, Ralph Manheim in cooperation with Erich Fried.

Preface

The quality of supervisory boards in health care, as well as in other civil society organizations, is a much-debated topic. I can know, as I was in the middle of some of these debates while working at the Dutch society for supervisory boards in health care (NVTZ). What struck me when I was there, was that philosophy did often not play a meaningful role in these debates, despite its strong potential to inform it. I believed that it was possible and useful to establish a connection between philosophy and the work of supervisory boards. Especially the societal role of these boards provided clues for this research project.

The painting on the cover is a modern interpretation of the *Regentesses of the Old Men's Alms House, Haarlem* (Frans Hals, 1664) by Loes den Uijl. The four ladies at the front form the board of this care institution. The lady at the back is an assistant. Behind them is a painting of the parable of the good Samaritan, illustrating the charity of the institution. This parable will return in this dissertation when discussing the work of the French philosopher Paul Ricoeur. It is a striking painting that is both alien and common to our experience of what a board is or should be.

I was always very much interested in the philosophy of Emmanuel Levinas, and I did various attempts to relate his philosophy to matters of organization. In this dissertation, I do not explicitly deal with his philosophy. Still, his thinking has led me to the wider school of phenomenology which will be discussed in some depth. While working on this dissertation, I became interested in the school of the ethics of care – a discipline also related to phenomenology. In my view, ethics of care helps to understand the everyday complexities people must face in caring relations. It brings in a perspective on governance and quality that is compelling, rich, and thoughtful. Finally, I have connected phenomenology and care ethics to political philosophy.

The scope of this thesis is both small and wide. Small, as it zooms in to a particular practice – supervisory boards in care institutions. Wide, as it connects this practice to everyday practices of caring and organizing, as well because it connects the role of civil society organizations to society and politics at large. I believe, following insights from the ethics of care, that it is important to relate small practices to their wider (political) context. This helps to understand how practices are formed, positioned, and entrenched.

Since I am a member of a supervisory board myself, I experienced firsthand the complex position of a board that is mostly absent in everyday caring practices. Also, I learned that things may go astray quite easily and that a supervisory board needs to be very vigilant, while there frequently is much distance in both time and space. It is easier to say that a board should be wise than to be it. I hope this thesis will help practitioners to reflect on their understanding of their proper role and position.

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1. Introduction: The need for practical wisdom in governance

*Quis custodiet ipsos custodes?
(Who will guard the guards themselves?)
– Juvenal, Satires, 347-348*

1.1 Wisdom in the boardroom

Perhaps, of all virtues we desire to find in supervisory boards, wisdom is the greatest. When King Solomon was asked by God in a dream what Solomon wanted, he asked for wisdom (rather than for wealth, victories, popularity or fame):

Therefore give to Your servant an understanding heart to judge Your people, that I may discern between good and evil. For who is able to judge this great people of Yours? (1 Kings 3,9, NKJV)

To govern means to judge (rather than to know) the difference between right and wrong. Not in general, however – whether it is good or bad to exploit people, to evade taxes or to abuse power. This is obviously and generally considered to be wrong. But it is also not about right and wrong in a strictly private sense; whether someone has high moral standards, or whether we say of some elder man or woman that he or she is benevolent or ‘old and wise’. Understanding the difference between right and wrong in a political sense (ruling the people, as Solomon calls it) is about particulars; about burning issues in the context of a situation in which deciding is a tough, if not an impossible, thing to do. What is good and what is bad is ambiguous and uncertain. What turns out to be good in one situation, may turn out bad in another, or what appeared to be good when making the decision had, in the end, bad consequences that outweighed the good (if it is even possible to make such a ‘weighing’ calculation). Political wisdom, indeed, practical wisdom, is about situational and sober ethics – but still requires the one who governs to act and to decide.

This dissertation is about governance. In governance, there is not just a king or a director who rules. Rather, there is co-leadership, checks and balances are in place and different responsibilities and mandates are attributed.² One of the players in governance is the supervisory board. It, among other things, controls the executive board and the governance of the organization, while the executive board is, indeed, executive. The supervisory board somehow needs to judge whether the governance is good and does good. Still, supervision is always a supervision *of something*: in discussing supervision of civil society organizations, automatically the question of good governing or governance comes into the picture and what the responsibility of the supervisory board is regarding this good governing.

1.2 Governance of civil society organizations

Today, a vast majority of civil society organizations in the Netherlands that also provide publicly funded public services (such as health care, public housing and education) have professional and independent supervisory boards, in a two-tier or dual board structure. Most of the organizations are private *foundations* – they have no embodied owners but are guided by the mission identified in their statutes. This was not always the case, as I will show in depth in Chapter 6 regarding health care. As civil organizations in the Netherlands often arose out of private initiatives, church organizations and associations, many boards previously had voluntary members from the constituency of the private initiative, like parents, residents, relatives, priests or vicars.

Focus on health care

As mentioned above, the object of study for this thesis is health care. Although I think that the argument has wider implications for governance of civil society organizations, part of the argument is that governance is always governance *of* a particular practice. Education is not the same as public housing, just as public housing is not the same as health care, and this matters for how to understand governance. Hence, an understanding of governance is always related to an understanding of what it attempts to govern. Health care itself presents of course a highly diverse perspective: there is a difference between a small nursing home and a university hospital. For that reason, this thesis mainly applies to health care organizations in what is called long-term care such as elderly care or care for mentally disabled people. I do grant myself some flexibility in this however, as I will constantly

² Winter & Van Loo, 'Board on Task: Developing a Comprehensive Understanding of the Performance of Boards.'

move back and forth between the general question of wise supervision in civil society, to which I will come in a moment, and its concrete relation to a specific health care practice.

Development of health care governance

From the seventies onwards, due to increasing scale and ‘complexity’, the cry for professional executive directors arose, followed by independent and specialized supervisory boards throughout the nineties, also under the influence of corporate governance and New Public Management (see Chapter 6).

In the beginning, professionalization of supervisory boards was not really an issue. There was hardly any body of literature, nor a common ground of how to do things, other than the first report on corporate governance in health care in 1999,³ and the establishment of an association for trustees in the health care sector in 1993 (nowadays called the NVTZ).⁴ As supervisory boards appoint their own members, they were (and sometimes are still) thought of as old-boys-networks.⁵ This has changed throughout the years. Amongst each other supervisory board members speak of their work as a profession, a craft. There is now a body of literature, standards of excellence (independency, transparency, vision, accountability, open recruitment), a governance code, professional associations, and an overwhelming supply of education possibilities.⁶

The role of supervisory boards

The task of the supervisory board, explained in detail in Chapter 3, is to oversee the mission of the foundation (which is mostly the structure) as formulated in the foundation’s statutes. Besides this, it has to appoint and evaluate the executive board and give it advice. This is its most directive function. Furthermore, it needs to approve or not approve high impact decisions such as strategy plans, reorganizations and mergers or major investments (for example in real estate or technology).

Hence, supervisory boards have a great impact on the course of an organization. Sometimes direct but foremost indirect. Their hands-on involvement in the organization is marginal – they have a background role. As such, they are not regarded as figureheads, although it is common for them to say that they need

3 Commissie Health Care Governance, *Bestuur, toezicht, verantwoording. Aanbevelingen voor goed bestuur, goed toezicht en adequate verantwoording in de Nederlandse gezondheidszorg.*

4 www.nvtz.nl

5 Cf. Goodijk, *Falend toezicht in semipublieke organisaties?*; Minderman, *Waar is de Raad van Toezicht? Deel I.*

6 Den Uijl and Van Zonneveld, *Zorg voor toezicht. De maatschappelijke betekenis van governance in de zorg.*

to act as role models. Indeed, one might expect supervisory boards to be wise. But what is this wisdom?

Their role within the organization and its wider context is institutional: they are a body that ‘checks and balances’ the power of the executive board, and they are supposed, following the branch code for governance, to sustain the organization within the wider context of the health care institution and public values in the Netherlands over time and in a ‘decent’ way.⁷ They need to consider public values such as accessibility, effectivity and safety of care and frugality with resources – political matters!⁸

As I will demonstrate, it is a matter of concern that management literature (see Chapter 3), as well as public opinion, indicate that supervisory boards often fall short on this task and role. Over the last decade, scholars, interest groups and consultants have debated the role of the supervisory board critically, especially in relation to some high-impact public governance scandals in health care, public housing and education. In Chapter 2 I will describe some stories from health care in detail. Where were they when things went wrong? – a frequently asked question and the answer appears obvious: reinforce supervision.⁹

Concern

The concern of this investigation is that although there has been much attention to the quality of supervisory boards in civil society organizations, and especially in health care – in terms of professionalization, (public) value orientation, strategic partnership, attention for quality and safety of the actual caring practices, and the like – I believe that the perspectives on supervisory practices that are commonly debated are too narrow to fully understand the role and responsibility of the supervisory board of a civil society organization. The usual perspectives are that of quality and risk management, corporate governance, professionalization, business administration and purpose or value-oriented reflections. In these aspects, governance is grounded, and practitioners seek to set foot on – apparently and appealingly – firm grounds and dry land. The quest for certainty – things or ideas to hold on to – appears to me as an important part of the supervisory discourse. There is a long-cherished desire that things are simple and clear.¹⁰ The origin of this quest may well be found in the specific experience of

7 Baart, *De ontdekking van kwaliteit; BOZ, De Governancecode Zorg 2017.*

8 Ibid.

9 Goodijk; Minderman.

10 Cf. Stacey & Griffin, *Complexity and the Experience of Values, Conflict and Compromise in Organizations*, 53.

‘being-in-the-board’.¹¹ This experience is marked, for example, by the episodic nature and limited time of the practice, ambiguous hierarchy, role diversity and confusion, information asymmetry, risk and reward asymmetry and addressing the ‘unsaid’. As Winter argues:

For non-executive directors the uncertainty is even bigger [in contrast to executive directors] as they have less insights than executives into all relevant factors that may, interdependently, produce future trajectories of development. And additionally, they do not lead the company themselves but only determine who are the executives who do so and have dialogues with them to influence them in their steering of the company. They are far removed from the action. Non-executives will make sense of the intrinsic uncertainty differently from how executives interpret the uncertainty while being-in-the-action of steering.¹²

The concern in this thesis is whether this quest for certainty does not paralyze the (discourses on) governance and care.

1.3 Context of supervisory boards: civil society, its ordinary practices and institutions

Ordinary practice

Civil society organizations, in our case health organizations, deliver public services. Concrete practices such as nursing, doctoring, educating and public housing are cornerstones of a society. Many of these organizations are professional organizations: the practitioners are skilled workers and there is much at stake in the lives of people who ‘make use’ – or better: are dependent upon these services. It is remarkable that precisely those professional practices that are said to suffer from government policy and extensive management and bureaucracy practices that undermine, perhaps also erode, the desire of (most) professionals to do good to the people they help.¹³ This is a tough concern, as the governance of civil society organizations has become rather complex in the Netherlands, and influences from state, professional, market and civil practices have made matters of governance ambiguous (see Chapter 6). The stakes are high and vast amounts of public money flow through these sectors. Ordinary practice however – educating a class of kids; a midwife helping a young mother; a nurse who is too busy to

11 Winter, ‘The Human Experience of Being-in-the-Board. A Phenomenological Approach’.

12 Ibid, 11.

13 Cf. Jansen, Brink, and Hammond, *Professional Pride: A Powerful Force*; Van Ewijk, ‘Conceptuele inleiding: Ontvouwing van normatieve professionalisering’.

give proper attention to the dement residents – may be difficult to ‘catch’ into the developed systems of accountability and supervision. What is good in one situation, may be different in another, and what is called accountable care may turn out to be careless – even ignorant. Good care may turn out not to be sufficient for accountability.¹⁴ Protocols may be both hindering and helping. This is, of course, utterly frustrating if you want to do good or want to perform the profession as well as you possibly can.¹⁵

This issue is a true concern for a supervisory board, in two ways. First of all, the supervisory board itself may be tempted to look at ordinary practice from the viewpoint of systems of accountability and quality management, and perhaps rightly so. The question is, what does the supervisory board see, or perhaps better: what does it not see? Second, the supervisory board is in the middle of the incompatibilities between systems of accountability and ordinary practice, and they need to consider and deliberate on both of these concerns.

Institutional task

The question of control over those who control, who watches the watchmen, is as old as politics itself. In our western and modern societies, numerous institutional and informal *checks and balances* are in play to control those who control others. This is not only true for government, but also for private, non-profit and civil society organizations. The question posed by Juvenal (the quote with which this introduction is started), *who watches the watchmen*, often referred to in Plato’s ‘Republic’, is about the problem of how to control people in power. From a democratic point of view this also entails the question of how citizens themselves can influence their proper lifeworld, and how they attain a position in controlling those in administrative power.¹⁶

In search of legitimacy – or democracy?

In the Netherlands, there appears to be dissatisfaction about the way the public sphere (including health care) is organized, and how citizens and street-level professionals are able to receive and give the care that is needed. The welfare state is highly bureaucratic with an urge for systematization and categorization, pushing away the possibility of judgment in concrete situations. This has led citizens to withdraw from active participation in the public sphere.¹⁷ This is not mere sentiment.

14 Cf. Baart and Carbo, *De zorgval*.

15 Cf. Hart, *Lost in Control. Refocus on Purpose*.

16 Democracy, from *demos*, the common people, and *kratos*, rule or strength.

17 Cf. Hart.

The Netherlands Institute for Social Research (SCP), one of the most influential advisory bodies of the Dutch government, has stated repeatedly that although people are rather satisfied with their private lives, they are unsatisfied about public life. People are worried about their communities, the state of politics and the distribution of welfare.¹⁸ Internationally, amongst others, the Canadian philosopher Charles Taylor has called this a ‘loss of freedom’: the retreat of citizens into their private lives, not anymore, or less, involved in participation in the public sphere. Referring to Alexis de Tocqueville he states that:

A society in which people end up as the kind of individuals who are ‘enclosed in their own hearts’ is one where few will want to participate actively in self-government. They will prefer to stay at home and enjoy the satisfactions of private life, as long as the government of the day produces the means to these satisfactions and distributes them widely.¹⁹

This could possibly lead to a form of ‘mild despotism’, as mentioned by Tocqueville.²⁰ It will not be a tyranny of terror or blunt oppression; instead, the government is mild and paternalistic. It keeps up democratic forms, including elections. But in fact, “everything will be run by an immense tutelary power, over which people have little control.”²¹ Hannah Arendt has called this the ‘conformism’ of the social sphere: people in society retreat into economic and biological necessities, thinking that freedom resides over there. Freedom, however, is not only being free from state intervention but also resides in joining the political sphere: the (ideal) place where citizens come together to speak about and make decisions about public life.²²

Tjeenk Willink, former vice-president of the Dutch Council of State, recently wrote that civil society organizations, such as in public housing, education and health care, have lost their connection with their traditional constituency (involved citizens).²³ With it, these organizations have lost their position as an opposing or balancing force towards government. Strangely, in discussions on how democracy is failing, Tjeenk Willink argues together with the Dutch Council for Public Administration²⁴, the conversation always points to representative democracy: the way Parliament and government operate.

18 SCP, ‘Burgerperspectieven 2019, 1’; SCP, ‘Burgerperspectieven 2018, 3’; SCP, ‘Burgerperspectieven 2019, 2’.

19 Taylor, *The Ethics of Authenticity*, 10.

20 Tocqueville, *Over de democratie in Amerika*, 747–48.

21 Taylor, 10.

22 Arendt, *The Human Condition*, 39–42.

23 Tjeenk Willink, *Groter denken, kleiner doen*.

24 ROB, ‘Democratie is méér dan politiek alleen - Burgers aan het roer in hun leefwereld’.

Surely, there are attempts to involve citizens in political decision making, but more often than not the citizens that are involved (often lobbying organizations) are not the citizens that feel abandoned or not represented by government or boards of civil society organizations. For this group:

(...) a reinforcement of the position in civil society is more important than yet another electoral system or referendum. Why is there so little debate on this matter? What is – now the private initiative is no more – the necessary complement on representative democracy and offers counterbalance to the specific dynamics of state and market? No one seems to realize how risky the absence of such a counterbalance is, precisely while state and market control major parts of the public sphere – the space in which citizens should be allowed to develop initiatives.²⁵

Hence, these (rather) different authors point to the relevance of a revival of civil democracy: the involvement and power of citizens in their direct public sphere considering politics, including health care, education and public housing – but also for example in religion, sport and leisure (but this is beyond the scope of this thesis).²⁶

On the other hand, though, Tjeenk Willink notices a revival of private initiatives, mostly in the margins of the entrenched civil society organizations that deliver public services.²⁷ Examples are initiatives in the fields of sustainability, public housing or from parents with children with disorders, neighbourhood care or care for refugees. These initiatives have to win space from government and market, and also from traditional civil society organizations. Some argue that this kind of initiatives disrupt and (implicitly) criticize the traditional ways of politics and public services in the Netherlands and are in fact very promising.²⁸ Tjeenk Willink himself is worried about the way these initiatives find it difficult to compete with government, market and entrenched civil society organizations, and to sufficiently institutionalize – and thereby become durable.²⁹ The question remains urgent however: is it true that civil society organizations have lost their democratic potential?

25 Tjeenk Willink, 53–54.

26 Hoogland and Buijs, *Ontzuielde bezieling*.

27 Tjeenk Willink, 59.

28 De Waal, *Burgerkracht met burgermacht*; De Waal, *The Value(s) of Civil Leaders*.

29 Tjeenk Willink, 59.

1.4 Practical wisdom

What is overlooked, and this is the perspective, a lens, by which I will rethink supervisory practice, is the fundamental *political* nature of supervising a civil society organization. This means, simply put, the notion that on the one hand there are those who govern and those who are governed and on the other hand the everyday concrete practices of care in which there is a permanent (possibility of) *friction*, a pluralism, about the question of what counts as good care and good organization. I will explain the complexities of this political distinction in Chapter 10.

This dissertation proposes to focus this conceptual rethinking of supervisory practice as ‘prudence’ or ‘practical wisdom’ (*phronesis*). The concept stems from the great Greek philosopher Aristotle (384 B.C. – 322 B.C.) and has been in philosophical attention ever since the works of Aristotle entered the Western philosophical tradition in the eleventh century. The Latin translation of the word is well known to us: *prudentia*, from which we derived the word prudence. Moreover, *phronesis* is not any longer a mere philosophical issue: it has gained quite some popular and scholarly attention in recent years. This concept automatically involves thinking of supervisory practice as a political and moral practice. Aristotle states that:

Now it is thought to be a mark of a man of practical wisdom to be able to deliberate well about what is good and expedient for himself, not in some particular respect, e.g., about what sorts of thing conduce to health or to strength, but about what sorts of thing conduce to the good life in general.³⁰

Practical wisdom, following Aristotle, contrasts scientific (universal invariable) knowledge and technical (craft-like) knowledge. It is about things on which one can deliberate (that is its political component), on which there might be conflicting views, while at the same time the matters deliberated have a specific end, a purpose (that is its moral component). For Aristotle, practical wisdom is an intellectual *virtue*. Considering his ethics, this implies that practical wisdom is not something that can be taught or acquired direct or in an instrumental way but is rather something that is internalized by experience and habit, while it always remains a *becoming*. In Chapter 11 of this dissertation, I will lay out my specific interpretation of practical wisdom for supervisory boards following different contemporary scholars such as Arendt, Gadamer, Ricoeur and Merleau-Ponty.

30 Aristotle, *The Nicomachean Ethics*, 106, 1140a25.

1.5 Research question

On the one hand we have practical wisdom, on the other hand we have the practice of supervisory boards in care institutions. The main research question of this thesis is, in short:

What is wise supervision?

Unpacking the question

Let me explain what elements are involved in this question in this study. It is a general question, and it will remain so, but since practical wisdom is always about actual practices, I study this question in the context of Dutch (long-term) health care, *as* part of civil society. What will become apparent is that albeit this is a thesis on supervisory practice, it has a much wider scope. As supervisory practice is oriented to so many organizational and societal aspects, it is also a thesis on governance, institutions, management and ordinary caring practices in civil society in general.

Furthermore, it is a philosophical question about a practice (governance of civil society organizations) in which philosophy is not a common player. The question for wisdom, which is oriented towards a specific practice and is hence a practical wisdom (not a mere general wisdom) suggests that the practice of supervision, or oversight, is, at least partly, defined by a navigating through tensions that are inherent to that practice. For indeed, if supervision would only require an administrative or technocratic *logic*, then decisions are not really decisions but just the following of reason.

The question is explorative: what happens if we reconceptualize supervision as practical wisdom? I have no hypothesis that is tested in the ‘real world’, but rather I install a specific *interpretation* that sheds light on the practice that has remained in the background in previous research on supervisory work. Hence, the part that deals with the current practice of supervision (throughout Part I) does not function as a way to prove the point, but rather to get into dialogue with the practice (through stories, popular management books and dialogues with two supervisory boards). The validity of my findings, conclusions and recommendations are not to be found in methodological criteria that determine representation of reality, but rather in the fact that I deal with a practice that talks back; agrees or disagrees, approves or criticizes and asks questions whether this is worth mentioning.³¹

³¹ See further methodological reflections: paragraph 1.8.

In the remainder of this general introduction, I explain the central concepts in the unpacked main question (1.6). After that, I will outline the conceptual lens through which I will study wise supervision (1.7), followed by an outline of the chapters (1.8). Then, there will be an extensive description and an account of the overall (theory of) method of this research (1.9). Also, I will briefly discuss the societal (1.10) and scientific (1.11) relevance of this research.

1.6 Key concepts

This paragraph addresses concepts that are mentioned with unpacking the main question formulated above, accompanied by concepts that play a vital role for an understanding of this research.

1.6.1 Governance

Governance is an essentially contested concept, like ‘democracy’ or ‘justice’. Social scientists and practitioners refer to it all the time, without being clear or agreeing on what it precisely means.³² Of course, generally governance is about running organizations and setting up structures that enable the organization to run its course. It might refer to anything that has to do with how the top of any organization is organized and working. But it is also a concept in public administration and refers to how government and public or semi-public organizations are related.³³ From this perspective, also national inspectorates, commissioners and insurance companies are part of a ‘system of governance’, for example in health care.

The word is derived from the Greek *kubernaitikos* and Latin *gubernare*. It is a nautical concept and is about the art of steering or navigating. The nautical metaphor is still very important in our organizations’ language, for example as in the ‘moral compass’, ‘setting course’ or ‘changing direction’. *Governance* is a noun of the verb *to govern*, just as *performance* is a noun of the verb *to perform*. The noun makes evaluation of the verb possible. Kooiman argues that governing is about the practices of steering (in Dutch *besturen* or *besturing*): “(...) in which public as well as private actors participate, aimed at solving societal problems or creating societal opportunities; attending to the institutions as contexts for these governing interactions; and establishing a normative foundation for all those activities.” Governance, then, is about the (theoretical) concepts that drive the practice of governing.³⁴ Different

³² Hughes, ‘Does Governance Exist?’, 87–88.

³³ Osborne, ‘The New Public Governance?: Emerging Perspectives on the Theory and Practice of Public Governance’.

³⁴ Kooiman, *Governing as Governance*, 4.

conceptions of governance (partly) determine the way it is practiced. Most common different approaches to corporate and non-profit governance are for example agency theory, stewardship theory or stakeholder theory.³⁵ In corporate governance, the focus is often on how to be accountable to providers of capital or other stakeholders or how to prevent ‘moral hazard’.³⁶ In public governance the focus is often how government can or should steer in relation to other societal actors – state, market, civil society and private citizens and which instruments to use (such as between enforcement or prevention or between equity or outcome measures).³⁷ Different scholars have critically argued that non-profit governance, and in our case also health care governance, stems closely from corporate governance and public governance (especially New Public Management) which tends to suppress the peculiarities of civil society organizations.³⁸ All this, it appears, leads to some rhetorical flexibility of the term: “[...] it allows us to reference, in a summary way, broad sets of ideas, problems and relationships at interlocking levels of analysis.”³⁹ Nonetheless, in this study, it is about the governance of a specific organization: a civil society organization, most of the times a foundation. It is not a corporation, although it is a private organization. It is not a government organization although it serves a public task (health care) with public funds. As private foundation, it has the authority to govern itself. Part of my inquiry is that, because of its common reference to corporate and public governance, the specificity of governance of civil society organizations has not yet been sufficiently explored.

For this research, which is a philosophical thesis, I want to draw the concept of governance out of the social sciences, into a more political-philosophical definition. The tentative definition I use is twofold and represents two sides of the same coin. Governance is, on the one hand, about how power (and therefore responsibility) is made possible, and how, on the other hand, power is checked and balanced. The positive formulation, based on Arendt’s idea of power, is about the possibilities and potentialities people (in and around the organization) have when they do things together; potentialities that people cannot accomplish with mere individual strength.⁴⁰ Governance, then, is

35 Meyer and Maier, ‘Corporate Governance in Non-Profit-Organisationen: Verständnisse und Entwicklungsperspektiven’.

36 Hart, ‘Corporate Governance: Some Theory and Implications’.

37 Van der Steen, van Twist, and Bressers, ‘The Sedimentation of Public Values: How a Variety of Governance Perspectives Guide the Practical Actions of Civil Servants’.

38 Maier and Meyer, ‘Managerialism and Beyond: Discourses of Civil Society Organization and Their Governance Implications’; Maier, Meyer, and Steinbereithner, ‘Nonprofit Organizations Becoming Business-Like: A Systematic Review’; Meyer and Maier, ‘Corporate Governance in Non-Profit-Organisationen: Verständnisse und Entwicklungsperspektiven’; Strikwerda, ‘Raad van toezicht of raad van verbinding?’; I will discuss this matter at length in Chapter 6.

39 Morrell, ‘Governance and the Public Good’.

40 Arendt, 199–200.

about unleashing these potentialities of togetherness. However, in doing things together, responsibilities need to be assigned between, roughly, those who govern and those who are governed. We therefore also need a negative formulation of governance based on Foucault's critical examination of power as *domination* and *disciplining*, and is about how, whenever power is established and responsibilities assigned, this power is checked and balanced – does not become mere strength, but remains deliberated, common and critically controlled.⁴¹ Anticipating the argument of this thesis, this definition already bears a tension: *simultaneously enabling and restraining power*. As we will see, the question for wise supervision may also be addressed as the question to the nature of governance.

1.6.2 Navigating through tensions

It is often said that supervisory boards experience tensions or dilemmas in their practice. They somehow need to navigate them, work them through, act and make decisions. Often, an obvious firm handhold is lacking, although they may be eager to find one. Experienced tensions can be those between distance and proximity, speaking out or holding back and intervening or choosing not to (see Chapters 3, 4 and 5). In this research, I will give more depth to this process of navigating by re-working the traditional dilemmas supervisory boards face.

1.6.3 Supervisory boards in Dutch health care

Although this appears rather straightforward, it needs some explanation. In the Netherlands there is mostly a dual or two-tier board structure, with a separate executive and a supervisory board. This might be comparable to non-profit organizations with a (voluntary) board of trustees and a director. The responsibilities in governing the organization are bifurcated into two boards with different responsibilities. There is a sense of co-leadership. The executive board is mandated by the supervisory board to, on a daily basis, lead the organization. The supervisory board provides this mandate, approves major decisions and oversees how the organization functions under this mandate. In Chapter 3 I describe in detail the responsibilities and positioning of supervisory boards in Dutch health care. In Chapter 6 I describe how the organization of health care in the Netherlands has evolved. As mentioned, Dutch health care organizations are civil society organizations, although they are mainly publicly funded (by taxes and insurances) and function within some market-like structures (competing over resources, personnel,

⁴¹ Foucault, *Essential Works of Foucault, 1954-1984; Volume 3. Power; Foucault, Discipline and Punish: The Birth of the Prison*, 205; Arendt, 201.

'customer-satisfaction' and the like). As noted above, although the research question is general, the concrete perspective is that of civil society, more particularly health care, more particularly long-term care. Long term care is a form of institutional care that has great and everyday impact on the lives of people (such as elderly people living in nursing homes). As such, it illustrates very well how the structuring of people's life is never neutral, but involves choices of policy, also, or precisely at the level of the boardroom.

1.6.4 Practical wisdom

The concept of practical wisdom provides an epistemological, but with it also a political and moral outlook. In recent years, this concept has undergone a true revival, especially in education, health care and management literature.⁴² One might well argue that this is a critical reaction to the rise of positivism and technical optimism in administration and business studies throughout the 20th century.⁴³ The most famous and perhaps fundamental example of this rationalism is the work of F.W. Taylor, and his *Principles of Scientific Management*.⁴⁴ Although administration science has not stood still since then, and many different (critical) perspectives have come into place, it appears still to be the case that naturalism and technical know-how are the primary forms of epistemology when it comes to leading and governing an organization. Naturalism, that is, a specific conception of science as a realist or positivist representation of reality, holds that (statistical) measurements of organizational practices represent reality and that the outcomes can be used for predicting evidence in other similar situations. This might well be the origin of the idea of *implementation* but is also present in the idea of copying 'best practices'. In a sense, a lot of contemporary research into corporate and non-profit governance still follows the positivist research paradigm.⁴⁵ In administration practice, only until recently the idea stood

42 See for example Bontemps-Hommen, *Practical Wisdom: The Vital Core of Professionalism in Medical Practices*. Bontemps-Hommen, Baart, and Vosman, 'Practical Wisdom in Complex Medical Practices: A Critical Proposal'; Calleja and Melé, 'Political Wisdom in Management and Corporate Governance'; Parker, Thomas, and Kavanagh, 'Problematizing Practice: MacIntyre and Management'; Kinsella and Pitman, 'Phronesis as Professional Knowledge: Practical Wisdom in the Professions'; Kemmis, 'Phronēsis, Experience, and the Primacy of Praxis'; Küpers and Pauleen, *A Handbook of Practical Wisdom*; Kupers and Statler, 'Practically Wise Leadership: Toward an Integral Understanding'; Schwartz and Sharpe, *Practical Wisdom*; Schwartz, 'Practical Wisdom and Organizations'; Trnavcevic and Biloslavo, 'To the Future with Aristoteles: Phronetic Bricolage?'

43 Described in for example Khurana, *From Higher Aims to Hired Hands*; van Baardewijk, *The Moral Formation of Business Students*; Schön, *The Reflective Practitioner*. The latter was already written in 1983.

44 Frederick Winslow Taylor, *The Principles of Scientific Management*.

45 Cornforth, 'Nonprofit Governance Research: Limitations of the Focus on Boards and Suggestions for New Directions'.

fast that management control information actually represents the organization, but a shift in this viewpoint is becoming apparent.⁴⁶ As supervisory boards strongly lean on management control information, and given the naturalist context of administration science, the risk of a similar naturalist view of the organization by practitioners is quite plausible. Linked with naturalism is technical optimism and formalism: a means-end rationality that assumes that provided one follows certain rules or protocols, one can secure quality and risks.

However, in my view, this rather gloomy description, though it might sometimes meet reality, is a caricature. If you would visit a meeting or a seminar with supervisory board members, and you would ask them how and why they take decisions, when they speak up or when they stand down, they will probably tell you that this is a matter of gut feeling, of experience or 'moral compass'. Of course, they will tell you that they need the correct information, but it seems that they have some intuition that something else is in play, very often referred to as 'common sense' (called *boerenverstand*, 'farmer's knowledge' in Dutch). This term very often marks the end of a discussion: it's just common sense. For me it is the very starting point of inquiry.

Following the tradition of Aristotle, I assume that the central form of knowledge in supervisory work is (some specific form of) practical wisdom (*phronesis*). I briefly introduced it in paragraph 1.3. It concerns knowing how to act, what the right or good thing is to do (for the political community and for the self), in general and in concrete situations, without theoretical fore-knowledge or universalia at hand that simply have to be applied. It is not technique. Contemporary philosophers, mainly in the hermeneutic-phenomenological tradition, such as Hannah Arendt, Hans-Georg Gadamer and Paul Ricoeur have taken up, and sharpened, this tradition of practical wisdom. Recent years, the attention for practical wisdom became more mainstream, both in academia as well as in practice.⁴⁷ As will become apparent, the aim of this dissertation is to reformulate the idea of practical wisdom, for wise supervision in civil society organizations.

46 Drost et al., 'Accounting as a Performative Strategic Actor: The Performativity Turn in Accounting Research'.

47 Shotter and Tsoukas, 'In Search of Phronesis: Leadership and the Art of Judgment'; Flyvbjerg, Landman, and Schram, 'Real Social Science Applied Phronesis'. See also note 42.

1.6.5 Institutions

The task of the supervisory board is institutional, in the sense that it should guard the mission or values of the purpose of the organization as formulated in the statutes. I will discuss this concept and its relationship with supervisory work extensively in Chapter 6, 7, 9 and 10. For now, it suffices to say that I regard institutions as something (for example a health care organization) that carries value(s) beyond its mere instrumental function (such as providing care). Values are ‘infused’ in institutions in such a way that people rely on them for making ‘common sense’ – shared meaning. Furthermore, institutions provide stability and durability of these values.⁴⁸ I regard institutions to be political, for institutions are expressions of how we try to live together. Furthermore, the values of institutions are not static or fixed, but permanently and incrementally changing due to a questioning of and conflicts around these values.⁴⁹ Institutions are not to be reduced to individual responsibility but have a wider reach in time and societal structures (you cannot just ‘change’ an institution by arguing that everyone ought to act differently – it is too sturdy for that). It is said, however, that in modernity and late modernity (that is, our era) traditional social institutions (such as church, family or association) have declined, broken down, and no longer provide a proper ‘common sense’ for people in society, while other institutional structures have grown and become all-pervasive (such as the welfare state and its bureaucracy).⁵⁰ For our question for wise supervision this is of course important: what is the institutional task of the supervisory board in the light of these institutional developments?

1.7 Conceptual lens

Building forth on the description of the key concepts, I will now explain my conceptual lens that will guide me through this study. First of all, this lens serves to narrow and focus the study. Formulating a conceptual lens is, however, also inspired by the hermeneutic tradition of Gadamer, implying that whenever someone tries to understand something or someone else, his pre-conceptions and prejudices are not (only) hindering, but rather first and foremost productive to get to an understanding.⁵¹

48 Scott, *Institutions and Organizations*.

49 Castoriadis, *The Imaginary Institution of Society*.

50 Dubet, *Le déclin de l'institution*.

51 Gadamer, *Truth and Method*. As he writes: “Just as we cannot continually misunderstand the use of a word without its affecting the meaning of the whole, so we cannot stick blindly to our own fore-meaning about the thing if we want to understand the meaning of another. Of course this does not mean that when we listen to someone or read a book we must forget all our fore-meanings concerning

The conceptual lens is formed by three elements (ambiguity, politics and democratization) by which I will interpret the quest for wise supervision. The lens forms the axis of rotation of this study, and I will come back to them continuously. First, I will describe two conceptual approaches that precede these three elements.

1.7.1 Schön's safe high grounds and the swampy lowlands

Underlying the question of wise supervision, I turn to a metaphorical distinction, coined by Donald A. Schön, of the 'safe high grounds' and the 'swampy lowlands'.⁵²

The safe high ground is, shortly, a place where scientists, consultants, managers, and indeed supervisory board members gather to evaluate and make decisions about the practice (of care). From the safe high ground, many things appear to be (potentially) clear and ordered. For every disturbance of order, they invent technical and evidence-based solutions in the form of policy, strategy, projects, instruments, codes, methods, controlling activities, road maps or blueprints. In principle, there is no problem that cannot be solved. This (instrumental) rationality consists of scientific evidence, 'best practices', rules and protocols. The PDCA-cycle (Plan-Do-Check-Act) is its ultimate instrument: learning and improving is a genuinely cyclical and straightforward process. It may however also have high moral claims, like a supposed moral compass or core values that need to be applied in practice. From the safe high grounds, people think for those in action without immersing in that action. The language is abstract but appears to be concrete: there is talk about 'the patient', 'the professional' or 'the citizen'. The swampy lowlands form the sites where concrete practice and action takes place. Here, thanks to or despite all the values, rules and policy – practitioners need to somehow complete the work to be done. They encounter tensions within the policy or profession. Practitioners experience imperfection, incompleteness or mediocrity. Often, there are no universal truths or methods available or suited for completing the job. Instead, practitioners need to navigate within their common judgment, taking into account the methods, policy and the situation at hand. Frankly, this is what professionals do. Learning is not a planned activity, but rather an unconscious acting involving ambiguous moving back and forth between action and reflection (in and on practice). On the safe high ground, however, the practitioners' judgment is not trusted.

the content and all our ideas. All that is asked is that we remain open to the meaning of the other person or text. But this openness always includes our own situating the other meaning in relation to the whole of our own meaning of ourselves in relation to it" (281). Hence, someone who tries to understand something or someone is always projecting (279). See further for methodological reflections paragraph 1.8.

⁵² Schön, *The Reflective Practitioner*.

After all, this judgment cannot always be made explicit nor objective. Therefore, they prefer professionals to act according to rules, values or methods that may or may not be adequate: at least they are to be made objective and traceable.

A central intuition underlying this study is that the art of governing or controlling the 'reflective practitioner', how to institutionally embed the practice, lies in standing back from the appealing perspective of the safe high ground – clarity and objectifiability – and understanding that the core of the practice is 'muddling through' and thoroughly ambiguous: from a distance it is never really clear what marks or induces good and what marks bad practice. That is to say: in practice, generalized methods often appear to be irrelevant or mismatched, even obstructing a proper completing of the work at hand.

Supervisory practice can easily be associated with the safe high ground. After all, they operate from a relative distance, need to deliberate about abstractions and reductions, talk about general values, risks and strategy. The appealing features of clarity and objectifiability, finding firm grounds, always lure. The question is how a supervisory board can, from its due position, control the practice considering its swampy texture and how to oscillate between the two sides.

1.7.2 Refocus on purpose or: lost in control

One of the most popular management books in the Netherlands in the past decade, especially in civil society organizations, is *Lost in Control* (original Dutch title: *Verdraaide organisaties*).⁵³ In the Netherlands it has even become a kind of movement. I do think that there is not one supervisory board member in health care that has not at least heard of it and that in every health care organization a copy of the book is to be found, and that is also why it is important to mention and use it here. It is short, funny, and plain, while many feel it touches the heart of persistent problems in (civil society) organizations. 'Going back to the purpose' is probably one of the most spoken sentences by board members and keynote speakers at congresses on management, care and education. Basically, it addresses the frustration experienced by many professionals that they cannot properly do their jobs due to the way things are organized. The logic of the organization, its goals, targets, structures and accountabilities, has become the core of their work, rather than performing the actual job: helping individual people as well as possible.

⁵³ Hart, *Lost in Control*; Hart and Buiting, *Verdraaide organisaties*.

Loosely referring to Habermas, a distinction is made between the system world and the lifeworld. The argument is that we need to learn (again) to act from the lifeworld through the system world, and not the other way around. Going back to the purpose or aim of the organization is something like activating common sense: what am I to do in this situation? From the perspective of management this entails: how can I facilitate professionals in such a way that they centre themselves in the lifeworld instead of the (managerial, and therefore potentially induced by the same perspective) system world? A parallel can be seen between this distinction and that of Schön: the system world then corresponds to the safe high ground, and the lifeworld to the swampy lowlands. They both deal with the question of how practitioners learn and act and how this may be perverted.

Many supervisory boards and experts in the field have embraced this language. Many of them believe, perhaps rightfully, that the supervisory task is to oversee whether or not the organization sticks to or completes its purpose, and whether or not gets 'lost in control'. The 'added value' of a supervisory board is measured by this token – although it may remain elusive if or when the 'purpose' is met. One of the aims of my thesis, and especially the second part, is to give more depth to – and critically discuss – this idea of purpose of, in our case, care, and the associated grounding of supervisory practice. I will do so in a carefully constructed and perhaps dense argument.

1.7.3 Ambiguity of ordinary practice

Building forth on the key concepts of 'the swampy lowlands' and 'lost in control', I am especially interested in what way supervisory boards recognize the ambiguity and ambivalence of ordinary practice. Or, whether they tend to turn a blind eye to this ambiguity, in desperate (but perhaps sometimes also disguised) need for certainty, with 'instrumental rationality' (strategy, quality management, risk management) or, more tenderly, with a trust in organizational values or benevolence of workers. Ambiguity means equivocal; ambivalence means 'simultaneous conflicting feelings', or literally 'on both sides strong'.⁵⁴ The point is that what happens in ordinary practice may not be (totally) understandable in terms of (abstract) categories and classifications. Something (an act, policy, control) may turn out to be this or that, or even both at the same time. As Zygmunt Bauman says that ambivalence is: "the possibility of assigning an object or an event to more than one category."⁵⁵ It raises the question what *knowing* and *not-knowing* something about ordinary practice means and what this implies for the

⁵⁴ See etymonline.com and etymologiebank.nl

⁵⁵ Bauman, *Modernity and Ambivalence*, 1.

supervisory task that is typically distant. Hence, indeed, my concern is that they may tend to turn a blind eye to this ambiguity. It is more delicate however as many supervisory boards are willing to understand what goes on in ordinary practice, and to be meaningful in a morally or social way. Finding a way between ‘distance’ and ‘proximity’ is a commonly debated subject. I am interested in how this ambiguity can be addressed in a conceptual way.

1.7.4 Quality of care as political category

Organizations in civil society, in our study especially health care organizations, invest a lot of energy and (financial and human) resources into monitoring ‘the quality of care’. This has some obvious reasons, such as the need to be accountable for insurance companies or government that provide the money. Management instruments, such as a SWOT-analysis in strategic management or a PDCA-cycle in quality management are more often than not focused on quality *improvement*. ‘Doing things better all the time’ is a strong and self-evident imperative in health care organizations.⁵⁶ But care is a complicated and delicate matter, especially when it comes to long-term care. It does not only involve benevolence or tenderness, but also the less pretty side of human beings – aversion, frustration, ignorance, neglect and injustice. Care is ambiguous I suppose, and no caring relation is without matters (and problems) of power and involves a permanent accommodation.⁵⁷ Still, management instruments appear to dominate health care practices, even on the level of values.⁵⁸ There’s quite a market of consultants who are willing to help implement these instruments, promising mountains of gold – in our case: a very good ‘net promotor score’.⁵⁹ Supervisory boards are very much focused on the quality (improvement) of care, and quality appears to be their main objective or societal relevance. Whether they do this merely instrumentally or with public values in mind is of course relevant. This technical or instrumental approach (recall Schön) is in contrast with the political and moral nature of practical wisdom. I am especially interested to what extent quality of care is or should be considered by supervisory boards as a *political* category, rather than merely as a *managerial* or *professional* category. I will actively explore what it means to consider quality as a political category. Part of this quest is unravelling what ‘political’

56 Good analyses of this matter have been done in the tradition of the ethics of care, more specifically in the theory of presence. See Baart and Carbo, *De zorgval*; Baart and Vosman, *De patiënt terug van weggeweest*; Baart, *De ontdekking van kwaliteit*.

57 De la Bellacasa, *Matters of Care*. She criticizes “(...) the persistent idea that care refers, or should refer, to a somehow wholesome or unpolluted, pleasant ethical realm” (8).

58 Value Based Healthcare may be such an instrument.

59 In many health care organizations, patients or relatives are asked by a survey to fill in whether they would recommend the facility to family or friends, resulting in a ‘net promotor score’.

in this sense means, but for now it suffices to define the political realm as a space in which certain orders (of caring and living together) are perpetuated and questioned, resulting in a permanent possibility of conflict over what it means to care well and to live together decently.⁶⁰

1.7.5 In search of civil democracy

If caring is seen as a political category, then governance – *simultaneously enabling and restraining power* – is about politics. Politics here is not to be confused with parliaments or representative democracy. Politics is the practice of governing and being governed, about the institutions and governing bodies that have positions to take decisions in the sphere of society. The supervisory board is such a body, next to for example the executive board and codetermination councils. The conceptual lens I propose is to look at the politics of civil society organizations from the perspective of *civil democracy*. I have already touched upon this in paragraph 3 of this chapter. The very idea of civil democracy is that citizens – who are also sometimes patients, residents, students or family – are regarded as full-fledged democratic actors that are (at least politically) able to codetermine the course of their lives and their respective environment. I am wondering in what way the idea of civil democracy in civil society is still alive, or, if not, what came in its place. Also, I will explore to what extent civil democracy, in whatever form, should be pursued in the governance of civil society organizations.

1.8 Reflections on the nature of this research

In this paragraph I discuss my methodological and epistemological outlook throughout the research. I believe it makes sense to describe this in some detail, as I believe it also functions in itself as a critique of dominant research practices in management and governance studies. Also, it shows that the theoretical background I have presented above is intertwined with the methodological outlook below – and I think it is of epistemological relevance that the theoretical approach is congruent with the research method. In this paragraph I will first outline, briefly, the method used and the different elements of this study. I will then argue why a representational approach to complex social practices has some serious epistemological flaws. After that I will discuss what a non-representational approach implies and why it is more promising for understanding complex social practices. Thereafter I will dig a little deeper into what has been called the ‘practice turn’ in social

60 I will mainly build on the so-called postfoundational political theories, especially Marchart, *Das Unmögliche Objekt*.

theory, as I believe that these practices theories are an important source for non-representational epistemologies (and methods). I will describe the ‘turns’ and why it is relevant for the congruence of my theoretical and methodological outlook.

1.8.1 A non-representational and hermeneutic approach

This is a theoretical study. But as it is about a particular practice, it also has a qualitative element. To describe this practice, theorize about it and taking some qualitative measures, I use a so-called non-representational approach. ‘Non-representational’ means that the aim is not to study ‘objects out there’ and make claims about the truth or state of affairs. The aim is rather to construct possible new (critical) meanings with and for complex practices in the combination of qualitative research and the building of theoretical concepts. The researcher does not stand outside of the practice in a subject-object relation. Rather, the quest is how to evolve shared understanding of professional practice in which you are (at least partly) immersed as a researcher (subject-subject relation). Hermeneutic in this context means: the preconceptions and the judgments of the researcher in dialogue with his ‘objects’ (which are subjects) of study are involved and made relevant, even necessary for theory building. Because of this, the robustness, reliability or validity of this study – with its findings, conclusions or recommendations – are not to be found in rock-solid criteria for a true representation or image of reality, but in the fact that both research practice and the practice researched itself are reflexive: supervisory board members talk back, agree or disagree, approve or don’t approve and provide the researcher with the critique as to whether this study and conceptual development has value or merit for practice.⁶¹ This connects to the conception of *grounded theory* as it is care ethically formulated by Baart and Timmermans who argue the reciprocal and mutual relation between theory building and (empirical) practice.⁶²

So, again, in this research, as an endeavour towards a philosophy of governance of civil society organizations, the emphasis lies on conceptual theory building, in an explorative way, looking at practices and how certain dominant ideas and concepts function in that practice. Genuinely, I propose to look at the supervisory practice with a different, rather uncommon lens. What brings this lens into sight or lays it bare? And is this meaningful or urgent for practitioners or policy makers? For me, this is not just another

61 See Giddens, *Social Theory and Modern Sociology*, 20–21.

62 Glaser and Strauss, *The Discovery of Grounded Theory*; Strauss and Corbin, *Grounded Theory in Practice*; Baart and Timmermans, ‘Plädoyer Für Eine Empirische Begründete Ethik der Achtsamkeit, Präsenz Und Sorge’, 132.

lens, however. I believe that this lens has been ignored throughout the last decades in considering our civil society organizations and that this ignoring has had its consequences. Therefore, installing this lens is a matter of concern, an urgency.

Part I of this research project is an inquiry into the practice of supervisory boards. It comprises a description of some high-explosive cases of governance issues in Dutch health care in the past decade; a summary of popular management books on governance; a description of common practice of supervisory boards out of my own working experience with supervisory boards; and an interpretive analysis of dialogues with two supervisory boards.⁶³ Especially the interpretive analysis functions as way to give the practice the opportunity and space to ‘talk back’ to my development of a conceptual approach of practical wisdom and should therefore secure the validity of this study in the above-mentioned and below discussed non-representational approach. Hence, Chapter 2 and 3 are not presented as empirical work, but rather as provisional descriptions of the practice of supervisory boards that help to sensitize the issues I want to address. Chapter 4 is presented as empirical research. However, the reflections addressed in the current paragraph also apply to the overall methodological outlook of this thesis. In Part II of this study, I develop a conceptual analysis of what wise supervision is or could be, in the light of the findings in Part I. Importantly, the outcomes of the research, or the propositions made, should not be considered as evidence, but rather as the making of a critical argument, a particular interpretation of what it means to be in a supervisory practice, using ‘sensitizing concepts’ that make it possible to look at the practice from a previously unknown viewpoint, perhaps giving new clues for new ways of working and understanding.⁶⁴ This may look like a circular argument, in that I will probably see what I want to see. To some extent, this circularity cannot be avoided in this approach, and it is therefore important to be in a probing dialogue with practice and theory.

Representational theories of complexity

In organizational theory the ‘accuracy of representation’ is still often seen as the ultimate aim of research and known as the position of realism: “the belief that science is really an attempt to discover truths about the one real world which exists apart from the perceptions of people.”⁶⁵ With describing and explaining phenomena by quantitative or qualitative approaches,

63 The methodology of the interpretive analysis is explained in that particular chapter, Chapter 4.

64 Boeijs, *Analyseren in kwalitatief onderzoek: denken en doen*, 44.

65 Chia, *Organizational Analysis as Deconstructive Practice*, 45.

research aims to get to the 'truth' about organizations.⁶⁶ This realism is often accompanied by positivism (or logical empiricism): the idea that the rules, regularities or principles that lie underneath the empirical reality are more real than the empirical world itself, and that the researcher is a spectator who neutrally observes the object of inquiry.⁶⁷

The same holds true for research in non-profit governance: looking for general and universal principles with respect to boards and their relations and effectiveness. With the use of variance studies, for example, research aims to predict what kind of board characteristics lead to a certain outcome (for example organizational success or corporate social responsibility).⁶⁸ In these variance studies, using cross-sectional research designs in which hypotheses are tested, research looks at the antecedents or consequences of board characteristics and behaviour, or asks them in surveys for opinions about these matters (for example on professionalization, values, diversity, role of the chair, et cetera). Board characteristics may be the relative number of women on board, the specific governance structure (two-tier or unitary) and the size and type of the organization. Antecedents may be risk appetite, urge for innovation or even organizational effectiveness.⁶⁹ Cornforth argues that this has several limitations, such as relative neglect of process studies that try to explain governance structures over longer periods of time. Also, he argues, there has been little attention to board room dynamics, although this attention is increasing. Moreover, he argues that the organizations included in most studies come from a specific field or region, which makes it hard to make generalizations. Although these might indeed be limitations, the challenge Lorino et al propose in their fundamental article on methodologies for organizational research is much more radical.⁷⁰ The limitations are not to be found in a shortage of representation, nor in psychology, but rather in the representational model as such.

The field of health care and its governance structures is often regarded to be complex.⁷¹ Complexity however is a fashionable term, and people are standing in line to call their practice or sector a complex one. Lorino et al argue that many approaches to complexity science in organizational research are based

66 Ibid., 45.

67 Carnap, *An Introduction to the Philosophy of Science*, 3.

68 Cornforth, 'Nonprofit Governance Research', 1118–19; Meyer and Maier, 'Corporate Governance in Non-Profit-Organisationen: Verständnisse und Entwicklungsperspektiven', 12.

69 Ostrower and Stone, 'Governance: Research Trends, Gaps, and Future Prospects'.

70 Lorino, Tricard, and Clot, 'Research Methods for Non-Representational Approaches to Organizational Complexity: The Dialogical Mediated Inquiry'.

71 Cf. Putters, *Besturen met duivelselastiek*; Bennington, 'Review of the Corporate and Healthcare Governance Literature'.

on Herbert Simon's cognitivism.⁷² The starting point is a realist/positivist one: objects and its relations are presumed to exist independent from interpretation or even observations. Representing reality then implies to translate reality into logical rules and laws. These in their turn can be used and utilized in other (supposed) similar situations. Cognition can, following Simon, be defined as the computations of symbolic representations. Representations can reside in the human mind, as well as in texts or computers. All knowledge can in principle be articulated in a logical and explicit way.⁷³ Although human beings are unable to include all relevant knowledge in their processing of it (bounded rationality), the underlying representational scheme remains the same: complexity is an objective state of affairs. Complexity is then defined by Simon as merely a high number of systems elements and connections between elements and a high diversity of interrelation rules. To quote Simon: "Roughly, by a complex system I mean one made up of a large number of parts that have many interactions."⁷⁴ Grasping these interactions into symbolic signs (in the human mind, or in computers), is sufficient to represent the real phenomena in the world. Hence, the formal relationships of the symbolic signs (syntax) *correspond* to reality. The meaning of signs, the relation between the signs and the objects they signify (semantics), as well as its pragmatic use (uses of signs by the interpreters), are considered to be the same as the formal relationships. Therefore, one does not *interpret* complexity, but one *represents* complexity – even if this is a hard or perhaps impossible job, especially for a human mind. If one fails to include all formal relationships, this is not a matter of misinterpretation, but rather merely a failure to include all formal relationships. This leads to the hypothesis that the formal relationships also determine the practical outcomes. This representational outlook has consequences for a methodology.

First of all, the researcher stands outside the system he observes. This split is definitive. He or she rationally processes as much interactions as possible, and with this information he or she can represent the real world with a model that includes as much formal relations as possible. The researcher is unbiased, subjectivity is irrelevant, preconceptions even hindering.

Second, this methodological stance leads to abstraction and decontextualization. With the symbolic signs (formal relations), the most diverse types of systems can be represented. The representational model

72 Simon, *Models of Bounded Rationality*; Simon, 'A Behavioral Model of Rational Choice'; Simon, *Administrative Behavior*.

73 Polanyi, *The Tacit Dimension*. Michael Polanyi argued that there is some knowing that can never be articulated, he called tacit knowing. The point of Simon is famously worked out in detail by Nonaka & Takeuchi, *The Knowledge Creating Company*.

74 Simon, *The Sciences of the Artificial*.

should be independent from contexts. This is the true mark of positivism: in the end the (abstract) symbolic signs or models that represent the system are more fundamental, more real so to speak, than what it tries to model. Complexity is a feature of the world (object) we can rationally describe (subject).

Although this kind of complexity thinking might have helped us to (provisionally) solve big biological or physical questions (such as in medicine or chemistry), the question is how proper this is for social and organizational practices. The abstraction principle might not fulfil its own demand, as Chia argues: “Any inquiry takes place in a specific situation which influences the nature of representations.”⁷⁵ The activity of abstraction itself cannot be performed outside a context. Abstraction is itself also an embedded activity.⁷⁶ Tsoukas and Hatch therefore argue that contexts cannot be escaped.⁷⁷ The activity of representing itself lacks reflection if a representational stance is taken. Picturing the observer as an information processor ignores or masks his or her subjectivity, agendas, concerns, affections, and the political setting within which the abstraction takes place. In this sense, the representational method alienates from lived experience of organizing, indeed of life itself: the radical unpredictable actions of man, the possibility to start something anew, to be creative, but also to be destructive.⁷⁸

Different authors have therefore argued to consider ‘second order complexity’: complexity is not so much an attribute of the world itself, but of our thinking about the world.⁷⁹ Thinking about complexity is then shifted from formal relations of a system, to *our* (and not just *my*) thinking about and within this system. This opens up a different view on complexity, as we now have to deal with different worldviews, convictions, backgrounds and political outlooks. This kind of complexity thinking is not so much about representation but rather about meaning or sensemaking. Simon’s view is, in this perspective, ‘just’ another way of making sense of organizational life with the pretention of being the only sensible or legitimate one. When it comes to meaning however, we face pluralism. This in its turn implies that wherever we speak of complexity, there is also politics and morality in play.

75 Chia, *Organizational Analysis as Deconstructive Practice*, 215.

76 This is one of the major points of Hans-Georg Gadamer and will be discussed in Chapter 11.

77 Tsoukas and Hatch, ‘Complex Thinking, Complex Practice: The Case for a Narrative Approach to Organizational Complexity’.

78 Kunneman, ‘Ethical Complexity’; Arendt, *The Human Condition*; Chia, *Organizational Analysis as Deconstructive Practice*.

79 Cilliers, ‘Difference, Identity and Complexity’; Tsoukas and Hatch, ‘Complex Thinking, Complex Practice: The Case for a Narrative Approach to Organizational Complexity’; Cilliers, ‘Complexity and Postmodernism: Understanding Complex Systems’.

Pluralism is not to be perceived as a problem or obstacle for representation, but rather as the human condition, the very possibility of action.⁸⁰ The researcher is no longer on the side-lines, but his or her background and taste becomes a vital instrument for making sense of that particular practice he or she is investigating. Importantly, this is also true for object of research, the supervisory board. That is where their complexity is about, especially in a board with different people: how to get these senses and interpretations together? Indeed, abstraction in a realist sense is *senseless*, as people only experience meaning in concrete contexts. So, "(...) if complexity is viewed as a characteristic of the interpretive relationship between inquirers and situations, the focus of attention should shift from the complexity of the research object to the complexity of the inquiry process."⁸¹ We need not look at complex systems *as such*, rather, we need theories and methods for the complex *interpretations* of systems. As the representational approach precisely serves to mitigate these interpretations of inquiry processes, my methodological approach will be *non-representational*.

The venues of a non-representational approach

Non-representation does not mean that one cannot make sensible or general statements about organizational practices. The crux is rather the idea that the taste and subjective background of the researcher is made productive, rather than invisible, for the contextualization of organization research. One does not make general statements based on particular observations, rather, the researcher, partly together with practitioners, creates new meanings, practices and concepts. It does not seek after an all-explaining explanatory model that is a *true* copy of reality, rather, it involves revealing which (different) interpretations are possible and *reasonable* in analysing social phenomena. It seeks a modest way of theory building between on the one hand abstract and de-contextualized representations that should just be repeated and copied, and radical singularity and contextual contingency that makes generic sensemaking impossible on the other hand.

In the approach of Lorino et al, an organization is viewed as a permanent process of organizing (following Weick) and as a practice (which will be discussed in the next subparagraph). The idea is that organizing is more than what people actually do; the imagination of the practitioners and researcher play an important role – doings *and* sayings. In this sense it is not a materialist view, but rather a phenomenological-hermeneutic one.⁸²

80 As famously argued by Arendt, *The Human Condition*.

81 Lorino, Tricard, and Clot, 'Research Methods for Non-Representational Approaches to Organizational Complexity: The Dialogical Mediated Inquiry', 773.

82 Following Drabek, *A Phenomenological Account of Practices*.

Mediation by language and the importance of context

In the interpretative analysis in Chapter 4, for example, I am looking for the language and concepts supervisory boards use to make sense of their practice in the light of ambiguity, politics and democratization. I do not, however, follow a structuralist approach to semiotic mediation. In this structuralist approach, concepts are ready-made (signifier/signified) and need no practical context or lived experience to have meaning, but only other signs in a socially established syntactic system.⁸³ This might be true for ordinary signified objects such as chair or fork but is not sufficient when people signify social phenomena. The meaning of a sign does not lie in its syntactic relationship to other signs, but in the social and situated context of its use, and its different dynamic interpretations. This is what Wittgenstein calls 'language games.'⁸⁴ Signs are not univocal, but rather 'in some respect', approximated or associated. The semiotic mediation of signs is therefore not merely dyadic – signifier and signified –, but triadic, it also involves its situated and evolving context and inherent different interpretations.⁸⁵ For example, if in a supervisory board the sign 'organizational culture' is discussed, its meaning cannot be found by only looking at the concept (signifier) and the object (signified); rather one must look at the specific meanings that are attributed in that specific context when the 'organizational culture' is discussed, together with the possible different associations the involved participants in the discussion have with this sign.

This triadic interpretation of signs has the advantage that it can overcome the singular/general or part/whole dichotomy. It refers to concepts that are at the same time perceived to be general and contextual. So, the organizational culture is in some respect related to a general signifier, is associated with it, but not determined by it. This makes it possible that the meaning of a concept is both relatively stable, but still ever evolving in its situated uses. Semiotic mediations can be anything we encounter in practices and can involve (a lot) more than language, discourse or speech. It involves (symbolic) objects, tools, concepts, actions, et cetera. Hence, for example, a specific action is not only interpreted, but the action also mediates the interpretation of different participants: it makes interpretation, and thereby meaning, possible in the first place. In our example, it is not only the case that there might be different interpretations or understandings of the members of the discussion as to what 'a' or 'the' organizational culture is, but it is also a priori the case that this concept makes it possible to speak about and interpret a social phenomenon in the organization in the first place. As the concept also brings all kinds of different (general or contextual) associations, it mediates the

83 Lorino et al.

84 Wittgenstein, *Philosophische Untersuchungen*.

85 This idea is closely related to Derrida's 'theory' of meaning signified as *différance*.

sensemaking. This mediation is therefore also time related. It embodies past situations and projections into the future, what Ricoeur called ‘threefold present’: present, past-in-the-present and future-in-the-present. In our example, the organizational culture as semiotic sign has reference to all three ‘presents’. There is a history of interpretation of the concept on which the practitioners build, both in general and the contextual interpretations of it; the narratives of the specific organizations that are constructed. In discussing it, a transformative moment is installed. Organizational culture is therefore a categorization of a socially evolving phenomenon. As category it stays the same, but as it moves in time, the meaning of the category is also changing. Hence, the assumption is that there is no direct access to reality, nor to a group consciousness or whatever. Rather, meaning is mediated by language and practice in an unfolding relation between the general and the concrete. Just as practical wisdom, indeed.

1.8.2 The promise of practice theories

The aforementioned interwovenness of general and contextual signifiers can also be regarded as the interwovenness of ‘objective’ states of affairs and ‘subjective’ experience. This is when practice theories become interesting: organizational studies that use terms such as practice, praxis, interaction, activity, performativity and performance.⁸⁶ This is all part of a new development in ‘practice’ theories, promising new venues of research, the so-called practice-turn in organizational theory.⁸⁷ The way practice theories look at organizations opens perspectives to do research in and about organizations beyond the representational approach. It needs to be said that these practice theories are not really ‘practical’, in the sense that they can be applied or implemented. Quite the contrary: practice theories contain an important critique to latent positivistic approaches to and in organizations. I will describe a number of ‘turns’ the practice turn suggests. Practice theories are very diverse, and different authors highlight different perspectives on epistemology, ontology and methodology.⁸⁸ The overview I

86 Schatzki, Cetina, and Savigny, *The Practice Turn in Contemporary Theory*; Erden, Schneider, and von Krogh, ‘The Multifaceted Nature of Social Practices: A Review of the Perspectives on Practice-Based Theory Building about Organizations’.

87 Schatzki, ‘The Sites of Organizations’; Schatzki, ‘On Organizations as They Happen’; Turner, ‘The Social Theory of Practices: Tradition, Tacit Knowledge, and Presuppositions’; Gherardi, ‘Practice-Based Theorizing on Learning and Knowing in Organizations’; Corradi, Gherardi, and Verzelloni, ‘Through the Practice Lens: Where Is the Bandwagon of Practice-Based Studies Heading?’; Schmidt, *Soziologie der Praktiken*; Schmidt, *Nie wieder Qualität*.

88 A good overview can be found in Nicolini, *Practice Theory, Work, and Organization an Introduction*. An important strand in practice theories is methodological: it prefers ethnographic approaches to qualitative research. Other approaches also suggest that discourse analysis can be fruitful. I have borrowed from the latter in the

present is quite rudimentary and highlights how I look at organizations and supervisory boards in this study from an epistemological point of view.

This 'practice-turn' calls for and develops examples of organizational research that do not primarily regard the organization as abstraction, but rather as concrete practice, constellated in a specific place, in a specific time, with specific bodies and materials, actors, affections, et cetera. This growing interest reflects a broader attention for material practices in social and human sciences. From the 1970s onward, practice approaches have become increasingly applied in specialized fields such as science, policy making, language, culture, consumption and learning.⁸⁹ Schatzki, an important contributor in the field of practice theories, suggested that practice theories built on the intuition that: "phenomena such as knowledge, meaning, human activity, science, power, language, social institutions and human transformations occur within and are aspects or components of the field of practices."⁹⁰ It is not exaggerated to say that the increase of these practice approaches is a reaction to the primacy of theoretical abstraction and constructs in many social theories, as we find for example in Durkheim and Weber, also in for example institutional theory. Practice approaches 'turn (back)', so to speak, to the place (site) where life is lived and experienced, where mundane activities take place. At least, that is what is pursued. In a sense, it is a form of phenomenological reduction.⁹¹ The fact that every member of the supervisory board has a similar task – means that I cannot transcend this interpretative task. The research method must be congruent with the way practitioners themselves need to make sense of their reality.

The attractiveness of these approaches can be found in "(...) its capacity to describe important features of the world we inhabit as something that is routinely made and re-made in practice using tools, discourse and our bodies".⁹² Reckwitz defines a practice as: "(...) a routinized type of behavior which consists of several distinct but coherent elements, interconnected to one another: forms of bodily activities, forms of mental activities, 'things' and their use, a background knowledge in the form of understanding, know how, states of emotion and motivational knowledge".⁹³ The habituation processes in a practice are not merely individual or site related, but also time related: a practice is perpetuated by history and tradition. This also relates to the

interpretative analysis in Chapter 4, although it must be mentioned that my study is conceptual by nature, and not a thoroughly empirical study.

89 Nicolini, 6–8.

90 Schatzki, 'Practice Mind-ed Orders', 11.

91 Küpers, *Phenomenology of the Embodied Organization*, 94.

92 Nicolini, 2.

93 Reckwitz, 'Toward a Theory of Social Practices: A Development in Culturalist Theorizing', 251.

question of institutions which we will discuss in Chapter 10 and is related to the question of care as political category.

As mentioned, practical wisdom refers to certain concrete practices. For Aristotle this practice had mainly to do with political affairs of the city state (polis). In recent interpretations of practical wisdom, as noted above, it can be used in many different kinds of practices. The relation between practical wisdom and practice theories lies in the fact that practice theories precisely highlight the concreteness of practices, and that it often makes little sense to speak of practices in general. Practical wisdom is not a general wisdom. It is helpful to explicate the ‘turns’ practice theories make. Also, the fact that we speak of a turn, does not logically imply that the aspects that they move away from become irrelevant. It would be more precise to say that the focus is shifting, or that a different lens is used so that we are able to see things that would have otherwise remained unnoticed, rather than having high-minded ontological aspirations (although this might differ from author to author).⁹⁴ Furthermore, the different turns we mention are not independent from each other, rather, they formulate different aspects of the practice turn in general and they therefore overlap.

Turn to the ordinary or everyday situation, away from universal-like concepts

This turn marks the singularity of a specific practice. Universal-like approaches tend to observe certain practices, then constructing concepts or ‘logics’ by which other, or all, related practices can also be explained. This inductive step, from concrete practice to abstract universal concept, practice theorists argue, underestimates the importance of the specific context and constellation of the investigated practices. In fact, it might totally overlook them. The point practice theorists make is that while abstracting from the concrete, the ‘actual’ determinants of the constellation of the practice are lost from sight (swampy lowlands). By postponing induction, practice theories try to very closely look at ordinary practices. In Chapter 8, on Schmidt’s interpretation of quality management (although not a practice-approach), it will be shown how such a radical contextual position leads to a different of theory than traditional quality management.

Turn to entanglement, away from dualisms

Social theory has long held to classic dualisms, such as subject/object, mind/body, ontology/epistemology, nature/culture, ratio/affects and knowing/doing. The problem is not so much the conceptual distinctions, rather, very often one of the two is given more value or is seen as more fundamental. For example: in Descartes, the subject is more fundamental than the object. In

⁹⁴ Cf. Nicolini.

Plato, the mind prevails over the body. In Rousseau, nature is better than culture. In organizational talks, for example, doing is better than knowing, or behaviour is more fundamental than structure. Practice theories try to dissolve such dualisms, sometimes for ontological reasons, such as Schatzki⁹⁵; sometimes for more pragmatic methodological reasons, such as Nicolini⁹⁶ or Schmidt.⁹⁷ We can still distinguish between the two sides of a dualism, that is, a mind does not become a body or vice versa, but it rather argues that the dualisms are false in their split: in everyday practice, two sides of a dualism are *entangled* and can perhaps conceptually, but not practically be unravelled. Precisely this impossibility is then taken as the productive point of practices: a constellation of actors, moving bodies, materials, formal and informal norms, et cetera. In other words, in analysing and understanding a concrete practice, you cannot isolate elements of the practice in a vacuum. Hence, you cannot understand an organization by *merely* or mainly focussing on its structure, its culture, its history, its systems or its people. The practical entanglement, the ‘multi-facetted’ nature of social practices, cannot be reduced, not even for methodological reasons. Due to this entanglement, practices always remain to some extent ontologically underdetermined – and hence *open*.

Turn to routines, away from superstructures

An important feature of practice theories is that they try to understand the world as perpetuated through routinization. Things or ‘superstructures’ such as the economy, democracy or even the family can only be durable and sustainable if the routines that belong to those structures are perpetuated. Routines however tend to alter through time and looking at these ‘structures’ from a practice perspective may therefore lead to new perspectives. Why for example, in voting time, do we think that sharing flyers on the marketplace is a good form of democracy? Why do we vote for people and not for policy? These questions are not suggestive, the point is that democracy as concept is fundamentally open, but that the practice, as perpetuated routine, might be not so easy to change.

Turn to immanent normativity, away from underlying regularities or spirit

For practice theories, normativity, how one ought to act within a practice, what is correct or incorrect, proper or improper, is immanent to that specific practice. Hence, you cannot find normativity (merely) in an overarching spirit, nor in underlying regularities or governing rule.

95 Schatzki, ‘The Site of the Social: A Philosophical Account of the Constitution of Social Life and Change’.

96 Nicolini.

97 Schmidt, *Soziologie der Praktiken*.

The normativity is maintained by “(...) mutual accountability of their constituent performances.”⁹⁸ Hence, what the good thing is to do (what a good performance is) in a concrete practice cannot be decided from outside or above (safe high grounds). This notion of immanent normativity resists moralism, reductionism and oversimplification of concrete practices.

Turn to performativity, away from detachment

Performativity is the concept that any kind of observing of a reality, also always already changes this reality in a specific way. There is no detached, let alone objective, point of view available. This might be true for practices that are considered to be detached, such as management control systems, supervision perhaps, but it also holds for research methodologies and epistemologies.⁹⁹ Following the example of a management control system: it is not (only) interesting to look at the (supposed) representations (figures, numbers) of the management control system; it is interesting to look at how this system shapes, (under)determines and moulds the practice of controlling and organizing (see also Chapter 8).¹⁰⁰

Summing up

Practice theories help to understand the supervisory practice and its embeddedness in other practices such as management or care. Practice theories provide tangibility to the concept of ambiguity and complexity and withstand a representational approach. The ‘turns’ I have proposed here force us to think differently about organizations and research epistemology. Practice theories are, despite the name, not very practical: they do not give guidance for how to act. Rather, practice theories open up a critical perspective to dominant ways in which we understand or have understood organizations. This may also be true for how supervisory boards tend to understand the organizations they oversee. They might prefer universal values over everyday imperfections; they might uphold dualisms that lead to reducing practices to for example ‘quality culture’ or indicators (such as absenteeism). They might overestimate the importance of strategy and vision, neglecting how the organization perpetuates itself. They might have ideals about loving care or heroic management, but they forget to pursue the entrenched morals and traditions within the organization. They might be all too interested in the director as person, his or her motives and potential, and forget the embeddedness of the many interactions that take place

98 Rouse, ‘Social Practices and Normativity’, 48.

99 Rouse, *How Scientific Practices Matter: Reclaiming Philosophical Naturalism*; Butler, ‘Bodies That Matter: On the Discursive Limits of ‘Sex’; Latour, ‘Reassembling the Social an Introduction to Actor-Network-Theory’.

100 Drost et al., ‘Accounting as a Performative Strategic Actor: The Performativity Turn in Accounting Research’.

between different layers in the organization. They might overestimate their own independence, thinking that they judge from the outside – barely influencing what happens in the organization – and forget that it matters what they control or advise, that this penetrates the way the executive board leads the organization. Finally, they might be stuck in causality schemes, overestimating the possibility of attribution to decision, strategy, evaluation and control. Hence, the non-representational approach and the practice approach both highlight how I have looked at this practice as a researcher, but also apply to the very practice itself - which is itself a matter of knowledge. With this, I have tried to establish a congruence between doing research and by the very way I am making sense of this particular practice.

1.9 Societal relevance

In this study, that is both general (wise supervision) and concrete (in Dutch long-term health care as part of civil society), I actively interpret the supervisory practice from the angle of practical wisdom. While this viewpoint itself may not be so explicitly present among practitioners, I believe that the potential of this meaning is inherent to the practice. In doing so, I am suggesting, as a gesture, to attempt to uncover “(...) what has already been experienced and said, what is as yet unarticulated, and what will possibly be expressed as meaning (...).¹⁰¹ As noted before, I do not argue that other conceptualizations of the supervisory practice (such as professionalization or value-orientation) are meaningless or not useful. Rather, I argue that, as the practice has evolved, the particular aspects of ambiguity of everyday practice, the political character of care and democratic decision making have been neglected. This precisely is my concern: has the governance of civil society organizations lost contact with both ordinary practice and society? Uncovering, or unfolding, this perspective opens up an array of interpretations that also returns, and opens up different interpretations, to the established doings and sayings of the supervisory practice. This may also restore the public legitimacy of governance in civil society organizations.

A guiding assumption for the research is that the actual practice of governance by supervisory boards plays an important role in the legitimacy problems that governance in Dutch healthcare is facing. The surface causes or symptoms of these problems are different scandals and incidents. Hence, professionals inside the organization as well as media, politicians and the ‘public opinion’ outside the organization show considerable distrust towards

¹⁰¹ Küpers, *Phenomenology of the Embodied Organization*, 61.

healthcare organizations and their top-level managers.¹⁰² The critique is targeted both at the effectiveness and at the morality of these ‘public leaders’. A popular way to analyse this situation is by using the distinction between ‘systems world’ and ‘lifeworld’.¹⁰³ It seems that, at least in the subjective experience of some sectors of health care professionals and the public, healthcare organizations and their managers have moved out of the morally charged ‘lifeworld’ of their origins to the morally neutral ‘systems world’, having become part of the state or the large-scale market economy (or one of the many possible combinations of either). The introduction of new management techniques (specifically New Public Management) in healthcare organizations seems to confirm this development. The formerly close connection between many healthcare organizations on the one hand and on the other hand the ‘lifeworld’ where (in earlier times often religiously inspired) moral imagination and concrete social action were initiated seems to have been broken.¹⁰⁴ The lack of a moral and political perspective in healthcare governance is said to be the cause of the major legitimacy problem top-level managers in healthcare deal with.¹⁰⁵

By questioning the entrenched practice of governance, and presenting practical wisdom, with its ethical and political implications, as an alternative mode of knowing, governance in long term care organizations might be rethought and revalued. We seek to reconnect governance practice with daily care practice on the one side, and ethically and politically contested dilemmas or perspectives in society on the other. This includes trying to recover the public and democratic legitimacy of supervisory boards.

The level of trust in institutions in the Netherlands is not so bad, compared to some other countries.¹⁰⁶ Still, the public legitimacy of institutions has been eroded because institutions have become so dominant and disconnected from lifeworlds.¹⁰⁷ Due to the emancipation of the individual and secularization in general, authority, predictability and stability – usually connected to institutions – is diminished, especially in the case of civil society organizations, such as health care and education, which seems to be a problem for professionals and citizens. If the institution does not back up nurses and teachers, then how is their work legitimized? If citizens are

102 Commissie Behoorlijk Bestuur, *Een lastig gesprek*.

103 Habermas, *The Theory of Communicative Action. Volume 1: Reason and the Rationalization of Society*. The distinction between lifeworld and system world was taken over by Wouter Hart and Marius Buiting who wrote the aforementioned best-selling management book translated as *Lost in Control*. In health care this book was, or is, very popular and influential.

104 Buijs, ‘Een vertrouwenwekkend vocabulaire voor managers’.

105 Putters, *Besturen met duivelselastiek*.

106 CBS, *Vertrouwen op de kaart*, mei 2018.

107 See for example the analysis of Tjeenk Willink.

addressed as clients, will they not make excessive demands on professionals and organizations?¹⁰⁸ If citizens are made individually responsible for their happiness and unhappiness, success and failure, health and disease, then what responsibility do institutions have? Rethinking institutions in civil society along the lines of ordinary ambiguity, politics and civil democracy may help society to reclaim its entitlement of being a 'civil' society.

1.10 Scientific relevance

Philosophy of governance of civil society organizations

This study aims to fill a gap in the research on the governance of civil society organizations, by connecting political philosophical themes (ambiguity, politics, democracy) to the governance of civil society organizations. This is actually a non-existing discipline, that I want to explore – in all humbleness. Although I have mainly a political philosophical perspective, it touches upon different nearby disciplines such as the philosophy of management and critical management studies, non-profit or civil society management and governance studies, as well as public administration in general.¹⁰⁹ The strength of this thesis lies in this interdisciplinary and eclectic approach. I believe that a philosophical perspective on this matter can surface something that these disciplines cannot do by themselves.

This thesis contributes to different scientific debates. One is the increasing scientific attention, mainly in critical organization studies, to practical wisdom and practice theories in organizational and administration theory, and the extent to which this is relevant. Second is the evolving debate in the ethics of care, and its relation to political and organizational theory. Third is the debate on the applicability of political and democratic theory to organizational theory. The relevance of this thesis can be drawn from both the societal pressure on good governance, as well as from urgent debates that transcend different academic disciplines (philosophy, administration science, organization science, political science and sociology). The outcome of this research provides a deeper understanding of good governance in health care, as well as in other civil society organizations.

¹⁰⁸ Tonkens, *Mondige burgers, getemde professionals*.

¹⁰⁹ For philosophy of management, see the journal *Philosophy of Management*, *Journal of Business Ethics* and the *Business Ethics Quarterly*. For critical organization studies, see for example the journals *Organization* and *Organization Studies*. For non-profit governance and management literature see for example the journals *Voluntas*, *Nonprofit and Voluntary Sector Quarterly*. For Public Administration see for example the *Public Administration Review* and *Public Administration* (amongst many others).

Political philosophy

The political philosophical perspective has different dimensions. It combines insights from the ethics of care, post-fundamental political philosophy and contemporary interpretations of practical wisdom in the hermeneutic-phenomenological tradition. Practical wisdom is a term that is used in both a general political sense, as well as applied for concrete (professional) practices, such as doctoring or nursing.¹¹⁰ Also the ethics of care has both a general political agenda, as well as applications in concrete (caring) practices (in a sense, the combination of these marks their specific discipline).¹¹¹ To apply the perspective of post-fundamental philosophy to a non-state situation may appear to be odd, but both the ethics of care and the concept of practical wisdom will provide us the legitimacy to do so: the politics of the ordinary.¹¹² Hence, the scientific added value also lies in the extension of the political question to civil society organizations.

For the ethics of care, it is useful to relate it to post-fundamental political philosophy on the one hand, and to management questions on the other. Ethics of care, some examples aside, has been struggling to relate to these disciplines.¹¹³ To the field of study that deals with practical wisdom this study relates this concept to the distinction of politics and ‘the political’, something that has not yet been done extensively.

Civil society governance studies

Although there has been quite some research in the governance of civil society organizations in the Netherlands and worldwide, a political philosophical approach is yet to be found while the themes of political philosophy appear to be relevant for the subject of governance of civil society organizations.¹¹⁴ Most studies in non-profit governance address the question of governance from the perspective of either business administration: how to be maximally effective – or from the perspective of public values or societal relevance: how to create or sustain public values from the governance

110 Cf. Bontemps-Hommen, Baart, and Vosman, ‘Practical Wisdom in Complex Medical Practices: A Critical Proposal’; Bontemps-Hommen, Vosman, and Baart, ‘The Multiple Faces of Practical Wisdom in Complex Clinical Practices: An Empirical Exploration’.

111 Tronto, *Moral Boundaries*; Tronto, *Caring Democracy*; Klaver and Baart, ‘Attentiveness in Care: Towards a Theoretical Framework’; Baart, *De ontdekking van kwaliteit*.

112 Laugier, ‘The Ethics of Care as a Politics of the Ordinary’; Courpasson, ‘The Politics of Everyday’; Marchart, ‘Democracy and Minimal Politics: The Political Difference and Its Consequences’.

113 Bourgault and Robinson, ‘Care Ethics Thinks the Political’; Baart, *De ontdekking van kwaliteit*.

114 Although some believe that politics can only be about the State (who defines what it is, what it is able or should be able to do), I will show in Chapter 10 why the term politics is very useful in understanding civil society organizations.

perspective. Parallel to research in civil society governance there is a huge amount of research into corporate governance, and as we will see in Chapter 6, these fields of studies are closely related. Performing a political philosophical study in this field provides a more fundamental (and is therefore also less instrumental, less 'applicable' if you like) critique and perspective on the way governance functions.

Philosophy of management

There has also been some tradition in the intersection of business study and philosophy. Of course, this deals with questions regarding ethics and 'social corporate responsibility', including for example issues on the environment or exploitation. It also addresses ontological questions about organizations; critically examines dominant concepts such as efficiency, outcome and growth; and studies what it means to be human (or non-human) in organizations.¹¹⁵ Management questions are slightly different from governance questions, especially from a political point of view. I take a similar critical stance towards the practice of civil society governance, as well as to the daily management practices in health care. Within the field of philosophy of management, however, not many political perspectives have been proposed – and that is what I aim to do.

Public administration

Public administration is a rather vast discipline. It mainly deals with questions of how to develop and implement policy by civil servants in national and local governmental institutions. In this sense, public administration is always the aftermath of political decision making. Public administration, however, also has perspectives on the relation between society and administration, as well as on the role of professionals in policy.¹¹⁶ Moreover, policy terrains of government are also about health care, education or public housing – sectors that belong to civil society in the Netherlands. Sometimes these sectors are called 'semi-public', referring to the fact that government has something to with it – if it only were in providing these organizations with public financial means and holding them accountable for how they spend this money.¹¹⁷ With legislation and policy, government can perpetuate or change perspectives on the governance of civil society organizations.¹¹⁸

115 Cf. Diest and Dankbaar, 'Managing Freely Acting People: Hannah Arendt's Theory of Action and Modern Management and Organisation Theory'; Schipper, 'Rethinking Efficiency'; Moore and Beadle, 'In Search of Organizational Virtue in Business: Agents, Goods, Practices, Institutions and Environments'.

116 Noordegraaf and Abma, 'Management by Measurement? Public Management Practices amidst Ambiguity'; Noordegraaf and Van Der Meulen, 'Professional Power Play: Organizing Management in Health Care'.

117 Goodijk, *Falend toezicht in semipublieke organisaties?*

118 The most exemplar case is the law on standardization of top incomes, in which

Method

Most philosophical theses, especially in the continental tradition, are theoretical by nature. Of course, there is active reflection on burning issues in politics and society, but empirical research is often lacking.¹¹⁹ In this thesis I combine a small qualitative and theoretical approach. The qualitative approach is explorative. In the previous paragraph, I have extensively reflected on the nature of this study. The added value lies in the non-representational approach, an approach that is not used very often in governance studies. The combination of philosophy and this non-representational approach adds to philosophy the possibility of practitioners to answer back. With this, the scientific relevance for practice may be stronger.

1.11 Outline of chapters

The dissertation has two parts. In Part I of this dissertation I explore how supervisory boards tend to ground their practice in professionalization (expert-role), quality management and value-talk. It sketches the context of the supervisory practice. Part II involves the conceptual development of wise supervision.

Part I starts with **Chapter 2**. In this chapter I describe a number of (anonymized) cases in which the supervisory board came in line of fire or was under critique either by the organization or by the media. The stories serve as exemplars to sensitize the difficulty of the supervisory task, and that questions of ambiguity, politics and democracy may suddenly pop up with all their consequences.

In **Chapter 3** I do not focus on extreme cases, but rather on ordinary supervisory practice, providing a context for my thesis. I describe how the practice is perceived in Dutch scientific and popular literature. After that, I describe the commonly accepted four roles of the supervisory board: supervision, advisory, employer and networking and introduce a more comprehensive account of the roles of the supervisory board. Finally, I give a detailed description about the actual practice of a supervisory board, based on my own working experience with supervisory boards. I reflect on the remarkable absence of the themes of ambiguity, politics and questions of civil democracy in common discourses in Dutch health care and civil society governance.

In **Chapter 4** I zoom-in to two supervisory practices in Dutch mentally

government sets a limit on what public officials – also executive directors in civil society organizations – may earn. Beforehand, this was a responsibility of the supervisory board.

¹¹⁹ For a good example of combining philosophy and empirics: van Baardewijk, *The Moral Formation of Business Students*.

disabled care. By means of an interpretative analysis, I describe how the supervisory boards speak about their job in relation to questions of ambiguity, politics and democracy. I have performed extensive dialogues with these boards, also in combination with other organizational members. I describe three ways by which these two supervisory boards 'figure their world': it is a matter of knowing what goes on in the organization; their practice is soaked with ideas on values and trust – but they refute any involvement in politics; they dwell in metaphors to figure their world. In the reflections at the end of the chapter, I highlight how in concrete supervisory practices there is already awareness about the matters I introduce, but that on closer inspection – there is still a world to win.

Chapter 5 collects and summarizes the insights from Part I and asks a bundle of questions that serve as a guide to Part II, the conceptual and theoretical exploration.

In **Chapter 6** I zoom-out from concrete supervisory practice and describe a genealogy of the governance practice in Dutch civil society, and health care in particular. I combine historical elements with a history of ideas (especially ideas on corporate governance and New Public Management). The aim of the chapter is to show how, on different planes, civil society is and has become an ambiguous sector: it consists of different and sometimes opposing elements at the same time. I do so by using four analytical perspectives, on different levels. I discuss governance theories on a macro-level (relation between state, market and civil society). On a meso level, I discuss institutional theory – that will also help to get a proper understanding of what institutions are. On this level, I also discuss practice theories, and will argue that all perspectives can be taken into account within the practice approach. Finally, I discuss the development of identities on a micro level of supervisory boards to understand ambiguity. With these analyses, I want to show how the use of management instruments (from the private sector), relative remoteness of supervisory boards as well as a focus on professional and expert knowledge became prominent in governance practices in civil society.

Thereafter, in **Chapter 7** I will describe 'the swampy lowlands' or ordinary caring practices by means of some critical insights from the ethics of care. The ethics of care, although a dispersed research program, provides an excellent, and to my knowledge the only serious critical, attempt in understanding concrete care relation and the embeddedness of caring practices in wider organizational and political contexts. I describe the ambiguity of care by means of four critical insights from care ethics: relationality, responsibility, contextuality and politics. After these insights, I link the care ethical question to the organizational question of *quality*. I describe the Care-Ethical Model of Quality Enquiry, developed within care ethics and the theory of presence (Baart and others) and I will find here a

provisional formulation of the institutional care of the supervisory board. In **Chapter 8** I will dig into the ambiguity of organizational practices (rather than mere caring practices), such as management and control. From the perspective of Schön, management is typically at the 'safe high ground'. I describe Schön's distinction between the swampy lowland (the reflective practitioner) and the safe high grounds (of instrumental rationality). I then introduce the work of Thomas Schmidt, a German theologian and organizational scientist, to look more thoroughly at what it means to speak about 'swampy lowlands' and how management so often does not take this into account (from the safe high grounds). With Schmidt, I discuss a number of paradoxes present in organizations and management practices and argue that management must relate to *contingency* and *conflict*. I argue that the supervisory task aims at considering three organizational qualities: the quality of decision, the quality of reform and the quality of conflict. As Schmidt's focus is primarily on management practices, we need to give more conceptual richness to the idea of politics, institutionality and democracy. Therefore, in **Chapter 9**, I describe how institutions and institutional life and forces have changed. Traditional institutions (church, family, social organizations) that were closely related to participation of citizens have declined whereas bureaucratic institutions have grown. The question is how to revive institutions in such a way that they are again closer to the everyday lives of citizens. To describe the decline, I use different philosophers and sociologists. My guide, however, is Charles Taylor's early work: *Sources of the Self*. The institutional decline is described by the ambivalent developments of individualism, instrumental rationality and a loss of political freedom. The revival of an institutional program is substantiated with a specific essay from Paul Ricoeur on one of Jesus' parables: The Good Samaritan. I argue how an institutional care does not differ from concrete care in terms of *charitas* or compassion, but that institutions do have certain risks. Institutional care becomes how institutions serve ordinary practices, and whether we can *justify*, need to *amend* or *criticize* institutions. I relate this perspective with the Dutch civil society and the need for a revival of civil democracy – also, or precisely, in the public services, such as health care or education.

As argued in ethics of care, an institutional perspective also brings about a political perspective. In **Chapter 10** I want to formulate the central tension through which the supervisory board needs to navigate by means of the political difference between *the political* and *politics* – a common distinction in political theory and philosophy. I discuss four political thinkers how have used this distinction, albeit in different fashions. I highlight the political nature of institutions as argued by Castoriadis, the 'realistic idealism' of Ricoeur, the 'empty seat of power' of Lefort and finally Marchart's permanent potentiality of conflict. Although all four shed an important light on the

matter of the political difference, I primarily follow Marchart's distinction to formulate the political difference as tension for supervisory boards. From the political difference, I describe two other tensions: *stable fragility* and *democratic deficit*.

In **Chapter 11** (before the conclusion and discussion), I can finally discuss the concept of *practical wisdom* itself, referred to as *practically wise supervision*. The chapter begins with the traditional formulation of practical wisdom by Aristotle. After that, a number of concepts are introduced that are related to the concept of practical wisdom. I 'borrow' these concepts from four philosophers in the hermeneutic-phenomenological tradition: Hannah Arendt, Hans-Georg Gadamer, Paul Ricoeur and Maurice Merleau-Ponty. These concepts are to some extent also already used in management and supervisory practices – although I will use them slightly differently. These concepts are supposed to help to illuminate the navigating of the political difference. The concepts discussed are judgment, interpretation, moral knowledge, trust, lived experience, common sense, action in concert, dialogue, play, aims and norms, ambiguity, inter-practice, association, participation, traditions, just institutions, discussion and responsiveness. In the final paragraph I will argue, based on these reflections, that practically wise supervision cannot be reduced to either individual, practice or institutional perspectives. I finally show how the three tensions described in Chapter 10 relate to the concept of practical wisdom.

In the **conclusions and discussion**, a thread through the chapters is described, a kind of summary, ending with integrating the theoretical perspectives of Chapter 7-11. I will illustrate the central argument and theme of this thesis. In order to get closer to ordinary practice, I then describe a number of statements and recommendations to governance practice based on my reflections. Finally, I will discuss some possible objections to my thesis.

Part I

Sensitizing the practice of supervisory boards

2. Stories: when the chips are down

The attention of the media and government on the governance of third sector organizations in the Netherlands, such as health care, education, culture and public housing is, allegedly, mainly due to governance crises. Although one might argue that compared to the size of these sectors the amount of peril is not so large, it is generally considered that these disasters or the dangers they represent are just a surface appearance of more fundamental problems of governance.¹²⁰ Indeed, if one takes up a random book on third sector related governance in the Netherlands, it most probably starts with some summation of organizations that have derailed. I also follow that path, although it is not my intention to complacently throw mud nor to bring up the past. From a handful of scandals to a whole sector is quite a leap of induction. Not discussing them, however, would be ignoring the fact that the public, as well as the internal debate on governance is widely driven by these happenings: in a performative way these crises have become part and parcel of our thinking and talking about governance of civil society organizations (and I therefore also perpetuate this performative mechanism).¹²¹ Furthermore, it might indeed be the case that these crises function as a clue to more fundamental issues that also reside in boards that appear to work just fine.

I present these cases as short stories. It are not case-studies in a methodological sense, but rather compelling stories that help to sensitize the problems and questions I want to address. The cases have been anonymized for ethical reasons, as it is not my intention to, perhaps indirectly, (further or again) damage people or organizations. Therefore also, the sources remain hidden. Some cases may be traceable due to their peculiar story and happenings, but the media publications do not always show the different layers and complexities of the cases. With these stories I am looking for mechanisms that highlight the three central concepts of this study: 1) the ambiguity of ordinary practice; the inherent difficulties in grasping the practice from the perspective of the supervisory board. In other words: how supervisory boards deal(t) with things they do or did not know. 2) These stories may tell us something about the political nature of care: how they make sense of what 'quality' is, and how making decisions structures the life

¹²⁰ Van Ruimschotel, 'Wroeten in het duister, groeien naar het licht. Incidenten, fouten en falen in de semipublieke sector'.

¹²¹ Austin, *How to Do Things with Words*. Austin coined the term 'performativity' in relation to language. Practice theories have taken up this concept to understand not only language (sayings), but also doings.

of people – those who care and those who are cared-for. 3) These stories tell us something about the democratic structures that are either present or absent before or in the middle of the crisis and what importance is granted to democratic structures (such as codetermination, professional autonomy or the co-opting of supervisory board members). With these concepts in mind, I will reflect upon the cases in the final paragraph of this chapter. As a result of this approach, a limitation is that there may be contextual factors that are not included in these descriptions. Another obvious limitation is that they cannot be falsified as they are made anonymous. The point is however, and therefore, not in representation, but in the possibility of these happenings in the light of the purpose of this study.

Not every story is the same. I am especially interested in stories in which there is a close relation to issues of quality or safety of care or in which the supervisory board is blamed for alienation from the organization. The stories are based upon articles from national and local newspapers, public reports as well as from professional news websites. For all stories, I have also shown my description to insiders, and gave them the opportunity to tell their side of the story to secure a fair hearing.

‘A deadly incident’

A respected organization for mentally disabled care operates in around 80 locations taking care of around 2200 clients. The executive board director, who was appointed 5 years ago, was renewing the organization, preparing for the future, and searching for a partner in anticipation of upcoming laws. Four years ago, the reorganization was finished: the organization has a ‘human measure’, as they describe it. From then on, the focus was on innovation.

One care location of the organization used a seemingly successful method of treatment called ‘regiemethode’ (translated best as: self-determination method) for youngsters with mild intellectual disability but severe psychiatric or behavioural disorders. A group that often falls between two stools. The method, specially developed for youngsters, consists of a pedagogical approach in which the extent to which the institution takes control is based upon a reward and punishment system. Bits of freedom, so to speak, can be re-earned by patients if they show good behaviour. The supervisory board has visited this location and was very enthusiastic about the employees and the (new) location.

A little later, the supervisory board discusses a plan of the executive board to start a new location to treat adults with the same type of problems as the youngsters above. Questions are asked about the expertise of the personnel and the guarantees that should be in place to treat this very special and complex group of patients. The executive board, together with someone from the management team, however, convinces the supervisory board. The location starts up, and everything seems to go rather well.

A year later, the executive director calls the chair of the supervisory board with the announcement that a calamity has occurred over there: a patient died. The woman was mentally disabled and had other health problems as well. She passed away while being 'held captive' and pushed to the ground by four employees in a so-called 'time-out room'. Immediately an external and independent investigation is started, initiated by the organization. Since the death has occurred in 'special circumstances', a criminal investigation by the Police is also initiated. There is video footage available of the incident, and this was confiscated by the Public Prosecutor's Office. The director informs the organization, contacts the family of the deceased woman, but chooses to inform the family council at a later time.¹²² The director states to all organizational members that the involved professionals acted professionally, and so he is covering for them. The external investigation shows some problems in the chain of care (another mental care organization, general practitioner, pharmacy) as well as a lack of availability of properly educated personnel (behaviourists, psychiatrists). The points of improvement were being discussed in the quality committee of the supervisory board, and an action plan was being implemented and controlled by this committee every two months.

In the meantime, the organization had started a partnership with a similar organization nearby. The intention was to create a holding company with two operating companies. The situation of the deadly incident was mentioned in this process of partnering, but since an improvement plan had been implemented, no further attention was deemed necessary by the partners.

The Public Prosecutor's Office dismissed the case since there was no evidence of death by culpable behaviour. Rather, they judged it as self-defence. The family of the deceased woman didn't agree and

¹²² A family council is a codetermination council in organizations for mentally disabled care in which families and/or relatives of patients are represented.

appealed to a higher court, but the same judgment was made. Still, the family would not accept this.

The National Health Care Inspectorate was also duly informed about the incident, and they awaited the internal investigations of the organization – as they always do. The inspectorate was not satisfied; and demanded an external review as well. This was also executed, but still the inspectorate was not happy. They decided to perform an investigation themselves. An improvement plan was implemented in the location.

Later that year, the Inspectorate published a devastating report. The location where it happened scores ‘insufficient’ on all criteria. The director sees no other option than to close down the location and decides to move the patients elsewhere. The report came as a bolt from the blue for both the supervisory and executive board, even though the inspectorate was critical in an earlier stage about the improvements – it was thought that the implemented improvements were sufficient. Both boards visited the inspectorate together to talk about the report. In advance, the supervisory board also visited the location – even though it was about to close down.

A little later, the supervisory board chose to start an external investigation under its own auspices. A research institute was hired to find out how it came that the improvement plan implemented earlier did not worked out as hoped.

Already then, the chips are down. A journalistic investigative radio program reported on the incident (one year ago by then). They appeared to have both the video footage of the incident as well as the inspectorate’s report at their disposal. The director, who has never seen the footage, was being asked to comment. A medical examiner was also asked to comment on the footage, and he publicly questioned whether the employees indeed acted merely out of self-defence. The director does not want to give any comments because of privacy reasons – he is advised by a communication consultant. It becomes even worse when a TV news-show shows the video footage of the tragic death of the woman on national television. Comments are given by a member of Parliament, a former inspector of the inspectorate. The director does not show up, for the same reasons he did not answer the questions asked by the radio reporter. After the broadcast, all media report on the case. In the light of accountability, the director chose to give an interview to a respected newspaper. This

interview was taken badly by the family council, the client council as well as the personnel. He had stated, this time publicly, that the involved employees acted professionally. He admitted in the interview that the woman would have been better off in a locked ward rather than in the concerned location, and that this was known: the woman was under intensive care by another organization, but the national central indication body had decided that she didn't need such intensive treatment – although that organization had thought she would. This is why she came to this organization in the first place.

On the morning after the commotion of the broadcast, the central family council withdrew confidence in the executive board by a public letter. The loss of confidence was based upon the report of the inspectorate; the protection the board granted to the involved employees; and also, because they felt that the board was not transparent enough (it finally took half a year to provide information about the incident to the council). The council questioned the attitude of the executive board director towards the press, to employees and to relatives, by giving contradictory or no information. Also, they argued, the board tended to make the incident seem smaller by (under)stating in a letter that: "In this case we regretfully have to declare that our norms for care are not fully met." The chair of the family council had contacted the TV-news show, the National Inspectorate as well as the Commissioner's office. The same day, conversations were held by the supervisory board with the different co-determination councils. It appears that not everybody was on the same side regarding the withdrawal of confidence. Also, there was a difference of opinion between the two operating companies as the partner was not amused. The supervisory board however did not want to rush things and awaited the report by the research institute. However, after another item on television that day, the director had lost the support of the management team of the partner organization. Together with the withdrawal of confidence by the family council, it was decided by the chair and vice chair of the supervisory board, together with the executive director, that he lacked support for continuing – and he quit. The supervisory board pushed the research institute to come up with results, looked for an interim manager and tried to restore their relationship with the family council. The research institute finally concludes interestingly that there appeared to be a difference between progress of improvement on paper and the practice of implemented changes at the specific location. The focus was on quickly implementing the improvements, while it would have better if the focus was on control, adjustment

and involvement of employees and family or relatives, and other stakeholders, such as the national inspectorate. Moreover, a reflection on the fundamental causes of the incident was missing. The report was discussed with the different councils. The supervisory board had also evaluated its own function in relation to this event but concluded that they had not neglected their task.

Different improvements were made, and more attention to questions of quality and safety (also for personnel) was given. The method of treatment used was abandoned. The National Health Care Inspectorate had advised that the organization was back on track.

‘Sometimes the urine runs down her ankles’

In a national newspaper an interview was published with two elder men, in which they complained about the quality of care in the nursing home where their wives resided: a regional nursery care organization. One of the husbands happens to be the father of the Secretary of State for the Ministry of Public Health, Wellbeing and Sports, who was responsible for the portfolio of long-term care. The article was headed (translated): “Sometimes the urine runs down her ankles”. The same evening, the Secretary of State has a discussion with the other elder man on the matter in a popular evening talk show. It was a rather confronting episode as the Secretary of State needed to discuss what happened to his mother. The main point of critique was the shortage of nurses and caretakers in the residence.

The next day, the chair of the supervisory board of the care institution in question joined the same talk show. She happened to be an emeritus professor in medical ethics, and she was an honoured and experienced board member in different places. In the talk show she tried to make a point that whenever and wherever there is care for people with dementia, such scenes as peeing in the pants is inevitable. It is a matter of accepting frailty and decline. She argued that the frame and image that had been created of the residence was incorrect, and that the perception was fraught. Interestingly, she said that she didn’t want a debate at the table, “because then it will become a yes-and-no game.” Moreover, she didn’t “want to make it political”, she “just wanted to talk about the content.” She tried to be compassionate towards the two older men by saying that it was understandable that they were angry and sad, because their wives resided in a nursing home, “horrible things happen there.” She had

a parent living in a care home herself, she states with some feeling for pathos. She noted that you cannot resolve the bare fact of life that people are fragile.

Then the core of her argument came up: it could not be the case that it was totally wrong in this care home, as it “has two golden quality marks”. She refused to admit that there was a fundamental occupancy problem. She said: “I am very happy to be the chair of this supervisory board of this organization, as they work so hard.” The other guests at the table, who stayed calm in the beginning, become irritated: “why don’t you just meet this man? Why do you do act like it’s all roses?” Another guest wondered: “why does this health care organization has a supervisory board in the first place?” Sarcastically and rhetorically the questioner added: “To watch the money, or to look over humane, good and proper care?”

She, the chair of supervisory board, replied that is why she: “visits locations, talks with team leaders and location managers.” On which she was answered: “But then how come you do not know about the bad things happening there?” A Kafkian debate on facts and perception followed. Finally, a new player entered the discussion with the devastating question: “Might it be that things got so bad due to the quality of your supervision?” Things heated up, became very political, and whatever she came there for, it hadn’t worked out. She wanted to bring in nuance, perhaps knowing more about the situation than can be told on television (due to privacy considerations). Not everything is ever as it seems, but it is important to understand how dominant appearances can be.

A week later the National Health Care Inspectorate (IGZ) did unannounced visitations at the homes in question. Another week later, questions were asked in Parliament due to the media attention for the case. A parliament member from the Christian Democrat Party notes:

Alright: management and supervision then. I was increasingly astonished by the interview of the supervisory board member of [organization X] on television. Golden marks were given, and for the rest it is not too bad. It really made me nuts! Do the managers and supervisors perceive the signals of personnel as critique or as free advice? Do they really take client councils seriously? Do they involve them with difficult policy questions, such as upcoming changes and relocations? Is the striving for quality and the

deployment of personnel high on the agenda? Do they visit the work floor enough to experience what is needed? Is whether people are as happy as possible being monitored? Or do they only monitor check lists and the correctness of files?

The Secretary of State promised to improve the quality of care in nursing homes and asks (next to other interventions) the branch organizations of directors and supervisory board members to start accreditation programs for their members. The report of the inspectorate follows early next year. For what it's worth, they had noticed shortcomings in the areas of medication safety, occupancy problems and safe living environment.

'A shredded organization'

A care institution for children, youngsters, adults and elderly with intellectual disabilities provides care for up to 700 people in about 100 locations with complex problems in living, working, learning and spare time is our next case study.

The director of the institution is retiring. He worked there for 14 years, and the organization has done quite well under his charge. Especially, the involvement and integration of family, employees and organization is said to be remarkable. The director wanted one of his managers to succeed him. She is already in the management team as a regional manager and had been working there for 11 years. The supervisory board however decided differently: they started a recruitment procedure together with a substantial delegation of the council of relatives and workers council. As the result of this procedure, a new director, from outside, was appointed as successor. The new director and the intended crown successor (the regional manager) did not get along very well. The new director wanted to fire her with the charge that she sets up employees against him, and they went to court. Employees are furious and show up en masse at court to support the manager. The conflict was brewing for more than a year. The supervisory board totally supported the director. A week later, the judge has decided that the manager could stay. The director and the manager promise the personnel together that they will try to restore trust for each other.

The next month, a couple of team leaders speak out over their worries about the path the director was following. They wanted to

get an order for an investigation, and the supervisory board decided that an independent advisor ought to be hired to study what was going on in the organization. A commission consisting of a delegation of the council of relatives, the workers council and the supervisory board formulated the assignment for this investigation, chose the researcher and supervised the fulfilment of the assignment. As a result of the outcome of the investigation the director quit. This decision was made together with the supervisory board, as the director experienced too little connection with the organization. The independent advisor reported that the director could not be in control any longer, as he was totally isolated within the organization. In a hurry, an interim manager was appointed (a decision that was regretted in hindsight). Another month later, the new interim director wanted to fire two regional managers: the one already mentioned and also her colleague. The firing of the two women would result in a decimation of the management team. The interim director declared that there was no foundation for a fruitful cooperation with the management team members. Again, they went to trial, this time on the initiative of the director. A third member of the management team voluntarily quit. The interim manager needed a firm judgment from the Court in order to legitimize his reorganization plans. The workers council supports his plans on a headline basis, but the supervisory board did not.

According to the workers council, the supervisory board wanted to settle in court, because the board feared negative publicity, also in relation to the independent report of the advisor that was hired. It was said that the supervisory board did not make a good impression on the advisor.

The supervisory board wanted no far-reaching reorganization measures to be taken by an interim manager but wanted to make haste with the appointment of a lasting successor of the previous director.

A while later, a procedure which must result in the appointment of a director of the executive board was launched. In this procedure again a delegation of the supervisory board, the workers council and the council of relatives participated. This resulted in the unanimous decision to appoint a new director, again an outsider, as director of the executive board who would start some months later.

Two weeks after the appointment, the interim manager resigned because of a non-bridgeable difference of opinion about the course of the organization with the supervisory board. It was said that the

interim manager attempted to pressure the supervisory board, but that the latter did not yield. A member of supervisory board would, controversially, temporarily lead the organization, thereby ending his position at the supervisory board. It happens to be the day of trial against one of the managers. The supervisory board member who is now the interim director manages to settle, something the previous interim manager did not want (can the reader still follow what is going on?). The trial against the other manager continued the next day. During the trial, the former chair of the supervisory board argued that in order to restore a safe climate at the organization, where people are not anymore occupied with the organization but with care, it was necessary to renew the top of the organization. Nothing could appear more certain. Two camps were formed among the employees. The workers council turned against the supervisory board, among other things because of the resignation of the interim manager. Also, they didn't agree with appointing the supervisory board member as interim director. The settlement with the manager was another stumbling block. The council of relatives told a newspaper that the report of the advisor was being kept secret, since so many parties showed up negatively in it, especially the supervisory board. The supervisory board stated in contrast that the people who had participated in the research had been promised privacy and confidentiality. The council however also noted that it appeared that the quality of care was not affected by the governance crisis. A couple of weeks later, the Union also joined the discussion. The organization lost the trial against the manager. The judge argued that if there was a disturbed relationship, this was due to the organization, not to the manager. The supervisory board had therefore failed, in the judge's opinion. The organization appealed to a higher court; it was rumoured. The national inspectorate was also alerted and the same day almost the entire supervisory board resigned.

A new supervisory board member, who was only appointed together with the new director stayed. She and two new supervisory board members form the new supervisory board, who had been recruited half a year earlier by a committee composed of workers, parents and board members. They would start their work two months before the new director would start. But the workers council now also demanded that this new supervisory board member should leave. They argued that she had deliberately suppressed the workers council and did not took them seriously. They gave her an ultimatum for resignation. She decided to stay. The council of relatives joined

her cause, as they also had agreed with the interim appointment of the supervisory board member earlier, thereby turning against the workers council.

The workers council also demanded an investigation into the recruitment procedure, in which they took part themselves, of the two new supervisory board members. As a result of this claim the two new board members resigned, fearing damage to their reputation. Because of the requirements of the statutes which stated that the board must have at least three members to take legally valid decisions, the (old) members of the board decided to stay until the workers council and the council of relatives each had found someone who they trusted and who could be nominated as new members of the supervisory board.

The next week the (temporary) managers, previously appointed by the first interim manager, threatened to resign, arguing that they could not work like this – but stayed in the end. This caused turbulence throughout the organization, and different meetups and protests were organized among employees to discuss the matter. Finally, the staff said that they wanted and demanded a clean sheet. Almost two third of the staff signed a petition that asked the (new) chair of the supervisory board to leave. 60 employees handed over the petition to her. They demanded the resignation of both the executive and supervisory board. The chair refused to leave with an argument for administrative continuity, but a little later, she finally gave up, the day the inspectorate published its report. She would leave as soon as a new supervisory board was installed. In the meanwhile, an exit package was negotiated with the manager. A new supervisory board was installed, a new executive board was up and running, and it appeared that, at least for the time being, the clean sheet was working. A convoluted story.

‘A cornered supervisory board’

“We have the idea that the supervisory board is closing itself up from the organization, and acts disjointedly”, said a spokesman for the workers and client councils. “The leadership style of the chair is the main source of problems that have arisen, we think.” The supervisory board had announced that in the procedure of finding a new director for the executive board they would do a ‘reorientation on the future’. The organization described in this case is a relatively small centre and residency for elderly people. To the councils, it remains unclear what is meant by this reorientation – hence, a source of agitation for

the staff. An action committee of employees welcomed the supervisory board with slogans, protest songs and billboards. They had lost all their faith in this board, especially in the chair – a faith which was already renounced a year ago by the client council and workers council, the management team and the staff. The employees think that, besides lacking communication, the supervisory board had lost sight of the mission, vision and culture of the institution in searching and recruiting a new executive board. Workers feared that both the procedure and content of the search would undermine the cultural mission of the residency.

But there is more here than meets the eye. The present director has been the director for 28 years at that time. He was like a father for both the residents and the employees, a culture bearer and figurehead. Apparently, the director – who was about to leave the organization – had made plans for renewing real estate but according to the supervisory board this would be a deathblow for the organization: it was too ambitious, too expensive. Rumours were that the executive director had secretly stirred up the workers council to protest against the supervisory board.

Afraid that the organization would be in serious trouble if the real estate plans were pushed through, the supervisory board chose to stay. Some attempts were made by the supervisory board to restore trust at the internal councils who were allied to, perhaps even in the pocket, of the executive board. From informal meetings between members of client council and workers council with some members of the supervisory board, nothing emerged. In an open letter to the organization the supervisory board tried to rescue what remained to be rescued, pointing at the unrealistic real estate plans and the threats to continuity. It appeared however that this issue was merely a surface appearance; the distrust towards the supervisory board throughout the entire organization seemed to be irreversible. The director, who is in the heart of this conflict, contacted and alarmed the national inspectorate, and they put the organization under stricter supervision.

The supervisory board was cornered, had been metaphorically beaten up in public but remained at its post, and refused to give in to both the organizational and external pressure. They felt that they would betray their social responsibility if they would quit. The supervisory board went to court. The court decided to suspend the chairs of the supervisory and the director and judged that an

investigation needed to take place. The court appointed, based on 'disturbed relationships' (rather than agreeing with one particular party), an interim-chair of the supervisory board and an extra interim-executive board member. These two interim managers had a deciding voice. They decided that the entire supervisory board needed to be renewed. Another crisis defused – for the time being.

'Piling up the problems'

A terrible year for a regional and urban merger organization, that ran around 30 nursery homes, for long term care and short term (revalidation) care and had a big home care branch. These three rather different branches of care were all the subject of fundamental changes in the law, the so-called decentralization operation (from national government to municipalities) of elderly and home care.

At the outset, there were different operational, but in themselves (as was thought) marginal, problems: high absenteeism (up to 13%, and allegedly even higher); many vacancies; a reorganization to a new ICT-system that didn't work very well and led to bad registration of provided care; a reorganization from a regionally organized structure to a branch-structure that induced a breach in existing communication and accountability structures, which on its turn induced untimely and improper management and control information and a reorganization experiment with self-managed teams (a management hype throughout health care) that dramatically failed due to a hasty and unthoughtful implementation. Staff did not get appropriate training, and the new teams were barely supported. In the meanwhile, the organization was working on a layoff of 'level 2 caregivers', and a merger with a home care organization was an occasion to justify this. Staff functions were cut away, and many administrative tasks were relocated to the new installed teams. All this then bit them in the tail, as understaffing became a major problem. Hence, there was a mixture of major reorganizations, changing laws and improper communication: it ran out of control.

Early that year, for example, the personnel wrote an alarming letter to the executive board, based on an internal survey, in which they stated that they feared the upcoming reorganization would only make things worse for the quality of care. Two hundred jobs would disappear, mainly support functions. The Union demanded that the reorganization (one of the many) be stopped. The letter was handed

over following a march through the centre of the city. The chair of the board declared that he wished to look at quality issues, but that the budgeting cuts were inevitable because of government policy.

Already then, the organization had fundamental budgeting problems. In three years, there was more than 30 million euros decline in income. The last year of the three accounted for a loss of 25 million euros alone. The losses were attributed to the unexpectedly quick implementation of a national policy of closing elderly care homes in favour of providing care for elderly people at home. One of the members of the executive board (the financial and operations manager) quit and an interim manager was hired, a manager from the hospital sector with little experience in elderly care.

In the meanwhile, within weeks, the national inspectorate, induced by the Secretary of State, had published a 'blacklist' of 150 elderly care residencies, that the national inspectorate thought were underperforming. Some residencies of the organization under consideration were among them. The inspectorate declared that they were among the eleven worst performing facilities for elderly care in the country. The organization considered legal steps against the inspectorate, as they argued that the list was outdated – they felt wronged, especially on behalf of the hard-working employees, so the chair of the executive board argued. This chosen path immediately made his position untenable.

Within the organization things started to ferment even more. Fundamental problems of quality of care were not really expected and not known (although there were some serious signals from some residencies) to top management, so they argued, including the supervisory board: they thought the problems they knew about were problems that were easily fixable and of a minor scale – a major miscalculation.

The chair of the executive board saw no other option than to resign as he declared that he felt no internal confidence anymore. Two other directors were fired by an interim director.

A popular columnist of the local newspaper was sceptical. His mother lived in one of the residencies, and he wrote weekly critical columns on the happenings in the care home. He thought that the director lacked connection with concrete care and ran the organization as a limited corporation. He questioned the moral position of the

supervisory board, that had politely stated that they had 'deep respect' for the decision of the director to leave (partly because of a wavering departure premium). The governance system of long-term care was 'morally bankrupt', the columnist argued, and the supervisory board had no awareness of this.

In the same month, the supervision of the national inspectorate on the organization was intensified, arguing that: "There is not enough control, there are not enough employees and there are worries about the structural assurance of quality". The specific reason was said to be the visits of inspectors to four residencies and the homecare division earlier that year. Following the inspectorate, the outcomes of the conversations with the executive and supervisory board were not satisfactory, especially in relation to the application of de PDSA-cycle in (some parts of) the organization.

In September, another 200 lay-offs were announced, and again employees together with the Unions demonstrated. The nurses and other personnel argued that they could not anymore deliver care in a substantive way – "the bottom is reached", even though most lay-offs were administrative staff and overhead functions (it appeared that the excess of staff was due to not reorganizing the staff services during the different mergers). A month later, it appeared that also in this year, millions of losses would be booked. Information was slow in becoming available as the transition from the old to the new information system was inadequately managed.

Things were moving in circles: there was too few staff, therefore (expensive) agency workers were hired to meet formal quality demands. However, these agency workers were often unexperienced, undereducated, and had no relational bond with the clients and families. This only induced more questions of quality. Because of a bad image it was difficult to find people for caring vacancies.

On top of and partly due to this, a remarkable manifest was presented later that year by the same columnist, together with someone from the client council of the organization. Although their experiences were primarily related to the organization in question, they had discovered that problems in elderly care were a nationwide problem. The manifest was published in national newspapers and presented to Parliament. The core of the argument was that in almost every elderly care organization, there were too few (properly trained) nurses and there was not enough simple and human

attention to elderly people, partly because of too much administration and bureaucracy, and most top-level management of these kind of organizations lacked connection with daily care, thinking primarily about their own interests. The manifest was a true success, said to voice the views of the commons, and public attention was enormous.

The interim manager had a really hard job, but his decision to undo the self-management teams, and restore leadership at a local level, was a hit for regaining the trust of the staff. For the coming year, black numbers were expected. Finally, a year later, the strict supervision by the inspectorate was abolished, which avoided a potential bankruptcy. Still however, the focus of the interim director was merely on the organization itself, not so much on concrete care. Understaffing and quality of care remains a problem, up to this date, but this was beyond the inspectorate's remit.

One might say that different big problems had piled up, and the organization had not the agility nor the competence to deal with them. It was judged that there were miscalculations by the executive and supervisory boards. Especially the combination and speed of different major reorganizations were judged to be fatal and too big a risk.

Brief reflections

The different stories do not all illustrate the same theme. I deliberately refrained from normative statements whether the supervisory board should have done a better job. In hindsight, the answer always appears to be clear cut. Things may also have more layers and complexities than meets the eye. Moreover, such individual cases may be extremes and obscure that the majority of supervisory practices are not facing such major issues. I think therefore, without judging these cases or inferring judgment to the whole population, that the specific problems of the specific stories point to some more general *clues* about issues of supervisory work in health care – and civil society in general. These issues are at the core of every supervisory practice whether or not there are problems as big as those in the organizations sketched above. As mentioned in the start of this chapter, I will briefly reflect on these cases using the concepts of ambiguity, politics and democracy and initially highlight possible tensions for the supervisory practice. These reflections are a prelude to the theoretical study performed in Part II.

Ambiguity of ordinary practice

In the different cases, it is apparent that the distance between the supervisory board and daily care is experienced by different players as a problem: this distance appears to evolve from a lack of understanding of, or a lack of willingness to understand, what is needed in ordinary situations. Sometimes this is made explicit in the media reports. It highlights that supervisory boards have to make judgments while there are inherent things they do not appear to know. The same is of course true for the outcomes of certain of their decisions.

Another problem of not-knowing is the element of surprise, that something is overlooked or precisely not-seen, or wrongfully estimated. In some cases, the board was surprised by the problems of quality; sometimes they did not see issues of loyalty or collusion; and sometimes they did not see the importance of public opinion and the power of media.

An easy answer, and also one that could make it as the header of a newspaper article, is that they should have known. That they were negligent, not competent. One might expect a supervisory board to have profound knowledge about the organization, while at the same time a supervisory board might have trouble collecting this amount of knowledge in the light of their due distance. It is unreasonable to think that all things relevant, in the future, can be known. It is generally accepted that supervisory boards should be cautious in getting too much into operational details – it is not their task. On the other hand, you do need a perspective that grasps the operational side of the organization. Therefore, a supervisory board is ‘trapped’ at the safe high grounds and the question raises how it is possible to understand or even imagine the swampy lowlands. In the stories also *tragedy* resonates. Historically evolved patterns in for example the relation between the executive board and codetermination councils may be devastating for an organization and the possibilities for a supervisory board, while it may at the same time be yet impossible to revert or totally grasp this in the middle of crisis.

Hence, a supervisory board, especially looking at things from the point of prevention, should be interested in what is *not known*, however, while at the same time understanding that such a question always relocates your gaze. The ‘deadly incident’ story is a good example, as they did in fact spend quite some time studying the specific treatment, and even went to that location, and were asking critical questions to the executive board. The executive board was able to convince them to approve it. Later on, a similar thing happened as the report from the university showed a discrepancy between the status of implementation on paper and in practice, even though the supervisory board had done some close observations of this implementation program.

Still, this escaped their gaze. The chair of the supervisory board who defended the organization on public television, argued that the golden quality marks should be taken into account. In our final case, the problem of not-knowing is complicated, but part of it is the detachment of the executive and supervisory board, as well as an accumulation of big decisions and reforms over a couple of years. Many 'improvements', from the management perspective, did not turn out to be improvements, especially not in combination with the other improvements.

Briefly, from a distance, many innovations, strategies, reorganizations or improvements appear to be necessary, hopeful and good while in reality they may turn out to be the opposite. When or how this occurs cannot be totally engineered or predicted in a managerial fashion. It is a risk to rely on standardized quality measures (such as 'golden marks' or implementation process programs). This leads to a tension, which is more radical than the often-named mere tension between proximity and distance: how can you understand the organization in general terms, if the general terms themselves are not only in conflict with ordinary practice, but also sustain and create this ambiguity? The relation between the safe high grounds and swampy lowlands is not only a matter of knowledge but is also recursive.

Political nature of care

The cases differ in their relation to concrete care, and how this structures the living together of people and patients. Some cases are explicitly related to incidents in care, while others are more related to organizational and governance matters. The deadly incident is the most explicit one. It is about a form of care in which self-determination (or self-management) of patients is the core of the treatment. This links up with a broader public and health care ideal of the autonomy of people and the ability to engineer your own life. Some argue that this is a 'neoliberalism in disguise'.¹²³ It is both tragic and ironic that the woman in question dies because of the restraining interventions. Also, it becomes apparent that different actors think differently about what good quality is. In any case, social innovation in health care appears to be rather risky, even if the supervisory board had done everything, or at least apparently enough, to understand what went on there. Decisions on how people live their lives in care residences are not mere technical questions of quality but invoke discussion and public debate on how the lives of patients are structured.

In the talk show interview, another aspect of this political nature was highlighted. In the interview, the questioning of the legitimacy of the supervisory board is explicitly related to her (the Chair) not knowing or understanding, perhaps not so much about 'bad things that happen there',

¹²³ Biebricher, *Onvermoed en onvermijdelijk*.

but about her not understanding the political nature of care and the way this is governed and supervised. In fact, she wanted to depoliticize the matter, but this is, as the debate showed, impossible. It may however not only be impossible; it may also be undesirable to depoliticize the matter.

From the organizational perspective a lot of politics was going on. From the inside, workers or councils collude with the executive against the supervisory board (especially in smaller organizations), and when things get hot also national media and politicians become interested. The public image is often rather black and white and is often in the hands of workers and clients. Executive and supervisory board members are often scapegoated, sometimes without a proper hearing. In different cases, strong 'we-they' oppositions arise, and moral arguments are thrown on the table ("governance is morally bankrupt", "they only care about themselves"). 'Disturbed relations' between codetermination councils, executive board and supervisory board may take an organization hostage, undermining proper checks and balances. From a governance perspective, it appears crucial that the supervisory board does not only take into account its own role, but also the position, role and relations between codetermination councils and executive board.

Furthermore: the very fact that people stand up, raise their voice, want something to be done in the name of some ideal of care is of course a political matter. This is not only true for 'voice', but also for 'loyalty' and 'exit'. Supervisory boards may struggle when to leave the ship or let themselves get beaten up for a perceived public good. The tension is that on the one hand this kind of politics may be devastating in terms of public outcomes or values but on the other hand may in itself be a legitimate form of raising voices – so peculiar to a civil society. A supervisory board may be caught in the middle of this.

The same tension is true for politics about the way care or the organization creates or sustain social orders. From a public value perspective, it may be 'ineffective' if this social order is permanently questioned. Organizations and professional routines cannot be changed all the time.

Briefly, it appears that politics (in the widest sense of the term) play a central role in these cases, while I think that many organizational and quality issues are often approached in a more technical manner. These 'techniques' may very well be related to 'public values', but this might still obscure that care is, at least potentially, essentially *contested*.

Democratic deficit?

From a democratic point of view, about who may take decisions and on what grounds, who may, can or is willing to have a say in decision making, something paradoxical seems to be going on. On the one hand, there is a lot of democratic 'action': debate on television and in parliament, colliding and protesting employees and conflicts between boards and codetermination councils. In some cases, there is not so much active protest, but rather a culture of distrust and discontent. On the other hand, when push comes to shove, people in everyday care, or the way they are represented, have, when the chips are down, very little formal possibilities to influence decision-making. Informally, their force may be strong, for example by turning to the media or by formally withdrawing trust in the executive or supervisory board. Usually, this makes a difference. But in some of the cases above, this makes no difference, and even leads to a case in court.

This is interesting as many of these organizations are historically formed as private initiatives in which citizens occupied the boards and were appointed and held accountable for example by and in associations. Nowadays, supervisory boards are supposed to be independent and professional, and perhaps for good reasons: preventing moral hazard and conflicts of interest and promoting independent and expert knowledge. This however results in a system of co-optation in appointing new supervisory board members. This autonomy, combined with the relative distance to ordinary care, may result in a democratic deficit – even if their action genuinely aims to be based on the public good. As we will see later, codetermination councils may give advice on appointments or may have a representative on the board, but still independence remains the leading value. Also, as we have seen, the relation with codetermination councils may become anti-democratic if collusion occurs. If care is essentially contested, and if ambiguity resists instrumental and technical decision-making, then why are involved citizens kept out of the boardroom?

The answer is not that simple. We have seen in some of the cases above that if it were possible for some, for example, general assembly, to suspend the supervisory board, the public outcomes may have been devastating. I believe this is also why practitioners and writers on governance prefer the autonomous, professional and independent supervisory board as we will see in the next chapter. This essentially turns back to Plato's questioning of democracy in favor of an elitist form of government: democracy will in the end ruin itself by internal quarrels – and this we have seen in some stories above.¹²⁴ The question and tension is; whether in the light of contemporary political thinking, democracy does not still

¹²⁴ Plato, *The Republic*, Book 8, 556-558.

yield some value on its own, or if, in the case of civil society organizations, the elitist account is preferable.

3. Context: common practice of supervisory boards

In the previous chapter, I presented some dramatic stories from which we distilled some key questions for supervisory boards in the light of ambiguity, politics and civil democracy. In this chapter, instead of focussing on extreme stories, common supervisory practice is described, and the way that common discussions are encouraged. The aim of this chapter is to provide context for the study subject at hand, to characterize common debate and to reflect whether the topics of ambiguity, politics and democratization resonate in the supervisory literature and practice. In this chapter, four things will be done. First, I will describe the common practice and developments of supervisory boards as described in different Dutch (popular) management books on governance in civil society organizations. After that, the four most commonly accepted tasks of supervisory boards in civil society are described in the light of the most dominant development: professionalization. This is followed by a description of common practice based on my own experience in working with supervisory boards as a policy advisor for the Dutch Society for Supervisory Boards in Health Care and Wellbeing (NVTZ). In the fourth paragraph I will reflect on the remarkable absence of the main themes of this thesis in literature and practice.

3.1 Developments in the role of the supervisory board: professionalization¹²⁵

Within the community, or ‘*Gesellschaft*’, of supervisory boards in civil society there seems to be a common agreement on what the main tasks of the supervisory boards are or have become in the course of the past two decades.¹²⁶ Professionalization is its main course. Briefly, I will describe common criticism and what is expected from a board nowadays, based on different Dutch management books on governance.¹²⁷

¹²⁵ Parts of this section were already published in Dutch: Den Uijl and Schulz, *Van bureaucraat tot grenswerker. Over de rol van de secretaris bij de professionalisering van het interne toezicht van hogescholen*.

¹²⁶ For an overview of bills, codes and regulations supervisory boards in health care deal with, see attachment 1.

¹²⁷ The reader may want to forgive me for the extensive use of Dutch references, but at this stage it is important to see how vast the body of knowledge (or opinion) is on this subject matter. Indeed, the discourse on governance in the Netherlands has national orientation: there is little international awareness both in terms of literature and practice.

Compared to twenty, even ten years ago, more is asked from supervisory boards.¹²⁸ More often they are in the spotlight, especially when things go wrong (as we saw in the previous chapter). They are being looked at and held responsible, both internally and externally: ‘where were you when things went astray?’¹²⁹ For most practitioners nowadays, this is nothing new under the sun.¹³⁰

A lot has been written about supervision in civil society: books, dissertations, reports of government advisory councils, reports of societies of supervisory boards and interbranch organizations and practical handbooks. The attitude seems to be: supervisory boards are (or were) all too easily ‘tricked’ or misguided by executive boards, especially if the executive board is its only source of information.¹³¹ Moreover, they do not show enough sensitivity and interest for what goes on in the outside world and in the sector, or what is asked from civil society organizations.¹³² They do, or did not, take their task seriously enough, are too little critical and are too much occupied with formal checks and the books of the organization.¹³³ Other authors point to (external) explanations for this: the laws and macro system of governance between state, civil society and market, is flawed¹³⁴ and the introduction of market forces in civil society is a failure.¹³⁵ Especially the problem of bureaucracy, the logic of management and New Public Management are seen as being to blame for it.¹³⁶ The morality of supervisory boards is sometimes explicitly questioned.¹³⁷

Professionalization seems to be the right answer to these located problems and many supervisory boards, headed by their professional societies, have taken up this project of professionalization.¹³⁸ More than ever, supervisory

128 Blokdijk and Goodijk, *Zorgtoezicht in ontwikkeling*; Schraven, *Governance in de zorg*.

129 NVTZ, *Tussen besturing en samenleving*.

130 See for example the handbook by Baanders and Van Zonneveld, *Atlas van het toezicht*.

131 Van Zonneveld, ‘Allemaal kanjers, toch gaat het mis.’; NVTZ, *Tussen besturing en samenleving*.

132 Den Uijl and Van Zonneveld, *Zorg voor toezicht*.

133 Goodijk, *Falend toezicht in semiplubieke organisaties?*, 3; Razenberg and Van der Zaag, *Praktijkgids voor toezichthouders*, 7; Goodijk, *Strategisch partnerschap: wat is wijsheid?*; Minderman, *Waar is de raad van toezicht? Deel I*; Minderman, Goodijk, and Van den Berg, *Waar is de raad van toezicht? Deel II*; Minderman, *Waar is de raad van toezicht? Deel III*; RVZ, *Garanties voor kwaliteit van zorg*; WRR, *Van tweeluik naar driehoeken*; De Hoog, *De toezichthouder*.

134 Commissie Behoorlijk Bestuur, *Een lastig gesprek*; Goodijk, *Falend Toezicht in Semiplubieke Organisaties?*; WRR, *Toeziën op publieke belangen*.

135 Commissie Behoorlijk Bestuur, *Een lastig gesprek*; Van Dalen, *Zorgvernieuwing*; Ruimschotel, *Goed toezicht*.

136 De Blok et al., *Het alternatief voor de zorg*; Den Uijl and Van Zonneveld, *Zorg voor toezicht*.

137 De Hoog, *De toezichthouder*; Commissie Behoorlijk Bestuur, *Een lastig gesprek*; NVTZ, *Mandaat en moeras*; Hoogland and Buijs, *Ontzuilde bezieling*.

138 NVTZ, *Commissie Brenninkmeijer: De vrijblijvendheid voorbij*; Baanders and Van

boards are interested in the quality of their services. Many supervisory boards installed specific committees for this task.¹³⁹ These have more contacts in the organization and with staff and management. They visit public meetings and celebrations to ‘get a feeling’ of and for the organization. Also, they are more involved in stakeholder dialogue.¹⁴⁰ Supervisory board members will go to class, follow specific courses, they evaluate their own performance – once in every two or three years with an external consultant.¹⁴¹ There is more diversity in backgrounds and professional expertise of supervisory board members (although some claim this is only the beginning). Professionalization is therefore also related to what is called ‘boardroom dynamics’: understanding the social and psychological features of being a supervisory board.¹⁴²

The conversation in the board is also about the board itself, about the ‘good conversation’, dialogue, openness, trust, navigating on a moral compass and social safety.¹⁴³ The board is supposed to relate more explicitly to its public and societal task and embeddedness, looking after public values.¹⁴⁴ Also, supervisory boards should be more conscious of and make work of the importance of codetermination in civil society organizations.¹⁴⁵ The creed is: being a member of a supervisory board is more than a minor but honourable ancillary position but is a tough responsibility.¹⁴⁶ Some say it costs or should cost about half a day a week. This intensification of the quantity of supervisory work is an important aspect of professionalization (although the nature of supervisory work remains difficult to quantify).

The process and language of professionalization can be interpreted differently. One might say it is just about the further development of the role of the supervisory board in such a way that it is best performed with its

Zonneveld, *Atlas van het toezicht*; Strikwerda, *Bespiegelingen over governance, bestuur, management en organisatie in de 21e eeuw*. There are societies for supervisory boards in almost every sector of Dutch civil society, such as in health care, education, public housing and for cultural institutions.

139 NVTZ, *Zienderogen beter*; NVTZ, *Zienderogen beter II*.

140 NVTZ, *Samen van waarde*; Eijlander and Lauwerier, *Regulering van het bestuur van de maatschappelijke dienstverlening*; WRR, *Van Tweeluik Naar Driehoeken*.

141 Commissie Behoorlijk Bestuur, *Een lastig gesprek*; Strikwerda and Ten Wolde, *Verplichte literatuur voor commissarissen en bestuurders*; Minderman, *Waar is de raad van toezicht? Deel III*; Scheer, Meurs, and Noordegraaf, *Onder zorgbestuurders*.

142 Razenberg and Van der Zaag, *Praktijkgids voor toezichhouders*; Schraven, *Governance in de zorg*; Schuit and Jaspers, *Handboek voorzitter*.

143 Commissie Behoorlijk Bestuur, *Een lastig gesprek*; Goodijk, *Strategisch partnerschap: wat is wijsheid?*; Dubbelman and Heegsma, *Waarderend toezicht*; Bouwmeester and Luyer, *Waardengedreven leiderschap*; Van Ooijen, *Toezichtdynamica*.

144 Den Uijl and Van Zonneveld, *Zorg voor toezicht*; See attachment 1 for the Governance Code in health care that describes this societal orientation.

145 WRR, *Van tweeluik naar driehoeken*.

146 Goodijk, *Falend toezicht in semiplubieke organisaties?*

corresponding responsibilities.¹⁴⁷ Professional practice is in this regard the equivalent of *good* practice. It is something else to say that professionalization is the development of a professional group such as we know from the sociology of professionalism such as doctors or lawyers.¹⁴⁸ Some argue, in this respect, that supervisory work is or has become a 'craft'.¹⁴⁹ However, there is no curriculum; it is not specialist work (it precisely requires a general attitude); there are no established *standards of excellence* and there is no education or license needed to perform the job. Moreover, supervisory board members that have no other occupation may lose in time the connection with (rapidly changing) society and everyday practice. Supervisory work is a practice in which knowledge and experience gathered elsewhere is made useful in other organizations or domains.

3.2 Four roles of the supervisory board?

Commonly, in literature and in practice, four roles of the supervisory board are distinguished, and they always come back.¹⁵⁰ These roles express the demarcations between management (executive board) and control (supervisory board) and form the professional framework of supervisory boards. I will discuss them briefly, and describe what professionalization means within these roles.

1. Supervising, overseeing and control the executive board and the governance of the organization.
2. Advisory role for the executive board
3. Employer of the executive board
4. Boundary spanning, utilizing the professional network in favour of the organization

¹⁴⁷ Cf. Schraven, *Governance in de zorg*.

¹⁴⁸ Cf. Freidson, 'Theory of Professionalism: Method and Substance'.

¹⁴⁹ Cf. Dinjens, *Goede raad voor commissarissen*.

¹⁵⁰ Cf. Schuit and Jaspers, *Handboek voorzitter*; Meyer and Maier, 'Corporate Governance in Non-Profit-Organisationen: Verständnisse und Entwicklungsperspektiven'; Ende, Hubben, and Suur, *Positionering van de raad van toezicht in de zorg*.

1. Supervising the executive board and the governance of the organization

The supervisory board is first of all a body that controls and disciplines. It provides checks and balances aimed at reducing the power of the executive board and to maintain its focus on the appropriate issues. To control, normally, one needs a norm or a system of evaluation. This is often called a supervision framework, sometimes based upon a supervision vision and accompanied by an information protocol. This framework describes how the executive board is checked or evaluated. The executive board usually, albeit partly, has a say in the normative elements of this framework. Indeed, the executive board has to set the course of the organization and might therefore well estimate which efforts are needed. A good functioning framework of norms (that is: one that stimulates, enables, rather than demotivates while it should at the same time be more or less controllable) is considered a sign of professionalism. Professionalization is in this case the supervision of the development and improvement of management and governance of the organization. Performing this supervisory task better is possible by optimizing existing processes, but also by looking for ways in which supervisory work can be innovative (doing things differently). Furthermore, the supervisory board is held publicly accountable for how they supervise and which decisions they have taken.¹⁵¹

2. Advisory role for the executive board

Sometimes this is called the ‘sparring partner’ role. The advisory role is performed professionally if the executive board is readily willing to listen to the advice of the supervisory board: looking for different perspectives, experiences, expert opinions and the like. The supervisory board, on their part, gives advice without pushing it (they should ‘sit on their hands’). The executive board should, ideally, look up to and have respect for the supervisory board. At the same time, the supervisory board should be approachable and helpful. Professionalization in this light is developing this role of providing advice and being a sparring partner.

3. Employer of the executive board

Even the executive board, which has final responsibility, is entitled to a good employer. Of course, the supervisory board may suspend, dismiss or appoint the executive board. Perhaps, this is the most influential instrument at hand for the supervisory board.¹⁵² But the supervisory board also does performance appraisals with the executive board – strict if necessary – and would be keen

¹⁵¹ Schillemans and Bovens, ‘Governance, Accountability and the Role of Public Sector Boards’.

¹⁵² NVTZ, *Mandaat en moeras*.

on the personal and professional development of the executive board member(s) and to take, if needed, the executive board under its protection. Some say the executive board should at least be a little nervous for this role of the supervisory board; it keeps them sharp and contains (potential) narcissism. Taking responsibility in this way is a sign of professionalism. Professionalization is the development of this employer role by improving existing or developing new processes and instruments. At the very least, there should be some recurring attention to how this role is being performed by the supervisory board.¹⁵³

4. Boundary spanning

The final role of the supervisory board is to utilize the professional networks of supervisory board members to help the organization acquire for example knowledge, financial means or a good image. In international literature on governance in non-profit organizations, this is a normal role.¹⁵⁴ The idea is that good and influential trustees are key in acquiring the needed (financial) means. In the Dutch context of dual boards and public financing of health care (and also education) it is more controversial: this is supposed to be the task of the executive board. Yet, this role may appear to be important or useful when a supervisory board member happens to know people from the private sector, politics or public administration. A professional supervisory board is capable of utilizing its networks for the organization, without explicitly representing the organization – for that is the role of the executive board.

Switching roles: professionalization as reflection

Taken together, there is also professionalization in how to combine these roles. This is sometimes called the *switching between regimes of supervision*.¹⁵⁵ These roles may in practice be difficult to distinguish (good control also asks for good advice) and may even be contradictory at times (controlling policy on which the supervisory has given advice). Professionalization is not so much in fulfilling the separate roles, but rather in the ability to switch between roles, knowing and understanding which role is appropriate at what moment, and being explicit about this switching of roles – while these roles may at the same time overlap. Therefore, professionalization is also associated with ‘metacommunication’ and a permanent and active reflection: continuously stepping in and outside the action, being explicit about how and to what the supervision is oriented.

153 Dinjens, *Bestuurder, voldoende uitgedaagd?*

154 Cf. Pfeffer and Salancik, ‘The External Control of Organizations: A Resource Dependence Perspective’.

155 Famously by Jacques Gerards, former director, founder and member of honour of the NVTZ.

Beyond four roles

Although these roles are widely accepted, there is some superficiality to this categorization. As these roles are formulated for the roles of supervision, it appears as if this task can be isolated from the broader practice of governance and organization. But this is, as argued before, not the case. One must also speak about co-leadership (with the executive board) albeit with different responsibilities. This dynamic is left out of these roles. Winter & Van Loo, therefore, developed a comprehensive model that goes a step further in describing the possible task areas a supervisory board has in relation to organizational matters.¹⁵⁶ They evaluate the performance of the board from the perspective of the person, group and system. As will become clear, I will use the same threefold distinction when coming the chapter on practical wisdom (Chapter 11). Then, they describe five fields where interaction between executives and supervisory board members is expected to take place:

- Hygiene: compliance and risk management
- Strategy: determining the direction of the organization
- Performance: monitoring and control, for example quality of care
- People: supervisory board as employer
- Stakeholders: contacts with external parties that influence the organization

Next to these fields of interaction, there are also types of involvement by the supervisory board. One might regard these steps as an 'framework of intervention'. These steps are:

- Ratifying: supervisory boards need to give their blessings on decisions in which they have been little involved.
- Probing: not only ratifying but making sure that the analysis and deliberation was sufficient and that they have received all relevant information.
- Engaging: the supervisory board is engaged in earlier processes of decision-making such as in analysis or deliberation.
- Directing: supervisory boards are the owners of both the process and the decision to be made.

Winter and Van Loo argue that this helps to understand that the lines between executive and supervisory board may be blurry, in different circumstances. In contemporary practice, the 'ratifying' involvement is for most decisions not good enough anymore. There is at least a requirement to

¹⁵⁶ Winter & Van Loo, 'Board on Task: Developing a Comprehensive Understanding of the Performance of Boards'.

be probing. When it comes to ‘people’, the supervisory board is always directing. It may be that the supervisory board needs to be engaging or even directing on other fields of interaction.

3.3 Subjective description of the ordinary practice of supervisory boards

To understand the practice of supervisory boards in more detail, I will describe what the ordinary and everyday practice of supervisory boards might look like (although literally it is not an ‘everyday’ practice), by providing a picture. It doesn’t claim to be representative; it does not refer to any specific empirical setting but is based on aggregated experience out of my own professional practice as both an advisor for supervisory board members, as well as the experience of being a supervisory board member in health care myself. Also, I assume board practices that are ‘steady going’ – no massive incidents or conflicts are present in the organization or boardroom.

With such a description, I will build on the practice approach described in the introduction, incorporating not only behaviour or systems, but also materials and instruments, moving bodies, overlap with other practices, habits, implicit norms and the like. I have asked five experienced supervisory board members that are active in long term care to what extent they recognized my description, and their suggestions have been incorporated.¹⁵⁷

A day in the life

A supervisory board member becomes a member by applying for a vacancy, usually publicised. Very often recruitment and head-hunter companies are involved in the selection process. It also happens that potential members are actively asked to apply for a vacancy in the supervisory board. In the appointment interviews, it is not uncommon that the executive board is involved. Members are appointed for 4 years, with one possibility of prolongation. In practice, almost every member will serve two terms – although this is a debated feature. Newbies often follow some kind of introduction program in the organization: meeting people of staff, visit a care location, perhaps even working alongside them, et cetera. There might be five to seven members in the board, with very different backgrounds (economics, accountancy, health care, real estate, (ex-)board members in other places, (local) politicians, et cetera. Most of the time, there is one board member that has a quality seat on behalf of the employees, and one on behalf of the client’s council. But they cannot be actual employees or clients

¹⁵⁷ Although not all suggestions, as some thought my description is a little conservative, and that many supervisory boards nowadays are more ‘inspiring’ and renewing.

(representatives). Members come and go, throughput is high, leading to a constantly changing team constellation. Because of this, the conception of what supervisory boards should do can vary a lot within one board, as there are those with a more traditional view (detached, modest), and those with a more contemporary 'innovative' view on supervision (proactive, involved). There is indeed talk among and across supervisory boards about "old and new supervision" and this is also debated within boards.

An executive board will normally consist of only one person, the director, but sometimes two or three form the executive board (especially in bigger organizations). There is a management team under the executive board, but they will normally not be present at meetings of the supervisory board although they might join if there is a topic at hand close to their responsibilities.¹⁵⁸ In normal conditions, there will be five to ten formal meetings a year with the executive board in which the general state of affairs and specific issues at hand are discussed. A meeting will last up to three hours. Sometimes the meeting takes place in a meeting room at a care location of the organization, but sometimes at the headquarters on for example an industry park. Meeting rooms are sober. There is coffee and tea, sometimes a cookie. If in evening hours, there might be bread or soup. Sometimes they have wine afterwards. It is possible that people will sit in the same places every meeting, especially if the same meeting room is used. A new member will need to find its place. Although s/he might be full of ideas and be inspired by a starting course for supervisory board members, s/he needs to accommodate to existing power relations and customs.

Now and then, there is laughter around. Mutual relations are usually friendly, decent and respectful – perhaps sometimes a bit distant. People generally don't know too much about the personal lives of the other members. It's the professional life that counts. From this latter life, anecdotes are shared. In the light of 'new supervision' and professionalization, however, the personal background of members is seen as more relevant than before. Before the meeting starts, there might also be some silence or even discomfort; people hiding behind their tablets, phones or meeting documents.

Meeting documentation is distributed by the secretary of the executive board two weeks before the meeting, via a special meeting-app, e-mail or by 'real' mail. The members either print their documents, or tablets are used. The agenda is set on the basis of the previous meeting, an information protocol (plan and control cycle) and in a separate meeting of the chair of the supervisory and executive board, together with the secretary of the executive

¹⁵⁸ Note that the management team is not necessarily the same as the executive board. In one-tier models, the executive board is very often the same as the entire management team. Hence, boardroom meetings are relatively small, something that is valued for its efficiency in decision making.

board. Although everyone can contribute topics to the agenda, in practice the chairs of both boards have a dominant say.

The chair of the supervisory board chairs the meetings. Very often, it is quite a challenge to discuss every agenda item properly, as there is so much to talk about, and time is limited. The length of the meeting can influence the quality of the conversations. The same is true for the meeting room, the climate, the availability of fresh air and daylight. Things that are at the end of the agenda very often have to suffer less attention and will be pushed through or delayed for next time. Sometimes, during the meeting, the agenda is reordered in order to address items that need a decision made that day. The records are made up by the secretary of the executive board, who is always present. Although the chair will try to distribute speaking time fairly, there are two or three members who lead the conversation, especially if the topic at hand is close to their professional expertise. However, very often, most of the time is spent by the executive board, explaining further the items in the documentation, and answering questions from supervisory board members. A lot of these questions are routine questions, but sometimes more unexpected questions are asked. Executive boards tend to like the routine questions, although they know that unexpected questions will help them further. Supervisory board members will sometimes hesitate to pose the question they have in mind. Not only because you don't want to make a bad impression, but also because you don't want to stir up things that don't need to be stirred up. Consensus, peace and harmony are considered key. Recent practice and discourse go beyond this restrained attitude. Supervisory boards need to be probing and this needs to be more explicit. Executive boards more and more share dilemmas and tough questions with the supervisory board. This trend is indeed visible, the practice of supervision is and has been in transition. This may, as noted, lead to different perceptions and expectations of supervision within a board and not every executive board member may be happy with or used to the probing attitude of new supervisory board members.

If a decision needs to be taken, the chair will ask everyone's opinion explicitly, sometimes in the meeting, sometimes beforehand for example by telephone. Voting processes are often avoided, in favour of negotiating on the plans presented by the executive board (in Dutch called: *'polderen'*). If there is a voting process, it rarely happens that the outcome is not unanimous, as the differences are often already flattened out by seeking consensus in the process. If someone does vote against, it might be recorded, but the majority decides and also the one who voted against is responsible for the decision taken. No one likes this of course, and that is why consensus is sought-after.

Returning topics on the yearly agenda that might take some time are the budget report; (integrated) financial report; evaluation of the executive board; management & control reports; saying goodbye to and appointing supervisory board members; yearly reports on quality; (integrated) administrative dashboard or core figures; discussing incidents or reports from national inspectorate and strategy or investment plans.

Regularly, there are guests at the table. These might be the internal controller explaining the numbers, the external accountant explaining the annual report, a manager of a location sharing his experiences, or someone from staff giving a PowerPoint presentation on a certain project, for example on risk management or quality improvement. Guests are often treated in a very friendly manner, and if there is critique, this is directed to the executive board, sometimes after the guest has left. Supervisory board members are very interested in the communication between the executive board and the guests: how do they relate?

Most supervisory boards have committees. There are mainly three: a remuneration committee, an audit committee and a quality committee. Two or three members from the board make up a committee. They will meet two to four times a year with relevant people from within the organization. The records, also often made up by the secretary of the executive board, are part of the collective meetings. Although everyone knows that these committees do not take on overall responsibility for the subject matter, it is generally considered a form of outsourcing or efficiency of supervision, while at the same time allowing people to zoom-in a little more. Board members experience the small size of the committee an advantage in approaching organizational members. For indeed, organizational members, even though supervisory board members are very friendly, can look up to them as 'high lords'. After they have met however, this distance is often taken away. Supervisory boards mostly tend to be egalitarian. There might be some chattering about the supervisory board in the organization, but generally, little is known about them, who they are, let alone what they do. It is too far away from daily practice.

Nowadays, supervisory boards will do working or fact-finding visits at locations, varying from one to six times a year, or even more. A location manager, a team leader, a volunteer or a client will show them around, showing the highlights of the locations, introducing them to colleagues or clients they accidentally or purposefully run into. Sometimes they will visit a client's room or home, or perhaps a joint living room. Again, the supervisory board members act in a friendly and interested manner. In practice, they experience the visits not so much as fact finding, but more as a way of

connecting with daily care, to see what it is all about. They say that they 'sniff and smell the culture'. Mostly, they are very enthusiastic about the commitment of the workers. Site visits with the entire board can be experienced by employees as overwhelming and inconvenient. A lot of boards therefore choose to go in little groups, for example with the committees, or even individually. In many instances, employees are very often impressed by the involvement shown by the supervisory board; they feel appreciated, proud and acknowledged that they were visited. Appreciation and inconvenience might indeed go hand in hand.

Other type of working visits might be joining an evaluative meeting, such as a moral council, a meeting or lunch of nurses or joining dinner with clients or having a look at a 'best practice' inside the organization or somewhere else. A very popular and regular form of involvement by the supervisory board is showing up at Christmas parties, New Year's receptions, opening festivities of new or renewed locations, or other special meetings where everyone's invited. These visits are preferred because of the informal setting and the opportunity to speak to all and sundry. During such a happening, a present supervisory board member will remain invisible or even incognito, that is, fulfils no public role. S/he will be modest, leaving the public role to the executive board or the involved manager. Generally, supervisory boards like to act in the shadows. Not because they are scared, but because they feel it is their role. Not being known well by organizational members is considered a good thing or sign, although there might be a discussion in the board as to whether they shouldn't be more approachable in the light of accountability.

The connections with the client, family/relatives and workers councils are perceived as very important. A supervisory board often has a member that was nominated by the client council – a right by law for client councils. The councils do not visit the meetings of the supervisory board, but rather the other way around. Mostly a delegation of the board is sent. In terms of governance, the councils have a direct relationship with the executive board, and an indirect relation with the supervisory board. In practice, these lines are blurred. The extent to which these councils feel, or actually are, taken seriously can vary widely from organization to organization. Boards, both supervisory and executive, might feel that these councils very often fail to acknowledge a general interest, defending primarily their own interests, digging their heels in. This is perceived by board members as a lack and ineffective way of governance. In these cases, these councils are experienced as stumble blocks for making policy. There are also board members who have a very close relation with these councils, informally drinking tea or coffee with them. Not every executive board member is however happy with such a practice, especially if there is something untoward going on. If there is good

cooperation between the different councils and boards, supervisory board members are very satisfied. Actually, if this is the case, this marks for many of them one of the great things about the job.

Once a year there is a special meeting of the supervisory board, very often without the presence of the executive board, in which their own functioning and performance is evaluated. Sometimes this is done with a specialized consultant in board room evaluations (which is quite a market opportunity given the number of boards to evaluate). Topics might vary from formal matters, such as information protocols, to intersubjective relations, board culture and values. This kind of meetings are often held in a nice location, somewhere in the forests. They often have dinner together, giving them a chance to get to know each other a little better in an informal setting.

Another frequent 'extra' meeting of the supervisory board might be a yearly 'awayday', also in the forests, discussing with the executive board, management team or other staff members the strategy of the organization.

A supervisory board member might spend quite some time on developing his/her professionalization. There is a big market for seminars and classes for supervisory board members, provided both by consultancy firms, universities or education institutes. The intensity of courses may vary, but the very enthusiastic board members might spend up to half of their total time spent on the job to professionalization. The society for supervisory board members in health care (NVTZ) is a very active society, organizing all kinds of (regional) meetings, courses and congresses. There is a lot to read too. There are newsletters from consultancy and accountancy firms giving free information on governance, books are published regularly, opinions are all around. Indeed, there is a 'governance talk'.

Although being a member of a supervisory board is an ancillary position and can vary from 100 to 300 hours a year (depending on the habits of the board, size of the organization and urgent matters at hand), responsibility is present on a daily basis. Time is spent on reading e-mail updates from the executive board, closely or superficially reading the meeting documentation, newsletters from the organization, calling with colleague executive board members (very often the chair) to discuss the upcoming meeting, reading news items about the organization in local or national newspapers, et cetera. A simple matter such as scheduling a meeting may be a difficult task as many board members are occupied people.

From a distance, for example when thinking in systems and models, supervisory boards appear to be rational machines that prevent the executive

board and organization from spinning out of control. But governance is, just as concrete care, a rather everyday activity in which customs, history, coincidence, and human (in)ability play a vital role.

3.4 Brief reflections

In this chapter we have provided some context to understand where supervisory boards came from, what their professional practice and ideals look like and how ordinary practice – a day in the life – might look like. In this last paragraph I will connect my inquiry into practical wisdom – including ambiguity, politics and civil democracy, to what has been described above. In the previous chapter I noted that in the extreme cases the relevance of these topics is clearly present. I here reflect on how these topics are present in the governance literature and ‘normal’ daily practice.

At first sight, all of these themes are somehow touched upon. *Wisdom* in general is often related to morals, values and reflection – an important part of the professionalization and education programs. *Ambiguity* or *ambivalence*, although not these specific concepts, is on touched by the notion that it is important to collect information not only from the executive board, but also from daily practice and other employees and staff. Furthermore, there appears to be attention to the difficulty of understanding quality and care.¹⁵⁹ There is an entrenched mutual acceptance that care cannot be socially engineered. This is highlighted by the widespread prevalence of commonly accepted dilemmas: between proximity and distance (both to the executive board and ordinary care), between organizational and public interests, between trust and criticism, and how to switch between roles.

The contested, *political* nature of care and the way quality is addressed is touched upon by a strong consciousness of a public task and responsibility; that something else is at stake than in any random private company.¹⁶⁰ Therefore supervisory boards should be allowed to ask critical questions (based on mutual trust), to open up possibilities and viewpoints. Although the aspect of *civil democracy* is more hidden, the basic ideas of checks and balances, contradiction, codetermination of employees, professional autonomy and the self-determination (self-management) of patients all relate to some awareness that citizenship plays a role in these organizations, and that this might have been neglected over the years.

159 NVTZ, *Zienderogen beter*; NVTZ, *Zienderogen beter II*; Te Lindert, ‘Goede zorg doet thuishkomen’.

160 Buijs and Den Uijl, ‘Publieke liefde’.

On closer examination, it seems that the potential and the radical nature of these concepts may have been underestimated, both in the literature and in practice. Is ambiguity really taken at face value, or does ambiguity as a problem dissolve as soon as a site visit is done or a conversation with a nurse took place? Doesn't an ideal of social engineering return through the back door by means of a professionalization discourse?¹⁶¹ To what extent is there examination of how management instruments (including controls) turn out in practice? Maybe the attention to public values, social responsibility and the 'moral compass' also functions as a way to depoliticize or to evade questions of care and quality: who can argue against a moral claim and a social engagement? Finally, if civil democracy, or at least legitimation and accountability of the supervisory board, is so important, is it not remarkable that the autonomous position of the supervisory board, co-optation system and the emphasis on independence and expert knowledge is barely ever questioned? In the end, although there is an attempt to relate to and to be accountable to care, stakeholders and society, the idea holds fast that the supervisory practice is a practice and a wisdom of experts (professionals) and not of citizens. I believe that it makes sense to study these concepts more closely and better think through their possible consequences.

¹⁶¹ Van Putten, *De ban van beheersing*.

4. Zooming-in: in conversation with two supervisory boards

In Chapter 2 I discussed different concrete stories to show how the problems of ambiguity, political nature of care and civil democracy are vividly demonstrated. In the previous chapter I have shown how there is some consciousness of the importance of these themes in the general context of the literature on and the practice of supervisory boards, but that they need to be studied more closely in order to understand the consequences for our thinking about what wisdom then entails. Therefore, after providing cases and context, I will zoom-in on the practices of two supervisory boards and how I understand how they think and talk about their work in relation to these subject matters. We will see how these concepts resonate in their making sense of the supervisory practice and which tensions regarding these concepts they experience.

I will do so by reporting on and interpreting intensive dialogues performed with the supervisory boards of two Dutch mentally disabled care organizations. I use some aspects of discourse analysis to analyse the gathered 'data' being well aware that it does not analyse the discourse as such. In this chapter I will first briefly outline the methodology of these conversations. Thereafter, I will briefly describe the organizations of the participating supervisory boards, and a short mention of the members of the supervisory boards themselves. After that I will outline the process of inquiry, what I have done and how the process of coding took place to analyse the data. Then I will show the results of my inquiry applied to various discovered themes out of the dialogues. Finally, I will gather what lines we have found for our further philosophical reflections.

4.1 Interpretative analysis of dialogues

To unlock tensions that are (implicitly or explicitly) present in the supervisory practice of the two supervisory boards, I perform an interpretative analysis of the performed dialogues.¹⁶² This means that I heuristically interpret (*verstehen*) how these supervisory boards talk about and reflect upon their practice – this is how they speak and this how I make sense of it. It serves as a way of zooming-in to find whether the conceptions installed in the introduction are also present in the way concrete supervisory boards talk,

¹⁶² See also paragraph 1.8, reflections on the nature of this research.

implicitly or explicitly, about their practice. Dual hermeneutic is in play: I do not directly observe the supervisory practice of two supervisory boards, rather, I ask them to interpret their practice (first-order hermeneutic). Following the methodological outlook as formulated in the introduction of this thesis, I interpret how they interpret their practice (second-order hermeneutic). Hence, there is no intention or pretention that the analysis of these dialogues can be methodologically generalized. If any such claim is possible, then certainly not on the basis of only two supervisory boards. In contrast, my interpretations serve as a way to explore and make (new) sense of the practice and to acknowledge the involvement and reflexive stance of the researcher in the dialogues. To perform this interpretive analysis, I borrow from methods of discourse analysis. It is not a discourse analysis as such, however, as will become apparent. Contrary to discourse analysis, my analysis focusses, firstly, on talking about the supervisory practice rather than talking in the practice. Secondly, the analysis focusses not on a representation of emerging patterns of meaning and language but rather on the researcher's interpretations. Some aspects of discourse analysis, however, will be useful to aid my interpretative framework.

In general, discourse analysis is a way of getting insight into how social realities (identities, relations) are constructed by means of discursive practices, and how these constructions can become common sense and self-evident.¹⁶³ Discourse analysis is a common way of doing research within both grounded theory and practice theories, mentioned in the methodological reflections in the introduction.¹⁶⁴ Relating to the latter, language is perceived in practice theories as a part of a practice, that underdetermines the practice, albeit it is a crucial element. Still, it can provide insight into practices, as long as this underdetermination is taken into account.

Borrowing from discourse analysis

To understand how I borrow from discourse analysis, it is necessary to shortly explain what discourse analysis is. Within discourse analysis, there are roughly two schools, Johnstone argues.¹⁶⁵ In the first, descriptive school, language is perceived as a system of knowledge. In this perspective, language provides meanings (and not the other way around), marks relations between meanings and imposes rules on how to use the language in a specific context. The source of a discourse is therefore the way in which language is used or clustered in such a context, or language game.¹⁶⁶ At the same time, discourses

163 Van den Berg, 'Discoursanalyse', 33.

164 Nicolini, *Practice Theory, Work, and Organization: an Introduction*, 189–205; Lindemann, 'Theoriekonstruktion Und Empirische Forschung'.

165 Johnstone, *Discourse Analysis*, 25.

166 Wittgenstein, *Philosophische Untersuchungen*.

are also generative: new meanings are installed, new relations established, old rules perish, and new ones emerge. Discourses are always on the move, since everyone who participates in a discourse is not outside the practice, merely observing it, but by participating, being immersed, is at the same time perpetuating and changing the practice. In this perspective, the discourse mirrors patterns of thinking, speaking and acting in reality. Discourses do not operate in a vacuum but are related to other discourses.

The second perspective, the critical school of discourse analysis stems from the school of Foucault, and later also Laclau and Mouffe.¹⁶⁷ Here, a discourse is characterized by conventional (disciplined or hegemonic) ways of speaking or writing, based on conventional ways of thinking. The idea is that discourses in a given society are not decoupled, but influence one another, and, crucially, mirror power structures in that society. Discourses are then vehicles of power and influence the thoughts, speaking and acting of subjects. This perspective on discourse analysis is known as Critical Discourse Analysis.¹⁶⁸ It is said to be critical since it wants to unravel or unmask, how discursive practices and social contexts influence one another by means of dominance and power structures. Some scholars however put this into another perspective: every discourse analysis is to some extent critical, or at least potentially, as it tries to relate constructions of meaning to its historical or social perpetuation.¹⁶⁹

In my interpretative analysis, I do not borrow from critical discourse analysis, but from the descriptive school.

4.2 Method

To create rigor in the interpretative analysis, methods of discourse analysis (i.e., coding and interpreting) will be useful. It is an iterative, inductive process of decontextualization and recontextualization:

During decontextualization the analyst separates data from the original context of individual cases and assigns codes to units of meaning in the texts. In recontextualization he or she examines the codes for patterns and then reintegrates, organizes, and reduces the data around central themes and relationships drawn across all the cases and narratives.¹⁷⁰

¹⁶⁷ Laclau and Mouffe, *Hegemony and Socialist Strategy*.

¹⁶⁸ Fairclough, *Critical Discourse Analysis*; Van Dijk, *Discourse Studies*.

¹⁶⁹ Johnstone, *Discourse Analysis*; Van den Berg, 'Discoursanalyse'.

¹⁷⁰ Starks and Trinidad, 'Choose Your Method: A Comparison of Phenomenology, Discourse Analysis, and Grounded Theory', 1375.

Johnstone wields a heuristic approach to discourse analysis and is useful, as heuristic, for my purpose. He describes discourse as recursive. Discourse is shaped by and simultaneously shapes: the world; language; participants; prior discourse and future discourse; its medium and the possibility of its medium; purpose and possible purposes:¹⁷¹

A heuristic approach is not a theory, nor a mechanical set of steps to follow. Rather, “it is a set of discovery procedures for systematic application or a set of topics for systematic consideration”.¹⁷² A heuristic approach helps to see what sorts of theory you may need in order to connect observations with general theory about a practice, language or society.

Hence, discourse analysis is about systematically analysing constructions of meaning. These construction of meanings within discursive practices are interpretative and recursive: by its representation of the world, it also changes it. Hence, discourse analysis is interested in how social reality is constructed, and, adding up, how this construction itself is constructed by an already present social reality.¹⁷³ In this research, I have struggled as to which specific instrument to use for the analysis of the transcriptions of six dialogues with supervisory boards. Partly, since this empirical chapter is explorative in nature and the amount of data is relatively small, I did not want to overanalyse the data. Moreover, I did not do any actual practice observations, like shadowing or joining some formal board meetings. In terms of ‘sayings and doings’, I focussed on their ‘sayings’ about their ‘doings’ and ‘sayings in practice’, more specifically their reflections on certain themes (which makes a classical discourse analysis irrelevant). The heuristic approach of Johnstone and the perspectives of Gee support a systematic analysis, but they leave the specific way of doing that rather open. This openness in method is preferable for my heuristic and explorative research. I finally chose Gee’s *tool of figured worlds*: “A figured world is a picture of a simplified world that captures what is taken to be typical or normal. What is taken to be typical or normal, as we have said, varies by context and by people’s social and cultural group”.¹⁷⁴ This implies that I ask the following questions of the data:

171 Johnstone, 9.

172 Ibid.

173 Van den Berg, ‘Discoursanalyse’.

174 Gee, *How to Do Discourse Analysis: A Toolkit*, 176.

For any communication, ask what typical stories or figured worlds the words and phrases of the communication are assuming and inviting listeners to assume. What participants, activities, ways of interacting, forms of language, people, objects, environments, and institutions, as well as values, are in these figured worlds?¹⁷⁵

So, it is about typical stories, with typical participants, typical activities and typical forms of language. It is about what is taken for granted. These stories are not only inside people's heads, but are also present in common discourse, also in for example texts and literature.

I think this tool is useful for my purpose in finding out how the participating supervisory boards use language to render what they find normal practice, or what they think normal practice ought to be. Moreover, as the 'normal' supervisory board discourse, as shown in the previous chapter, already inhibits the idea of tensions or dilemmas, it will still be possible to reflect on them. The figured worlds that are present are not static, rather, they also anticipate on new discourses. Since I have created a dialogical setting, this will give some interesting perspectives, and forces the participants to reflect upon their own typical stories.

Gee formulates seven building blocks of social reality, discursively created.¹⁷⁶

Significance: language that renders things significant (or insignificant).

Practices: language that is connected to and recognized within a certain practice or activity.

Identities: language that is associated with taking on a certain role, by self or others, by installing demarcations.

Relationships: language that signals what kind of relationship is in place or is preferred (with direct conversation partners but might also be outside the discourse).

Politics: the way in which language demarcates certain perspectives on the distribution of social goods, what is deemed valuable, just, adequate, acceptable or normal.

Connections: how concepts or practices are connected (or disconnected) by means of language.

Sign system and knowledge: The relevance of different signs in the Discourse, outside of or next to the spoken or written language, such as gestures, equations, graphs or images.

¹⁷⁵ Ibid., 177.

¹⁷⁶ Gee, *An Introduction to Discourse Analysis: Theory and Method*, 18–19.

In this research, within the figured worlds tool, I am especially interested in the building blocks of *significance*, *practices*, *identities* and *politics*. The others do not vanish but remain in the background. I choose to follow this line since I am interested in the tensions of the supervisory practice that may arise out of the threefold notion of ambiguity, politics and civil democracy – my interpretative framework. As we saw in the previous chapter, I assume that the specific way in which they perform and think about the practice can tell us something about which tensions are normally experienced, and how they render things (in)significant. The point of politics is important, as tensions might probably have to do something with competing values, ambiguities, et cetera. Moreover, the role of power and countervailing power, inherent to politics, in supervisory practice is ambiguous: the power supervisory boards have or have gained may vary widely across different boards.¹⁷⁷ Identities are important as many discussions on supervisory practice are about role-demarcation and the supposed dilemmas that are inherent to this.

Examples of interrogation of the data of the dialogues:

Significance: what do they normally think is meaningful? What views on supervisory practice are rejected or neglected?

Practices: How do they understand the supervisory practice? What references do they make in order to legitimize their way of commonly understanding the practice? What words do they use to render the practice meaningful? What elements of the practice are experienced as important, and what elements as less important (such as structures, controlling activities, walking around, site visits, meetings)?

Identities: how do they form a specific identity? How do they compare themselves with or against other supervisory practices? What is the role of the organization and form of care for the forming of identity?

Politics: what values are explicitly brought forward? What demarcation lines of inside and outside are visible? How is plurality accounted for and given meaning? What is the role of conflict or harmony in this supervisory board?

¹⁷⁷ Winter, 'The Human Experience of Being-in-the-Board. A Phenomenological Approach', 8.

4.3 Process and selection

For this exploratory inquiry I have selected two supervisory boards from two organizations in mentally disabled care. For the supervisory boards, it was a time-consuming method I proposed: three dialogues of three hours. Supervisory boards do not meet that often, and this is therefore quite an investment of time. These two supervisory boards from mentally disabled care organizations however were willing to participate. The advantage of these two participants was that one organization is known in the Netherlands as an ‘exemplar organization’ of how to organize care. The other was a more ‘mainstream’ organization, if any such label does justice to a mentally disabled care organization.

Organization X

X is an organization in the east and north of the Netherlands, that gives care to about 3800 clients and 2200 employees. Yearly turnover is 125 million euros. Care is given on the basis of day care, or clients live in their special residencies. The organization is quite stable. The ‘one and only’ executive board has been there for about 20 years, building an organization that is ‘lean and agile.’ During the time I had dialogues, the chair of the supervisory board had served their time, and they decided not to appoint a new chair, but to variably assign the role of the chair in meetings to members of the supervisory board (quite an uncommon practice). In the dialogues, the executive board was present.¹⁷⁸

Organization Y

Y is an organization in the east of the Netherlands, that gives care to about 1000 clients. It has around 900 employees and 350 volunteers. Yearly turnover is around 50 million euros. The supervisory board has six members, the executive board two. Care is given on the basis of day care, or clients live in the organizations’ special residencies. Y has recently made some major organizational restructures. Care is organized in so called ‘result responsible teams’, a form of self-organization with less management functions. There have been some personnel changes in both the executive and supervisory board. During the time I had dialogues with them, there was a switch of the chair of the supervisory board, and after the dialogues a new chair of the executive board was installed. In the dialogues, the executive board was not present.

¹⁷⁸ As from 1 January 2021, the researcher is member of the supervisory board of this organization. This has not influenced the dialogues, analyses, interpretations nor this text as it was already finished by then.

Dialogue set-up

Freely building on the setup of a dialogical inquiry, referred to in the introduction, the setup would be reflexive.¹⁷⁹ That is, the researcher and the participants stand in a reflexive relation to each other. This implies that the researcher does not merely observe the dialogue, but also 'steers' by means of moderating it and giving reflections before, during and after a dialogue. In this respect, the idea is that gradually a more precise image of the matter at hand becomes visible.

I did not 'immerse' myself in the practice, observing formal supervisory board meetings, as this would have taken too much time, and supervisory boards only meet infrequently. Moreover, from experience, in such meetings observations are very time consuming and many discussions on the topics at hand require a vast amount of background knowledge of what goes on in the organization. I wanted to have the participants in a more reflective or distant stance rather than in their practical stance, and therefore performed these dialogues as described. Of course, one might argue, this is in conflict with the 'practice approach' described in the introduction. My response would be that the practice lens does not only apply to specific empirical methods (such as ethnomethodology or shadowing), but also to the very way one looks at (bundles of) practices (such as a routinized type of behaviour or a site of moving bodies and things). If one accepts the latter point of view, it does not follow automatically that empirical research can only be relevant if it is conducted *without* a reflective stance. Indeed, practices are about sayings and doings. In this research I focus on their sayings. This has its pitfalls, I admit, but given the specific practice of supervisory boards and my conceptual and philosophical project, I chose to follow this route.

In line with Lorino et al., I have gradually broadened the perspective of the supervisory practice, by inviting other organizational partners to a third dialogue session. I therefore borrow elements of the hermeneutic dialectic circle as formulated by Guba and Lincoln.¹⁸⁰ This circle is developed in the tradition of the so-called responsive evaluation. The idea is that there is a continual reflection between the researcher and the participants in multiple dialogical settings. Involving these stakeholders later in the process helps the supervisory board to see whether the ideas that they have reflected on are meaningful for organizational partners.

179 Lorino, Tricard, and Clot, 'Research Methods for Non-Representational Approaches to Organizational Complexity: The Dialogical Mediated Inquiry'.

180 Guba and Lincoln, *Fourth Generation Evaluation*.

The idea is to start with a central question – a concept – by the researcher, which has to be addressed by the supervisory board in dialogue. This was done in two dialogue sessions of three hours. After the first round, the researcher would enhance the concept, and interpret what is discussed, and bring it back into the second dialogue round. After the second round with the supervisory board, the researcher would again enhance the concept, and this would be brought in into an enlarged group with representatives from the board of directors, the management team, council of workers and, last but not least, the council of patients of the organization. The dialogues were recorded and transcribed.

Input first dialogue

In the input (a two-page white paper) for the first dialogue with the supervisory boards I took a position in which I stated that although many supervisory boards are willing to change or innovate, the practice is perpetuated to such a degree that a different perspective on supervisory practice is barely possible, let alone accepted. Furthermore, I stated that the real or primary problem of supervisory practice in health care is not the effectivity of supervision but the democratic embedding of it – and the lack thereof. I asked them to what extent democratic legitimization is important for them. I asked to what extent political practices are present in the boardroom. I asked them how they would feel if a third party, like a general assembly, would appoint the supervisory board and I asked them what alternative forms of supervision they are able to think about.

Zooming in a little on their concrete practice, I asked them how they *know* if they understand what goes in the organization? Following this, I asked about the importance of meetings with patients or relatives and professionals – and also what practical and fundamental tensions these may bring. I finally asked them if the question of what good care for mentally disabled people is, is discussed in the boardroom.

Input second dialogue

In the input for the second dialogue, I wrote down my provisional observations of the first dialogues, and hence two different small papers were written for these boards that served as input for the second dialogues.

For organization Y I highlighted the uncertainty and doubts about their own functioning, about how they should deal with the executive board and judge the quality of the executive board. They had some clear-cut ideas about how it *should* be, but as the specific context does not match these ideals, they seem to have no idea how to judge it. Furthermore, the board seems to be ‘up-to-date’ regarding the contemporary governance debate, and this is so dominant in the discourse that the specific context may get lost from sight. Also, they appeared to use a lot of popular ‘policy language’, something I found

interesting in their way of sensemaking. Even more, they appeared to know how to play the game but still struggled with trusting and judging the executive board. The theme of democratization was pushed aside by arguing that 'we do it for the patients'.

For organization X I highlighted that they truly wanted themselves to be different from other 'regular' supervisory boards, while it was not really clear how this difference was present. They had strong aversions against formal approaches to governance, as they believed that the human aspect easily gets lost. Hence, they perceived their board as informal, and believed that this should also be the case in the organization. They still had different roles and responsibilities, though, and it remained elusive how they perceived this. Furthermore, the question is raised as to what extent this supervisory board has too much uniformity. It appeared that everyone was on the same spot, and that different perspectives were not only not present but also perceived as undesirable: how does this relate to the idea of independent judgment? They highlighted a different perspective on their way of connecting with the organization (staff, patients). They did not perceive this as information they needed to supervise, but rather perceived it as a way of showing interest and involvement. The supervisory board is only there for the bigger picture. However, how do they know that a specific occasion is important for the whole? Also, I questioned to what extent the way patients are treated is discussable. They appeared to be very content with the way care was organized; alternatives were not discussed in the board. Lastly, I highlighted something they called 'common sense'; something they found very important for the supervisory task.

Input third dialogue

In the third dialogue other people from the organization were involved in the dialogue, as noted before. Different people were invited: the executive board, a location manager, a regional manager, people from the codetermination councils, professionals, patients and/or relatives. I did not give them an extensive overview of the previous dialogues but rather asked them some central questions: what do they expect from the supervisory board and what is their use? What do you think they actually do? Are there any stories or narratives about the supervisory board in the organization? Have you ever heard something from the supervisory board? Do you feel free to go to the supervisory board if deemed necessary? This dialogue was setup with a so-called mirror conversation: the supervisory board was asked not to respond to any of the comments of the participants in the first part of the session. In the second part, the floor was open to the supervisory board.

Schematically, the process was as follows:

STEPS IN THE DIALOGICAL INQUIRY	OUTCOMES
1 st step: Dialogue with supervisory board	<p>3-hour dialogue with each supervisory board</p> <p>Some insight into what supervisory board does, say and how they figure their world. Also, insight into what the supervisory board experiences as pivotal problems or roadblocks. Researcher creates two-page draft about his interpretation of the doings and sayings of the supervisory board, as well as their self-understanding.</p>
2 nd step: dialogue with supervisory board	<p>3-hour dialogue with each supervisory board on the basis of two-page draft</p> <p>Reactions, further dialogue and adjustments to the draft paper.</p>
3 rd step: dialogue with supervisory board and stakeholders	<p>3-hour meeting of the supervisory board and stakeholders, including (for example) an executive director, someone from the work council, someone from the patient council, someone from the management team</p> <p>The draft that had been formulated by the researcher in response to the former community of inquiry is brought into dialogue. Different perspectives on the subject matter will open up self-understanding.</p>

Process of coding, analysis and validation

I have coded the transcriptions with the help of the software package Atlas TI. The advantage of Atlas TI is that you can immediately add interpretations to the created codes. In the first instance, I have coded ‘bottom-up’, looking for what the text itself shows and unfolds. After that, I have compressed the codes. In the second instance, after I developed some theoretical ideas of what the tensions were in the dialogues, I formulated codes that explicitly contained these tensions, and with these codes again analysed the texts. These two ways of coding (bottom-up and top-down) helps on the one hand to prevent a tunnel vision and projection. On the other hand, it helps to precisely pinpoint my interpretations of their espoused tensions. The bottom-up codes are made after theoretical reflections that follow in Part II of this dissertation. To show my searchlight or lens, I will here sum up the codes I have used with a short description. These are the codes that I have made in the second reflection and are therefore top-down. The terms applied to the codes therefore do not correspond to the language used by the participants. In the six texts I have used 50 codes. The most salient codes are presented below. They are not necessarily the codes that appeared most frequently: some quotes are interpreted as crucial even if they are mentioned not very often and this has also to do with sticking to the threefold conceptual lens of ambiguity, politics and democratization. They are the following:

Confession
(8 relevant quotes)

References to confessional speech, things they believe in and stand for. Often comes together with style figures such as “really”, “just” or “very much”. These utterances are not factual but are in the sphere of conviction. At the same they are brought forward as obvious – it has a rhetorical function as well. It has also to do with social imagination: it should and can be different, though it is not exactly clear how. It is commitment to change. Furthermore, it serves as a way to connect to something overarching, beyond self-interest, a kind of transcendental principle.

Recognition or denial of ambivalence (29 relevant quotes)	References in which the ambivalent character of organizing is pronounced, or denied, simplified. It is about descriptions of organizing that acknowledge that the constructions to describe the organization in the boardroom should not be confused with actual daily practice. At the same time, they understand that they need such constructions.
Formula of change (a formula in the sense of a kind of spell, an incantation, something general that can be applied to merely everything to solve problems) (6 relevant quotes)	References to utterances that render change good or important as such. Change as a goal in itself.
Formula of dialogue (13 relevant quotes)	References to the idea that a good and open conversation, called a dialogue, is very important and potentially solves all problems.
Formula of new ways of organizing (6 relevant quotes)	References to 'new forms of organizing'. Often is about a flat organization with responsibility low in the hierarchy: professional autonomy, simplicity, network organization. The 'new organization' is a political term: it needs to battle against old but pervasive ideas of organizing. It is a formula in the sense that the use of the term already and immediately presupposes a position, without being exactly clear what it contains. It is a general concept to which different meanings and interpretations can be addressed. Normally, you can't be against this. The same is true for 'new supervision'.
Formula of strategy (3 relevant quotes)	References to the necessity to adapt to the future, while the future remains elusive. It is about choosing between certainty and development and change.
Formula of accountability (18 relevant quotes)	References to the idea that the problem of decision making can be solved by appointing responsibilities. The personalization of responsibility: holding people responsible, even though decision making is often quite complex.

Formula of values (24 relevant quotes)	References to general values as being obvious, known or clear. The question of what values we pursue is the most important question.
Formula of values – autonomy (13 relevant quotes)	References to values that have to do with the individual autonomy of patients or professionals. This should be enhanced.
Invisibility (10 relevant quotes)	References to the relative invisibility of the supervisory board for the organization. Marking the distance.
Paradox of the general and the concrete (42 relevant quotes)	References to the paradox of the general and the concrete, foreground and background: the concrete can only be understood in the light of the general while at the same time the general can only be understood in the light of the concrete. A typical supervisory problem due to its relative distance.
Paradox of decision (12 relevant quotations)	References to the idea that you can only decide on things that are undecidable. Decisions are being made in contingency, and always involves its counterpart (we do this, not that).
Paradox of control (28 relevant quotations)	References to ideas that controlling activities may make things worse. Controlling is only possible if you are willing to be controlled yourself.
Paradox of formal/informal (12 relevant quotations)	References to a paradox of formal and informal. Often, the informal aspect (the human, the pure, the good conversation) is deemed more important than the formal aspect, while at the same time supervisory boards act from a different formal hierarchal position.
Practical wisdom (15 relevant quotations)	Reference to a form of practical wisdom, often referring to things such as sanity, common sense, sensing, gut feeling, experience, moral compass.
Style figure of the metaphor (18 relevant quotations)	Use of metaphors to explain the identity, practice and role of the supervisory board.

Second order observation

References to the role of the supervisory board that it should look for blind spots or should enlighten the case with multiple and changing perspectives. Often refers to utterances of reflection, critique, investigating.

These codes show that I am looking in the discourse for language that entails ambivalence and paradox, while at the same time this ambivalence may be absent due to the use of formulas, general notions or values. Borrowing from discourse analysis, it is also useful to look at how language is used, for example in style figures. As became apparent, especially the use of metaphors appeared to be important, as well as an imprecise way of talking – using a lot of words, circling around, taking back words – up to becoming really sloppy sentences. For me this is important as it highlights the difficulty of speaking about what supervisory boards actually do.

Validation took place in two instances. First, as the dialogues followed one another with my input from the previous dialogue, I was able to validate the material with the participants themselves. Second, validation took place with discussing and sharing the material with the two supervisors of this dissertation.¹⁸¹

Limitations to this approach

There are some limitations to this approach. We know very well that such a dialogical approach does not overcome the difference between ‘theory in use’ and ‘espoused theory’. The way this interpretative analysis is set up, makes it difficult to find ‘theory in use’, as I only ask them, in a reflective stance, to think about the theories they think they use, or in other words, espouse. Still, I believe, in order to locate tensions that they experience as meaningful, the form of a dialogue has the advantage of getting them into a reflective stance, as a second order observance, something that is more difficult to locate in their daily routine. This implies however that my findings about how these supervisory boards speak about and reflect upon their practice, does not necessarily reflect their actual sayings and doings in practice, or at least there may be some ‘noise’ between them. This also means that I do not – cannot – make any normative or empirical claims about whether they are doing a ‘good’ or a ‘bad’ job. Instead, I focus on the espoused tensions (implicit and explicit) that I interpretatively find in their reflective discourse.¹⁸² The tensions I find contain in this sense no ‘evidence’, in the representational

181 As noted in the acknowledgements, the second supervisor back then died on the 10th of June 2020.

182 Argyris and Schön, *Theory in Practice: Increasing Professional Effectiveness*.

sense of the matter, as discussed in the introduction. Still, the located tensions may have some exemplar validity, and the generalizations I propose are of my own interpretation.

The inherent risk of the heuristic and open approach that I follow might be that I overinterpret the data or overlook meaningful linguistic relations. In this research, it is however not my aim to perform an in-depth analysis of these boards and their practice, but rather use the dialogues as exemplars or vignettes to show how some tensions may appear in supervisory practice. This justifies the open and heuristic approach. Also, in my analysis I am not looking for any normative or empirical claims about the quality of their practice, or about ways for them to improve or change it.

4.4 Results and provisional interpretations

4.4.1 Figured world 1: a matter of knowing what goes on

The question of information appears to be a vital and difficult one. How can one know what goes on in the organization? How do we know that what we know is what we are supposed to know? What are we supposed to know? Adherent questions arise frequently regarding the relative distance the supervisory board takes in order to understand what goes on. These supervisory boards are convinced that they need to go beyond mere reporting information: they need to make contact with day-to-day practice, visiting openings, parties, take every formal opportunity to speak informally with clients, personnel and managers. However, despite these activities they feel that there is more that they should do.

For this analysis I primarily used the codes of paradox of the general and the concrete as well as the code of practical wisdom. The first code entails the problem of knowing what goes on in the organization from a distant perspective. The second is about how they try to find language that goes beyond objective or technical knowledge. This leaves us with 57 potential quotes. In the argument below I selected the most salient and exemplary quotes. What I want to show with these quotes is that they do have an idea about what it means to have knowledge about the organization, but that they have trouble speaking about it as it is so intangible and fragile, covered in uncertainty. Using words such as experience, gut-feeling and the like is a way to regain certainty. In this figured world I simultaneously include both organizations, as this material is very similar in the two supervisory boards.

Respondent Y: *I do indeed think that it does matter to do a site-visit, just as we are here on location. I am not merely here to acquire information, no, I am here to observe if that what I have heard from the executive board, if that what I hear and see from employees, how things go at Y, how I feel and experience this. To me, this is something totally different than an alternative for information, like: I cannot get it from a document, I am going to get it from the shop floor. This is, anyhow, not the way I look at it.*

Remarkably, we note here not only the problematic of part and whole, paper and practice, upper and lower hierarchies, but also that of *sensing, feeling and experiencing*. It is not considered to be a mere cognitive matter. On the one hand the respondent argues that s/he is going to the shop floor to look for coherence in the words of the executive board and daily practice. But s/he immediately argues that this is not information, comparable to documented information. Hence, it is and is not information at the same time. Calling it information totally underdetermines the activity, it seems to suggest.

Another respondent, from the other supervisory board, distinguishes between cognitive knowledge and gut-feeling, based on experience:

Respondent X: *Yes, also just your own life experience. At least, I find this very important. We all have been around a couple of years and have encountered things in your work which you store in your head. That is the knowledge you collect. People then say: you have a bag in which you store your experience, and you take it along. At a given moment you just sense that something important is going on. Isn't that what R. said? Something goes wrong and your head says: I don't see anything. But your gut says: something isn't right. If your gut says this, then this is because of experience. At least, for me, how sensitive one is. You just need to talk about this and take decisions based on this. And this is the case in our board.*

Hence, it is argued that sometimes you know something without seeing it. It involves experience and sensitivity. Understanding the organization, the quote seems to suggest, is not about processing clear-cut information, making calculations, but rather understanding what goes on underneath the surface of information. The respondent tries to tell something about the obviousness of the non-obvious elements of the organization.

Another respondent from the same board argued that visiting clients or employees was of great importance, although she could not reason why and was looking for words:

Respondent X: *It absolutely adds value. Sometimes it is difficult to have a conversation with a client, you can imagine, but I find this fun and good. So, both things are important. (...) For me, it is important to just look in someone's house from the inside, to experience how it looks, how it smells, that it is clean, for example, that the client is proud to have his own room or keeps his own apartment. Also, the way in how the professional is welcomed if someone opens the door, that kind of things; it's all part of it. If we don't speak about 'ratio', but, yes you experience, I mean, what you see is more than what can be said.*

She drove this to the extreme: if the lifeworld of the client and professional is what matters, then what does the supervisory board do to understand this:

Respondent X: *I think this is truly a strange discussion that we are having, internally. What is a supervisory board anyway? (...) It is about the clients, their parents, and a person that tries to add something prudent to that. Isn't that the case? (laughter). That those three actors have a feeling that good things happen. That is what has value, that people can live lives that matter, that are humane or something like that. Yes, we have added words to this, yes, in that little piece. What do we do somewhere in top of the organization, like, societal accountability, or securing societal value? (...) I mean, this is a weird conversation, in itself a weird conversation. (...) That you look at a group of people (supervisory board) while the place where it actually happens is totally absent. How meaningful is it what we are talking about?*

We can plot the problematic of knowing what goes on in two directions. There is a tension between part and whole; the supervisory board needs to make up its mind about what goes on in limited time and bounded space. It therefore needs a 'birds-eye-view'. But this can induce this feeling of little 'meaning', in the concrete sense of the word. Therefore, they think that going into parts, small practices, gives you some, albeit ambiguous as to what precisely, information about the whole. Going into parts also serves, in my words, a kind of leadership function: giving an example, showing that you are interested and moved by concrete care practices. The other direction is the tension between cognitive knowledge and gut feeling, intuition. In order to understand the organization, you need some rational discourse, for example on strategic, financial, quality or safety measures. However, when push comes to shove, it is not cognition that appears to matter, but a kind of tacit knowing, a gut feeling, an intuition, based on professional, administrative and life experience.

In a sense, it is argued, you need to make ‘threads’ through a vast variety of ‘information’, which sometimes can hardly be called information, while you also have to account for power differences and social issues of hierarchy. A respondent of Y argues:

Respondent Y: *Well, let me explain with an example I encountered as an executive board member elsewhere. My supervisory board told me: well, we want to gather some information regarding your actions from within the organization. I told them to do what they think is right. But all of my management members told me that they don't want to do this again, for we do not want to go negative behind your back, our working relationship is too good for that, and if we have any critical points for you, we point it to you directly; what is this madness? So, do you understand, what is said and what is not said in such situations? They are pretty thoughts and systems, but you cannot blame someone for not gossiping about his or her superior with someone who is the superior of your superior [laughs]. So, it doesn't need to tell you what it says... They are impressions and we have to collect and put them together a little.*

Notice also how this respondent is struggling to find proper words – even though he apparently likes to teach. He uses an example from practice elsewhere and tries to pinpoint the kind of knowledge that is required, and the social issues that come along.

One more example, in a discussion about whether the supervisory board should read reports from staff meetings, one board member argues:

Respondent X: *But reports themselves, you know, if you don't know the context, I feel not obliged to go and read it, I think: oh, do I also need to read these reports, but I don't know the context, so I do not know the conversation, the underlying arguments, why it is discussed, what it means. So, I think it is meaningless. I find it much better to distil dilemmas from it, and then bring it here (boardroom, red.) and talk about it, like, well, this is going on, how do you look at it? But then you have a conversation based on a dilemma, a theme, a development. But reading reports on my own, for me as a supervisory board member, that would only raise a lot of questions. Of course, this is possible, but then..., suppose I am present in such a meeting..., that I would..., then it has meaning since then I read something and have questions about it, and I think: I am going to take this back to the boardroom, for I am curious how it..., how this conversation takes place and with what issues it deals. But reports without context, eh...*

She is struggling with this issue. She understands that the report is only meaningful in a certain context, but that it is impossible to incorporate every context in the boardroom, while at the same time she acknowledges that reports may have some value for further discussion. She identifies a dilemma: an important part of the supervisory job is about reading reports. She at the same time believes that you have to know a specific context in order for a report to be meaningful. But as a supervisory board it is impossible to know every context. So, it appears she transposes the reading to a conversation: as long as there is a conversation about dilemmas in the practice, she feels she can do her job as supervisory board member. Hence, the argument seems to be that conversation about dilemmas tells you more about an organization than blunt reports. Apparently though, reading reports is often the actual practice of supervisory board members.

Supervisory practice, the discourse shows, is very much occupied with understanding what goes on in the organization, far beyond mere information. Supervision is taken in this sense quite literally: it is about getting a vision from an outside position, from above. The value of knowing what goes on has instrumental value though: it gives input for a meaningful dialogue or discussion with the executive and supervisory board in order to make or approve better decisions.

The language is about sensing, getting a feeling, even smelling and tasting, and the practice involves zooming-in to and zooming-out of the organization. However, it remains ambiguous what kind of knowledge that takes, they have trouble speaking about it. It is unclear what investigated parts say about the whole, and what the whole says about its parts, although they understand that they are related. They expend many words on this, and I infer that this tension is very meaningful to them.

4.4.2 Figured world 2: (a)political practice, values and trust

The second figured world is that what I call a perceived (a)political practice, values and trust. That is, they (both supervisory boards) tend to dismiss the relevance or importance of any relation to political action (they perceive this as cunning), hierarchy, debate, conflict and power differences. Instead, their speaking together is very harmonious, is about consensus, dialogue without power, without interests. It's about values and trust. This also implies that they shirk away from words such as 'control'. On the other hand, though, there are some specific ways in which they think society is a good society, how they try to influence this, and hereby lines are drawn between 'we' and 'they', 'old' and 'new'. In this figured world, I distinguish between the two supervisory boards, as they have different views and issues.

The codes used for this section are 'formula of change', 'formula of dialogue', 'formula of new ways of organizing', 'formula of values' plus 'autonomy' and the 'paradox of formal/informal'. This leaves us 74 codes. The quotations used below are used as exemplars of how respondents in the supervisory boards look at the situation. So, for example, the first quote I used below, about the negative sentiments adhered to the word 'politics' is something that occasionally returns, in both supervisory boards; they really feel a need to distance themselves from it. For argument's sake I pick one or more quotes that pronounce this in the most meaningful, edgy or concise way. Sometimes I analyse what happens in the supervisory board without adding specific quotations, but which can be related back to the codes mentioned above. In this figured world, the supervisory boards appear to be very different. Therefore, I will first relate to the figured world of X, after that of Y.

Organization X

In a debate on politics in one supervisory board one member argues that politics can be useful, acting strategically, but it can never be vile – 'below the belt'. But very soon he is contradicted by his colleagues:

***Respondent X:** Politics easily has a negative connotation. In the early days I used to say: yes, I cannot go into politics because I am not allowed to lie. Eh, politics immediately has..., when you speak about politics it is immediately negative. Emotionally.*

The director adds:

***Respondent X:** Well, that says a lot about the definition of politics, and the negative connotation. So, once you name it like that, that's fine by me, since you want to add something to society. (...) I would never call it that way. I would remain pure with, with eh..., if you regard this as value, like, try to do what you need to do, and involve others. That's a way to look at it.*

Yet another board member argues in the same discussion:

***Respondent X:** But maybe there is a difference that, that, that you act in such a way to add something to a positive movement for good care. You are not occupied with your own position in that political world. That is an important difference, that if you truly act political you have ambitions to win and then... But you act from inner passion, from values and your vision on care.*

The equating of politics with lying is quite blunt. He seems to want to distance himself from the concept, and implicitly also argues that he never lies. The executive board member tries to turn it around: although he does not want to use the word politics, he still has an idea what it could mean: it is about doing something that is needed together with other people.

The third quote adds another dimension: not only is it about getting things done together that are needed; the intention matters as well. Politics is associated with ambition, zero-sum, while her view on what brings about a good society or organization is related to the intentions of passion (a fashionable term), values and vision – it is about not only appearing to be good, but really being good. A high moral standard.

Hence, this supervisory board appears to distance itself from any self-interested politics, but on the other hand admits that it wants to ‘add something to society’. As will become clear, they draw lines between good (new) and bad (old) management of care, and that they create a strong sense of community, of a ‘we’, by means of shared values. What is noticeable in their use of language is that they use a lot of moral language, and consequently claim to have a high moral standard. To give some examples:

Board members should not be self-interested; they do everything not for themselves but for the client and professional. Traditional control practices are morally bad, both principally and consequential: they are often based on distrust, and trust is for them a value in itself. Moreover, it perverts the possibility of good care, results in the opposite it wants to achieve. Dialogue as a moral term, in which power should play no part, which is harmonious. Everybody should be and can be ‘open’, transparent about how they think and feel. There are no taboos, only trust. Values are named over and over again, in the sense that they share them, and speak for themselves.

In the board and organization of X they follow a philosophy of responsibility. They argue that in many organizations people shirk responsibility, pointing to other people, especially ‘upwards’ in the hierarchy. Here it is argued that personal responsibility is key for good care, and all the board has to do is make responsibility possible. In my view, in the way they use this language, a political notion pops up. Not only in the sense of a certain conviction about good organization (making responsibility possible), but also in the sense of ‘responsibilization’: ‘burdening’ employees with responsibility:

***Respondent X:** But let me put it the other way around. Again. The last couple of years I have been emphasizing this. (...) Eh, I think that people should not be able, and are not allowed, to withdraw from*

their responsibilities. (...) This means that they must use their power, for practicing their profession, by definition. The words power and responsibility are closely intertwined, isn't it?

Another board member adds:

Respondent X: *Since responsibilities are embedded at the lower levels of the organization, people also feel this way. Some people experience this as oppressive and they won't stay. So that's also a fact. I think that's fine. If you don't want that, then you should indeed leave. Eh, with that, you may also assume that if people choose to stay, they take responsibility, that they want to take up this share of responsibility.*

To illustrate the relation of 'responsibilization' and values, they come up with a story about an employee who has stolen a small amount of money (moneybox of a resident):

Respondent X: *This is going on for a while, a finally she has been caught on camera. And, eh, she has been working for us for years, and no one ever noticed her as such. Eh, next, eh, she was fired on the spot, so, eh, since one of the core values, eh, is severely damaged. So, trust, and in this case stealing money from a client, eh, and next, her lawyer argued that her dismissal was not proportional, as she stole just a couple of euros [laughter]. Eh, that was, I was truly excited for what the judge would say, like, this cannot be happening? So, we have, like really, brought in to uphold, that violating such an important value is unnegotiable [assenting noises]. So, like really, that there is a zero-tolerance behaviour. For this woman just had a divorce, she was going to move with her children, and this became impossible due to her dismissal. That was brought in as argument. (...) The judge judged in our favour. But, by thinking this way... don't... values, very important values are, in that sense, we can evaluate them, but they are unnegotiable.*

The way this story is told, I believe, is in different respects an exemplar for this supervisory board. The story itself shows their moral standard, but also the way in which they want to, in my words, 'control' this. They execute a 'high trust, zero tolerance' policy, under the argument of 'what you permit is what you promote'. Employees are given many responsibilities and 'ownership' over their work, and this is where they are generally admired for. This is enforced by 'responsibilization'. However, they do not mean to scare their employees off, or be coercive in any sense, but to 'enforce' responsibility

by a sense of ownership. They find it morally just and administratively effective. Moreover, they find it important that the way they speak about this type of governance contains no language of politics, hierarchy, control, systems, power, and the like. By this, they want to show their position, where they stand in the debate on organizational effectiveness of care. They work with the 'lifeworld' of people, while many other organizations centre the 'system world'. This also gives them the possibility to draw a line between those who do use this language (and practice), and those who do not. A fierce taboo applied to a specific kind of language, namely the traditional language of quality management, appears to be going on.

Moreover, the organizational values seem transcendental for them, that is, in this particular case, they all find it more than reasonable (by making assenting noises in choir, by laughter) that the personal circumstances of this woman, let alone the proportionality, do not weigh at all and by no means as opposed to the importance of the organizational interests and values, even though they have trouble explicating these values.

Third, what is important to note is the espoused unity of the supervisory and executive board. By means of laughter and assent everybody shows that they absolutely approve this policy and opinion, that there is not a moment of doubt or disagreement.

Fourth, the way the respondents speak about values is surrounded with 'sloppy' language: half-formed and choppy sentences, breakdowns, repeats, thinking time and noises, supporting power terms, and the like. Partly, this is common to spoken language of some people, but partly it also shows that they have conceptual difficulties speaking about the matter.

Similarly, this supervisory board also rejects the language that adheres to countervailing power or contradiction, in the name of trust and openness:

Respondent X (A): *But then countervailing power becomes a central issue, like... But it is self-evident that if you don't agree with something, that you speak out. This is something totally different from being contradicted, this is what I see. You need to organize contradiction in the supervisory board, he? I am totally allergic to this.*

Interviewer: *Why?*

Respondent X (A): *Well, because you need to organize a contradiction. I just want there to be a stage, where this is open. That is where it belongs.*

Interviewer: *Alright, but can you be a little more precise?*

Respondent X (A): *It has become a certain purpose on its own. That everything needs to be spoken out. I find it naturally that everything is spoken out. That is something totally different.*

Respondent X (B): *It is about dialogue. That need not to be contradiction.*

Respondent X (A): *I find it strange to say: you need to take care of... Prominently, at a certain moment, Femke Halsema¹⁸³ was speaking about supervisory boards and the organization of countervailing power. That became such a big thing, that you start to think, yes, what is this all about, really? You need to explain this to me.*

Interviewer: But you say that this is because you are used to it?

Respondent X (A): *I think you need to work for it, the good and the less good. That there is dialogue. That, naturally, it is possible that everything can be said.*

Speaking out when you don't agree is something different from being preoccupied with contradiction. In their view, supervisory practice is not about contradiction, checks and balances, but about togetherness and shared responsibility. The harmony they apparently show suits this. But, and this is an important but, precisely because of this it is possible not to agree and to speak out. You cannot start with the contradiction – that undermines trust. They also argue that this must come naturally, that it should be a given; you cannot organize contradiction if it is not already there. If it is already there, you do not have to organize it. Openness is, so it is argued (it is 'self-evident'), both and at the same time an *is* and an *ought*, and because of this, you don't need to organize it.

The denominator for this perspective is dialogue. In the coding process I have called it the dialogue formula: it serves as a way to compress and suck up everything that is related to an attitude of trust, openness and true conversation about meaningful things. It is not always clear whether this is a processual ethical stance, or whether it is a pragmatic way to contain complexity.

Apparently, even if this is indeed the case in this supervisory board, that there are no taboos, that there is no strategic silence or action, a 'choosing of battles' – which I highly doubt, as I had already noted a taboo related to a

183 Femke Halsema wrote a report with a government committee on governance practices in civil society: Commissie Behoorlijk Bestuur, *Een lastig gesprek*.

certain type of language – then this can be no general claim, even though they appear to make one, as they well know that the coincidence of the *is* and *ought* of dialogue and openness is rare, or at least not common, in supervisory boards across the country.

Hence, paradoxically, the figured political world is in fact very strong, even though they reject this, at least as language. Not only is their sense and creation of a ‘we’ and ‘they’ very strong, they also are explicit about their ways of governing and controlling values. But, most important, they use a very strong moral language, an assumed coincidence of *is* and *ought*, which seems to frame their board as morally perfect, even though they openly feel uncomfortable with such a notion, and truly struggle with this; they don’t want to be complacent. Here the *is* and *ought* seem to diverge: they feel that they ought not to be complacent but do experience complacency in some sense. Precisely this moral language creates taboos and marks an inclusion (of those who speak the same language, share the same values) and an exclusion (those who do not) – in fact, in the first dialogue it is even mentioned that some of the board members can not envision being a colleague of someone who is member of a particular political party in the Netherlands. Indeed, they appoint members on the basis of shared values. This issue becomes clearly visible when a trainee in the supervisory board is using ‘old’ language to make a statement. He shows some doubts about the ‘doctrine’ of trust:

Respondent X: *The amount of trust is big here, as I experience it. Well, I do not know if this is desirable, so to speak, or if that is good, but I cannot give a final judgment on this. But trust is spoken out very often.*

The executive board questions his doubt and is starting a kind of ‘inquisition’, and other board members join in. The young trainee, who obviously feels cornered and uncomfortable, responds:

Respondent X: *Eh, well, but, yes, I am, but alright, again, I have not figured it out quite yet..., but healthy distrust, or that you sharpen one another, that ehm. Sometimes, it seems to me, ehm, as it is spoken out so explicitly, like, having mutual trust and all, that the acuity is lacking, that a sort of, yes, very cosiness...*

This discussion (certainly not a herrschaftsfreie Diskurs) goes on for a while, and the trainee gives an example he saw in the organization:

Respondent X: *Eh, yes, with one site visit I saw one team clearly overworked, really busy, and then the utter good and positive story about X, what is there, don't get me wrong, I mean, let's take that... you know, also for me, is solid like a rock..., that positive story tends to outcry that one team, as they have a feeling like: 'hello you guys, what are we talking...', this, eh... Almost like this may not be said, since they are a part of X and we are supposed to be successful.*

He argues, although he takes it back, that the talk about values is so pervasively present, that board members, and even professionals themselves, might deny imperfect day to day practice. Besides this remarkable notion, he feels obliged or forced, so it appears, to constantly retract his statements. He does not want to place himself outside the group and dominant opinion, he wants to be part of it, but still has this deviant notion in mind.

This comes back one more time a little later, in a pretty 'confrontation' between a professional and the supervisory board. Different board members have argued and stated that they always 'feel' and 'sense' the presence of values, like trust and openness, all across the organization. Also, by the way, they have said that they understand that the organization is never perfect. But then this professional jumps in, almost aggrieved, joining and helping the trainee:

Respondent X: *I do understand what you say [looking to the trainee]. I am very much triggered by what you all say about that you feel the values of X like this. But I don't always feel it. As I really believe that we, ehm, at least where I work, I cannot speak for the entire organization, I have much work to do on this part. [understanding murmuring]. Eh, so that makes it different, you say you feel and sense it everywhere, and then I think, well...*

Immediately after this, consensus is sought by the parties by arguing that the critical attitude she demonstrated is precisely what they feel and sense as values. The critique is reversed as a confirmation of their own perception. This might well be true and at least appears to be very natural and common for this board as well as for the present employees. The question is, however, whether a more fundamental issue has seen the light of day here, namely that of a discontinuity, a disruption or disturbance, between how things look from a distance, and how things are on the ground. Or, in a different fashion, the specific way in which general and abstract values are at work in everyday practice. That is, the way in which general values are relevant and present on the one hand, and absent, hidden, pushed back or irrelevant on the other. This raises the major question whether and how general values can become

a blind spot for understanding the ambivalent practice of care. It furthermore induces the political question of how values and administration, 'steering with values', a practice of governing and being governed, relate.

From a political angle, in their consensus, the question of *difference* pops up. During the dialogues, they question to what extent it is favourable or good that they all share the same values, and that there is so much harmony, laughter and applause. The answer is obvious for them, beyond question: there are different people at the table, with different personal and professional backgrounds, that is enough, and it works. This issue of difference and/or homogeneity might stipulate importance tensions for supervisory boards. To what extent is representation relevant for a supervisory board? Or is it indeed a matter of expertise and experience, combined with an orientation on values? What does representation, as a democratic idea, mean in a context in which the supervisory board appoints its own members?

At X, they do not need to enforce conflict or difference of opinion in order to fulfil their role as 'sparring partner'. To what extent is difference of opinion, of background, or values preferred? One board member states:

Respondent X: *Yes, we also said to each other, also in the recent formal evaluation, like: is there enough incentive? And, ehm, is it not too much of the same? You need to remain critical towards this. Do we not agree too often too easily? So, are we doing this right? We said this to each other. And if you move one step forward and say: yes, also in this the supervisory board needs to have a role and add something. And if this is not the case, everything goes fine and since he [the director] does everything, ehm, well and we think: what are we going to talk about, he? You could say, well, as long... I think that if we would be absent for a year, and R. [the executive board] stays on his seat, then nothing changes at all. Then it will just go the way it goes. That is what I say. I think it has to do with something you add to this, that you can be of importance to one another. And then we are constantly speaking about, ehm, what do we do? What do we do to add meaning? To bring added value? This is where our conversation should be about. What do we need to do to add this value?*

Organization Y

If we turn to look at the other supervisory board, Y, a different world can be figured. In the beginning, they also aim to depict a *common* world, based on harmony and values. The language that surrounds this talk about values is that if an individual board member mentions it, it is mentioned as a 'we' form:

Respondent Y: *What I find typical for our supervisory board is that we, I think, are really clear about sharing the vision of Y. The fact that we find it important that clients can live their lives, that they can have control over their lives. That is, I think, in each of us, so to speak, also in convictions and values, very much present.*

This speaking in terms of 'we' circles around, and also imposes opinions on one another, tempting the other to accept that statement:

Respondent Y: *I think we all share that there is something special going on what does not take place in any other mentally disabled care organization.*

A specific ideal is formulated: that clients should have control over their lives. It is not quite clear what this means in practice, but it is an undiscussed ideal – it is seen as speaking for itself.

As the dialogues evolve, it becomes clear that they face several issues. In fact, it seems that with them there is no perceived coincidence between, what I have called, *is* and *ought*. They appear to know very well how things ought to be, in their perspective, like trust, openness, values and the like, but that at the same time there is a major issue of trust between the supervisory and executive board. During the dialogues this is acknowledged, but also at the same time trivialized and apologetically pushed backwards. In the first dialogue, they talk about a management philosophy, drawn up by the executive board, which the supervisory board has yet to approve. In this document, it is said that they work on the basis of trust and results. A board member with a financial background argues in a slightly irritated way:

Respondent Y: *Look, if you think trust is 100% important, there is room for nothing else. I am also of trust, but I am also of checks and balances. And then I read this document, and I notice many things of the management philosophy that are about looking to results, we are looking to results. I think, what the heck! This, about precisely this, I have the feeling that I am not allowed to talk! But now it is here on paper, so apparently, we are allowed to. Therefore, I can consent with [her] confusion, I can absolutely understand it, as I clearly see that it is there in the document. The moment we are speaking about this in concrete terms, however, it feels different than it is on paper.*

The point is that the financial perspectives are not good at all and the supervisory board seems to lose grip on this issue. In fact, they argue, the executive board prefers to talk about quality of care rather than about

financial issues. Within the supervisory board this attitude is also present. One supervisory board member, in relation to the quote above, with a specialty in financial matter, feels that her critical questions are being pushed back, that she is not allowed to ask such questions in the name of trust. She feels that the supervisory board members who are in the quality committee have much easier access to the executive board and the organization than she has. This marks her irritation, even agitation and insecurity. A coinciding point is that since a couple of years the organization has implemented an organizational structure based on 'result responsible teams', implying a kind of self-organization – and indeed a lay-off of staff and management members has occurred. But within this new structure, management control information appears to be lacking, at least that is how the supervisory board sees it.

Hence, almost the entire first dialogue is spent on the question of what trust in their situation means. They want to be critical, in fact they are, but not, rather in a suppressed manner, since they at the same time seek and desire consensus and harmony all the way through. They say they want to be sharp, edgy, but the way this is expressed, the sharpness seems absent, taken back. This quotation illustrates this, especially the way in which this respondent is often hesitating and struggling with words:

***Respondent Y:** That conversation, so, that you, ehm, are not only applauding audience, then I think, like, go find yourself someone else in this supervisory board. So, like, that you need to ask questions now and then, to contradict, like, well, we don't agree. Next, on a certain moment, you must also... it does not need to be peace and harmony, like everything's cake and sunshine... but what is then needed? That is what I would like to..., well, we are now in a new constellation, we are appointing a second executive board member, ehm, the supervisory board is new, but what is, yes, to which..., yes, what do we need to do with each other? What is needed to..., well, that indeed such a climate is present that a director... And perhaps we become anxious that we..., but perhaps they come with many issues out of the blue... And from the other side, that you can also be at the front of processes... Yes.*

She seems to understand that strong countervailing power is useful or necessary, and that it does not necessarily contradict trust. At the same time, though, she hesitates in her communication, as if these were not really her words, that she feels sorry or embarrassed to look at things this way. A kind of discourse has evolved between (and within) supervisory board and the executive board about trust and quality of care, that contradiction has become

a taboo, a sign of distrust – or at least, so they feel. On the other hand, this board also strives for consensus and harmony, they really seem to push away, trivialize, but then also pull back from, the ‘fact’ that they have an issue of trust. This results in this subject becoming taboo when actually speaking with the executive board member and results in discussion among the supervisory board members when the director is absent. The quote above is an attempt to break with this taboo, but her going back on her words shows how much tension the ‘taboo’ creates.

This is expressed in the second dialogue, when a new chair of the supervisory is installed and present. He ‘lectures’ the other board members:

Respondent Y: *But I actually understand that the discussion is in the wrong place, I am getting more grip on it the way she explained it, there are actually different layers in trust. There is a first layer like: I need that to understand to know what is best for the company. Below this, there is a layer, which you lifted up, like, as it were, in the formal questions there is not enough trust to be heard. That is a different matter, and you need to make this explicit if you want to have good relations, but I find it difficult to see this in detail so soon already, I am just working on my first round, but I did sense, in the first meeting, that this tension needs to be worked on, for that is not good. (...) But I find it very good to observe that there are different layers in there, and that you should not mix them up, as you are then keeping up appearances. (...) Are we playing a game, or is a party playing a game, or are we just talking in all openness, and yes, that on certain moment someone has better arguments that you understand, than you will work this out in discussion.*

Later on, he explicitly refers to the ideal, which he thinks should be natural practice, of Habermas’s *herrschaftsfreie Diskurs*. Everyone always naturally should be laying his or her cards on the table, and the best argument will win. Figuring out this best argument, seems to be for him the work of the supervisory board. If this is not the case already, then this should be resolved, and that is his mission, so it appears. Compared to the other board members, this new chair shows little doubt about the way he looks at things, and he seems eager to break through the perceived impasse of the relation between executive and supervisory board. He is careful to judge the situation, since he has only been here for a short time, but on the other hand is very confident about how it should be. For him, it appears not so difficult to reach this point: ‘it needs to be worked on’. Furthermore, although he believes in the power of the rational argument, he has gained knowledge about the situation with ‘sense’.

Another political angle that becomes visible in the dialogues is when there is a discussion on 'democratic legitimization', a question brought in by the interviewer. They immediately absorb the concept, like a sponge, as they feel it has some meaning, but it remains unclear how they view it. In the end, they seem to reduce it to a question of being accountable. A respondent argues:

Respondent Y: *If you are talking about democratic legitimization, then you have indeed the institutions, but do they fit with Y and 'living your own life' [Y's mission statement] and the steps that have been made to reduce management layers. And perhaps we have, as a supervisory board, to find different means of accountability, like making a pretty annual report, but maybe we'll do..., for example a conversation or a meeting in which you say, like, we did this and that, that would be possible, you know. That is, yes. I think a little like: does the way we are accountable, is that the ideal way to do it?*

The new chair responds that within the structure of the supervisory board in a foundation, which is the case in most Dutch health care organizations, the democratic question is less important than the question of how to avoid the executive board from becoming omnipotent. For him, it is not a problem that the supervisory board has no fiduciary accountability to shareholders or whatsoever. He argues that the democratic question is inferior to the general point of checks and balances, namely that the supervisory board's goal is to pull the executive board out of its daily routines, judging if the decisions are taken wisely. This is, I believe, a common argument and is related to the question of the visibility of the supervisory board. This chair argues that the supervisory board should hesitate to offer proactive accountability towards stakeholders, as this is a task for the executive board. If you need not to be on the stage, then you shouldn't be there. Not everyone in the supervisory board is convinced and one member sees an important tension in thinking about how external stakeholders can be involved with policy making of the organization, albeit stating it slightly incoherently:

Respondent Y: *I wrote down for myself like, democracy is also about how you deal with minorities, with different and opposing voices. For in the end, you need to move on, otherwise you are stuck on the roundabout, and, ehm, in the end, like, how do you deal with, well, lalaladelie [awkwardly singing], do you have it, and how do you acknowledge it. But do you say like: well, I understand you want it differently, but we still continue to move in that direction, but what do you need?*

The tensions between considering perspectives, listening to what people have to say or want, which interests are present, leads to a pressure for you to take into account all of this, but in the end, decisions need to be taken. It appears that this argument serves as way of confirming the preference of their governance model: democracy leaves you stuck on a roundabout. In contrast, decisions can be taken freely by the supervisory board, that is, there is no body, or at least not in common practice, that can formally reject their decisions. Therefore, checks and balances are the most important source of democratic elements, and they must be maintained and nourished by the supervisory board itself, and thus will constantly need at the same time a ‘first and second order observation’. As another board member argues:

Respondent Y: *How are we here dealing with contradiction? Like, if someone says: I don't want to hear what you have to say... Yes, that is where democracy vanishes, I believe, so that is a very important point. (...) Those are things that have to do with good conversations, like: yes, do we do this, if there is a conflict, is the conversation on the table? And I believe, looking at a supervisory board, like, that is absolutely part of it. But for me this would be a point for us to investigate.*

Hence, all things that have to do with democratic elements must come from the supervisory board itself, which might be a little undemocratic. Therefore, they acknowledge this tension and paradox, that you need to constantly reflect on the practice and checks and balances that are in place. The respondent here states that conflict is possible, but that this only makes sense if it is on the table. She admits that there is work to be done regarding this point.

What I found to be central in this supervisory board regarding trust and values is that they articulate a permanent need to *morally justify* their distrust or doubts; as if it should not be there. This becomes clear in an exemplar statement by one of the supervisory board members:

Respondent Y: *Can I come in between? For you now tell me your perception, and that is lovely, for we are speaking here about our own perceptions and insights, about who we are. If you talk about trust, then for me a very important aspect of it is to unburden. And this is for me: as long as I as supervisory board member do not worry, in my role, that some things are perhaps not good executed, I have non but trust. But on the very moment that for me, and that also truly a feeling here, he? [pointing towards her stomach], that I then think: oeh, I get the jitters in my stomach; is this going well? Then worries*

arise. And I think that you are allowed, as supervisory board, to ask this to the executive board. Of course, we have to facilitate each other but to what extent can you also contribute, or we together have to contribute that we both are unburdened. And that for me sounds far less negative than pushing things or whatever, as it has a purpose, namely the continuity or doing good for patients, that it is the purpose that you worry about.

The moral justification of distrust is formulated as that it contributes to the overall purpose of the organization. This respondent needs this justification since there is a permanent and pervasive talk about the goodness of trust and togetherness. Emotions are installed (jitters in the stomach) to make the point to show how much the respondent cares. She tries to find an argument to legitimize criticism but feels that she needs to walk on tiptoe. The point is quite simple: I only trust if there is reason to trust (that the respondent doesn't need to worry). The respondent tries to be on speaking terms with the talk about trust, values and purpose as that appears to be needed to be taken seriously in the first place.

Hence, they appear to deceive themselves with how they think their practice should be (trust, about values, and the like). This talk about ideals appears to cover up, or pushes away, the actual issues and questions they need to be addressed.

4.4.3 Figured world 3: dwelling in metaphors

What is remarkable about the dialogues is the abundance of metaphors encountered when the respondents describe their problems. This is I think exemplary for the difficulty supervisory boards have in speaking about their practice. To precisely grasp what the practice is about, what kind of knowledge is used and what they do can only be communicated, so it seems, indirectly, in metaphors. According to discourse analysis, content cannot be analysed without analysing the specific form in which the content dwells – like metaphors.¹⁸⁴ The form is part of the content.

Since the time of the ancient Greeks, the practice of government or governance (*kubernaitikos*) was conceptualized as a nautical metaphor. Other classical metaphors related to governance are that of war (strategy, tactics, frontline, rivalry) and also crafts, such as weaving or pottery. Hence, I take the general metaphors of 'steering' (nautical) and 'strategy' (war) for granted. I am looking for more specific metaphors, that on the one hand tell something

¹⁸⁴ Jørgensen and Phillips, *Discourse Analysis as Theory and Method*.

about the specific problematic of supervisory boards, and on the other hand lay bare the difficulties they have in pointing out precisely where these problems lie. Moreover, the use of metaphors, as form, tells something about their practice. They are not mere 'ornaments' but they actually order the practice. Metaphors serve to make pronunciation and creation of reality possible, comprehensible and controllable and reduce complexity.¹⁸⁵ The risk of metaphors however is that, when overused, they not only become a cliché but the 'as if' structure disappears: the organization is not 'like a pipeline' but 'is a pipeline'. This would imply that every attempt to penetrate the organization is hopeless from the start. By making the literal meaning of the metaphor concrete, you abandon its heuristic value

From the perspective of discourse analysis, it is important to see metaphors not only as ordering, but also as reproduction (of a certain dominant idea).¹⁸⁶ Dominant metaphors that are reproduced over and over again highlight the recursive aspect of discourses. Metaphors have a strong rhetorical function as they are easy to copy and remember. The metaphors discussed below are not only known in the supervisory boards under scrutiny but are probably known to all supervisory boards in the country: they have a strong pervasive and penetrable potential; they are conventional metaphors, as Hart argues. Hence, metaphors, what they highlight and what they obscure, strongly influence how supervisory boards perceive their practice.

Furthermore, metaphors are not mere instruments that are put to use. Metaphors create a kind of flexibility, it is a process of speaking about things in a loosely, searching but still comprehensible way.¹⁸⁷ Metaphors make it possible to communicate a certain opinion or perspective, but with a self-defensive layer of flexibility: it is more or less like this, but not quite yet. Metaphors may therefore change over time, are principally open, although they make stay the same for a long period of time.

Metaphors have been used by both supervisory boards. In the description of this figured world, I will therefore not distinguish between the two boards but focus on the metaphors.

185 Van Twist, *Woorden wisselen*, 39.

186 Hart, 'Critical Discourse Analysis and Metaphor: Toward a Theoretical Framework'.

187 Cameron et al., 'The Discourse Dynamics Approach to Metaphor and Metaphor-Led Discourse Analysis'.

An exemplar

The most beautiful quotes that pile metaphor on metaphor came from a board member from organization Y. In the first one, he questions the coherence of the management philosophy of the organization, and the role of the supervisory board therein, and how close they should observe the executive board:

Respondent Y: *And then, it is not about controlling someone, but management is also a matter of, like it goes in practice, for the hurdle, you need to give the horse some space to take it. But after that, you stay on the horse. And that is something different than, I believe, trust and observing what comes out of the pipeline. And then I think: well, if I would put it there... Since then, oh yes, then it is not good. Yes, but then the horse is already out of the arena. Do we want this? Then we must come back to the idea that the client's first.*

The second one, when they find out together that when it comes to financial outcomes of the organization, they want to be more active and coercive:

Respondent Y: *That is the nail on the head. In this case, that we are on that moving train, and now we have... yes, we need a new assist, but also a different way of looking. You need to stop talking about the 80%, saying like a Dutchman, 'shit' that comes out of the pipeline. You need not to talk about 80%... What will the future bring? And this marketing research that we have done together, what has come out of it? It has been drawn away in beautiful writings, sorry for the word. But were you able to give it hands and feet? Well, no. That does not fit with each other.*

Third, again from the same respondent:

Respondent Y: *If you look at the role of the supervisory board, we need to realize that we are boarding a moving train. It already has a certain speed, as well as a destination. But luckily, we can change trains, so it's not really a point.*

Following this discourse, it is almost as if the respondent is merely rattling with words, associating as he goes. Not only are there a lot of metaphors, they are also linked together and mixed up. These examples are a little extreme, but it shows very well how dominant metaphors are in the discourse. Furthermore, it highlights that the metaphors are unreflected, that is, they are used as form of casual speaking. It doesn't seem to be very important how accurate the metaphor is (as when he says that you can just switch

trains). It is important to associate to a certain theme – just keeping the conversation going. But something peculiar might be at stake: not only do they play with metaphors; the metaphors also play with them. The organization is not like a horse or a train, but *is* in a sense a horse and a train: the only thing left to see is that something is moving beyond your grasp.

The dominant metaphors

Next to the ‘moving train’, the ‘pipeline’ and the ‘horse’, other important and dominant metaphors that are used, in both supervisory boards, are ‘the helicopter’, ‘the boat’, and the ‘compass’. I will give my interpretations.

Moving train

Jumping on a train that moves brings in images of bandits in the wild west who want to rob a train. The very idea of this metaphor, that is often used, is that a supervisory board member, in most cases, enters an organization who is already there for a quite a while, with a certain history, course and policy. Moreover, even though a supervisory board appoints a director, for new supervisory board members, the director will be a *fait accompli*. Therefore, it appears, this metaphor is used to make tangible the *relative position* and *possibilities* of a given supervisory board. The supervisory board ought to be humble in its pretensions of what it can do for the organization, as the course is already set, people already have chosen positions, and you are seen as an invader. The tension this metaphor brings forward and addresses, I believe, is that of the high public expectations of supervisory boards on the one hand, and the experience of supervisory board members that most of the course of the organization is for them forfeit; many board members experience only possible marginal gains.

The pipeline

The pipeline, often imagined as a sewer, is an important metaphor for supervisory boards (and perhaps in management practices in general), especially to illustrate the problem of understanding what goes on in the organization, as well as their impotence to change the course of events. In the pipeline, things are going on that are invisible to the supervisory board. They stand at the end, an opening, and see what comes out: financial records, quality indicators, interesting cases, et cetera. This might indeed sometimes feel as ‘shit’, as a respondent of Y notes, as the outcomes are constructions, and need not say everything about what happens ‘within’. Outcomes need interpretation and meaning, but from an outside perspective, this meaning is not easily found – is made invisible. Also, once things are in a pipeline, you cannot get at them. The supervisory board does approve decisions, but after that you cannot control its course anymore and have to wait until ‘something comes out’. This impotence of supervisory boards is important

for them to acknowledge, as they must refrain from trying to control things in the pipeline: that is not their job, so they perceive. The pipeline metaphor might also serve to reinforce this perception: since it is not our job to go inside the organization, it becomes a pipeline.

Helicopter

Another frequently used metaphor is that of the helicopter, or helicopter view. The point of this metaphor is that the supervisory board is not on the ground, where concrete practice takes place, but that they 'overlook the whole' from a certain distance, 'up there'. The helicopter metaphor, however, also allows a change of altitude, to zoom in and zoom out. Moreover, you do not only oversee the whole (they are in principle not interested in detail as such, but in their part of the whole), but also the relation of the whole to the wider environment. The helicopter metaphor places the supervisory board outside and above the organization, even though they now and then recognize that they are part of it. But for employees and clients, the supervisory board indeed is perceived as somewhere far above, as different respondents in the third dialogues argued. The metaphor allows practitioners to explicate the abstraction of their desired form of knowledge about the organization. The metaphor is the opposite of the 'boots on the ground' metaphor. Hence, they are not occupied, ideally, with day-to-day troubles, but rather overlook it all, not only in space, but also in time. I believe the helicopter metaphor provides the supervisory board an image that successfully reduces the complexity of their task to a mere overseeing. It approves and sustains the practice of flying over now and then, talking about abstract policy matters, although they know that they also need details now and then. This metaphor, however, also shows the possible detachment of the supervisory board from the organization, and this is a commonly discussed tension.

The boat

Another commonly used metaphor is that of a boat or ship. It is a more specific metaphor than the general nautical metaphor of management. The idea is that the organization is a big inert ship and that there is a wheelhouse in which the director is captain. The supervisory board is not on the ship, but visits the boat now and then, coming alongside with a small rubber boat, climbing up the ladder, sitting in the wheelhouse – but refraining from the temptation to touch the steering wheel – and then leaving again. There are different aspects to this metaphor. Of course, comparable to the helicopter metaphor, it detaches the supervisory board as members of the organization. But the metaphor allows less distance than the helicopter metaphor – you really need to be on the boat, and/or in the wheelhouse. The metaphor also lays bare the tension between supervising and steering. In supervisory board discourse, as we have seen, supervisory boards hesitate to 'sit on the chair

of the executive board'. It takes metaphors to address this difference, as in concrete practice, things may be grey. So, by installing this metaphor the supervisory board likes to show that they are not in charge, that they do not steer, and that they do not stay. On the other hand, though, supervisory board do need to make decisions that are about steering, changing course, for example by appointing a certain director, or by not approving certain strategic plans. By means of its advisory function, it influences the course of the organization. Hence, the metaphor serves the supervisory board to give, in language, the director trust and mandate, while at the same time it helps to push away ambivalence. The metaphor of the ship may in this sense be deceptive: on a ship there is a rudder that can be operated by someone. In an organization, the term 'steering' is far more ambiguous. Perhaps formally one can trace it back to a specific person, such as the director, but what the course of the organization will be can hardly be reduced to his or her attempts to steer it. On the same plane, the supervisory board does indeed steer, and they need to.

The (moral) compass

The 'compass', more specifically the 'moral compass', has become an important and dominant metaphor in the Dutch world of policy and governance, and is brought forward by different respondents during the dialogues. It points to the first and intuitive understanding of what I call practical wisdom, and therefore I will explain this metaphor, and the way it is used, in some more detail.

You ought to have a moral compass, but many in fact don't have it or use it, it seems to say as an appeal. Very soon, as noted above these kinds of metaphors are eroded by an unending stretching of their meaning and application. Or, as noted above, that a metaphor is not even recognized as a metaphor anymore. This is especially true for the moral compass. If we have a look at the difference between a compass and a roadmap, the roadmap suggests a certain course in an area, that can be followed in detail. However, the idea that you can map a social practice such as supervising like the way you map an area is deceiving. In social practices, there are no 'roads to the future', as they are uncertain and human. The attempt to figure out a fixed route often contains blueprints, or destinations or purposes that need to be followed. In concrete dilemmas, however, these are often not very useful, in the strict sense of the word. In this respect, the metaphor of the compass works better. The compass gives orientation, clues, even if the road is not ahead, and the destination only partly knowable. It is important not to look at a compass as a roadmap, to confuse orientation with direction. With a compass, to find your path, you must not just follow the pointer, but again and again reorient where you are on the basis of the compass. The route needs

to be readjusted again and again. Moreover, the compass is not the subject matter. It is only an instrument for understanding your position in changing environments.

So, what are we really talking about when the moral compass metaphor is used? Does the compass guide us to what is moral? Is a compass personal, inside someone? Is it communal, within a certain group, or is it universal? Does every compass need to point to the same moral 'north'? In what sense does a moral compass help? It appears that the compass points, in the sense it used here, to a kind of bundle of ideas about an intangible form of knowledge about morality (individual, caring, society) and the practice of supervisory work (beyond mere control). In supervisory terms: not only looking at if we do things properly, but also at whether we do the good things.

So, I believe, the use of this metaphor is important for supervisory boards as it points to a kind of knowledge that cannot be reduced to the professional knowledge of organizations, nor the 'objective' knowledge of numbers and figures, nor to any form of technique or craft. They feel this kind of knowledge is important, even decisive, but they lack language to indicate it, and turn to the metaphor of the compass. This 'objectifies' this knowledge, which makes it understandable and communicable. You can consult, use or awake your moral compass, and you can make an appeal to another person's compass. It also releases them from the difficult task of giving words to this kind of knowledge; the compass is a functional reduction of complexity.

4.5 Brief reflections

In the beginning of this chapter, I mentioned that I would zoom-in on two concrete practices with the concepts of ambiguity, politics and civil democracy in mind. Building on the brief reflections in Chapter 2 and 3, I wanted practitioners to 'talk back'. In these forthcoming reflections, I want to show how the dialogues enriched and gave texture to our provisional understanding of the threefold conceptual lens of this study. As noted, these reflections do not follow inherently from the dialogues nor their actual practice but are intertwined with my interpretations and understandings (*verstehen*). In the next chapter, I aim to formulate which questions now need to be conceptually addressed and will be taken forward to Part II of this study.

Ambiguity of ordinary care

Just as we saw in Chapter 3, there is awareness about the difficulty of understanding what goes on in the organization. In both supervisory boards, this goes beyond admitting that facts, figures, quality management systems

or management control systems fall short in understanding what goes on – although they have of course their merits. First of all, of course, that is why they do site visits and talk to people from within them. They try to relate the bigger picture, the whole, to its parts and concrete elements. It is interesting that they do not necessarily see these kinds of activities as the objective gathering of information. They are not testing norms. Rather, in relation to understanding the organization they talk about gut feelings, being sensitive for things that matter, reflecting on what has been seen. Experience plays a vital role, as well as bodily engagement in the organization – they want to ‘see, hear, smell and touch’ what goes on. But also, being emotionally touched by what happens in ordinary care. Hence, the way they try to understand the organization (and its ambiguity) is itself ambiguous: they use intangible concepts to make sense of this.

On the other side, however, there is also a countermovement to be observed. Despite, or perhaps thanks to, this ambiguity, they sometimes tend to reduce the complexity of their task. This becomes, among other things, visible in the use of metaphors. The metaphors clearly help them to explain what they do, to make their practice translatable and common, so to speak, while at the same time these metaphors also cover up or reduce this complexity. They use the metaphors, apparently, as a way to get a grip on their practice and the organization. The metaphors however are very flexible, you can always use them to make a point, while it may remain unclear how precisely this is relevant for the practice at hand. It becomes problematic when the metaphors function as a way to totally determine their practice. The metaphor of the moral compass, for example, is used to explain how they make sense of and how they judge what goes on in the organization and boardroom. But it remains elusive where this moral compass comes from, whether it is external (universal) or internal (mere subjective), and how it relates to other views on the (moral) good. The use of this metaphor also closes down this question of different views: it is seen as a categorical imperative.

Moreover, the way that there is common talk about values, trust, openness and togetherness might cloud their understanding of the fact that values may be ambivalent in practice. Self-determination for mentally disabled people may help some patients to regain confidence and dignity but may also end in the abandoning of patients who cannot deal with this. This ‘value talk’ may then even lead to a further increase of distance from the ordinary practice. This is a difficulty as values, especially when moralistic, are harder to counter than for example ‘rational’ strategic decisions based on the books or risk management analyses.

Political nature of care

Although politics as a concept is highly controversial in actual practice (it is related to political games, scheming, one-sidedness, populism and interventionism), boards do in fact relate to this concept in the way I have presented it in this study.

First of all, these boards have shown a strong focus and connection with 'quality', including a moral perception of their task regarding this quality. Also, they have strong moral ideas about what good quality is or how to organize this (such as self-determination, responsibility, trust and the imperative of openness). The very notion of values, in a context in which there is hierarchy and accountability, is already political: where do these values come from? What are their counterparts? How are they justified? How or in what are they grounded? Most of the time, the answer they give lies in either some notion of a moral compass or understanding what is needed in society.

The use of management instruments, in the traditional sense, appears to be modest. In this sense, they do in fact understand that there is more to quality than mere 'improvement' in a technical fashion. They seem to think that there is more to quality than what can be counted, measured or socially engineered. Lastly, they both add a form of leadership to their role as supervisory board: setting an example and 'living the values'. Although they strongly adhere to a clear demarcation of roles between supervisory and executive board, they believe that it does matter if the supervisory board shows interest in ordinary care, is honest, transparent and open.

Looking a little closer, some important questions can be raised. First of all, especially at Y, there is an urge to get a grip on the organization. This is accompanied by an uncertainty, an uneasy feeling that things are being missed or are hidden for them. They do not like this feeling; they want to feel comfortable. There is a slumbering discontent about the executive board, but this is pushed away with talks about trust and openness. They are genuinely looking for harmony, while there is a slumbering conflict about how the organization is run. At X, this uncertainty about understanding what goes on appears to be absent. Here, there is not any sign of conflict. However, there is uneasiness precisely about their harmony: is it not too much of the same? This is especially interesting when we noticed that their harmonious echoing of values may detach them from concrete practice, and that they mark clear lines between people who agree with them and people who doubt this (the trainee, for example). A 'we' and a 'they' is created very strongly by means of their values: it is said that when someone cannot live with these values, then he or she might want to go to another organization – without hard feelings. This raises the question to what extent it is possible to fundamentally discuss the way care is organized, how professionals act

and how the lives of patients are structured. At X, the way care is delivered is very much explicated. They want patients with different kinds of disabilities to live together, just as would be the case in normal life. Although this might very well be a good idea, it is also taken for granted. Within the harmonic context, criticizing or questioning it may probably be an undertaking in vain. On the other hand, however, they grant a lot of autonomy and trust to professionals in ordinary practice to do whatever they think is needed to provide good care. They, in their turn, discuss this with the patients and relatives. This adjusting and aligning may be a very good way to make the political question of good care really ordinary and practical. For this reason, the executive board refuses to write a 'strategy plan', as they argue that it is not their decision to decide what good care is or should be.

At Y, things are more ambiguous. Although they have the value of self-determination, the very idea of 'result-responsible teams' appears to be a paradox: it is fostering responsibility provided that it produces results. Who defines these results? How is this judged? There appears to be more need for control, even if the opposite is proclaimed. They do, however, openly worry about the future of the organization, especially in relation to its financial perspectives. Some board members however feel that they are not really allowed to discuss this, as it is about 'hard' controls and does not align with the preference to talk about trust and all the good things happening in concrete care. It seems that there is a conflict about how to manage the organization, but that it is difficult to actually 'do battle' about it, due to a strong focus on and wish for harmony.

Civil democracy

The idea of a civil democracy or democratization is at the same time present and absent in these supervisory boards and their organizations. For the supervisory boards, democracy is related to their legitimization; are they respected as board and do people in the organization experience their added value (whether or not they actually know anything about what the supervisory board does)? Also, the idea of democracy is linked with a 'societal orientation'; the need to have added value as a board. They say that they are not so much there to watch the organization, but whether care is properly given and continued. There is a shared and genuine feeling of social responsibility.

From the perspective of the organization, the idea of civil democracy, at least as ideal, is linked up with professional autonomy – here the professional is seen as a full-fledged democratic actor who can take responsibility for care – and with the idea of self-determination of the patient – here the patient is involved in what he or she thinks is good care for his or her life. Regarding X, it appears that they are able to remain loyal to this form of civil democracy, they do not fall into the trap of taking responsibility away by means of control. At Y, this is, despite their wish, more ambiguous.

From a different democratic angle, the question of representation or codetermination in decision making is not all related to the way the supervisory or executive board is appointed or held accountable. This is out of the question: the influence of codetermination councils and the adherence to social values does the job. Interestingly, at X, they have abolished the workers council, as they believed it was based too much upon collusion and defending vested interests, while it in fact should be about co-determination. The ideal of harmony definitely plays a role here, but due to the culture of autonomy of the professionals in everyday care, no one seems to really make an issue of this. The objection may be raised, of course, when the organization comes into a crisis situation, that the voice of the workers should not be silenced. But then again, they strongly believe that if the organization comes into crisis, then they will survive together precisely because of their ability to give professionals a voice, precisely by a lack of formal structures. At Y, they explicitly state that they *supervise* rather than do some kind of representation. Precisely the fact that they are not bound by a mandate or instruction defines their supervisory role. They check whether the board does a good job. It is an expert job, requires professional and administrative experience. Precisely therefore it makes no sense to have a board of laypeople, patients or workers representatives. Democratic legitimation is then perceived as a way to give voice, or better: to listen, to minorities. This is their notion of social responsibility.

5. Towards a practical wisdom: summarizing Part I

We have come to an end of Part I of this thesis. In the quest for practical wise supervision, I explored the daily (or not so daily) practice of supervisory boards in health care, looking from the perspective of the ambiguity of care, the political nature of care and notion of civil democracy. I have started this part by looking at some cases in which the role of the supervisory board is under pressure, due to problems of care, management or organization.

Stories

I argued that the supervisory practice is largely determined, due to its relative distance and general overview, by what is not known, and how a supervisory board (and the public) deals with this shortage of omnipotence or the potential of social engineering. Furthermore, I argued that the inviting prospects of innovation, strategy and change management, risk and quality management may turn out to be a disappearing prospect.

The stories all deal with crises where a lot of erupting (not necessarily disrupting) conflicts are going on about what good care, good management or supervisory work is. It is not hard to understand the political nature of governance in such circumstances: people really raise their voices, stand their ground. The stories therefore also raise questions about the positioning of the supervisory board: is there a democratic deficit? Is the model too much built upon (technical) expertise?

Context

After the stories, I wanted to explore 'regular' practice of supervisory boards, by looking at literature, formulating dominant role perceptions and describing my own experiences with supervisory boards. I argued that although there is (valuable) consciousness of the ambiguity of care, the contested nature of it as well as the need for (democratic or public) legitimization of the board, the critical potential of these concepts may be underestimated or underexposed. It is as if these concepts are neutralized, rationalized in such a way that it confirms common practice rather than challenges it.

Zooming-in

Next, I zoomed-in on two particular supervisory boards using an interpretative analysis based on dialogues with these boards. The dialogues showed, following my interpretation, how supervisory boards wrestle with their role and how they try to balance between distance and proximity, trust and criticism, harmony and plurality, control and 'letting go' and indeed knowing and not knowing – both in their own way. What we see is a nuanced image of how supervisory boards genuinely want to be of social relevance and at the same time adhere to the idea that their role is modest. Despite their social activism and an intuitive idea of civil democracy, they do not question the way the supervisory board is positioned in its expert-role.

In the introduction, I mentioned how the quest for wise supervision is linked up with the question of civil society, and the way in which citizens have a sense of control over the institutions that form civil society. This also brings in the question of how civil society relates to the state and the market. Also, referring to Schmidt and Hart, I argued that there is a cleaving, or at least a potential cleaving, between management and governance on the one hand and ordinary practice and civil society on the other. In the second part of this thesis, I will explore these notions, building forth on questions that arose out of the image of the supervisory practice in Part I. In the second part I will abstract from the concrete board cases, focusing on theoretical and conceptual perspectives that help us to make sense of the supervisory practice in a broad political philosophical perspective.

Questions for the next part

I will now formulate different bundles of questions that arise out of the image set in Part I, and will show how, in Part II, I will navigate these questions.

The first bundle of questions is, still partly informative, how the model of the supervisory board, as we know in civil society in the Netherlands has come to be. What is its theoretical genealogy, and what can we learn from this in the light of its contemporary positioning of civil society (governance)? What are the relations with the private and public sector? What do we see if we zoom-out? This question will be answered in Chapter 6.

The second question is about how can the ambiguity of care be properly conceptualized? What is it that we have called ambiguity, the swampy lowlands? How can we properly conceptualize this beyond the mere tension of distance and proximity? For this, I turn to the ethics of care (Chapter 7) that provide, in my view, a very fruitful (but also critical) way to look at ordinary care practices. This task will be further developed throughout Chapters 8 and 10.

The third bundle of questions is about the 'safe high grounds' of instrumental rationality, and its contemporary 'disguises' in quality, strategy and risk management, as well as in the popularity of values. What are the difficulties in managing care? Why are management techniques so often disappointing? Is it even possible, in the light of ambiguity, that the practice of care be translated into general values? This question will be answered by using the work of Schön (mentioned in the introduction) and Thomas Schmidt – who wrote on the paradoxes of quality management.

The fourth bundle of questions is about the relation between the practice and ideas about governance of civil society in relation to questions of (late) modernity: how did the practice of governance become professional? Where is the active citizen, the *citoyen*? What is the importance of civil democracy and democratization? How are organizations and institutions alienated from the idea of a civil democracy? Is a civil democracy still possible, even thinkable, in the current institutional field?

The fifth bundle of questions is about the specific political nature of care, and what this means for decision making. In what sense can we call civil society political? In what sense is the difference between 'the political' and 'politics' relevant for the governance of civil society organizations? What can we then say about the 'purpose' of civil society organizations? Is supervisory practice an expert practice or a political practice?

The sixth and last bundle of questions is around what is practical wisdom following different contemporary philosophers? And what is then, practically wise supervision and what tensions do supervisory boards need to address?

Part II

**Theoretical exploration of practical wisdom in
the boardroom**

6. Zooming-out: health care governance in the Netherlands. A genealogy

6.1 Introduction

The historical context of an organization or practice is crucial if we want to understand its current practice and its routines, how meaning is attributed, what is highlighted and what is neglected, how routines are perpetuated and how they are disturbed. Furthermore, I have argued in the introduction and in Chapter 3, that the development of the supervisory board, its course in the foundations of civil society and health care, are very close to the developments in corporate governance. Hence, we need to find out this relationship – between state, market and civil society – and its underlying idea(s) to understand if and how a political aspect of governance disappeared from the stage. Zooming out of the concrete supervisory practice and placing it in a wider context of history and ideas about governance may help us to understand how on the one hand practitioners make sense of their practice, showed in Part I, and how on the other hand this shared feeling of alienation of civil society and common sense came to be. This chapter, unlike the chapters before, is more theoretical, and is therefore placed in Part II, rather than in Part I, although it functions as well as a hinge between them.

In this chapter I am trying to understand the governance context of health care organizations in the Netherlands as it has evolved in the second half of the twentieth century until today. I will do so from the theoretical perspective of *ambiguity* and will show that albeit this is on the one hand only a sociological *description* of the development of governance in long term care, I will also argue that this ambiguity has led supervisory boards to become alienated from concrete care practices; it has become a perspective from the safe high grounds. As noted in the introduction, ambiguity is part of the lens through which I am looking for a practical wisdom for supervisory boards. It is a conceptual exercise: how can historical aspects of the governance context be linked to conceptual frames. The question bluntly is: what is the undercurrent of health care governance, within civil society, in its relation to public (state) and private (market) sphere?

I will start off explaining the conceptual framework of ambiguity, and the different possible levels of analysis within this frame. I will work out four

levels of analysis, namely that of governance theories, institutional theory, practice theories and identity theories. These levels can be perceived as different lenses through which one can look at the matters of ambiguity. They all highlight, from their own perspective, the way in which health care governance has become ambiguous and perhaps alienated from its everyday practice of care. I present all these levels of analyses, as they all highlight something different within nevertheless intertwined matters. They also represent common ways in which administration science addresses the matter of the *hybridity* (instead of ambiguity) of organizations, and it therefore makes sense to present them. I however believe that the practice approach, as described in paragraph 6.5 and in the introduction of this thesis, is the most promising approach to understanding ambiguity. It does not distance theory from practice by ideal types and does not overestimate the role individuals can have.

A definition of ambiguity may well be having a double meaning – equivocality, multifaceted complexity. Closely related is the term ambivalence: strong on both sides – conflicting.¹⁸⁸ Also hybridity, a more common term in public administration science, bears similarity. Many research perspectives prefer the concept of hybridity over ambiguity. However, hybridity is more dual and static than the more complex and philosophical notion of ambiguity and ambivalence. I therefore mainly follow the concept of ambiguity, as this also fits with the overall research framework. As Denis et al. argue, speaking about hybridity, already from the 1980s we have seen increasingly porous boundaries between actors, organizations and sectors with regard to public services.¹⁸⁹ New Public Management (NPM), they argue, is the most obvious example of this public/private form of governance. In the Netherlands, health care has its roots in the ‘third sector’ but is under contract to public or private sector commissioning. However, albeit the growing importance of hybridity, Aucoin has shown that public sector reforms in Britain, Australia and New Zealand already in the seventies and eighties were a product of opposing sets of ideas about public sector design.¹⁹⁰ In this respect, all organizations are and have been at least a little ambiguous, which one might expect when thinking in ‘ideal types’.

188 www.etymonline.com

189 Denis, Ferlie, and Van Gestel, ‘Understanding Hybridity in Public Organizations’.

190 Aucoin, ‘Administrative Reform in Public Management: Paradigms, Principles, Paradoxes and Pendulums’.

I will analyse the ambiguity of health care governance in the Netherlands on three levels, namely 1) the *macro* level of public governance systems, ideal governance forms and types; 2) the *meso* level of institutions and organizations and 3) the *micro* level of individual actors and groups and teams. I will speak both about the ambiguity of health care *organizations*, as well as the particular ambiguity of supervisory board practices. In other words, it is about ways in which ambiguity is reflected in the governance practices of health care organizations. Different theoretical perspectives or lenses are available that can be classified along this line. On the macro level, we find governance theories that focus on the mode or form of governance, due to shifting laws, regulations and conceptions. On the meso level, we find institutional theory and complexity theory. On the micro level, we find theories on identities and practice theories. The boundaries of the three levels are not absolute but tend to overlap each other. The institutional dynamics approach is both meso and macro, while the practice theories are both meso and micro. Of course, one might argue that institutional dynamics also has micro aspects or that practice theories have macro aspects. I am well aware of that, the point is that for the different levels of analysis, I use different theoretical viewpoints that I think are most suited to be installed for that particular analysis.

Moreover, Denis et al use different theoretical perspectives from those that I apply to health care in the Netherlands.¹⁹¹ Contrary to their framework, I do not refer to the Actor Network Theory (ANT) of Latour when it comes to the meso analysis, but rather to a broader perspective, namely practice theories, as highlighted in the introduction of this thesis.¹⁹²

¹⁹¹ Denis, Ferlie, and Van Gestel, 276.

¹⁹² One might regard ANT as a form of practice theory, although Latour would not admit that. Denis et al. want to use ANT to bring back in the agency perspective. However, of all practice approaches, ANT has the lowest focus on agency, as it blurs the lines between inter-subjectivity and inter-objectivity. Schatzki for example, according to Nicolini (2012, 169), openly offended to ANT and argued that although instruments and artefacts have agential power, we need to keep human agency and material performances distinct. Between Latour and Schatzki, there appears to be a wide range of practice related theories that emphasise the role of human agency and the agency of sites, object, bodies and artefacts. Hence, I use the lens of practice theories rather than only that of ANT to say something about ambiguity from this perspective.

6.2 Macro analysis of ambiguity: structures and ideal types of Dutch health care

6.2.1 Ambiguity of Dutch third sector in ideal types

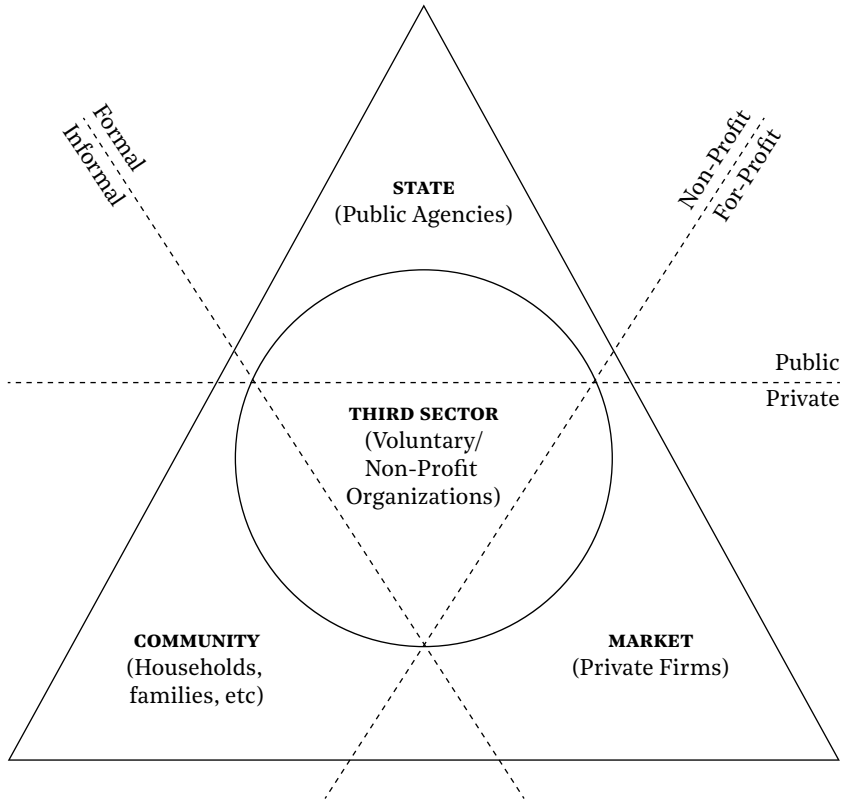
Dutch health care organizations are civil society organizations. This is a rather unique situation, as in many other countries these are *public* organizations. This implies that civil society, or the ‘third sector’ in the Netherlands is relatively big.¹⁹³ The macro structures from a governance theoretical perspective of Dutch health care can be explained using the Pestoff-triangle (Figure below).¹⁹⁴ In this triangle, four sectors appear by drawing three lines between state, market and community. The state is the first sector, that is public, formal and non-profit, in which hierarchy, coercion (deployment) and (democratic) voice are the dominant steering principles. The market is the second sector, it is private, formal and for-profit. The dominant steering principles are (free) exchange and exit (by consumers or employees). The fourth (I come to the third in a moment) sector is that of communities, informal, private and non-profit. Its guiding steering principles, if one can call that, within this sphere, are love and loyalty. The third sector is an ‘intermediate’ sector. Its principles are formal, non-profit and private. It is a sector of voluntary, civil or privately supported governance.¹⁹⁵ It is noteworthy to mention that the circle drawn is *not* the Third sector, but rather something Pestoff calls the ‘welfare mix’, e.g., the zone of interactions between the different institutions. The third sector is the triangle pointing down.

193 Brandsen and Pape, ‘The Netherlands: The Paradox of Government–Nonprofit Partnerships’; Burger and Veldheer, ‘The Growth of the Nonprofit Sector in the Netherlands’.

194 Pestoff, ‘Third Sector and Co-Operative Services - An Alternative to Privatization’.

195 Van de Donk, *De gedragen gemeenschap*.

Figure 1. Pestoff triangle



Billis developed a governance theory of ideal types with the hypothesis that although many third sector organizations appear to be hybrids – combining elements of public, private and third sector – every organization has a ‘root’ sector, and its distinctive principles adhere to this root.¹⁹⁶ He argues that: “(a) all organizations have broad generic structural features or elements (such as the need for resources) but that (b) their nature and logic or *principles* are distinctly different in *each sector*”.¹⁹⁷ This leads to an ‘ideal type’ of a distinctive sector. The core elements of a sector can be distinguished along five core elements, in which each sector – public, private and third – has its own (root) principles. The elements are ownership, governance, operational priorities, human resources and other resources. He then plots the three sectors as is shown in Table 1.

¹⁹⁶ Billis, *Towards a Theory of Hybrid Organizations*.

¹⁹⁷ *Ibid.*, 47–48.

Table 1. Ideal type sectors and accountability

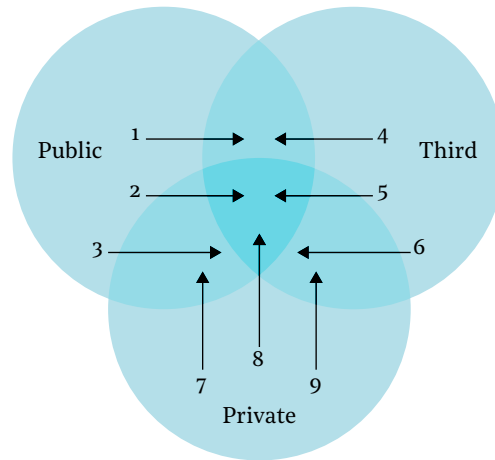
CORE ELEMENTS	PRIVATE SECTOR PRINCIPLES	PUBLIC SECTOR PRINCIPLES	THIRD SECTOR PRINCIPLES
1. <i>Ownership</i>	Shareholders	Citizens	Members
2. <i>Governance</i>	Shared ownership/ size relative	Public elections	Private elections
3. <i>Operational priorities</i>	Market forces and individual choice	Public service and collective choice	Commitment about distinctive mission
4. <i>Distinctive human resources</i>	Paid employees in managerially controlled firm	Paid public servants in legally backed bureau	Members and volunteers in association
5. <i>Distinctive other resources</i>	Sales, fees	Taxes	Dues, donations and legacies

As Billis himself admits, the element of ownership is highly problematic and ambiguous in the third sector. Milgrom and Roberts for example defined ownership as “the possession of residual decision rights and the allocation of residual returns.”¹⁹⁸ This however seems to apply only or merely to the private and public sector. The discussion we mentioned in Part I, about the democratic deficit and the accountability vacuum of supervisory boards in Dutch health care is partly due to this problem of ownership. No one in particular is owner, the foundation owns itself. This appears to be an unsatisfactory answer; we must somehow assume that the patients, families and/or citizens are also the principal owners, although this is not visible in the governance arrangements. In the ideal type, the third sector organization is an association of members, mostly voluntary, and *not* a firm or a bureau.

Billis then introduces the way in which organizations can become hybrid organizations, see figure 2.

¹⁹⁸ Milgrom and Roberts, *Economics, Organization and Management*, 289–93 quoted in Billis, 2010.

Figure 2. The three sectors and their hybrid zones¹⁹⁹



Every circle is a root of a given organization, which, as it evolves through time, can develop into different hybrid zones. For example, an elderly care organization that has its roots in a monastery, but nowadays has more professional workers than volunteers, has become a merger organization with other (perhaps non-monastery) organizations and is mainly funded by both the public and a bit by the market sector, and therefore has become a third/public/private sector organization. However, it still has its roots in the third sector. Billis would call this example *entrenched* hybridity: the logic of public and private is durably internalized and cannot easily be undone. He argues that although this form of hybridity risks the possibility of mission drift, this is not necessarily the case.

It is indeed hard to make general statements about the third sector as Van de Donk argues. Although he is trying to revalue or restore the idea of enchantment and *caritas*, which lie at the root of these third sector organizations, he calls us to be cautious, referring to Tocqueville, about characterising the third sector in terms of ideal types. Van de Donk calls the third sector a 'loose and baggy monster'.²⁰⁰ It consists of a bewildering variety of organizations which apparently only have in common that they are not state or market organizations. Therefore, I believe ambiguity is a more proper and open term than hybridity. Van de Donk uses the following definition of the root of the third sector, referring to the orientation of organizations as: "more or less direct, voluntary, and unselfish commitment that is primarily aimed

¹⁹⁹ Billis, 57.

²⁰⁰ Van de Donk, 11; Kendall and Knapp, 'A Loose and Baggy Monster. Boundaries, Definitions and Typologies'.

at care for each other and/or for some, albeit undefined, other, from a sense of mutual solidarity.”²⁰¹ In his essay, he goes on to argue that many aspects of this ideal formulation are under increased pressure in the light of increased ambiguity (due to privatization, marketization) and changing society.

Understanding ambiguity, then, requires the distinction between state, market and third sector, even though such distinctions may be ambiguous from inception. However, it helps to analyse how sectors change over time, and how policy and culture influences the way third sector organizations operate. With this in mind, we turn to how health care in the Netherlands can be historically analysed as ambiguous.

Developments of Dutch health care as third sector

For that, we first need to have a look at Dutch civil society in general. It is widely argued that indeed in Dutch contemporary civil society organizations, and in particular health care organizations, governance and professional practices have become detached from their original roots, or purpose.²⁰²

The roots of health care organizations can be found in private initiatives (*particulier initiatief*) in the 18th and 19th century. Most health care initiatives (for example *de Gasthuizen*, guest houses) from the middle ages onwards were driven by the monasteries, churches, guilds or elite members of society to care for the poor, the ideal of *caritas* – solidarity and perhaps also (secretly) one’s work on eternal salvation.²⁰³ As in many countries during the 20th century, health care became a governmental affair.

In the Netherlands, however, these private organizations retained their independence in the delivery of health care services. The strengthening of this so-called Dutch ‘corporatism’ was possible due to religiously influenced political power in the late 19th and early 20th century, as well as the rise of segmentation within society on religious or ideological grounds (*verzuiling*, literally: pillarization). The confessional governments adhered to the protestant ideal of sphere or group sovereignty (protestant) and subsidiarity (catholic). Due to pillarization, an increasing civil clustering in the third sector evolved, in which organizations of all kinds (health and social care, housing, newspapers, schools) were loyal to a specific confessional or ideological group or pillar.²⁰⁴ It was important for political movements to

201 Van de Donk, 13. Translated from Dutch.

202 Hart, *Lost in Control. Refocus on Purpose*; Hoogland and Buijs, *Ontzuilde bezieling*; Buijs and Den Uijl, ‘Publieke liefde’; Buijs, ‘Een vertrouwenwekkend vocabulaire voor managers’; Putters, *Besturen met duivelselastiek*, 8.

203 Burger and Veldheer, ‘The Growth of the Nonprofit Sector in the Netherlands’, 222; Mierlo, *Particulier initiatief in de klem: gemangeld tussen politiek en bedrijfsleven?*; Buijs, *Waarom werken we zo hard?*

204 Burger and Veldheer, ‘The Growth of the Nonprofit Sector in the Netherlands’.

reach consensus, and the fact that public services were delivered within the pillars was one of the important achievements of Dutch corporatist politics, which probably found its sublimation in the formal agreement in which they made peace over freedom of education and general voting rights.²⁰⁵

The interaction of these two elements, ideological and pragmatic, made it possible that the delivery of health care services remained in the hands of the private initiatives, in close cooperation with government, especially in the 'interbellum' (1918-1939), which in the Netherlands is sometimes called the 'confessional era'.²⁰⁶ Hence, during the 20th century, the situation arose that many collectively paid public services were delivered by private organizations, that is, third sector organizations. If we look at the model of Billis, we notice a first form of entrenched hybridity, as the funding of these third sector organizations is now largely by government. This is a rather unique situation. In many other OECD countries in which collectively paid public services took over the role of private care for the poor and *caritas*, not private but public organizations started to deliver these services, of which the most famous example, the so called 'envy of the world', is the British National Health Services (NHS). Until the 1960s, the expansion of the welfare state in the Netherlands took place along the confessional and denominational lines. As from the 60s onwards the secularization process was set in motion, also a process of de-pillarization occurred. Burger and Veldheer note:

At first, the growth of the welfare state strengthened the pillarized structure, but later it contributed greatly to its decline. For many years, the expansion of publicly financed but privately provided welfare state services boosted the growth of confessional organizations. Their national umbrella organizations became more important as they represented the interests of service-delivering non-profits to the central government when funds were distributed, and conditions were drafted. At the same time, the pillarized structure became more vulnerable as their dependence on collective funding increased. Furthermore, accepting collective money meant accepting the regulations that came with it despite the principle of subsidiarity, with respect, for instance, to the educational qualifications of personnel. Cuts in government subsidies during the financial crisis of the late 1970s and early 1980s forced some pillarized organizations to merge into nondenominational (but still private) organizations or to dissolve. It is important to underline that the mergers of denominational

205 Onderwijsraad, *Onderwijsvrijheid én overheidszorg*, 13–18.

206 Mierlo, *Particulier initiatief in de klem: gemangeld tussen politiek en bedrijfsleven?*, 12; Couwenberg, 'Het particuliere stelsel: de behartiging van publieke belangen door particuliere lichamen'.

organizations created new private entities that remained unequivocally private and non-profit: hardly ever did state agencies assume their functions.²⁰⁷

The governance of Dutch health care has the unique situation that almost every sector, branch, professional group or patient group, has its own umbrella or lobby organization that defends its interests in national government. Sometimes these umbrella organizations (often associations) are still denominational, but far less – as one might expect – than in the 50s and 60s. Hence, it is argued that due to government budget cuts, and an increase of financial dependence of these societal organizations on government, public fusion with third sector increased. Not to mention the increase of professional workers at the cost of volunteers, especially in health care services, as these services became more and more technically and scientifically oriented, a typical case of modern differentiation and specialization.²⁰⁸

6.2.2 Ambiguity in relation to the private sector: corporate governance

The next step, as we travel with high speed through history, is the fusion of third sector organizations and their governance with the private sector, as we highlight especially the role of corporate governance. We will come back later to public fusions, especially the rise of New Public Management (NPM) in the nineties.

Generally, it is argued that the principles of corporate governance entered the non-profit sector because of increasing scale and complexity of health care organizations. Directors of health care organizations were desperate for ‘professional boards’, rather than boards of volunteers.²⁰⁹ But just scale and complexity are not enough to explain why corporate governance principles became prominent in non-profit sectors. Khuruna writes about the dominant steering principles that arose out of so-called *agency theory* on corporate governance. Agency theory:

(...) emphasizes three mechanisms: monitoring managerial performance, providing comprehensive economic incentives, and promoting an active market for corporate control. Monitoring managerial behaviour involves the deployment of complex accounting practices, sophisticated internal

207 Burger and Veldheer, ‘The Growth of the Nonprofit Sector in the Netherlands’, 226.

208 Cf. De Swaan, *In Care of the State*.

209 NVZD, *Rapportage commissie raad van toezicht-model*.

controls, and the appointment of a professional board of directors whose members operate in the stockholders' interest by virtue of their need to maintain their personal reputations.²¹⁰

Despite the absence of shareholders or other owner groups in health care, the similarities with the governance debate in health care are remarkable. In time, there is an overlap between the rise of agency theory and that of the debate on professional boards in Dutch health care: both in the late seventies and early eighties.²¹¹ A second overlap in time occurs in the nineties, when in the UK the Cadbury report and code is published and in the Netherlands the 'Commissie Peters' published its code on corporate governance.²¹² Right after that, following the example of the corporate world, a private committee on Health Care Governance was formed and published its code in 1999.²¹³ A third overlap in time occurs after the Enron scandal and new corporate governance codes are made, in the Netherlands in 2003. A new health care governance code was published in 2005.

A fourth and final overlap in time is quite recent, as both codes in the corporate world and in health care have been renewed. This latter overlap, unlike the previous situation, resulted in quite distinct codes compared to before. Indeed, the health care governance code now focusses on the societal relevance and values of governance, whereas the corporate governance code – although they urge long term value and an eye for organizational culture – is a more classical privately oriented one.²¹⁴ Indeed, it appears that health care governance followed the trends in corporate governance, without a shareholder assembly, however, and this was a critique that was heard from the inception of professional boards and the two-tier model.²¹⁵ What corporate governance is however, contrary to the codification, is far from uniform.

210 Khurana, *From Higher Aims to Hired Hands: The Social Transformation of American Business Schools and the Unfulfilled Promise of Management as a Profession*, 318.

211 Jensen and Meckling, 'Theory of the Firm: Managerial Behavior, Agency Costs and Ownership Structure'; Fama and Jensen, 'Separation of Ownership and Control'; Fama and Jensen, 'Agency Problems and Residual Claims'; Gitmans and Van Wersch, 'Knelpunten in de bestuursstructuur van het algemene ziekenhuis'; Van Wersch, *Democratisering van het bestuur van non-profit instellingen*; NVZD, *Rapportage commissie raad van toezicht-model*.

212 Cadbury Report, 'The Financial Aspects of Corporate Governance'; Peters, 'Corporate governance in Nederland. De veertig aanbevelingen'.

213 Commissie Health Care Governance, *Bestuur, toezicht, verantwoording*.

214 Strikwerda, *De Nederlandse Corporate Governance Code: Ingeleid, toegelicht en becommentarieerd*.

215 WRR, *Van tweeluik naar driehoeken*; Strikwerda, 'Raad van toezicht of raad van verbinding?'

The idea of corporate governance, in general, is to deal with difficulties that arise in situations where ownership and control, execution, are separated. Adam Smith, in *The Wealth of Nations*, was suspicious of organizations which were run by administrators with other people's money:

It cannot well be expected, that they should watch over it with the same anxious vigilance as when they invest their own. Negligence and profusion, therefore, must always prevail, more or less, in the management of the affairs of such a company.²¹⁶

In corporate governance literature this is called 'moral hazard'.²¹⁷ Adam Smith is speaking of the separation of ownership and control, a term we nowadays attribute to the 1932 work of Berle and Means.²¹⁸ Berle and Means share with Adam Smith the view that although the separation of ownership and control appears to be a matter of fact in (bigger) corporations – and nowadays also in health care and other societal sectors, they hesitated over arguing that the separation of ownership and control is a *general* principle of good management. It leads to corporate magnification, inefficiency, monopoly, and social irresponsibility.²¹⁹ Herbert Simon, from the behaviourist perspective, would argue the same when he said that managers tend to satisfice rather than to optimize when they function as administrators – in a corporation in which ownership and control are separated.²²⁰ This problem does not only apply to market organizations, but also to non-profits and professional partnerships.²²¹ Hence, this moral or rational hazard needs to be accounted for. In the course of the late twentieth century, different approaches to corporate governance have seen the light of day. They all, however, refer to agency theory – which was, and probably still is, the dominant framework or point of reference.

Agency theory

The first and perhaps most influential stream in corporate governance is, as mentioned, agency theory. The introduction of agency costs – the costs of internal monitoring and transactions – made neoclassical economists sensitive to corporate behaviour – how far can you go in controlling, keeping in check, other people? This quest for the costs of monitoring was already present in F.W. Taylor's *Principles of Scientific Management*, first published in

216 Smith, *The Wealth of Nations*, Book 5, Chapter 1, §3.1.2.

217 See Eisenhardt, 'Agency Theory: An Assessment and Review', 61.

218 See Hovenkamp, *The Opening of American Law: Neoclassical Legal Thought, 1870-1970*, 172–73; Berle and Means, *The Modern Corporation and Private Property*.

219 *Ibid.*, 284–86; Hovenkamp, 173.

220 Simon, 'A Behavioral Model of Rational Choice', 111; Simon, *Administrative Behavior: A Study of Decision-Making Processes in Administrative Organizations*, 119.

221 Fama and Jensen, 'Separation of Ownership and Control', 301.

1911. There is an important difference however between Taylor's principles and agency theory: Taylor assumed that there is harmony in goals between the principle (manager) and the agent (workforce), that they mutually benefit from the controls he introduces.²²² For agency theory, however, it is precisely assumed that the goals of the agent (administrator) diverge from the goals of the principle (shareholders or owners) – that is essentially what moral hazard is about. In the seventies, agency costs became the dominant framework for business corporations, following the idea of an organization as a nexus of contracts or transactions, as formulated by Coase – the transaction costs theory.²²³ The axiom of agency cost theory is that one must minimize these agency costs (such as monitoring costs and bonding costs), by aligning the goals of shareholders (principals) and managers (agents) – which are principally conflicting – using incentives and monitoring instruments. In the same way, supervisory boards in civil society should use incentives and monitoring instruments to make sure that the executive board does not pursue its own interests, but rather the social or organizational purpose.

The argument goes that whenever there is a separation of ownership and control, agency costs arise because of opportunistic and self-interested behaviour by agents. However, with good monitoring, incentive and reward systems, the goals of the agent and principal can be aligned. Although individual shareholders may have different goals, it is assumed that the goal of an aggregation of shareholders was to make a profit. Corporate governance, then, functions as a vehicle for neoclassical economics to make sure that that firms would fulfil their 'social responsibility' (a misleading term they argue): increase its profits and create shareholder value.²²⁴ For the proponents of neoclassical economics and new institutional economics, separation of ownership and control was necessary for efficient organizations and they believed that agency costs could easily be reduced, since managers are easily controlled with contracts and a good board of directors.²²⁵

Khurana eloquently described the rise of agency theory in the light of 'the unfulfilled promise of management as a profession'.²²⁶ The rise of American business schools can be explained, he argued, by the idea that *professional*

222 Taylor, *The Principles of Scientific Management*, 5.

223 Jensen and Meckling, 'Theory of the Firm: Managerial Behavior, Agency Costs and Ownership Structure'; Coase, 'The Nature of the Firm'; Taylor, *The Principles of Scientific Management*; Alchian and Demsetz, 'Production, Information Costs, and Economic Organization'.

224 Friedman, 'The Social Responsibility of Business Is to Increase Its Profits'.

225 Jensen and Meckling, 'The Nature of Man'; Fama, 'Agency Problems and the Theory of the Firm', 289.

226 Khurana, *From Higher Aims to Hired Hands*.

managers contribute to society's wellbeing. Management, then, was a *calling*, a vocation. What happened though, as what happens with many professions, was that this vocation was used to expand the autonomy and authority of this profession – management -, also or precisely in organizations with a separation of ownership and control. Khurana argues that this professional expansion was the breeding ground for the rise of agency theory: how can we tame the managers who claim to be professionals, but neglect shareholder's interests?²²⁷ This resonates with the question often heard in civil society (as we saw in Chapter 2 and 3): how can we tame the managers who claim to be professional, but neglect public interests? For agency theory, managers are not professionals but only (and merely) *hired hands*. Indeed, the idea of the hired hand is quite the opposite of a professional. Hired hands are mercenaries, they will follow whatever end with whatever means, if good incentives and monitoring systems are in place. This is of course dubious and requires faith in the strength of these incentives and the malleability of the agents. The realist 'father of political theory', Machiavelli, for example, was rather suspicious of mercenaries. In *The Prince* he argues regarding them that when the battle starts and the chips are down, mercenaries will flee:

The mercenaries and auxiliaries are useless and dangerous, and if anyone supports his state by the arms of mercenaries, he will never stand firm for sure, as they are disunited, ambitious, without discipline, faithless, bold amongst friends, cowardly amongst enemies, they have no fear of God, and keep no faith with men.²²⁸

It is interesting to note that the separation of ownership and control became the norm in the corporate world, while the initial theorists, Adam Smith and Berle and Means inclusive, thought it would be a bad idea, at least for most types of larger organization. This was however largely ignored, and most assertions on Berle and Means wrongfully state that they indeed thought that the problem was that managers were not controlled properly by owners, while they actually only *described* the rise of firms with a separation of ownership and control.²²⁹ For Berle and Means, the idea of the organization as a 'mere nexus of contracts' was not in play, instead, they conceived the corporation as some kind of 'mythical thing', something of which the whole cannot be explained solely by its parts.²³⁰ The addition of transaction costs theory to the separation of ownership and control shed a different light on corporate governance. Thus, since all organizations are mere nexuses of contracts, the agency theorem does not only apply to organizations with

227 Ibid., 316.

228 Machiavelli, *The Prince and the Discourses*, 45, Chapter XII.

229 Hovenkamp, 183.

230 Berle and Means, 226.

dispersed ownership, but also applies, among others, to non-profit organizations.²³¹ Moreover, in any organization in which the important decision makers are not exposed to the financial risks related to their decisions, agency theory will apply. Therefore, the separation of ownership and control became a rhetoric device for implementing corporate governance arrangements in the tradition of neoclassical economics and agency theory.²³² When it comes to boards, Fama and Jensen translated the separation of ownership and control to the more precise distinction and separation of decision management and control management (supervisory), and the presence or absence of residual risk bearing in the decision management.²³³ Hence, agency theory combines a human nature approach of opportunism that needs to be mitigated, and an organizational ontology of a nexus of contracts that brings along monitoring costs. Decisions are made based on weighing these costs relative to for example 'make-or-buy' decisions.

Stakeholder theory

Agency theory however is contested. The strongest and most widely accepted critique is from stakeholder theory, of which Edward R. Freeman was identified as the main proponent, but which was however first mentioned by Rhenman.²³⁴ The critique, as far as corporate governance is concerned, is that the conception of the organization as merely a nexus of contracts that must be ordered in such a way to maximize profit, underestimates the role of stakeholders that have no fiduciary contractual stakes. These non-fiduciary stakes are stakes that can affect or be affected by the organization. Agency theory, Freeman and Evan argue, goes no further than to say that: "(...) the proper form of corporate governance [is] thus translatable into questions of how best to ensure contract compliance."²³⁵ Stakeholder theory states that non-fiduciary stakeholders, for example community members of the community in which the organization is active, have at least as many reasons to have an elected seat in the board of directors. Freeman is eloquently stretching the meaning of 'ownership'. This is not first of all a moral claim, but still a claim that can fit within the theory of contract costs theory:

231 Jensen and Meckling, 'Theory of the Firm: Managerial Behavior, Agency Costs and Ownership Structure', 310.

232 Hovenkamp, 182.

233 Fama and Jensen, 'Agency Problems and Residual Claims'.

234 Cf. Freeman, 'Strategic Management: A Stakeholder Approach'; Freeman, 'Stakeholder Theory: 25 Years Later'; Rhenman, 'Industrial Democracy and Industrial Management: A Critical Essay on the Possible Meanings and Implications of Industrial Democracy'.

235 Freeman and Evan, 'Corporate Governance: A Stakeholder Interpretation', 337.

By participating or monitoring the day-to-day decisions of the firm the community may well be able to act more responsibly towards the firm, and the firm may well act more responsibly towards the community.²³⁶

Initially, Freeman posed stakeholder theory as a theory of strategy: to perform well, the stakes of all relevant stakeholders must be included and voiced. Later on, the theory was expanded to a more ethical theory on business and corporate social responsibility.²³⁷ The idea is, bluntly, that since the organization is responsible for the stakeholders it affects, it is ethically obliged – in a Kantian way – to consider the interests of stakeholders in decision making.²³⁸ The main function of corporate governance, then, becomes balancing and deciding multiple conflicting interests, instead of merely monitoring contracts. Freeman seems to suggest that in the end, these conflicting interests can be overcome with a similar argument to the one that the classical management thinker Follett brings forward: management is about integrating conflicts of interest, and this is in principle always possible.²³⁹ In stakeholder theory, the organization as ‘a nexus of contracts’ remains the theoretical framework.

Stewardship theory

The proponents of stewardship theory developed another important critique to agency theory. The idea is quite simple: what if agents are not self-interested opportunists, but rather collectively and internally motivated stewards?²⁴⁰ It is not hard to assume that there are at least some agents who are intrinsically motivated and involved with the goals of the organization or society. Hence, would not an emphasis on contract control and moral hazard undermine and even *crowd out* this intrinsic motivation?²⁴¹ Proponents of stewardship theory therefore do not reject agency theory altogether, but slightly adjust its assumptions on human nature, building on man as a self-actualizing person, rather than merely an opportunistic person. This leads to the question to what extent the principals will take risks. Agency costs arise not only because of agents that tend to shirk, but also because the principals believe that the agents will shirk. Hence, in agency theory, the

236 Ibid., 343.

237 Freeman, ‘Stakeholder Theory: 25 Years Later’, 99.

238 See Bowie, *Business Ethics: A Kantian Perspective*.

239 Freeman, ‘Stakeholder Theory: 25 Years Later’, 104; Follett, *Dynamic Administration: The Collected Papers of Mary Parker Follett*, 93–94.

240 See Donaldson and Davis, ‘Boards and Company Performance Research Challenges the Conventional Wisdom’; Davis and Donaldson, ‘Toward a Stewardship Theory of Management’; Donaldson and Davis, ‘Stewardship Theory or Agency Theory: CEO Governance and Shareholder Returns’.

241 Davis and Donaldson, ‘Toward a Stewardship Theory of Management’, 25–26; Van der Kolk, *Management Control Packages in Public Sector Organizations*, 77.

principals are highly risk averse. However, introducing control mechanisms because of risk aversion might well become a self-fulfilling prophecy: the agent will become (to some extent) an opportunist.²⁴² The question of rewards and control in relation to intrinsic motivation is of course a psychological matter that applies not merely to organizations but to other aspects of life as well, such as in nurturing or education.²⁴³

Anyhow, if principals are willing to take some risk and put more trust in the alignment of the self-actualizing agent and the organizational goals by motivation and identification, stewardship theory offers some alternative venues. The argument goes that the choice between an agency and a stewardship approach is subject to the context of risk appetite, power distance and individualist or collectivist culture.²⁴⁴ When it comes to the separation of decision management and control management, stewardship theory proposes that the board member that does decision management (CEO), contrary to agency theory, should also be the chair of the board, since that gives them the trust and latitude to fully utilize their internal motivation.²⁴⁵ So, in stewardship theory they actually give more power to executives at the expense of supervisory power. Indeed, agents will be able to set aside their personal goals in favour of organizational or social goals because of his or her intrinsic motivation. This also links up with the so-called Rhine model of management and management control, based upon trust (giving mandate to the executive board) and consent (by supervision and codetermination).²⁴⁶

Resource dependency theory

Another important theory that was added to agency theory and is entrenched in non-profit governance is that of resource dependency. It argues that the ability to acquire and maintain resources is crucial for the organization's survival.²⁴⁷ Since no organization controls all these resources, the (independent) board has an important role in boundary spanning and networking to acquire the resources the organization needs.²⁴⁸ Interestingly, here, the role of the board is totally different from agency, stakeholder and

242 Davis and Donaldson, 23.

243 Deci, Ryan, and Koestner, 'A Meta-Analytic Review of Experiments Examining the Effects of Extrinsic Rewards on Intrinsic Motivation'; see also Hart, *Lost in Control. Refocus on Purpose*.

244 Davis and Donaldson, 34–36.

245 Donaldson and Davis, 'Stewardship Theory or Agency Theory: CEO Governance and Shareholder Returns', 61.

246 Michel, *Capitalism against Capitalism*; also: Goodijk, *Herwaardering van de Rijnlandse principes: over governance, overleg en engagement*; Peters and Weggeman, *Het Rijnland-boekje: principes en inzichten van het Rijnland-model*.

247 Pfeffer and Salancik, 'The External Control of Organizations: A Resource Dependence Perspective'.

248 See Miller-Millesen, 'Understanding the Behavior of Nonprofit Boards of Directors: A Theory-Based Approach', 522.

stewardship theory. The role of the independent board has not so much to do with control-management, but rather with acquiring resources and addressing relevant networks. In the Netherlands, there has been little attention for acquiring resources, probably due to the dominance of the two-tier board model. As noted in Chapter 3, many supervisory boards believe that acquiring resources is an executive task. Addressing relevant networks by a supervisory board, on the other hand, is very important for organizations, for example when peer-organizations face similar issues or when there is a need for cooperation between organizations, sectors (for example with public housing) or in regions.

Collecting four perspectives

I have sketched the four perspectives on corporate governance in table 2. In the third row I've added the traditional role conceptions of supervisory boards as discussed in Chapter 3 and discussed further in the upcoming paragraph. Apparently, practice has become a mix of the different theoretical approaches discussed above.

Table 2. Different conceptions of corporate governance

	AGENCY THEORY	STAKEHOLDER THEORY	STEWARDSHIP THEORY	RESOURCE DEPENDENCY THEORY
What is the nature of man?	Opportunistic, self-interested	Open, undetermined, sits close to integration self-interest and integration of stakes	Good, intrinsically motivated	Not defined
Wat is the main focus of governance?	Monitoring & controlling contracts, shareholder value	Aligning conflicting interests for strategic and/or ethical purposes	Enabling responsibility, advice instead of monitor	Boundary spanning, acquiring resources
Classical role perception (see Chapter 3)	Monitor & control/ employer	Monitor & control/advisor/ employer	Advisor/ employer	Networker/ boundary spanning/ employer

The traces of corporate governance in long-term care governance

Let us look then to some aspects of the discussion above which can be traced back to established health care or civil society governance structures. International research and popular literature in non-profit governance, as well as publications in the field of Dutch health care governance, as we saw in Chapter 3, point to three or four classical roles for (supervisory) boards: monitor & control, advice, employer and sometimes also boundary spanning.²⁴⁹ Interestingly, we can distinguish the different theoretical perspectives on corporate governance, as the table shows in the third and last row. It seems that in practice, boards try to somehow integrate these different perspectives, while they appear to be theoretically mutually exclusive or contradictory.²⁵⁰

In the European or continental context, sometimes called Rhenish organizing, the idea of the ‘steward’ is more common than in Anglo-Saxon approaches. The two-tier board model, which we can find for example in the Netherlands and Germany (*Aufsichtsrat*), is a typical outcome of the stewardship approach: the board of directors receives a large mandate, and the supervisory board supervises the mandate. In the Rhenish perspective, the organization is seen as a cooperative of stakeholders; focused on proper employment relations that are balanced through employee participation and co-determination (*Mitbestimmung*); interlocked in institutional networks which ensures its societal embeddedness and; based on relations regardless of hierarchies.²⁵¹ Independence of supervision, accountability, consultation and giving mandate (trust) is the key to good governance.²⁵² In the one-tier approach, reluctance is found to giving executive directors the chair seat; it is reserved for a non-executive which has a more direct connection to the ‘principal’ (but who is, of course in its turn, also an agent of the principal).

If we remember our scheme from Billis, we notice two important things that corporate governance has brought to the third sector, namely the introduction of market forces by means of controlling contracts into different third sectors (such as health care) and paid employees (professional boards) in managerially controlled firms. Increasingly, non-profits and civil society organizations have taken the form of regular firms, although the particular governance assumptions may differ, or better, may be combined.²⁵³

249 See Miller-Millesen, 526–27; Ende, Hubben, and Suur, *Positionering van de raad van toezicht in de zorg*, 35–37; Baanders and Van Zonneveld, *Atlas van het toezicht*.

250 Clark, Steckler, and Newell, ‘Managing Contradiction: Stockholder and Stakeholder Views of the Firm as Paradoxical Opportunity’.

251 Peters and Weggeman, *Het Rijnland-boekje: principes en inzichten van het Rijnland-model*; Goodijk, *Herwaardering van de Rijnlandse principes: over governance, overleg en engagement*, 9–10.

252 Ibid. 57–63.

253 Maier and Meyer, ‘Managerialism and Beyond: Discourses of Civil Society

Another facet of corporate governance in the third sector might be the rise of top-level managers in boards and supervisory boards from business schools, private and public organizations. In health care organizations in the Netherlands, throughout the eighties and nineties, traditional voluntary boards were replaced by a two-tier board model, with professional board members on both sides. Many seats, especially of supervisory boards are held by well-educated and experienced board members, involved in for example local or national politics, business or board practices from other health care or third sector organizations.

The reason for this 'professionalization' of boards is usually said to be the rise of complexity and an increasing scale due to fusions and mergers, as mentioned earlier. The governance of health care organizations should be more business-like, just as government should become more business-like. The directors who used to serve on a voluntary board were usually people from 'the field', with a background in nursing or medicine. The voluntary board served as complementary experts to the director, with members representing backgrounds from local community, denomination, economics, real estate, law, et cetera. Since the complexity rose and organizations became bigger, directors from the field were replaced by 'professional managers'. However, these managers did not like having an executive function *without* final responsibility. They lacked the authority and autonomy to bear full responsibility for the organization. Therefore, the debate arose as to whether the traditional voluntary board model was suited for contemporary health care organizations, finally resulting in the two-tier board model, which was adapted as a universal principle in nearly all health care organizations in the Netherlands.²⁵⁴

Indeed, if one looks solely at the increase of mergers and fusions, the increase of board salaries and incentive systems (market forces, managerially controlled firms), the introduction of professional boards (*idem*), as well as the similarities in codes of governance, the difference between private and civil society governance has become ambiguous.

Organization and Their Governance Implications'; Meyer and Maier, 'Corporate Governance in Non-Profit-Organisationen: Verständnisse und Entwicklungsperspektiven'; Maier, Meyer, and Steinbereithner, 'Nonprofit Organizations Becoming Business-Like: A Systematic Review'.

²⁵⁴ Although there is no, to my knowledge, extensive research on the presented statements, the statements are based on interviews with Jacques Gerards, former director of the NVTZ and involved in health care governance since the eighties, and Theo Schraven, advisor and secretary writer of the 1999 health care governance report.

6.2.3 Ambiguity in relation to the public sector: New Public Management

We cannot speak about the ambiguity of third sector organizations in the Netherlands without speaking about New Public Management (NPM), a bulk-concept to designate American and Northern European approaches to government services. Nowadays, NPM is for many a dirty word.²⁵⁵ Everything that is wrong is civil society and public organizations, so it seems, can be traced back to the age of managerialism (another word for NPM) in the late eighties and nineties. The central idea of NPM, though, is that government institutions should become more service and performance oriented, which seems to be – in itself – a good idea.²⁵⁶ NPM first of all arose in government, due to a couple of what Hood calls ‘megatrends’. The first important trend was that government growth (in terms of spending and staffing) should be reduced or reversed. Second, a shift towards privatization or quasi-privatization occurred, with an emphasis on subsidiarity.²⁵⁷ Third, development of technology and fourth an international orientation of governments of public management and policy design. This led to what Rhodes has called: ‘from government to governance’ which implies that public services are no longer delivered by the state itself, but by arm’s length subsidiaries, on the basis of monitoring and control and the state as shareholder.²⁵⁸ We already notice an important overlap with agency theory, but not from a corporation point of view, but from a government point of view: the idea that organizations become more effective when principals pursue agents with good contracts and good monitoring to act on their behalf, rather than when principals would execute ‘tasks’ themselves. NPM therefore is a very explicit form of ambiguity in which public organizations steer with private principles.

Hood has extensively described the ‘doctrines’ of NPM, including ‘hands-on’ professional management, explicit standards and measures of performance, greater emphasis on output controls, division of labour (manageable units), shift to greater competition, stress on private sector-styles of management

255 Strongly pronounced by Siltala, ‘New Public Management: The Evidence-Based Worst Practice?’

256 Van der Kolk, Ter Bogt, and Van Veen-Dirks, ‘Constraining and Facilitating Management Control in Times of Austerity: Case Studies in Four Municipal Departments’, 936; Hood, ‘A Public Management for All Seasons?’; Pollitt and Bouckaert, ‘Public Management Reform: A Comparative Analysis - New Public Management, Governance, and the Neo-Weberian State’, 8.

257 See also Kuiper, *De terugkeer van het algemeen belang*.

258 Rhodes, ‘Understanding Governance: Ten Years On’; Rhodes, *Understanding Governance*; Van der Steen, Scherpenisse, and Van Twist, *Sedimentatie in sturing*.

practice and stress on greater discipline and parsimony in resource use.²⁵⁹ Indeed, Hood argues that the main origin of NPM can be found in neoclassical economics, agency theory and the scientific management movement (although there are differences, as I have shown). Gruening however is more nuanced, digs deeper, and identifies a dozen of theories that somehow inspired NPM, even if these theories themselves contradict each other.²⁶⁰

It is important to stress that NPM primarily originated in public administration, in the sphere of public organizations, such as ministries, municipalities, provinces and public agencies such as tax and oversight authorities. Classic examples of NPM-inspired privatizations in the Netherlands are that of the Dutch Railways (NS), postal delivery and the energy utility.²⁶¹ In the Netherlands however, as mentioned, health care organizations are not public organizations, that is to say, they are third sector organizations that are primarily funded by public means and are restricted by public law on health care and its governance. Hence, they are neither market nor state. As we noted above, they have become ambiguous organizations in which public, private and third sector aspects are mixed. So, in the Netherlands, health care foundations operate in a context of market mechanisms in the commissioning and delivery of health, as well as a very strong intervention by law, parliament and inspectorates in the governance and delivery of care. That is why these organizations are sometimes called semi-public organizations. It is quite common, however, to relate NPM to the way health care organizations are managed, partly because many of their control mechanisms come from government (public) or insurance companies (private).²⁶² Of course, health care organizations are subsidiaries for government to execute responsibility for public health. This would install a principle-agent relation between government and health care organizations. However, this might be a misinterpretation of the status of these health care organizations, as a lot of them are originally funded by religious, philanthropic or humanistic movements and inspiration. Hence, they were *already* private, and not privatized by government, their roots are not in the public sector but in the third sector. The health care sector indeed has emerged in the Netherlands as independent from government. Merely seeing them as 'agents' highly underestimates their history and status as *societal* rather than *public* organizations. The 'colonization' – to use a rough term – of health care organizations by government and its public organizations might be explained by the apparently vast amount of bureaucracy and distrust in this sector.²⁶³

259 Hood, 'A Public Management for All Seasons?', 4–5.

260 Gruening, 'Origin and Theoretical Basis of New Public Management'.

261 Kuiper, *De terugkeer van het algemeen belang*.

262 See De Blok et al., *Het alternatief voor de zorg*.

263 WRR, *Bewijzen van goede dienstverlening*.

NPM's adherence to management theory

To be sure, NPM is closely related to developments in management and organization theory (not only in corporate governance). For example, the 'classical work' of Osborne and Gaebler, called *Reinventing Government*, has a strong anti-bureaucratic rhetoric.²⁶⁴ The arguments and style are very similar to the seminal work of Peters and Waterman first published in 1982, named *In Search of Excellence*, which dealt with 'America's best run companies'.²⁶⁵ In both books, we can find an anti-bureaucratic sentiment, and a promotion of the importance of creativity, autonomy and adaptation. NPM is, just as I noted regarding corporate governance, in itself, a mixture of all kinds of theories that may be contradictory. For example, some would argue that NPM is related to classical management theories, such as Taylor's scientific management. Others will relate NPM to contemporary management theories, from the eighties onwards, that despise machine-like theories such as scientific management.²⁶⁶

Bureaucratic paradox of NPM

Whatever the organizational theoretical reference, NPM is aimed at reducing bureaucracy in public organizations. Strange as it may seem, if we read some contemporary critical or popular literature on NPM, or if you would listen to keynotes in congresses, NPM is very much associated with a *rise* or *perpetuation* of bureaucracy.²⁶⁷ This must be due to the strong focus of NPM on monitoring and control, and the related constant need to precisely define and distinguish what is monitored, finally resulting in different 'products' to locate accountability. This bureaucratization (and the need for standardization and assuring legitimate care) in combination with a political emphasis on the need for equality (everyone is entitled to the same amount of care) has become a toxic blend. The most classical example is the development in home care services, in which every little activity is labelled as product and registered in minutes. In hospitals the DBC (diagnose-treatment-combination) system was developed with a similar purpose. The same trend is visible on the level of governance. Supervisory boards wanted to set clear-cut goals, often called key performance indicators (KPI's), to evaluate the board of directors. The idea of NPM, and we can find this also in long term care governance discourse, seems to be that a better description and demarcation of tasks and responsibilities simplifies the ability to control and monitor thereon. However, in the experience of many, things have not become simpler, but have yielded bureaucracy.²⁶⁸

264 Osborne and Gaebler, *Reinventing Government*.

265 Peters and Waterman, *In Search of Excellence*.

266 Gruening, 'Origin and Theoretical Basis of New Public Management', 11.

267 De Blok et al., 18, 59–60. See especially Frankowski's contribution.

268 WRR, *Bewijzen van goede dienstverlening*, 12, 24.

Mission drift due to ambiguity

In *Bewijzen van goede dienstverlening* (proofs of good service) by the WRR (The Netherlands Scientific Council for Government Policy) a remarkable analysis of NPM in health care can be found.²⁶⁹ It is argued that government has too quickly abandoned deliberation and consultation and instead sought others than health care professionals that could enforce and discipline the demands of effectiveness which government thought was lacking in health care – recall Hoods causes for rise of NPM. In health care these ‘others’ are the organization and its management, and later also the ‘consumer-patient’. Health care organizations though, were traditionally characterized by a small voluntary board that was facilitating by nature and was staffed by part-time directors. By harnessing these organizations with a professional management, a precept borrowed from the private sector, and embedding them in an institutional context with clear performance incentives, the power in these institutions has shifted from the primary processes of care to the secondary processes of the organization. The functional task demands of professionals, so it is argued, became subservient to the preconditional demands of the organization. It is via this argument that we see what Billis calls ‘mission drift’ when hybridity entrenches.

Macro analysis conclusions

In this paragraph we have learned that – due to historical developments, public policy (that induced among other things upscaling of care, concentration and hence more organizational complexity) and the rise of corporate governance – health care organizations took refuge in both private (mixture of corporate governance conceptions) and public ways of looking and doing things (especially NPM). It appeared that, as the public logic of NPM is partly based upon the private logic, the distinction between private and civil society organizations is ambiguous. Hence, health care organizations start more and more to focus on how to measure and be accountable for processes and outcomes (in financial and quality terms) to insurance companies, local and national inspectorates and lobby and branch associations. The question of civil ownership fades out as the question of professional administration and oversight fades in. This has brought about conceptions of governance that are similar to corporate governance, without the presence of owners in the form of an assembly.

²⁶⁹ Ibid., 112.

6.3 Meso/macro analysis of ambiguity: Institutional dynamics and health care governance

I now highlight ambiguity in long term care from the perspective of institutional dynamics and complexity on a meso-level. The theoretical approach of institutional dynamics uses organizational archetypes and institutional logics.²⁷⁰ Friedland and Alford define institutional logics as “a set of material practices and symbolic constructions which constitutes its organizing principles and which is available to organizations and individuals to elaborate.”²⁷¹ Within societies, then, there are several available frameworks in ‘specialized arenas’ – institutions – such as political, economic, kinship, religious. Each of them is governed by a different ‘logic’. Organizations exist on the *mesolevels* within these arenas, and: “are confronted by and have available to them multiple, often contradictory, logics.”²⁷² The question that arises out of these institutional logics is which logics regulate or should regulate certain organizational practices: “Is access to housing and health to be regulated by the market or by the state? Are families, churches, or states to control education? Should reproduction be regulated by state, family or church?”²⁷³ We discuss the institutional level of ambiguity for a different reason.

First, organizations, in all kinds of forms, have tended to institutionalize in the twentieth century. Institutionalization means that organizations become more than mere instruments (for profit, or care – in our case).²⁷⁴ The history and durability of organizations, or a field of organizations, becomes a value in itself, for example because of the social or cultural function or symbolism it has gained in a particular context. Selznick, an early theorist on institutions, equates institutionalization with: “*to infuse with value.*”²⁷⁵ Second, more importantly, institutions are an important object of study in this thesis. As noted in the introduction of this thesis, I am searching for an *institutional task*. In the next chapter, I will discuss this institutional care in more depth and an analysis of institutional decline and a possible rebuilding of it follows in Chapter 9. The connection between institutions and ambiguity is an important prelude to understanding how supervisory boards have been

270 See Scott, *Institutions and Organizations: Ideas and Interests*, 186; Denis, Ferlie, and Van Gestel, ‘Understanding Hybridity in Public Organizations’; Greenwood and Hinings, ‘Understanding Strategic Change: The Contribution of Archetypes’.

271 Friedland and Alford, ‘Bringing Society Back in: Symbols, Practices, and Institutional Contradictions’, 248.

272 Scott, 186.

273 Friedland and Alford, 256.

274 Scott, 19–20.

275 Selznick, *Leadership in Administration; a Sociological Interpretation*, 16–17. Original italics.

driven away from an institutional, and finally, as will become apparent, a political task.

Third, ambiguity arises out of institutional logics as in many organizations or practices there is not one logic in place, but different competing logics, regardless of whether a logic has a legitimate claim in ordering that particular practice.

Fourth, this perspective helps to understand why organizations of the same type (such as hospitals, schools, etc.) located in widely scattered places so closely resemble one another.

6.3.1 Defining institutions

Very quickly, one gets lost in the number of concepts regarding institutions that appear to be synonymous – but are not. I here sum up the definition I will use of institution, institutionalization, field and organization.

I follow Scott's definition, who formulated an integrated definition of institutions, based on for example Weber, Durkheim, Giddens, Berger and Luckmann, Goffman and March and Olsen: "institutions are multifaceted, durable social structures made up of symbolic elements, social activities, and material resources."²⁷⁶ With this, institutions provide stability and meaning to social life – even though institutions do change, but this change is only incremental as it is permanently resisted by the very nature of institutions. Institutions are not just the sum of actors in an institution, but by carrying values, transcends from the individual into structures. Scott argues that institutions can be defined as being comprised by three elements: regulative, *normative* and cultural-cognitive. Institutions regulate and constrain behaviour. They set rules, monitor and sanction. After the regulative element, institutions also have a normative element, which is slightly different. Institutions bring forth and perpetuate certain values and norms, that need not to be regulated. The orientation to values makes institutions define goals or purposes (make a profit, care for the elderly), as well as prescribing how this should be done.

Then there is the *cognitive-cultural* element that is "the shared conceptions that constitute the nature of social reality and the frames through which meaning is made."²⁷⁷ It addresses how institutions relate to individual agents, and how this is productive for the creation of meaning. By centralizing the interaction between individual and cultural elements, this element can show us how institutions are resistant to change, while they still change. Institutions represent in this sense a 'sedimentation of meaning'.

²⁷⁶ Scott, 48.

²⁷⁷ Ibid., 57.

As noted, institutions have more value than just the technical matter at hand (cleansing souls, educating or healing people), but are infused with values that give meaning and texture to social life as a whole. Hence, there is kind of social recognition and legitimation by the simple fact that something is an institution, even if the perceived effectiveness or fitness for purpose of the institutional organization is questionable – and as we will see in Chapter 9, this is precisely why institutions have declined in modern society.

Processes of institutionalization of organizational types are caused by changing environments or *fields*.²⁷⁸ In institutional dynamics, the reason why organizations get institutionalized, and tend to resemble one another, is because they find a similar legitimation in an organizational *field*. Institutionalization may occur because of path-dependency (once invested in technology, this cannot be [easily] reversed), the need or will for a stable social order rather than loosely organized or narrow technical activities, and the process of objectification (“this is the way we do it” or “this is the way it is”). However, organizational types may also deinstitutionalize, for example when traditional legitimation patterns are (successfully) being challenged. To think in terms of a field implies to think relationally of “those organizations that, in the aggregate, constitute a recognized area of institutional life: key suppliers, resource and product consumers, regulatory agencies, and other organizations that produce similar services or products.”²⁷⁹ The organization and its environment codetermine each other. Hence, agency and determinism coexist. A field is composed through a power struggle of different *institutional logics*.²⁸⁰ These logics are differentiated among specialized arenas or spheres, such as political, private, economic, religious, kinship, and so on, and each of which is governed by a different logic. There is close similarity to the Pestoff triangle mentioned in the macro analysis, in this sense however, it is not so much about the governance structures, but rather about the rules, values and cultural-cognitive meanings that determine a certain logic.

6.3.2 Institutional logics in Dutch long-term care

In Dutch institutional research on (long term) health care governance, the main approach is the institutional logic approach. Verhagen identified four logics, namely a political, an economic, a family and a professional logic.²⁸¹ Hoek

²⁷⁸ Ibid., 186–87.

²⁷⁹ DiMaggio and Powell, ‘The Iron Cage Revisited: Institutional Isomorphism and Collective Rationality in Organizational Fields’, 148.

²⁸⁰ Friedland and Alford, ‘Bringing Society Back in: Symbols, Practices, and Institutional Contradictions’.

²⁸¹ Verhagen, ‘Zorglogica’s uit balans’.

identifies three, namely private, public and professional logics.²⁸² Putters also named four logics: government and politics, market, community and medical profession.²⁸³ All three argue that the activities of the board (and supervisory board) – the internal governance processes – somehow must integrate these different and competing logics. However, especially Verhagen and Putters argue that these logics are unbalanced: the community interest and expectations and the elaboration of its logic is underexposed in the governance of Dutch health care organizations. This can be explained by the organizational fields and the way organizations legitimize themselves. The most influential powers in the organizational field of long-term care are the government (and its inspectorates) and the commissioning groups which are mainly from local governments. Moreover, normative legitimation and resources are acquired by following standardized accreditation processes. In hospitals, the specialists form an important elite group, but this is less the case in long term care. Specialized nurses, location managers and team leaders might fulfil that position, but in a less strong fashion. Then there are the patients and families themselves, who appear to have very little power in the organizational field.²⁸⁴ Recently however, there has been more attention to the role of patients and relatives in ‘co-creating’ care.²⁸⁵

It does not take a huge effort to see that most long-term care organizations in an organizational field (for example elderly care, mentally disabled care) are very much alike. Recently, an institutional shift appeared in the governance structures of many of these organizations: from hierarchical and deployment organizations, to organizations led by self-governing teams. This indeed seems to be one of the most recent forms of normative legitimation. At the same time however, Van Dalen showed how the mimetic aspects of long-term care organizations tend to suppress innovation and different kinds of governance structures.²⁸⁶ Currently, one might notice that organizational fields of long-term care are currently shifting, whereby the professional and family logic gain more power. The fact that organizations in long-term care must deal with these different logics at the same time, shows its ambiguity.

282 Hoek, ‘Governance & gezondheidszorg: Private, publieke en professionele invloeden op zorgaanbieders in Nederland’.

283 Putters, *Besturen met duivelselastiek*.

284 Verhagen, 280.

285 Cf. Kanne, *Co-creatie van goede zorg*.

286 Van Dalen, *Zorgvernieuwing: over anders besturen en organiseren*.

6.3.3 Institutionalization of governance

The supervisory board of an organization may find itself in the heart of the competing institutional logics; it somehow should work within all of the contradictions and paradoxes that result. However, the supervisory board (or more precisely: the two-tier governance practice) can also be regarded as itself being an institution. The two-tier governance practice is far from being a mere instrument for restraining and enabling responsibility; it has become a perpetuated practice with (implicit and explicit) norms and rules in which practitioners are socialized.

The two-tier board appears to be taken-for-granted – although one is not legally obliged to install precisely *this* governance structure. We have already shown in the preceding paragraph how the influences of corporate governance and NPM played their role here. But a more important feature might be the power struggles of dominant elites. Before the two-tier board entrenched itself, there was the so-called ‘instruction model’ of governance. In the latter, the board had final responsibility, but no executive power. A director was executive but had on the other hand no final responsibilities. Very often, the board comprised voluntary elites from local communities or complementary expertise. Since health care has become more and more complex, institutionalized and organizations became larger, the directors pursued more power to stand against the dispersed power of the professions. For indeed, the bigger the organization, the more need there was for proper integration of the different professional elites. Therefore, the directors pursued final responsibility, and wanted to displace the board to a less dominant position, leaving the board aside with an oversight and employer-of-the-board function – the supervisory board. As the boards were mainly volunteers and became aware of the needs of increasing institutionalized organizations, they readily took a step back (more on this point can be found in the fourth paragraph on roles and identities). During the nineties, and especially after the (private) report on health care governance in 1999, nearly all organizations in long term care (but in all areas of health care, by the way) adopted the two-tier model. The same is true for education and public housing.²⁸⁷ Not having a two-tier supervisory board in a traditional long-term care institution seems to be unthinkable in the Netherlands, not because of legal rules, but because of orthodoxy – dominant discourses on governance.²⁸⁸

²⁸⁷ Den Uijl et al., *Onderzoek alles, behoud het goede. Herwaardering van het verenigingsmodel*.

²⁸⁸ See for a comparable argument made in education: Den Uijl et al.

A strange thing is going on here. In the opening chapter, we mentioned that supervisory boards sometimes lack (internal or external) legitimacy. Here however we argue that precisely out of reasons of legitimacy the specific supervisory practice is now entrenched. We here face the notion of *sedimented* change, and this indicates ambiguity. As the supervisory practice is highly institutionalized, processes of change or deinstitutionalization, processes we nowadays face as some argue,²⁸⁹ will not just lead to paradigm shifts. Rather, sediments of the 'old' way of working will reside in the new forms. Therefore, even though many supervisory board members want to 'change' or 'innovate', the practice is and perhaps can only be changed marginally. For the answer to the question of why practices of supervisory boards are mimetic, one needs to look at both the institutional context of the organizational field, as well as to the specific institutionalization processes of supervisory boards. Ambiguity occurs in both the different institutional logics that are apparent in health care, as well as in the sedimented practice perspectives on governance.

6.3.4 Pluralism and complexity

Hence, ambiguity from the institutional logics perspective, is (from a strategy perspective) about how to navigate between competing logics. Health care organizations are what Mintzberg called *professional bureaucracies* and are typical highly and inherently pluralistic organizations where no one has full control (even though this is sometimes pursued), where divergent objectives are pursued by different groups and where the legitimacy of change initiatives cannot be taken for granted.²⁹⁰ Hence, these organizations are influenced by a variety of norms (logics) that are not always reconcilable with efficiency objectives.²⁹¹ Pluralism increases whenever organizational boundaries tend to be more fluid, something which is highly visible in health care (more and more health care organizations need to cooperate in networks). This analysis closely resembles patterns of change as formulated by complexity theorists in which opposing forces collide, relationships are mostly nonlinear, and feedback loops produce unpredictable and cyclical change.²⁹² The supervisory board, though formally the protector of the societal mission as formulated in the statutes, might be wondering how the executive board is steering such

289 Cf. De Waal, *The Value (s) of Civil Leaders*.

290 Denis, Lamothe, and Langley, 'The Dynamics of Collective Leadership and Strategic Change in Pluralistic Organizations'; Denis, Ferlie, and Van Gestel, 'Understanding Hybridity in Public Organizations'; Mintzberg, *The Structuring of Organizations: A Synthesis of the Research*, 348–79.

291 DiMaggio and Powell, 'The Iron Cage Revisited: Institutional Isomorphism and Collective Rationality in Organizational Fields', 148.

292 Cf. Stacey, 'The Science of Complexity: An Alternative Perspective for Strategic Change Processes'.

an organization. As pluralistic organizations tend to be unstable, and always in a state of ‘becoming’, a strong autonomy of everyday practice is vital for managing and overseeing such organizations – a good example we have seen in organization X in Chapter 4.²⁹³ Here we link up with the next part of our analysis, namely the ambiguity from the perspective of practice theories.

6.4 Meso/micro analysis of ambiguity: Practice theories

6.4.1 Practice theories, a short overview

Very often, as noted above under the paragraph on institutional theory, ambiguous governance practices are sociologically explained using different ‘logics’ or ideal types. Usually, these logics are a professional logic, a bureaucratic or public logic, and a private or market logic. Sometimes a community or family logic is added.²⁹⁴ Although this might be very insightful, Weber reminds us not to forget that people within a practice do not rationally act according to these logics – he called them ideal types; they often act out of impulse or habit.²⁹⁵ Indeed, very quickly, the contextuality and ‘swampiness’ of the practice can come to be overlooked.²⁹⁶ The rise of practice theories in recent years might be partly explained by this ‘overlooking’ of day-to-day or micro practices.²⁹⁷ For practice theory, theory is not abstract, but rather forms an ensemble with and within the practice.²⁹⁸ Governance as practice means that we understand governance in its context, history, implicit and explicit rules and norms, artefacts, interactions, bodies, et cetera.²⁹⁹

To understand ambiguity from the perspective of practices, we need to go one step further. It is argued that practices are bundled, function in networks or a nexus of practices.³⁰⁰ Boundaries between different practices are constantly crossed, making practices intertwined with each other. These boundaries may be crossed by actors (or bodies): the supervisory board member who walks for a day along with nurse; but might additionally be impacted by ‘things’, such as quality measurement system reports. These

293 Bjerregaard and Jonasson, ‘Managing Unstable Institutional Contradictions: The Work of Becoming’; Jarzabkowski, Balogun, and Seidl, ‘Strategizing: The Challenges of a Practice Perspective’.

294 See also Freidson, ‘Theory of Professionalism: Method and Substance’.

295 Weber, *Economy and Society*, Vol. 1, 21.

296 Van Ewijk, ‘Conceptuele inleiding: Ontvouwing van normatieve professionalisering’; Schön, *The Reflective Practitioner: How Professionals Think in Action*.

297 Caulter, ‘Human Practices and the Observability of the “Macro-Social”’, 38–39.

298 Schmidt, *Soziologie der Praktiken*, 29–30.

299 As mentioned in the introduction of this thesis.

300 Nicolini, *Practice Theory, Work, and Organization an Introduction*, 205–7; Hui, Schatzki, and Shove, *Nexus of Practices*.

boundaries are also crossed between organizational practices and orders that comprise regional and national politics, for example healthcare services, inspectorates, etcetera. The inspector's practice crosses necessarily that of an organizational practice. Hence, they are intertwined with each other (and might itself be a 'bigger' practice), as these boundary crossings appear. Rules for example that enter a governance practice might partially be derived from the governance code, which comes from umbrella sector organizations in health care. Other rules, for example on transparency of salaries, might come from national inspectorates, private health care insurance companies, or local governments. The governance practice is therefore not self-sustaining but is perpetuated in a nexus of practices and is by that very fact ambiguous in a practice-sense: drawn from different but intertwined practices. Ambiguity in this practice-sense does not imply – merely – different roots or archetypes, but rather the fact that contemporary health services are intertwined and linked-up, in sayings and doings, with numerous other practices, close-by or further away.

6.4.2 Ambiguity of governance and practice theories

Now in what sense is the practice of governance ambiguous. First one must mention that governance in a practice-sense does not merely entail an idea or structures. Rather, it is about doing governance. When do we do governance? In Chapter 3, when describing common practice, I made an attempt to show what doing governance, or *governancing*, is. The boardroom is one of the specific sites where supervisory work takes place. Normally, there is no supervisory board meeting without the executive board attending, therefore, even the most basic aspect of the practice of supervisory is already ambiguous: it overlaps the practice of steering: governing, leading and/or managing an organization. Now and then other people will visit the meeting of a supervisory board, for example an accountant, a controller, a nurse or a doctor, members of staff or management team, et cetera. All these people represent different heterogeneous practices that are brought into the boardroom. Sometimes it is the other way around, as mentioned above, when supervisory board members go out of the boardroom, and visit people – employees or patients – in or outside the organization. We already mentioned the ambiguity of the explicit rules that function in the practice of governance. Different board members, furthermore, all bring along, to a certain extent, not only their personalities and character (emotions), but also their professional backgrounds, personal interests and purposes. There might be a mix of backgrounds from executive boards in private or third sector, local or national politics, third sector or health care professionals, advisors or consultants, HRM professionals, accountants and controllers, real estate specialists, professors, et cetera. It is obvious that the mix of people brings

along a peculiar kind of ambiguity to the practice. This is in the context of practice theories however rather than being about the psychological aspect of this ambiguity, but rather the way these different backgrounds become manifest in the practice. For example, when a professional from health care quarrels with an accountant or controller on investments in quality or professional staff. Moreover, practice theories are informed by the fact that individual agency only partially explains or determines the functioning of the practice. Looking at governance and supervision with a practice lens shows very clearly how boundaries between different types of practices are blurred.

6.4.3 Performativity of practices

Furthermore, a 'practice lens' teaches us that a supervisory practice is not primarily (or not at all, depending on which author one refers to within the practice theory spectrum) representational, but rather performative, in that the performances of the practice are not detached but rather connected with the practices it tries to represent.³⁰¹ Hence, a supervisory board *de facto* also changes or transforms the practices *by the very way* it tries to represent it in a detached manner. This argument also goes the other way around. The practice of governance is not created as a 'one-off' or in a rational vacuum but is rather a perpetuated practice informed by the (bundle of) practices it crosses. Depending on the concrete supervisory practice at hand, one may notice how the accounting or controlling standards used in the organization partially define the practice.³⁰² The very way the supervisory board looks at management and control in the organization is not merely defined by the supervisory board itself, but also by the practice of controlling in the organization. This is supplemented by practices in which supervisory board members dwell in other places, as well as controlling standards that are promoted elsewhere.

Schmidt calls this overlapping of practices: 'assemblage of performances'.³⁰³ The performances must be public, visible. Hence, supervisory practice is not (merely) about the governance or responsibility *structure*, nor is about the specific functional descriptions of the supervisory board, be it in a governance code, rules or by-laws, but about the concrete emergence of doings in a concrete site or place (*Ort*). The site of supervisory practice cannot be

301 Nicolini, *Practice Theory, Work, and Organization an Introduction*, 173; See for a more radical account: Barad, 'Posthumanist Performativity: Toward an Understanding of How Matter Comes to Matter'.

302 Drost et al., 'Accounting as a Performative Strategic Actor: The Performativity Turn in Accounting Research'.

303 Schmidt, *Soziologie der Praktiken*, 230–31.

captured in a spirit (*Geist*), in values, in intersubjectivity, in norms or in communication, but rather is held together as a specific practical ability (*praktisches Können*), a collective of behaviours by bodies and materials. We here already come close to the realm of practical wisdom. From this perspective, supervisory practice is best described as a combination of discussing organizational issues guided by a rather strict agenda. Reading of texts and responding with body language might be important as a practical ability, as the practice is mainly performed within a setting where people sit together at a table. Practitioners somehow ought to know when a particular question is legitimized, when it is proper to speak, so to say, when one can become probing or demand explanations, and when one can become trustful. This practical ability is hence not the rational ability of a single practitioner, but rather his preserved degree of autonomy while he is at the same time immersed and partially defined by the practice. As Gadamer argues, from a hermeneutic perspective, it is not just we who play the game, but also that the game plays with us.³⁰⁴ Being a virtuous player of the game, following Arendt, means that one is able to “(...) answer the opportunities the world opens up before him in the guise of fortuna”.³⁰⁵ This Machiavellian approach to virtuosity (*virtú*) may imply that the supervisory practitioner can shift between different modes of supervision, to shift between different modes of the power that he or she has at hand, depending on what a situation demands.³⁰⁶ This form of ambiguity – a range of heterogeneous practical abilities, which nevertheless somehow must be combined and integrated – is, following the practice approach, at the core of the supervisory practice.

6.5 Micro analysis of ambiguity: Identity and roles of governance practitioners in long term care

I also want to highlight how we can make sense of ambiguity from the perspective of identity or roles. This is because roles and identities can highlight matters that are close to the way practitioners of governance tend to evaluate themselves – recall the four roles in Chapter 3 and the search for added value or meaning of the supervisory board in Chapter 4. Also, this perspective helps to see how the governance model in Dutch civil society, and health care in particular, developed. I must note however, that from the

³⁰⁴ Gadamer, *Truth and Method*, 505.

³⁰⁵ Arendt, *Between Past and Future*, 153.

³⁰⁶ I come back to the Machiavellian point of view in Chapter 10. Arendt and Gadamer, and their perspective on practical wisdom and what this implies for wise supervision, are discussed in Chapter 11. Arendt and Gadamer are of course not practice theorists as such, but this shows all the more the conceptual reach of practice theories.

practice perspective described above, I only consider roles and identities as *part of* the practice, but as such only partially determines the practice. Hence, I here will speak of the identity and roles of a supervisory board and in what way we can look at these from the perspective of ambiguity. The mixing of different identities or the construction of new ones is a form of ambiguity. An obvious case would be, for example, when a doctor becomes a supervisory board member (in another organization). He will take his identity as doctor along in the forming of his identity as a supervisory board member. Different research has shown that these kinds of role-mixing might eventually trigger the rise of new work identities.³⁰⁷ This reshaping or construction of identities might lead to frictions between different identity preferences.

It is commonly accepted to say that the identity of the supervisory board member in Dutch health care has been shifting heavily in recent years. Governance in Dutch health care is, ever since the nineties, mostly organized in a two-tier governance structure. Before this, there was an instruction model, in which the board had final responsibility, but no executive power – as noted earlier. The director on the other hand had no final responsibility but did have executive power. The rise of the two-tier model, in which the director became the executive board (with final responsibility) and the board became the supervisory board (which thus had to abolish final responsibility and hence were set at a distance) can be explained by a change in identity construction of the directors. They argued that the increasing complexity of health care, as well as an increasing need for quick and mandated action, demands integration of final responsibility and execution. They seem to have ‘won’ this power struggle, as in the course of the nineties nearly all health care organizations adopted this two-tier model. Within the instruction model, many board members were volunteers. They had different expertise in addition to the director, who was often someone ‘from the field’. In long term care, these voluntary boards had very close ties with the local environment of the health care organization. This was one of the problems directors had: board members often discussed and bypassed directors because of their involvement in local communities: they would debate policy next to the football field on Saturday or Sunday mornings. As the nineties developed, and more and more two-tier models were implemented, the identity of supervisory boards members changed. Instead of (local) embeddedness, now *independence* became the main identity focus. Moreover, as supervisory boards were more and more perceived as *professional* boards, honoraria were more and more introduced and raised. This had another

307 Denis, Ferlie, and Van Gestel, ‘Understanding Hybridity in Public Organizations’, 280.

reason as well: the wave of fusions and mergers in the nineties made some long-term care organizations very big, complex, and demanded – so it was argued – corporate-like boards. As independence was key, supervisory boards more and more relied on the information from the executive boards. Their focus became business economics, management, accounting and the control of the executive's actions. Indeed, one might say stereotypically, they became more and more bureaucrats in the Weberian sense: 'without anger or fondness' (*sine ira et studio*), addressing the technical matters of running an organization with specialized expertise.³⁰⁸ As the second millennium evolved, different supposed 'governance scandals' in civil society appeared, both on economic and quality issues. Voices were raised that supervisory boards have become powerless, 'lame ducks', and that executive boards could principally do everything they wanted (note here the argument from agency theory of moral hazard).

An important metaphor of the identity of supervisory boards was, and perhaps still is, that they were not allowed to sit in the executive's chair.³⁰⁹ This identity discourse was so pervasive, that, with a little exaggeration, a meeting or conference was not possible without this being mentioned. Hence, supervisory boards were reluctant and hesitated from being 'proactive', resolute and thorough, as this might undermine the executive role. In the light of the scandals, this identity perception became, at least to some extent, problematic.

We notice from 2010 onwards that identities shift. Supervisory boards emancipate, so to say. They become more engaged and thorough in their collection of information and less dependent on the information the executive board gives them.³¹⁰ More and more supervisory boards are interested and active in strategy, risk and quality management. Their search for information may even be a little desperate: how can we make sure that we don't miss out? Professionalization is seen as an important answer, and there is talk about the supervisory work being a craft.³¹¹ Also, civil or servant leadership is given attention, contrary to the prestige identity that may have been present before.³¹² Schraven, a consultant who has been in the business of governance in health care from the early nineties, has eloquently described these changes in roles and identities in a maturity matrix. It moves (or should move or has moved – this remains elusive), from an informal, via a formal and a

³⁰⁸ Weber, *Economy and Society*, 975.

³⁰⁹ Cf. den Uijl and Schulz, *Van bureaucraat tot grenswerker. Over de rol van de secretaris bij de professionalisering van het interne toezicht van hogescholen*.

³¹⁰ NVTZ, 'Tussen Besturing En Samenleving'.

³¹¹ Dinjens, *Goede raad voor commissarissen: 21 inzichten voor toezichthouders en bestuurders*.

³¹² Cf. de Waal, *The Value (s) of Civil Leaders*; Den Uijl and Van Zonneveld, *Zorg Voor Toezicht*.

result-oriented supervisory practice, towards a value-oriented supervisory practice. A value-oriented supervisory board always has, among other things, the patient in mind, has internalized the governance code and permanently asks what the *raison d'être* of this organization is. They move freely within and outside the organization. Accountability is seen as necessary, useful and voluntarily.³¹³

Now the point of the identity perspective, when it comes to ambiguity and the proliferation of it, is that identities once formed do not just disappear to be replaced by new ones, but rather appear as sediments in an ongoing identity forming process. Hence, we might expect that although we now find ourselves in a dominant discourse of supervisory as a value-oriented profession, it is to be expected that the 'old' identities still play an important role in supervisory boards. Indeed, it is by sedimentation that ambiguity on the level of identity shows up.³¹⁴ Hence, in long term care, especially small elderly care organizations, there might still be voluntary supervisory boards, in a two-tier setting, combining voluntary identity with a professional identity which is forced upon them by accretion, the society of supervisory board members or accreditation requirements. Moreover, many supervisory board members who come from an embedded identity, find it hard to accept the independent identity, and others find it hard to accept the need for a re-embedding. This indeed, up to this day, leads to many frictions in and between supervisory boards and executive directors, as these different identities are mixed up. We are at this moment not arguing at all that the latter identities are better or worse than former ones, but just confirming that from an identity perspective, supervisory practice in long term care is ambiguous.

6.6 Brief reflections

We have seen that four theoretical perspectives (governance theories, institutional theory, practice theories and identity theories) on three different levels (macro, meso and micro) lead to different interpretations of how ambiguity proliferates in supervisory board practice in Dutch civil society and health care. Taking a genealogical approach, I have intertwined history and ideas. This has shown the institutional background of the rise of the supervisory practice as we know it. Summing up, there are four different kinds of ambiguity.

³¹³ Schraven, *Governance in de zorg*, 13–15.

³¹⁴ Ricoeur, *Oneself as Another*, 121. I come back to this French philosopher in Chapter 9 and 10.

- From a macro perspective, there are, and have been, some major influences on the third sector by ideas from economics and business administration as well as from public administration.
- From a meso/macro perspective, ambiguity occurs due to colliding institutional logics that are manifest within a single organization. Governance is supposed to navigate these, sometimes, irreconcilable logics. Also, some logics may outgrow others.
- From a meso/micro perspective, ambiguity occurs due to the ‘nexus of practices’: not only logics collide, but all sorts of concrete practices (rather than abstract logics) come together in the practice and site of governance. Making sense of this complexity of ‘practice bundles’ requires a *praktischen können* (see p. 176).
- From a micro perspective, ambiguity occurs due to the sedimentation of identities and roles. The practice of supervisory boards is always already burdened with historical identities.

In the beginning of this chapter, I argued, and still do, that the perspective of practice theories can integrate all four types of ambiguity without letting the different perspectives overdetermine the practice. Rather, discourse (history of ideas), colliding logics (or perhaps better: repertoires), nexus of practices and sedimentation can all be seen as part, but not as determinative of practices. This means that we cannot determine or judge a practice merely based upon ideal types or by looking at human actors. We need to take them into account, but the practice approach requires, eventually, to build theory in coherence with empirical practice. It enforces modesty about the potential of remote theory in understanding practices, and that is also why I used four different perspectives.

Now the question is, or was, what does this genealogy of ambiguity tell us about practically wise supervision? First of all, it shows us that there has been a tendency to perceive the supervisory practice predominantly as a bureaucratic or administrative expert role: the process of professionalization, combined with (the crucial) independence and relative distance of supervisory boards. This may show that the specific *civil* aspect of civil society or health care organizations has been gradually lost from sight. Or, put differently, the ordinary practices of care and living together became less and less part of the supervisory practice. At the same time, however, we notice how a reversal of this is going on, a rediscovery of the social or public meaning of supervisory boards – also noted in Chapter 3 and 4. This is also because practitioners became aware that bureaucratic/rational control of practices of care is always ‘after the fact’, too late, if you like. The strategic question, where to go from here, requires a looking forward. But there are no numbers in looking forward. Hence, supervisory boards were forced to look more directly at the

daily reality of care. Furthermore, we notice that, from different perspectives, the practice of governance is about conflicted perceptions of what good governance and good care is, leading to some hegemonic discourses and dominant practices (for example, the rise of agency theory, the suppression of caring logics, the idea and practice of independence and professionalism). It furthermore appears that the idea of civil democracy, or any form of democratization of governance, has been lost from sight ever since the seventies – and never really came back, not even in the recent revival of social value or purpose-oriented supervisory practice. More general attention to civil democracy, in relation to care, is present, of course, in the revaluation of professional autonomy and co-creation between patients, relatives and professionals. Supervisory boards are more aware of this, as we have seen here and in Chapter 3 and 4. The question remains whether, with a historically entrenched practice that thrives on management instruments, remoteness and expert-knowledge, the supervisory practice is truly able to connect to the ordinary questions of care, and how these questions relate to the bigger picture. Also, since there is so much attention to technical and expert-knowledge, the question is whether the boards are able and willing to admit the political nature of their work – and whether of course this is necessary. Lastly, although there is attention to ‘professional ownership’ and co-creation with patients, the idea that the supervisory board or the governance process itself should have democratic elements is far from being an accepted or common point of view.

Further perspectives

From the perspective of Schön’s reflective practitioner and Hart’s ‘lost in control’, it is interesting that the supervisory practice admits that it is sometimes too distant or instrumental, and too much occupied with control systems instead of the ‘lifeworld’ of patients and professionals. It remains elusive whether these are only ‘sayings’ or also ‘doings’. In any respect, to better understand this movement, we must now turn to the more theoretical and fundamental issues of this thesis: care and the management thereof.

7. The swampy lowlands: A care ethical approach

7.1 Introduction

Throughout the past chapters, I have mentioned the idea of ‘ambiguity of care’ – the swampy lowlands. I believe it makes sense to study this idea in some detail. Not only because it needs explanation, but also because from a management or governance perspective, care is often not seen as ambivalent or ambiguous. Quite the contrary, from the management perspective, care, or the quality thereof, can (and should) be categorized, measured, controlled and managed. At least to some degree. This relates to the urge for certainty, for firm ground, coined as concern in the introduction. As mentioned, this urge is not *everywhere*, as we saw in Chapter 4. Moreover, this certainty is not always sought after in evidence, but also in ideology. Also, this urge need not to be militant, it may very well spring from good intentions – the urge appears to be habitual rather than intentional. This is at least what we might expect considering the analyses of sedimentation and ambiguity in the previous chapter. This urge for firm ground has to do with the way in which health care deals with the question of quality: as soon as this question of care comes up, it is immediately detached from the *content* of care: it is about systems, assurances, measurements and improvements.³¹⁵ Quality management principles from industry are copied to organized care – a form of ambiguity.³¹⁶ Less obviously, it is sometimes about romantic values, ‘the learning organization’ or accountability. In the slipstream of this processual and technical approach to care follows an omnipotent drift for (bureaucratic) control and administration, even though nearly everyone claims that they want to get rid of this.³¹⁷ Supervisory boards use the quality and management systems already present in the organization to organize their supervision. It is no surprise, then, that also in supervisory boards and quality committees this processual approach to quality is dominant.

The care ethical approach to care (in a general and an institutional sense) is, I believe, one of the few perspectives on care that does take into account the *content* of care and its ambiguity. The care ethical approach is able to look at caring practices very carefully, and searches for the moral and political implications of what is considered *within* practice as good care. Because of

315 Baart, *De ontdekking van kwaliteit*, 42; NVTZ, *Zienderogen beter: gids voor intern toezicht op kwaliteit van zorg*.

316 Schmidt, *Nie wieder Qualität. Strategien des Paradoxie-Managements*, 280.

317 Baart and Carbo, *De zorgval*; Baart, *De ontdekking van kwaliteit*, 46–47.

these moral and political aspects, it well suits my quest for a practical wisdom in governance. As I argued in the introduction, any form of practical wisdom is never practical wisdom in general, but always in relation to some concrete (political) practice. If I want to say something about practical wisdom in supervision, I must also look very carefully at a certain political practice in which the supervisory practice is embedded. Of course, at the same time, I argued that practical wisdom, and practically wise supervision in civil society, share some qualities and ideas. The care ethical approach however, cuts both ways. In the Netherlands, care ethical approaches are often embedded within professional health care practices, but internationally, care ethics is more to be seen as a political-ethical and also epistemological theory in general.³¹⁸

The concept of 'care'

The term 'care' is itself an ambivalent term and can be used in many different ways and contexts. It can be a verb, like *caring*. It can be a noun, for example referring (especially in the Netherlands) to the health care sector (*de zorg*). It can be an utterance of concern, dedication or worry, such as: 'be careful!' – caring about something. It can be a quality of a certain action: something is handled with care. Some may think care is a 'thing', with qualities that can be measured.³¹⁹ Also, within care ethics itself, the word raises controversies. Curiously, in the Netherlands, the word care (*de zorg*) is not (anymore) primarily associated with everyday and ordinary caring, such as bathing the baby, wrapping it in a cloth and then cuddling it tenderly. Instead, the word care (*zorg*) is first of all associated with its institutional, organizational and professional form: the health care system.³²⁰ This coincides, as mentioned above, with the loss of the content of care whenever the question of quality appears. For a care ethical approach, the ordinary and institutional forms of care must both be taken into account in order to say something about care – and about when care is considered or appears to be good: its ethical outlook.³²¹ For Tronto, for example, care is besides a moral foremost a political category. It: "(...) includes everything that we do to maintain, continue, and repair our 'world' so that we can live in it as well as possible."³²² In her later work, she takes an explicit liberal democratic turn

318 Vosman, 'Kartographie Einer Ethik der Achtsamkeit - Rezeption und Entwicklung in Europa'; Conradi, 'Theorising Care: Attentive Interaction or Distributive Justice?'

319 Vorstenbosch, *Zorg: een filosofische analyse*; Vosman, 'Kartographie Einer Ethik der Achtsamkeit - Rezeption und Entwicklung in Europa'.

320 Vosman, 'Kartographie Einer Ethik der Achtsamkeit - Rezeption und Entwicklung in Europa', 33–34.

321 Vosman, *Goed gebleken*. The Dutch care ethicist Frans Vosman was one of my supervisors of this thesis. He died 10 June 2020 (see also preface). In his dissertation he already pointed out, not yet care ethical, that what is considered to be good, is that what appears to be good.

322 Tronto, *Moral Boundaries*, 103; Tronto, *Caring Democracy*, 19.

to this definition: “Democratic politics should centre upon assigning responsibilities for care, and for ensuring that democratic citizens are as capable as possible of participating in this assignment of responsibilities.”³²³ This category of care is far beyond, or precedes, mere health care. Still the linkage with health care is quite natural, as in this branch ordinary – although professional – care intersects with its political contexts, practices and policies, and is therefore a fertile ground for care ethical research.

In a care ethical sense, therefore, the concept ‘care’ can have different meanings, there is no clear-cut care-ethical definition. It can refer to ordinary forms of caring; to delineate a kind of profession (such as nursing) and can be applied to a whole range of studies. The concept of care is therefore never neutral, never speaks for itself, but must be time and again explained and unpacked. This ambivalence also opens up the political aspect of care.³²⁴

Outline of this chapter

In this chapter I will therefore, in a care ethical way, talk about what it is that the supervisory practice is oriented towards. I will do so by starting with a small story and some explanation from a concrete caring practice to give an example about what care is, before we are even able to speak about systems or assurances. After that, I will shortly describe the history of ideas in the ethics of care (which is a pluralistic field of study). I will then formulate four critical insights ethics of care has to offer to understand ambiguity, and, as we will see, also its political and democratic implications. After that, I will critically examine the notion of quality management in the light of these critical insights as a prelude to the next chapter. I will discuss to what extent we can, from the care ethical perspective, consider supervisory practice as a political and a caring practice. Indeed, care ethics opens up care as a moral and political space: in care within organizations and institutions, something is at stake in our attempts of living together decently.

323 Ibid., 30.

324 Vosman, ‘Kartographie Einer Ethik der Achtsamkeit - Rezeption und Entwicklung in Europa’, 34.

7.2 Story: the professor

The word 'erudite' pops up during the intake. And that is what he is. Despite his deep dementia, he is studying journals for hours, with a fierce, almost despairing concentration. He fills up his notepad, in a handwriting that has most in common with a cardiogram of a severely ill patient. He loved to teach, and also practices this on one of our younger nurses, but he is incomprehensible.

Sometimes he knows. He rips his written notes apart, foaming and screaming. He furiously tries to unscrew the table leaf, behind which he is locked on doctor's orders, but still, he remains decent. If he fails, he drops his face, exhausted.

Comforting him is counterproductive. He lives a life of the mind and hates bodily contact. Washing him is an assault, because he is so ashamed of his body, and being naked in front of strangers. He crawls away into a foetal position and totally dissociates, disappears somewhere into a nook of his mind. It is intensely sad to see the professor transform into a small heap of humanity which does not want to exist anymore.

Piece by piece his soul vanishes. He shrinks, turns paler, smaller. As other residents tend to accept their fate, he drifts away on a raft into the rough and wide-open sea.

He refuses to have contact with table companions, people with whom in daily life he also never mingled. Why do we suddenly put the housewife, the salesperson and the professor at one table, because of dementia? What makes us think that in this arena they suddenly want to sing songs together or arrange flowers?

He refuses, sets himself apart. He does not eat or drink anymore. The wrinkles of his fears and worries are smoothed by the peace of his decision.

One morning he departs this life, with a smile. What he has decided has now come to be.

It is now that we can see how he must have looked before his illness – calm, concentrated and yes, erudite.³²⁵

325 Translated from Donkers, *Berichten uit de zorg*, 15–16.

I do not want to overanalyse this story, as there is a shortage of contextual information: it would be too hurried a judgment to decide whether this appeared to be good care. But there are some things important for my question. First of all, it shows how raw and sore care can be, being confronted with death, decline and a (supposed) loss of human dignity and the impotence and despondency of caring practitioners. It is not romantic at all and defies a generalization in values. Care is about survival, and not only for the patient.³²⁶ The technical questions of quality systems, assurance, control and improvement are out of place, appear irrelevant, even offensive and alienating. Does the nurse need to make a (near) incident report for the showering scene? To whom and when will the question to determine the 'net promoter score' be asked? In other words: who may or can decide, in this time and place, what good care is? And however uncomfortable, is the organizational need for quality management in the end not also relevant for small stories? It is an obvious case in which small everyday and ordinary forms of care (helping someone with a shower) are related to or embedded in its organizational (in an elderly care residency), professional (nurses and doctors) and political context (see the next part).

Indeed, the author, who is one of the nurses, asks explicitly political questions: why do we 'put' different people with different backgrounds in the same residency? To what extent is their life taken over by the organization – despite, or thanks to, 'co-creation' methods? Why is he locked on doctor's orders? What has his family, or the nurses have to say of this harsh intervention? Is locking up people with dementia a justified restriction of freedom?³²⁷ The author speaks of a 'we', both in this political sense ('we' instead of 'they') as well as in the caring sense (we saw or did such and such, instead of I), marking a sense of responsibility and togetherness – care does not occur in a vacuum. It is these kinds of questions that bring us to a care ethical approach.

7.3 A brief history of ethics of care

In this paragraph, I will briefly describe the history of ideas of the ethics care, in order for me to see how I will relate to and use care ethical insights for this study. There are roughly, as Vosman argues, three generations of care ethicists.³²⁸

326 Vosman, *Overleven als levensvorm*; van Nistelrooy, 'Self-Sacrifice and Self-Affirmation within Care-Giving'.

327 The story is a little outdated. Nowadays such restraining interventions are not so often used, also due to new legislation. However, this does not make it less, but rather more political.

328 Vosman, 'Kartographie Einer Ethik der Achtsamkeit - Rezeption und Entwicklung in

First generation

The roots here can be found in feminist theory in the eighties, especially the work of Gilligan, Ruddick and Noddings.³²⁹ They fought for an appraisal of feminine morality in ethical theory, such as mothering, caring and nurturing. It is a mistake however to think that it is only about women who give care in a private sense. The debate between Gilligan and Kohlberg is perhaps the most famous and an exemplar for this. Gilligan claimed that Kohlberg's theory of moral development was a male dominant system, as it saw detached universal reason as the highest form of morality. Gilligan in contrast argued that women's morality is not detached, but is always already involved in caring relations, and that this might alter the decisions taken. In Kohlberg's theory then, women can never reach the highest stage of moral development. The idea of 'the different voice', posed by Gilligan, is still important to an ethics of care, as it criticizes remote and detached attempts to determine what is (ethically) good.³³⁰ This remoteness of ethical theory is often also present in deontological or utilitarian ethics. Care ethics, in its infancy, was also much inspired by well-known philosophers that questioned detached ethical theories, such as the late Wittgenstein, Arendt, Ricoeur and Dewey.³³¹

Second generation

The second generation came with the works of Tronto, Held and Sevenhuijsen. Tronto, perhaps the most influential care ethicist up to date, tried to overcome the naturalist or feminist focus on (certain) women's voices, by arguing that care is a *political* category.³³² In this 'political turn' of care ethics, she questioned three *moral boundaries* present in mainstream thinking about morality. A boundary means: once you cross the border, you are in another realm – it is either/or. Although Tronto believed that such boundaries are also important – morality is, for example, not the same as politics – it may be questioned where and how the lines are drawn. I describe the boundaries (especially the first) Tronto identified in some detail, as they do not only give insights for this chapter or paragraph but will appear to be relevant in later reflections as well.

Europa'; Vosman, 'The Disenchantment of Care Ethics: A Critical Cartography'.

329 Gilligan, *In a Different Voice*; Ruddick, *Maternal Thinking*; Noddings, *Caring: A Feminine Approach to Ethics and Moral Education*; Vosman, Baart, and Hoffman, 'After Forty Years: Toward a Recasting of Care Ethics'.

330 Vosman, 'Kartographie Einer Ethik der Achtsamkeit - Rezeption und Entwicklung in Europa', 37–38.

331 *Ibid.*, 36.

332 Tronto, *Moral Boundaries*.

The boundary between morality and politics

First is the boundary between politics and morality.³³³ Moral questions are, roughly, about how one ought to live and think and what considerations need to be taken into account. Political questions are, in contrast, about the allocation of public resources, maintaining public order and about how disputes on these matters should be or are resolved. Although in Aristotle there was already a close connection between ethics and politics, in contemporary political thinking, primacy is given either to morality or politics. As a first stage, thinkers try to figure out ‘the best’ moral values that should count for everyone. After this is ‘fixed’, it needs to be implemented by political means. This is essentially liberal political philosophy (such as Rawls’ veil of ignorance). For the thinkers that give primacy to politics, mainly in the tradition of Machiavelli, morality may be irrelevant to politics (politics is amoral). Politics is, then, about how to gain and sustain power. Morality (or immorality) is only useful insofar as it gives you a strategic advantage – as Machiavelli famously says: “(...) it would be found that some things which seem virtues would, if followed, lead to one’s ruin, and some others which appear vices result in one’s greater security and wellbeing.”³³⁴ In international politics, this appears to be a main concern, and we find strands of this thinking in political thinkers in radical democracy (such as in Mouffe). So, Tronto argues, we end up with either politics being a means to achieve moral ends, or morality being a means to achieve political ends. The first may end up as ideology and totalitarianism, while the second ends up as a public life in which moral arguments have no internal strength or value anymore. Tronto suggested that there must be a way to make this boundary more fluid: morality and politics are, just as Aristotle argued, intertwined. For Aristotle, both morality and politics must be seen in the light of ‘the good life’ (*Eudaimonia*). Tronto argues, in her own way, that: “Care can serve both a moral value and as a basis for the political achievement of a good society.” With this, she also suggests that local moral questions are also political questions – and vice versa.³³⁵

Moral point of view-boundary

The second moral boundary she questions is what she calls the “moral point of view-boundary”.³³⁶ The argument goes that moral thinking is a detached, remote, way of thinking, in which universal principles are applied to concrete situations. One *should* also be detached and disinterested when doing moral evaluation. This moral point of view is pushed into practices from the outside.

333 Ibid., 6–9.

334 Machiavelli, *The Prince and the Discourses*, Chapter XV, 57.

335 Tronto, *Moral Boundaries*, 9. Looking forward to Chapter 10, it is precisely this point why I think that political questions are not only questions of the state or government, but have a much wider reach, also in civil society and economy.

336 Ibid., 9–10.

It is supposed to be rational, and leaves out emotions, everyday life and political circumstances. Tronto argues that, from a caring point of view, this is senseless: why would one evaluate morality outside its relevant context? Humans are concrete beings who are interrelated and embedded in concrete practices. What is considered to be good within a certain practice or community must be evaluated from within that particular practice: that what *appears* to be good in a given context (not just in the sense of ‘seeming’ but especially in the sense ‘turning out’ to be good in a given context).

Boundary between public and private life

The third moral boundary is that between *public* and *private* life. Commonly, care seems to be primarily a private matter: mothering, nurturing, informal care. The value of care seems to be irrelevant in public life, where we speak about justice, equality and fairness. Indeed, women traditionally occupy the private life, and men public life. These boundaries, therefore, she argues, are politically and socially established, and need to be questioned.³³⁷ Sevenhuijsen, who wanted to rethink citizenship from the perspective of care ethics, argued that “All people are vulnerable, dependent and finite, and that we all have to find ways of dealing with this in our daily existence and in the values which guide our individual and collective behaviour.”³³⁸ Care therefore addresses questions of oppression, harm and suffering – power structures – in the light of living and caring together as well as possible. This is far beyond a private matter, and so the ethics of care developed as a political theory or ethics.³³⁹

Third generation

The third generation of care ethicists (such as Robinson, Brugère, Laugier, Hankivsky, Bourgault, Baart and Vosman) have applied (and further developed) care ethics as political theory, making different connections with philosophical, feminist and sociological traditions, and reaching out to topics such as business ethics³⁴⁰, racism, bioethics, environmental ethics, terrorism and professionalism.³⁴¹ Regarding these topics, the political context of the world has changed: different matters are at hand, and caring is not anymore merely about humans, but also about living things (such as the environment).

337 Ibid., questioning the boundary between public and private will also mark ordinary practices in caring political.

338 Sevenhuijsen, *Citizenship and the Ethics of Care*, 29.

339 Vosman, ‘Kartographie Einer Ethik der Achtsamkeit - Rezeption und Entwicklung in Europa’, 42.

340 Hamington and Sander-Staudt, ‘Applying Care Ethics to Business’.

341 Robinson, ‘Resisting Hierarchies through Relationality in the Ethics of Care’; Brugère, *Care Ethics The Introduction of Care as a Political Category*; Laugier, ‘The Ethics of Care as a Politics of the Ordinary’; Hankivsky, ‘Rethinking Care Ethics: On the Promise and Potential of an Intersectional Analysis’; Bourgault, ‘Epistemic Injustice, Face-to-Face Encounters and Caring Institutions’; Vosman, ‘Kartographie Einer Ethik der Achtsamkeit - Rezeption und Entwicklung in Europa’, 45.

The focus is not so much on the ‘traditional’ ethical theory of care ethics, but rather on how contemporary political and social matters can be seen from a care ethical point of view – care ethicists for example counter the narrative of an autonomous individual that actively chooses his or her way of life. There is also a challenge to care ethics nowadays, as care ethics risks ending up only debating its internal differences, risking idiosyncrasy, while actual dialogue (in the sense that theoretical insights from outside care ethics are taken seriously) with other disciplines may not take place.³⁴² In a sense, this thesis is an attempt to make such a dialogue happen.

Care ethics in this thesis

Although care ethics has been criticized³⁴³ and although there is internal debate on important matters (such as about the ontological aspect of care, the liberal democratic point of view, whether care ethics is not too much of an ideological movement, or whether care ethics should focus on justice and equality or on concrete caring relations³⁴⁴), I will not get too much into these debates. I follow the line of the ‘critical insights’ that care ethics provide.³⁴⁵ Insights differ from principles: they are not metaphysical or ontological conclusions on the nature of human being and human relations, but on how practices of care work and how participants in those practice fare.³⁴⁶ Insights precisely resist being transformed into principles, as the care ethical approach, the way I use it, is about the ambiguity and complexity of what appears to be good. Care itself may appear to be ambiguous, there is no intrinsic (and certainly no romantic) good in care – it may turn out otherwise. Ethics of care is an ethics, indeed, but not in the sense that it asks: ‘what should I do’ or: ‘how should I live?’ in a general sense. It is ethical in the sense that it tries to unravel what appears to be good in concrete situations, that it stands besides people in their solicitude, that we question how people move on, sometimes even without proper solutions and the continuing of suffering. But also, on the other side, it makes visible how skilfully and inventively people may take care, how they cooperate successfully, sometimes thanks to and sometimes despite the specific context.³⁴⁷ It has interest in that what is perceived as insignificant, in voices that remain or are made unheard.³⁴⁸

342 Vosman, ‘The Disenchantment of Care Ethics: A Critical Cartography’, 42–43.

343 Cf. de La Bellacasa, *Matters of Care: Speculative Ethics in More than Human Worlds*; Kittay, *Love’s Labor: Essays on Women, Equality, and Dependency*.

344 Vosman, ‘The Disenchantment of Care Ethics: A Critical Cartography’, 42–43; Conradi, ‘Theorising Care: Attentive Interaction or Distributive Justice?’

345 Vosman and Niemeijer, ‘Rethinking Critical Reflection on Care: Late Modern Uncertainty and the Implications for Care Ethics’; Vosman, ‘The Disenchantment of Care Ethics: A Critical Cartography’, 37–38.

346 *Ibid.*, 37–38.

347 Baart, *De ontdekking van kwaliteit*.

348 Cf. Laugier, ‘The Ethics of Care as a Politics of the Ordinary’.

An important concept in the field of care ethics is *presence* or *attentiveness* as coined by Baart (second and third generation).³⁴⁹ The basic idea is *not to turn away from someone in need*.³⁵⁰ This turning to someone, or something (beyond anthropocentrism, like the environment)³⁵¹, may in some situations carry more weight than justice, equality or freedom. In care ethics, there is no *fixed* hierarchy of values. The whole point of care ethics, one might say, becomes how concrete questions or burning issues in everyday situations have a general political scope, and how this general scope, in return, influences these everyday situations – for better or for worse.³⁵² Tronto says in this respect that caring practices are *nested* in their institutional and political contexts.³⁵³

The importance of care ethics for my question may already appear obvious: I am looking for ways to connect ordinary forms of care to their institutional forms of governance, and finally to ask how this becomes political. Care ethics, although there are many different outlooks, basically does the same – albeit without the specificity of governance, of course. Ethics of care addresses ‘burning issues’ in everyday lived experience between people that take and undergo care.

7.4 Four critical insights

Let me get to the four critical insights I distinguish that will help me in expressing or describing the ambiguity of care and its political embeddedness. I discuss these critical insights and link them to questions of governance and management. I do not intend to show the detail of the controversies within care ethics regarding these insights but rather follow interpretations of these insights that are close to the description of care ethics above, and that fit with the question of ambiguity and political nature of care. These insights are shared by most care ethicists, however, with slight differences.³⁵⁴ The insights are critical in the sense that, apparently, these insights are usually absent either in practice or in politics and policy making. It is not so easy to distinguish this however, as many management and policy practices

349 Klaver and Baart, ‘Attentiveness in Care: Towards a Theoretical Framework’; Baart, ‘Een Theorie van de Presentie’; Vosman, ‘Kartographie Einer Ethik der Achtsamkeit - Rezeption und Entwicklung in Europa’.

350 Vosman, ‘Kartographie Einer Ethik der Achtsamkeit - Rezeption und Entwicklung in Europa’, 43.

351 Vosman, Baart, and Hoffman, ‘After Forty Years: Toward a Recasting of Care Ethics’, 5.

352 Vosman, 44–45.

353 Tronto, *Caring Democracy. Markets, Equality and Justice*, 21–22.

354 Engster and Hamington, ‘Introduction’, 4.

in Dutch health care have adopted a language similar to the ethics of care, the theory of presence, or the idea of ‘professional loving care’ as coined by care ethicist Van Heijst.³⁵⁵ Indeed, a quick look at the mission statements and core values of Dutch health care organizations will show that many say something about relationality and patient centeredness. However, this ‘hijacking’ of care ethical language might result in superficial moralizations that cover up the depth and trickiness of the abyss care ethics want to make us aware of.³⁵⁶ In Chapter 3 and 4 I mentioned this moralization in the form of ‘value talk’. It might be even worse: a ‘neoliberalism’ in disguise, in which the moral language is used to cover up policies in which responsibility is shifted and individualized.³⁵⁷ For now, we focus on four critical insights, namely relationality (1), contextuality (2), responsibility (3) and the political nature of giving and receiving care (4) and tentatively discuss how they relate to governance.³⁵⁸ Although there are other notable insights (see note), for my question of practically wise supervision – the description of ‘the swampy lowlands’ and how this relates to governance – these are the most relevant.

7.4.1 Relationality

The argument of the early care ethicists, and an argument that is relevant still, is that the liberal notion of autonomy and self-determination leads to a detached theoretical ethics, that does not account for the relational embeddedness of people. So, an ethics or theory of justice that demands we withdraw from our daily relationships, by for example a ‘veil of ignorance’ (Rawls), a duty (Kant) or a calculation of happiness or utility (Mill), all of which overlook the human condition. This latter implies that ethics proceeds through concrete and embodied relations, rather than through detached rational evaluations.³⁵⁹

Furthermore, this critical insight leads us to question the idea of self-determination or self-efficacy. In Dutch health care, this is a pervasive ideal: the purpose of health care is not only to restore people’s self-determination (as if this were possible), but also to build policies on the idea that care

355 Van Heijst, *Professional Loving Care: An Ethical View of the Healthcare Sector*.

356 Baart, *De ontdekking van kwaliteit*, 56–57; see also for a non care ethical approach: Den Uijl and Van Twist, ‘Het moreel teveel’.

357 Biebricher, *Onvermoed en onvermijdelijk: de vele gezichten van het neoliberalisme*.

358 Engster and Hamington, ‘Introduction’, 4–5. They notice five critical insights, as they also name ‘responsiveness’. I include this into the ‘relationality’ insight. They also mention the role of emotions in normativity; I leave that aside. Responsibility is not taken up by them as a critical insight. Vosman, ‘The Disenchantment of Care Ethics: A Critical Cartography’, 36. Vosman describes 7 critical insights, next to formulated here also: normative importance of emotions; bodyliness in all relations (I include in contextuality) and vulnerability. Held, ‘The Ethics of Care’, 538–41.

359 *Ibid.*, 539.

proceeds through the self-determination of the patient.³⁶⁰ Vulnerability, in this respect, is something to be got rid of, as much as possible. In the ethics of care, this vulnerability is inherent, even constitutive for our relational embeddedness: you cannot manage on your own. Suggestive slogans such as 'value-driven care' and 'patient-centeredness' are common in policy letters and reorganizations and are based upon this ideal. Values are of course fine, perhaps even important, but the question is to what extent they function as an analytical tool to evaluate caring practices, or whether they tend to obscure the reality of everyday practice. Very easily, the interdependency and inter-determinacy of people is overlooked, as well as the asymmetries and vulnerabilities associated with them. Care may become a social engineering of autonomy and can, from an organizational perspective, be introduced overenthusiastically. It is true that some people are more dependent (vulnerable) than others, although everyone is to some extent dependent on others.³⁶¹ A health care professional does know more about what a good treatment is than a patient, although not in a detached way. This knowledge, a practical wisdom, must be activated in the relation with the patient.³⁶² This in its turn implies that caring (giving or receiving) is not merely a matter of applying knowledge or following techniques. A kind of practical wisdom is needed for the health care professional to understand what is needed, and this proceeds through relationality and active engagement in the life of the other, without persuasion or patronization.³⁶³ It involves concern for the other, doing what is necessary (and withdrawing from what is not), being attentive, being loyal to the end.³⁶⁴ Still however, it is precisely through relationality that autonomy comes into play. Autonomy, from the caring perspective, is to understand the borders and limits of how far a caring relation can go. This includes the possibility that the receiver of care does not acknowledge preliminary understandings of what good care is, that this is resisted.³⁶⁵ Autonomy may therefore show up precisely by resisting the ideals of self-management or self-determination. It is important, therefore, not to moralize this relation. Caring, even if attentive, is not always and of itself morally good

360 Cf. Van de Weele et al., *De kunst van ambachtelijke afstemming*.

361 Kittay, *Love's Labor: Essays on Women, Equality, and Dependency*.

362 Cf. Bontemps-Hommen, Vosman, and Baart, 'The Multiple Faces of Practical Wisdom in Complex Clinical Practices: An Empirical Exploration'; Bontemps-Hommen, Baart, and Vosman, 'Practical Wisdom in Complex Medical Practices: A Critical Proposal'.

363 Gadamer, *The Enigma of Health*. He has made this point from a hermeneutic point of view. Widdershoven, 'The Doctor-Patient Relationship as a Gadamerian Dialogue: A Response to Arnason'.

364 Baart, *De ontdekking van kwaliteit*, 20–22.

365 Cf. Nortvedt, 'Phenomenology and Care: Reflections on the Foundation of Morality'. The philosophy of Levinas is in this respect often introduced in care ethics, although this is also controversial within care ethical approaches. See also Dorlin, *Se défendre: une philosophie de la violence*.

and may include forms of violence, may be compulsory and belittling (both for the giving and receiving of care).³⁶⁶

From a governance and management perspective, an ideal of care is easily, even complacently, put forward. Some policy documents may say that, for example: ‘we pay attention to the relationship, rather than to the rules’. What does this imply for the nurses who have to take care of the professor in the opening scene opening this chapter? Although this sounds appealing and pretty, very moral indeed, a relational perspective might bring to the foreground moral issues, but this also makes it messy, ambiguous and complex, involves power and patriarchy.³⁶⁷ Not a single relationship is the same, and a relational perspective does not guarantee good care. Some relations are not good, and in many cases, it is a good thing, especially in institutions, that there are rules for giving care in order not to be at the mercy of the arbitrariness of the personal relationship. A relational perspective also brings along everything of humankind that we would gladly want to conceal – cunning, revenge, domination – indeed, vices.³⁶⁸ The point is that we should not deny all of this, that we have to take this into account, deal with and relate to it, rather than moralizing about it. The key insight of relationality, viewed from this perspective, is that it provides a critical lens, a starting point, with which it is possible to figure out what turns out to be good care for the receiver of care.

7.4.2 Responsibility

Another important insight in care ethics is responsibility. The interpretations of this insight differ, however. Generally, responsibility follows from dependency: anyone who has the capacity to care, should care.³⁶⁹ It is seen as an imperative (or a command, as Levinas would term it). Walker relates it to how responsibilities are assigned: “I propose that it is fruitful to locate morality in practices of responsibility that implement commonly shared understandings about who gets to do what to whom and who is supposed to do what for whom.”³⁷⁰ Hence, responsibility may be both about *responsiveness*, reacting (and the duty to react) to someone or something in need, and about sharing and delineating responsibility. Responsibility is also a contested term, however. It is not only used in a care ethical or phenomenological way.

366 Ibid., 175.

367 Brugère, *Care Ethics The Introduction of Care as a Political Category*, 15; De la Bellacasa, *Matters of Care*.

368 Vanlaere and Burggraave, *Gekkenwerk: kleine ondeugden voor zorgdragers*.

369 Vosman, ‘The Disenchantment of Care Ethics: A Critical Cartography’, 32–33.

370 Walker, ‘Moral Understandings : A Feminist Study in Ethics’, 16, as quoted by Vosman, 33.

We also find this concept in for example neoliberal approaches.³⁷¹ 'Figure it out yourself, don't burden the political community with!' – becomes the imperative. Hence, responsibility is ambiguous, and may turn out to be the responsiveness in the care ethical sense but may also imply something totally different. Furthermore, this responsibility is not always voluntary, it may be enforced responsibility in which power asymmetries play an important role. This may also be the case in health care organizations. Responsibility of both the givers and receivers of care is an important concept (as we have seen in Chapter 4) and professional autonomy is exalted. The question is whether or when this shifting of responsibility does not become an institutional abandoning of professionals and patients.

In governance theory in general, responsibility is an important theme. Who has final responsibility, how are responsibilities separated (between, for example, the supervisory and executive board)? Responsibility, from a governance perspective, separates functions. The critical insight of care ethics about responsibility shows that responsibility, from an organizational perspective, has a much wider and more fundamental scope than functional separation: it is about making responsibility possible, including the political notion that responsibility may be enforced, involve domination and solicitude. Furthermore, there may be friction about who has responsibility for whom and for what, as the separation of functions may be clear on paper but are often ambiguous in practice. The organization has the political (rather than a moral) task, it appears, to sustain responsibility "amidst friction, violence and multivocal meanings."³⁷² Ambiguity of responsibility, then, is what marks the swampy lowland of care.

7.4.3 Contextuality

Ethics of care hold that what is good, in ethical terms, can only be found in and through a concrete situation within a practice. Hence, there are no principles or values that serve as a starting point for inquiry, that need to be applied in concrete contexts. Care ethics favours particularism, in this respect. A caring response is unique and requires an understanding "of the particulars of the other's experience, including their history, relative power, relationships, and so forth."³⁷³ Closely related terms to contextuality – outside care ethics – are complexity, messiness or swampiness – as discussed in the introduction of this thesis.³⁷⁴ Care is a complex matter, and cannot be reduced to either standardized techniques, universal values, morals or ideals from

371 Vosman, 34.

372 Ibid., 36.

373 Engster and Hamington, 'Introduction', 4.

374 Vosman and Niemeijer, 'Rethinking Critical Reflection on Care: Late Modern Uncertainty and the Implications for Care Ethics'.

the 'safe high grounds'. In organizational practice, there is however an omnipresent need to reduce questions of quality of care to simple concepts or instruments, or, in other words, to abstract from contexts. Value Based Healthcare for example is such an instrument and appealing concept, and the Plan-Do-Check-Act circle might be another.³⁷⁵ For supervisory boards, who must make sense of care in limited time with limited instruments, this is of course also welcome. The question is to what extent this abstracting from contexts does not also obscure and counteract the contextuality of caring practices. 'Quality improvement', from the abstract point of view, may very well turn out to be a worsening of quality in practice.

7.4.4 Politics

The issue that I raise in this section is the understanding of what politics is about and in that context what power is about. With regard to my inquiry, it is necessary to have a fitting delineation of both, as the political nature of care is part of my initial quest. Power and politics are closely interwoven, also in terms of governance (distribution, restriction and control of power, formal and informal power). I describe the issue of power in some depth, as this will be seen to be useful as this study progresses, especially when digging into political theory in Chapter 10.

I will sketch out the accounts of what politics and power are about in care ethics and, more broadly, in political theory. Finally, I will draw conclusions necessary for my inquiry into the ambiguity of care, politics and democracy.

Since Tronto's *Moral boundaries*, care ethics perceives itself as political, as described in the section on the history of care ethics. Care is not first of all a private matter, I argued, like maternal care, but a political and public matter, involving ways in which we care for the self, each other and the world in order to sustain it. It is about living together, as hard as it becomes, in concrete caring practices that are nested into political contexts. I use Tronto's ideas on politics, power and democracy as a point of reference to figure out how I in this thesis will use these concepts. Tronto's care ethical perspective is democratic in a specific social sense: caring democracy is about bringing all voices at the table to decide on how responsibilities in society (or local communities) are assigned, negotiated and divided.³⁷⁶ She has an ideal of 'honest political discussion', and is close to Habermas's 'communicative action' (*herrschaftsfreie Diskurs*).³⁷⁷ Tronto perceives power foremost in terms of domination: how different groups have different and unequal resources

³⁷⁵ I come back to this extensively in the next chapter.

³⁷⁶ Tronto, *Caring Democracy. Markets, Equality and Justice*, 56–58.

³⁷⁷ *Ibid.*, 58; Habermas, *The Theory of Communicative Action. Volume 1: Reason and the Rationalization of Society*, 285–86.

of power that give advantages or disadvantages in getting to decide about responsibilities. Although she admits that absolute equality is not possible, the political, or care ethical task is to make things more equal, especially when it comes to voices at the table. From a critical perspective, the question may be raised, however, whether this ‘honest discussion’ and ‘all voices at the table’ are not illusory, and whether this point is not too moralistic: how should or could a political care ethics decide on what specific political decisions on justice, freedom and equality should be favoured – does she not become part of the ‘morality-first’ political thinkers she herself critically questioned? Looking from the ‘swampy lowlands’: what about the voices that do not want to be heard?³⁷⁸ What if people are not so much interested in deciding on policy, but are rather just interested in some control over their immediate life experience, or who are in a permanent mode of clinging on to survival?³⁷⁹ And is there not more to say about power than only looking at it from the perspective of domination? Also, we might question whether she takes sufficient account of what politics is (and what *the political* is), including the necessity of governing; about making decisions when it is impossible to include all voices in the light of potential conflict. This distinction is not discussed in care ethics to my knowledge, although there have been extensive attempts to relate to political theory in general.³⁸⁰ It might indeed be true that care ethics, unlike feminism in general,³⁸¹ has difficulty in centring the role of conflict due to its focus on grounding politics in relationality.³⁸²

Differentiating four forms of power

It makes sense therefore, to differentiate the concept of power in political theory outside of care ethics. Hence, we have already *power as domination*, the simplest form: it is that which the governor imposes on or forces upon the governed, either by violence or by will. There is however also *power as potential*, *power as structures* and *power as hegemony*. Notice that my definition of governance in the introduction follows both the (somewhat contradictory) second and third forms of power. For care ethics, there is no typical form of power that is used or applied, but it makes sense to perceive care ethics in the light of all four forms, especially the latter three.

378 Dorlin, *Se défendre : une philosophie de la violence*.

379 Simplican, ‘Intellectual Disability and Stigma: Stepping out from the Margins’; Vosman, *Overleven als levensvorm. Zorgethiek als kritiek op het ideaal van het ‘geslaagde leven’*.

380 Cf. Engster and Hamington, ‘Care Ethics and Political Theory’; Conradi and Heier, ‘Towards a Political Theory of Care’; Bourgault and Robinson, ‘Care Ethics Thinks the Political’.

381 Cf. Butler and Scott, *Feminists Theorize the Political*.

382 Except for: Cloyes, ‘Agonizing Care: Care Ethics, Agonistic Feminism and a Political Theory of Care’. I will discuss the question of ‘the political’ in more depth in Chapter 10.

The second form of power is best described by Hannah Arendt in *The Human Condition* and is about *power as potential* of what people can accomplish together; what they cannot accomplish on their own.³⁸³ Power is, in this sense, organization – action in concert or power-in-common. It is built on the idea that people exist in the plural, and that only in plurality power can come into being. Due to this plurality, checks and balances are natural, due to the different points of view of people. Power, by this, preserves the public realm and promotes the possibility of men, in the plural, to flourish. Hence, power is the opposite of domination by tyranny, which precisely wants to undo plurality as the tyrant does not want people to accomplish things together out of power (which might also be political revolt), but only by (his) force. Power is for Arendt also different from strength, which is an individual, isolated, quality. Power is vulnerable, it can easily be destroyed by violence and force. In relation to care ethics this might imply the astonishingly good care caregivers can give, even if the practical and institutional surroundings are difficult.

We add to that Foucault's view on what power is: *power as structures*. Following Foucault, what is political is that which is considered to be normal, the way in which we ordinarily do or speak about things. This 'normal' becomes socially and politically perpetuated, leading to normalization. Foucault did this kind of analysis in psychiatry and health care and related this to (bio) politics.³⁸⁴ Power is in this sense generative of certain borders and normal conceptions. These normal conceptions tend to become narrower and narrower and to expand and differentiate that which is not normal. An example of normalization we found is the question from the nurse in the professor-story above, where she asks why we put people from different milieus together in nursing homes – that is what we do. The nurse openly questions this, a sign of freedom, following Foucault. Freedom, then, is realized in questioning the established power-orders, and therefore always related to the dialectics of force, suppression and resistance.³⁸⁵ For Foucault, power is not mere oppression by some dominant power. The point is that the disciplining powers are never intended as inhuman or obscure action, or mere abuse of power. It is not about the strength of governors. Rather, power is in the *structures* of society and the 'actions between' governors and governed (conflict, agreements, discussions, concessions) and how they relate to each other, now that the 'art of government' has become to distinguish between what it should and what it should not do – what its limits are.³⁸⁶

383 Arendt, *The Human Condition*, 200–207.

384 Foucault, *History of Madness*; Foucault, *The Birth of the Clinic*; Foucault, *The Birth of Biopolitics. Lectures at the Collège de France*, 1978–79.

385 Foucault, *Essential Works of Foucault, 1954–1984; Volume 3. Power*, 292.

386 Foucault, *The Birth of Biopolitics. Lectures at the Collège de France*, 1978–79.

The ‘underside’ of this governmental limitation is that it is not explicit government that ‘steers’ people, but rather the way structures develop.³⁸⁷ The care ethicist Laugier follows Foucault when she says: “The subject of care is a sensible, sensitive, receptive individual inasmuch as she is affected, is caught in a context of relations, in a social and biological form of life, in relations and hierarchies of power that pervade our lives—what Foucault defines in terms of biopolitics.”³⁸⁸ Politically, in other words, there is steering, a governing, without an *intended* or explicit steering.

A fourth understanding of power in this light is that of hegemonic culture, as developed by Gramsci: *power as hegemony*.³⁸⁹ This concept goes beyond the struggle of classes, in that the ruling class should make alliances with other class groups by way of leadership and dominant opinion. Politics is about defining what is normal, and about making people think that they are not governed, but that they govern themselves. Hegemony is then a form of cultural oppression, in which those oppressed have imposed the oppression on themselves. Especially some critics of neoliberalism have taken up this argument, stating that neoliberalism has made alliances with socialist or democratic strategies.³⁹⁰ In the Netherlands, an example might be the idea of the ‘participation society’, a governmental concept and policy that should foster an active and responsible citizenship. It can however also be translated as a form of reducing government (and its spending), leaving people to their fate, disguised in a positive and hegemonic idea of participation which was already latent within society (the preference of ‘bottom-up’ thinking, for example). Such policies are therefore ambiguous – it remains unclear what fosters this policy. Foucault’s idea of biopolitics is made strategic in Gramsci. In this perspective, resistance is about unmasking such strategies. In the third and fourth perspective on power, conflict plays a dominant role, as conflict always has had an important role in political philosophy (such as in Machiavelli or Hobbes). For care ethics, this thinking in terms of hegemony is important as it constantly wants to relate concrete practices to wider political concerns. Hence, issues such as prevention or neoliberalism are topics that might be understood from the perspective of hegemonic power.

Political theory outside, yet close to, care ethics

Although care ethics has had a political aspect since the early nineties, and although it has recently tried to reflect on what precisely politics implies in

387 *Ibid.*, 11–16.

388 Laugier, ‘The Ethics of Care as a Politics of the Ordinary’, 226.

389 Gramsci, *Selections from the Prison Notebooks of Antonio Gramsci*.

390 Biebricher, ‘Critical Theories of the State: Governmentality and the Strategic-Relational Approach’; Biebricher, *Onvermoed en onvermijdelijk: de vele gezichten van het neoliberalisme*; Lorey, *State of Insecurity: Government of the Precarious*.

care ethics,³⁹¹ I think it needs more to engage with contemporary political theory in order to make its political aspirations more solid.³⁹² In the phenomenological tradition, close to ethics of care,³⁹³ one might speak of the political space as a space in which bodies come together.³⁹⁴ This involves friction and therefore *potential* conflict. This is the position of Oliver Marchart,³⁹⁵ arguing with *and* against for example Mouffe, Lefort and Ranciere whom in contrast argued that permanent conflict and resistance must be present from the very beginning in order to understand something as political. All of them however, including Marchart, argue that *the political* does not have an ultimate foundation: no theistic rule, no overarching spirit, not a symbolic unified body – no values of care indeed. Living together is therefore always, at least to some extent, messy and incoherent. That is why Marchart calls ‘society’ (*Gesellschaft*) an ‘impossible object’: it is impossible to define it in a positive sense. This does not mean however that it does not exist – as the famous Mrs Thatcher quote goes (“there is no such thing as society...”). Marchart, Mouffe, Lefort and others, are suspicious of theories that look at the political as a striving for harmony. Any romantic dream of relationships in this sense, caring, dialogue, and so forth, misses the point that the constitutive *ethical* element of the political is not unification, understanding each other, but rather *relating to difference*, or pluralism, even, or precisely, when differences persist. This is also the position of Arendt in *The Human Condition*, although Mouffe thinks that Arendt has had too many high hopes about men’s possibility to solve conflicts by dialogue. It is however important to mention that power, for Arendt, was not primarily something of domination, but rather of creation: power makes it possible to do things (together), as noted in the introduction when I defined the concept of governance.³⁹⁶ Mouffe radicalizes Arendt’s position by transforming pluralism into necessary conflict. following – in Arendt’s tracks – Marchart, in his more nuanced position of pluralism and conflict: there is always friction, and this may involve conflict, but not necessarily. This is, then, the critical insight of politics of care ethics as I define it: understanding that living together, giving and undergoing care, involves potential conflict, that power structures involve the silencing of voices (active or passive).³⁹⁷

391 Engster and Hamington, ‘Introduction’; Bourgault and Robinson, ‘Care Ethics Thinks the Political’; Bourgault, ‘Epistemic Injustice, Face-to-Face Encounters and Caring Institutions’.

392 Vosman, ‘The Disenchantment of Care Ethics: A Critical Cartography’, 36.

393 Although this relation is also contested. See Nortvedt and Vosman, ‘Care Ethics and Phenomenology: A Contested Kinship.’

394 Küpers, *Phenomenology of the Embodied Organization: The Contribution of Merleau-Ponty for Organizational Studies and Practice*, 116, 148.

395 Marchart, *Das Unmögliche Objekt. Eine Postfundamentalistische Theorie Der Gesellschaft*.

396 Arendt, *The Human Condition*.

397 See also Dorlin, *Se défendre : une philosophie de la violence*; De La Bellacasa, *Matters of*

Returning to the ethics of care, and the moral boundary Tronto noticed between morality and politics, we can now say that a critical insight of care ethics is that politics is on the one hand about navigating through pluralism and, while on the other hand, morality – what appears to be good in concrete practices – can be figured out *through* concrete practices. But – and this is important – this figuring out of ‘good care’ in concrete practices is always provisional, reserved and open and embedded in wider political contexts of domination, power structures and hegemony.

The everyday as a political category

Hence, a political ethics of care is very much interested in ordinary, everyday political action, or how everyday action is embedded within a political context.³⁹⁸ Recall the shame involved in the professor’s nakedness while showering, his feeling of humiliation – so painful also for the nurses. Recall the doctor’s ‘ordinary’ order to fixate him behind a table if he has a tantrum. To understand everyday action in a political way, and to begin analysing the political from within the ordinary, shows not only how people work with and work around policy, struggles and difficulties, it also ‘sobers up’ organization’s high ethical standards and rude normativity about values, dialogue and patient centeredness on the one hand, and the promises of transparency, accountability and cost-effectiveness of administration practices on the other hand.³⁹⁹

For our purpose, the peculiar political critical insight of the ethics of care is of great importance. It raises questions on several things for supervisory boards, boards and policy in general. It enables me to question the relative distance of boards from ordinary practices. It questions the way power is used and/or abused. It questions the ideological background of policies in the organization. The major point however is that the question of care, or ‘good quality’ is not primarily a question for quality managers, a question of effectiveness, but is a political question.

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398 Laugier, ‘The Ethics of Care as a Politics of the Ordinary’; Laugier, ‘The Ordinary, Romanticism, and Democracy’.

399 Cf. Courpasson, ‘The Politics of Everyday’; Küpers, *Phenomenology of the Embodied Organization*, 124.

7.5 The question of quality

In the previous paragraph I have presented four critical insights from care ethics that appear relevant for the question of wise supervision, especially in relation to ambiguity and politics. However, we need to get a little closer to organizational (caring) practices in order to make these insights recognizable in organizational practices. Therefore, I will in this paragraph zoom-in into the attempts that have been made to connect care ethics with (public) management practices. I will first briefly discuss business administration in general, as discipline and practice, and management perspectives on quality management in health care in particular. After that, I discuss the so-called 'Care-Ethical Model of Quality Enquiry' (CEMQUE) of Baart that attempts to bridge care ethics and quality management and its institutional embedding.⁴⁰⁰ The question of quality management will be further explored in the next chapter. The institutional aspect will be further explored in Chapter 9. Hence, this paragraph is also an introduction to the themes of the chapters to follow.

7.5.1 The problem of quality

Ethics of care is not primarily about professional healthcare or social care. Its claim is more general, as we have seen. In the Netherlands though, ethics of care has become associated with the health care sector, partly due to its own research focus, partly because the word "care" (*zorg*) in Dutch is associated with professional care.⁴⁰¹ The inevitable question in health care, also when it comes to supervisory boards, is that of 'quality'. This is not necessarily a care ethical question, therefore. Care ethics, in general, is miles away from any model of quality management or business and industrial economics – traditionally the realm of quality questions. In the Netherlands though, there has been research on the combination of ethics of care and quality matters, especially by the works of Andries Baart, Frans Vosman and related scholars.⁴⁰² Still, there is quite some gap between an institutional or organizational theory and the critical insights from ethics of care. There have been attempts to explicitly cross ethics of care with quality questions in (public) organizations, but their impact has been marginal.⁴⁰³ Partly this

400 Timmerman, Baart & Den Bakker, 'Cultivating quality awareness in corona times'.

401 Vosman, 'Kartographie Einer Ethik der Achtsamkeit - Rezeption und Entwicklung in Europa'.

402 Timmerman and Baart, 'Ongeregeld goed: De huisarts aan het sterfbed van de eigen patiënt'; Baart and Carbo, *De zorgval*; Baart, *De ontdekking van kwaliteit*; Baart and Vosman, *De patiënt terug van weggeweest*.

403 Hamington and Sander-Staudt, 'Applying Care Ethics to Business'; Urban and Ward, 'Care Ethics, Democratic Citizenship and the State'; Stensöta, 'Public Ethics of Care - A General Public Ethics'; Stensöta, 'A Public Ethics of Care'.

may be due to the fact that many organizational theories and business administration are not regarded as political theories.

Business administration as technique

The study of business administration, at least in the mainstream, is about effectiveness and the ability to make people (employees or professionals) and things do what you want them to do, in all different kinds of ways. It varies from strategic management, human resource management, process management to communication management. Organizational theory is instrumental by nature. That is, it has difficulties overcoming an instrumental or rationalistic view, even when some contemporary theories claim that organizations should give their members a sense of purpose, belonging or meaning.⁴⁰⁴ The very idea of management is that management as instrument – as toolbox – is applicable in a general sense.⁴⁰⁵ As we have seen in Chapter 6, even stakeholder theory, which seems somehow close to a political organizational theory, has problems regarding questions of difference as a political perspective. Stewardship theory, or the even stronger ‘servant leadership’, which wants leaders to ‘serve communities’, might be closer to a care ethical or political approach. However, although as theory or ideal it is appealing, it seems miles away from daily reality and the political struggles associated.

From general management to quality and risk management

The management issues in health care are nearly always related to the question of quality of care. As noted in the introduction to this chapter, the orientation is on the process rather than on the content of care: it is about systems, assurances, measurements and improvements. This is also true for governance.⁴⁰⁶ It is interesting, for example, that the committee of a supervisory board that deals with the question of care and organization is called the ‘quality and safety committee’,⁴⁰⁷ rather than, for example, ‘care committee’. And why is safety explicitly named?⁴⁰⁸ The question of care, it

404 Van Diest, *Een Doordachte Organisatie*; Van Diest, *Zinnig Ondernemen*; Van Diest and Dankbaar, ‘Managing Freely Acting People: Hannah Arendt’s Theory of Action and Modern Management and Organisation Theory’.

405 Khurana, *From Higher Aims to Hired Hands*; See also: van Baardewijk, *The Moral Formation of Business Students*.

406 Cf. NVTZ, *Zienderogen Beter*; NVTZ, *Zienderogen Beter II*; Den Uijl and Van Zonneveld, *Zorg Voor Toezicht*.

407 Supervisory boards often have committees in which certain topics are worked out in more detail by a few members of the board. There is the audit committee for checking the books, there is the remuneration committee for evaluating and rewarding the executive board, and since the question of quality has made its upheaval in boardrooms, many now also have quality and safety committees.

408 Actually, there is a historical reason for this. Patient safety as a quality measure (reducing iatrogenic harm) has been subverted to serve the ‘managerial’ (as its seen)

appears, in boardrooms, but also in health care discourse in general, is framed within the logic of quality, more specifically, quality and risk management. The question of quality is philosophically however a very difficult question.⁴⁰⁹ Let me show this by giving some standard descriptions of quality of care that are widely accepted.⁴¹⁰

- The current definition of the WHO is: “The extent to which health care services provided to individuals and patient populations improve desired health outcomes.”
- The definition of the American Medical Association (AMA) of ‘high quality of care’ is: “care which consistently contributes to the improvement or maintenance of quality and/or duration of life.”
- Donabedian, an important figure in health care quality management has defined quality as care that is: “expected to maximize an inclusive measure of patient welfare, after one has taken account of the balance of expected gains and losses that attend the process of care in all its parts.”⁴¹¹
- The Institute of Medicine describes quality of care in six domains: “safe, effective, patient-centered, timely, efficient and equitable.” These domains are also promoted by the Institute of Health Care Improvement (IHI) and its figurehead Don Berwick.

Quality in healthcare according to experts is about measurable quality improvement. Quality improvement measurements, such as the PDCA cycle, risks ignoring whether from the recipient’s experience (the citizen-patient) the changes made actually improve their experience. Quality management may lose itself in a process driven approach – ‘the operation was a great success (but the patient died)’. It may well be the case that, from a quality management point of view, things got better, while some recipients of care may experience the opposite. Hence, many approaches to quality *appear* to be outcome oriented, while they are in fact process oriented. Hence, the question remains: what does quality management manage?

Moreover, the process-oriented approach (concealed in quasi-objective outcomes) make sure that the difficult ethical questions and differences (pluralism) about the content of care become irrelevant, or secondary, while

task of risk management, which has additional implications, but originally risk management and patient safety were seen as more or less synonymous, but purely from a clinical perspective.

409 Cf. Van Tongeren and Bal, ‘Blijven vragen wat kwaliteit is’; Pirsig, *Zen and the Art of Motorcycle Maintenance*.

410 See also for an overview of definitions: Blumenthal, ‘Part 1: Quality of Care--What Is It?’; See for some Dutch examples of quality systems: Baart, *De ontdekking van kwaliteit*, 26–31.

411 Donabedian, *Explorations in Quality Assessment and Monitoring*.

they at the same time gladly use ethical terms (such as quality of life, core-values) to boost their higher ground. If quality of care or quality of life can be objectified, then accountability becomes a much easier job. The categorizations of quality permit quality and control systems to flourish, inducing both and at the same time an expansive bureaucracy as well as a genuine possibility of improving care. Since supervisory boards are always dependent in their way of looking at care on the way the organization looks at care, it is easy to see how, also in the boardroom, this 'objective', process oriented and instrumental forms of quality management persist.

7.5.2 Towards a care ethical model of quality management

Nevertheless, quality appears to be the (perhaps pragmatic) key for an ethics of care to enter the realm of organizational theory and business administration. At least in health care, since here, the connection between what care is, is intertwined with the question of quality from the perspective of quality and risk management. But ethics of care cannot just absorb these theories, as the critical insights we discussed will thoroughly challenge these approaches. One insight we have already mentioned: why is there so little political theorizing in organizational theory, beyond mere instrumentality? Another is that quality management is not primarily interested in the ethical aspect of it, while at the same time ethical issues are absorbed into quality management, turning ethical issues into quasi-objective management issues.

If one would have a look at the dominant discourse in quality of care, the dominant perspective is that quality is something *above* standard care. First you do your business, get your ducks in a row, and when this is fine, you have time to think about (improving) quality. It is an add-on. Quality is about 'learning', that the status quo is never good enough, that 'good is only good until you found better'.⁴¹² Quality, it appears, is in constant flux. To support this 'change', 'innovation' and 'learning culture', all kinds of implementation tools, projects and programs are developed, involving a bureaucratic layer around health care of controllers, supervisory bodies, consultants or advisory offices.⁴¹³ Despite their good intentions, giving them the benefit of the doubt, there remains a feeling of standstill by many critics, that it does not really

⁴¹² In the NHS a well-known phrase introduced by the Good Governance Institute.

⁴¹³ Tjeenk Willink, *Groter denken, kleiner doen*, 72. Tjeenk Willink estimates (nobody knows exactly) that in the Netherlands, the costs of management control and supervisory practices (in general) is estimated twice the size of the entire branch of General Practitioners.

help.⁴¹⁴ It does however create upheaval as well as distraction from what really matters, it is felt in many quarters.

Need for accountable care

The reason why quality and risk management are so important to management, is that care not only needs to be good or sufficient, but it also needs accountability (justification) in order to be paid for, to gain a 'license to operate', or to keep the governmental inspectorates and supervisory bodies, such as the inspectorate for health and youth care, 'happy'. Accountability to management and staff, to professional norms, to chain-partners, to commissioners, to municipalities, to other stakeholders is a major aspect of running such an organization. Accountability, however, following from the argument above, also implies a (partial) *depolitization*: it fixes quality into more or less measurable norms (such as time slots for giving care or the number of incidents reported). Still, bringing in the organizational question brings in all kinds of elements that are absent in private caring relations: distance, teamwork, shared and proliferated responsibilities, power, politics, et cetera. It raises questions of justice, of accessibility and economics – not always the 'hometown' of care ethics.

Accountable care is not always the same as good care, however.⁴¹⁵ The nurse in the story of the professor might have done everything that she was asked to do (recording that the professor was 'showered', filling in a near-accident form due to the happening in the shower, filling in a form because he was fixated. They might have made a 'care plan'⁴¹⁶ with the family, they might have deliberated on and recorded what risks to take, et cetera). But for the nurse all this may not in real terms address the question of quality. It would however be naïve to think that we can do away with this accountability, or that it is an inherently bad thing. In a study of the Netherlands School for Public Administration (NSOB) it is shown how a governmental program that should reduce excessive bureaucracy (called ERAI) was tricky since so many of the institutions circling around a health care organization only thrive by means of standardized accountability instruments.⁴¹⁷ It shows how complex it is, on a national scale, to organize health care in such a way that it is accountable. The political interest in health care is that it is both and at the same time accessible, economical and of some quality. I refer back to

414 Ibid., 78; See also: De Blok et al., *Het alternatief voor de zorg*; Baart and Carbo, *De zorgval*.

415 Baart, *De ontdekking van kwaliteit*, 34. Timmerman, Baart and Den Bakker, *Cultivating quality awareness in corona times*.

416 In Dutch called, ironically, a zorg-leef-plan (plan of care and life).

417 Frankowski et al., *Participeren in partnerships. Een reflectie op de samenwerking van het ministerie van VWS met het zorgveld*.

Chapter 6 to see how in the recent decades this has led to an ambiguous sector. That accountable care is not always good care, and that it might even pervert good care, is not a new thing to say.

The Care-Ethical Model of Quality Enquiry (CEMQUE)

The Care-Ethical Model of Quality Enquiry (CEMQUE) of Baart, that discusses quality of care in general, not specifically for long term care, shows with some depth how this cleaving can be addressed.⁴¹⁸ It is a heuristic model, which sets out a specific view on quality of care, based on care ethics and, more specifically, the theory of presence. It is therefore not a model that attempts to ‘represents’ reality in a scheme.⁴¹⁹ The model has four entry points: care receiver, caregiver, the health care organization, and its wider context (umwelt or system). By these four entries, all aspects are supposed to be integrated into questions of description, weighing and advancing care, but also as a means of maintaining accountability and judging existing quality frameworks.⁴²⁰ It therefore poses questions of reflection and cross-connections between different aspects of good care. The entries of the model take into account, to some extent, the four critical insights I have mentioned earlier on. The relational aspect is highlighted by the core-concepts of ‘solicitude’ and ‘habitability’. The outcome of care is a relating to the fragility of existence, rather than merely being healed or cured. The aspect of responsibility lies both in the connection between the organization of care and concrete care, as well as in the very concept of presence: responding to someone in need. The aspect of contextuality is thought of throughout the model by its very ‘orientations’. As orientations, they are always indeterminate, and must be worked out in concrete contexts – as well as they can be. This openness in the model is crucial for its understanding. The political aspect of it is highlighted by the fact that the model is *not neutral*: it inhibits a specific political-ethical view on what good care is, namely relational, and is not primarily or only oriented towards curing or healing, but towards a relation with the fragility of existence, with and for others. This in its turn also appears as the *telos* of the caring institution.⁴²¹ By centralizing the idea of *decent institutions*, it is political-ethical, societal, from the very start, as institutions are, what I have called in Chapter 6, infused with values. Moreover, the four different entries will not so easily integrate, there is friction between every layer, power (difference) is involved, and the system is complex. The idea of the model is that it gives weight to both concrete care and the need for accountability, but that it

418 See Baart, *De ontdekking van kwaliteit*, 150.

419 Apparently, it is also impossible to capture reality in a scheme, but the point is about pretention, of course.

420 Baart, *De ontdekking van kwaliteit*, 151.

421 *Ibid.*, 235.

searches for ways to prevent mismatches between these two rather different things: sometimes care is accountable but does not turn out to be good; sometimes care does turn out to be good but is not accountable; sometimes the experience of care is not deemed relevant at all, only the goals of accountability matter.⁴²²

7.5.3 Providing and maintaining a decent institution: a care for the supervisory board

For my thesis, I especially have attention for the organizational entry in the model, more specifically that of the *decent institution*, as Baart argues that this is primarily a task for the board (supervisory and executive). In Chapter 6 I have argued that organizations tend to institutionalize, and therefore become difficult to (conceptually) separate. The organization as institution also relates the organization to its wider political contexts. The umbrella name for this aspect is the habitability of the organization of care. Habitability refers to the liveability of the facility, the way in which it shelters life or work, or more precisely, its relations and how they can flourish. I choose to centre the idea of ‘sheltering’ or ‘shelter’ for the assignment and responsibility of the institution and its governance arrangements. The normative part of this entry comes from the idea of decency, or a decent institution, for a decent society. This should transcend material or social goals. Health care has a telos, a purpose, and there is more at stake than just having a (relatively) good time with each other. The markers are interrelated, for example: the way how people learn should be facilitated. This model shows similarities with organizational applications of MacIntyre’s *After Virtue*, especially that of Beadle and Moore.⁴²³ The difference is that Baart does not understand the facility and the practice as antitheses that need to be separated properly, but rather that an organization *bundles* different kinds of practices – of which management can be one.⁴²⁴ CEMQUE differs from traditional models of organizations, although there are several organizational theories and/or models that more or less also emphasize the different aspects in the care ethical model, from McKinsey’s 7S-model, up to Barnard’s distinction of the formal and informal organization.⁴²⁵ Baart however insists that the entry points are not properties of organizations, but rather concrete and interconnected practices. The model is a heuristic: it is about real practices that you can look at *if* you view them in the right light. It does not proclaim a grand vision of care or organizational instruments, but rather tries to pull

422 Ibid., 34.

423 Beadle and Moore, ‘MacIntyre on Virtue and Organization’.

424 Baart, *De ontdekking van kwaliteit*, 80–82. See also the introduction of this thesis for a description of practice theories.

425 Barnard, ‘The Functions of the Executive’.

up what is always already there – even sometimes weak and suppressed and what needs to be given attention and strength.

The role of governance (boards, in this respect), so it is argued by Baart is that it should translate the *telos* of the institution (care) properly within its organization.⁴²⁶ That is: it should be decent, correct and just, and be explicit in its relation to civil society. It searches the middle ground between the *telos* of the institution, the political and public rules in which it is embedded, and the (im)possibilities of the actual, executing organization – including its history, traditions, rules and norms, et cetera. This is not an easy task, it involves (political) friction and decisions, and compromises are needed. This threefold model is close to Moore's Public Value Theory,⁴²⁷ but also shows similarities, as mentioned before, with approaches to organizations in the slipstream of MacIntyre.⁴²⁸ The role of governance is dialogic, both internal and external, and it should constantly discursively reorient towards the institutional *telos* in relation to its capacities and context. The opposite of a decent institution is when institutional practices (such as management) become self-referential – a purpose in itself, alienated from its context, dangerously abstracting-in-order-to control the form of the actual caring practices, doing things that are alien to the institution, allowing abuse of power, and the like. The other three entries of the organization are of course interconnected to the decent institution and cannot be seen in isolation (practices run as 'threads' through the bundles of practices in organizations).⁴²⁹

Baart has made an ideal description of what governance should entail, and where its focus lies. This is also a problem: that we should go back to the 'original purpose' is already a commonplace, a platitude even, as shown in Chapter 3. It is not always clear whether this makes something visible or invisible. If no one can disagree, then what is its meaning? A difficult question therefore remains: whenever we get to speak of a *telos*, it is easy to overlook the concrete context by *fixing* and *fixating* on the *telos*. It is indeed a matter of concern whether abstract theorizing about the *telos* of an organizations actually helps to solve what is at stake in concrete practice. I will come back to this difficult matter in the final chapters. Baart, still, has

426 Baart, 216–18.

427 Moore, *Creating Public Value: Strategic Management in Government*.

428 Parker, Thomas, and Kavanagh, 'Problematizing Practice: MacIntyre and Management'; Brewer, 'Management as a Practice: A Response to Alasdair MacIntyre'; Moore, 'On the Implications of the Practice- Institution Distinction: MacIntyre and the Application of Modern Virtue Ethics to Business'; Beadle and Moore, 'MacIntyre on Virtue and Organization'; Moore, 'Corporate Character: Modern Virtue Ethics and the Virtuous Corporation'; Hart, *Lost in Control*; van Baardewijk, *The Moral Formation of Business Students*.

429 Schatzki, 'Sayings, Texts and Discursive Formations'.

made a very important step for an ethics of care to be understood as, or embedded in, business administration, including its institutional setting, while at the same time overcoming a merely managerial perspective by introducing the institutional (and therefore: political) role of sheltering. Based on CEMQUE, we can say that the practice of governance is itself a caring practice, given a caring name with 'sheltering', both in a relational and in an institutional sense.

7.6 Summary

These four critical insights and the Care-Ethical Model of Quality Enquiry help us to look at care within organizations beyond the managerial question, beyond a mere functionalist or technical view. These care ethical insights give proper words and more depth to the concepts of ambiguity of care and politics, and touch upon the democratic question. In short:

Relationality: Care is not of itself good, but ambiguous. It proceeds through relations, therefore through power. It stresses the vulnerability of both care receivers and givers and questions the possibility of self-determination. It resists moral euphoria (in the sense of excessive enthusiasm) about relations, caring, et cetera in core values, but rather 'forces' us to look very 'carefully' at concrete caring practices.

Responsibility: Caring presupposes a responsibility to care. Responsibility may be both about responding to someone in need and about the way responsibility is divided. Responsibility marks the ambiguity of caring practices as formal responsibilities and the need for responsiveness may not coincide. The political aspect is that responsibilities must somehow be distributed.

Contextuality: Figuring out what good care is, is a particular question, and cannot be decided from outside of a specific practice. Moreover, the context of care is messy and complex, and therefore resists instrumental simplification by management techniques.

Politics: Caring, ordinary, practices are nested in political contexts. Figuring out good care, therefore, cannot be just a moral inquiry, but must also be a political inquiry. This implies that notions such as power, governing, potential conflict and pluralism about what is good are involved in concrete caring practices. Politics is, in this regard, more than the democratic aspect of 'all voices at the table' – there is more to politics than policy.

Looking more closely at supervisory practice, we can provisionally argue the following three points.

Supervisory practice is a political practice

Despite the enormous attention on professionalization and the focus on expertise, I argue on the basis of these critical insights that supervisory practice is a political practice. First of all, it needs to oversee 'good care', and this is not just a technical matter. It involves finding its telos, which is itself a risky activity. Openness to concrete practices and a telos is necessary. Secondly, the supervisory board oversees how responsibilities are assigned and divided, who can, may and want to raise their voice. Third, the concrete practice of caring is nested into wider political and social contexts. The supervisory board is on the threshold, boundary, of the concrete practice and wider context. The discourse of professionalization, discussed in Chapter 2 and 3, therefore, might be misleading in understanding the overall role of the supervisory board.

Supervisory practice is a caring practice

One step further, we can then also argue that supervisory practice is a caring practice, and this includes sheltering. This caring must be understood both relationally and institutionally. Relationally, in the sense that, in the end, the relations in which the supervisory board is engaged (with the executive board, but also other organizational members) in the organization are more determinative of its functioning than the abstract supervisory visions, information frameworks, roles and its supervisory instruments (such as quality management systems). These relations involve power differences, and the supervisory practice becomes not only a matter of controlling or 'checking' power, but also of making it possible. This is also an institutional form of care: providing a context for care to appear in its relationality and contextuality. Supervision as caring practice resists complacent simplifications of (quality of) care. A task which lies ahead is to understand in more depth what it means to care for the board on an institutional level.

Supervisory practice is an impossible practice

Lastly, as intermediate reflection, we can also argue that it appears that the supervisory practice is an impossible practice. Does the discussed perspective not totally overload the supervisory board with responsibility? What about the relative distance, precisely the absence of (meaningful) relations within the organization? What has the supervisory board to do with the professor in our example, given that there may be several hundred to thousands of such cases in the organization? What about the dependence on quality management systems for judging care? Can the job be done without such simplifications? What about the non-executive role that the boards have – what, in the end,

are they able to do? I will take these questions seriously in the chapters to come. I believe, we have to dig deeper into the matters of quality management (for a better understanding of ambiguity), institutions and politics, and the democratic role of the supervisory board. The next chapter will focus on quality management, and how quality management is possible in organizations.

8. The safe high grounds: The paradoxes of quality management

8.1 Introduction

In the previous chapter I have critically discussed contemporary quality management and showed how the Care-Ethical Model of Quality Enquiry of Baart attempts to make a bridge between the care ethical perspective and quality management. The purpose of that chapter was to use care ethics to give more depth to the idea of ambiguity, politics and democracy in civil society – health care in particular. Although I have touched upon possible problems with contemporary quality management, I need to discuss this with more critical rigor. I ended the last chapter with the observation that, if quality management does not suffice to understand care, the supervisory task becomes seemingly impossible. In some sense, any form of governance cannot escape quality management, it appears, while this same quality management may divert the observer towards things that are of little importance to concrete care. It appears, therefore, that there is a paradox at the heart of governance: to some extent, it is impossible not to be on ‘the safe high grounds’ (dependent on what is given to you; relative distance; ideal of independence) while at the same time there lies an imperative not to linger there, but to go and understand care from, what Schön calls, the swampy lowlands. In this chapter, I will therefore highlight the paradoxes of quality management: you cannot live with or without it. I will argue, enriching the argument of the former chapter, that the problem of quality management lies precisely in the denial or concealing of its paradoxical nature, not in its use or application itself. I will argue that the supervisory task is to look at three organizational qualities: decision, reform and conflict. To introduce this matter, I will first discuss Schön’s *Reflective Practitioner*, also briefly noted in the introduction. It will appear that Schön’s perspective on quality management resembles in some respects the critical insights from care ethics. From there on, I will introduce the recent work of Thomas Schmidt who has contributed to the analyses of quality management and its paradoxes. These two authors help us to see the ambiguity of ordinary practices, while at the same time it is somehow necessary to use organizational instruments. Based on Schmidt, I therefore formulate three organizational qualities, in the final paragraph, that help to understand the task of the supervisory board: the quality of decision making, the quality of reform and the quality of conflict. The political and democratic aspect are less explicitly present in the

authors I discuss here. However, I will relate some of Schön's and Schmidt's observations to this notion. The political and democratic aspects of care will be dealt with in the next chapters.

8.2 Schön's reflective practitioner

As noted in the introduction, the distinction between the 'safe high grounds' and the 'swampy lowlands', coined by Schön⁴³⁰, forms an important metaphor for this thesis for understanding the position of the supervisory board.⁴³¹ Schön criticizes what he calls 'Technical Rationality' (with these capitals) in professional work, similar to instrumental rationality, a dominant and criticized feature of modernity.⁴³² Many professionals in organizations are being taught that professional problems are technical problems, even professional problems that appear to the professional as non-technical – but rather as puzzling, troubling and uncertain.⁴³³ Good professionals, that is, reflective practitioners, come to recognize, Schön argues, that although problem setting is a necessary condition for problem *solving*, it is not itself a *technical* problem.⁴³⁴ Technical Rationality, then, depends on agreements on ends or purposes: "When ends are fixed and clear, then the decision to act can present itself as an instrumental problem. But when the ends are confused and conflicting, there is as yet no 'problem' to solve."⁴³⁵ These conflicts cannot be resolved with technical instruments. Instead, professionals need to figure out what in this situation will appear to be good – in care-ethical terms. This is a non-technical problem, but indeed an ethical-political problem. The problem of many approaches to quality management in organizations is that they force their professionals to prefer the instrumental (and Positivist) approach, as this instrumental approach provides rigor, certainty and objectivity. Professionals are caught in a dilemma, as matters such as uncertainty, uniqueness, instability and value conflicts are *relevant* for the concrete job in hand, while the instrumental framework forces them to look away from this.⁴³⁶ The contrast is that those problems that can be solved technically (high, hard ground) are often of little importance to clients or the larger society, while "(...) in the swamp are the

430 Schön is not a philosopher but was consultant in quality management and professor at the Massachusetts Institute for Technology (MIT). His thinking is indebted to Dewey.

431 Schön, *The Reflective Practitioner*, 42.

432 Cf. Weber, *The Protestant Ethic and the Spirit of Capitalism*; Taylor, *Sources of the Self*; MacIntyre, *After Virtue*.

433 Schön, 40.

434 Ibid.

435 Ibid, 41.

436 See also Hart, *Lost in Control*.

problems of greatest human concern.⁴³⁷ Institutional mechanisms of accountability have failed and have contributed greatly to the “disenchantment” of the professions (for example the ‘five-minute registrations’ in home care).⁴³⁸ Therefore, a quality management that focusses upon categorizations and processes, may perceive itself to be rigorous but it lacks relevance. A quality management that proceeds through experience, trial and error, intuition and muddling through, on the other hand, may be relevant but may also lack rigor (for accountability). Of course, Schön has a normative preference for the latter approach. The aim of his book, one might say, is to make this approach rigorous in a non-instrumental way. He therefore introduces the idea of ‘reflection-in-action’, as opposed to Technical Rationality, arguing that, very often, professionals “(...) cannot say what it is that we know.”⁴³⁹ Knowing is tacit, and often cannot be made explicit – and trying to make it explicit undermines its force.⁴⁴⁰ When a professional is (en) able(d) to act as a reflective practitioner, however, accountability is in fact possible. The conversation of the professional with the client is seen as a *contract* in which both the knowledge of the professional and the client are recognized but provisional, and that meaning may diverge and emerge. With such a contract, the professional is more directly accountable to his client than in the technical contract.⁴⁴¹ Although many organizations in Dutch civil society *talk* like this, it is apparently very difficult to organize it in practice.⁴⁴² Due to the institutional pervasiveness of Technical Rationality, not many organizations will be able to turn to this alternative and more direct forms of accountability. The safe, hard and high grounds of Technical Rationality will remain appealing. We should be wary however of just one-sidedly pointing a finger at a pervasive management culture. I believe matters are more complex. We need therefore to more fundamentally analyse and dismantle Technical Rationality, while upholding the possibility of accountability, management and governance. We cannot just clear away the organization, let alone the institution. In my view, the work of Thomas Schmidt offers important insights to this issue.

437 Schön, 42.

438 Ibid., 293.

439 Ibid., 49.

440 Cf. Polanyi, *The Tacit Dimension*; Nonaka and Takeuchi, *The Knowledge-Creating Company*. Nonaka and Takeuchi have, in my view, radically misunderstood Polanyi and Schön’s theories of tacit knowing.

441 This approach to accountability is what organization X in Chapter 4 uses.

442 Cf. De Blok et al., *Het Alternatief Voor de Zorg*. Interestingly, in the COVID-19 crisis in 2020, nursery homes suddenly turned over to a maximal risk aversion, centralized control and focus on safety. Years of deliberation over quality of life and attentiveness (value talks) evaporated in an eyewink. See Den Uijl, Frankowski and Hendriks, ‘Van beleidsreflex naar reflexief beleid’.

8.3 Introducing Thomas Schmidt: Beyond improvement-euphoria

If one would ask a random nurse or caregiver what s/he thinks of the Plan-Do-Check-Act circle, it is likely that s/he will answer annoyed. Still though, this is perhaps the most propagated technique of ‘quality improvement’ in nursery education, management-consultancy practice and in health care organizations under the flag of ‘quality management’. PDCA (also known as the Deming circle) was the real first attempt to actually prove what is good, rather than just saying it’s good. And indeed, if staff are fed up with PDCA it’s not about the process itself but the way managers have imposed it on people. If used in a collegiate, genuinely enquiring way, it can be felt to be rewarding for the participants. Donald Schön saw that instruments such as the ‘Deming circle’, or more precisely, the ‘Shewart circle’, are flawed in their managerial usage, as they often do not calculate in or recognize the swampiness of everyday activity, and the often implicit, inarticulable and devious ways in which people learn.⁴⁴³

Recently, the German theologian Thomas Schmidt, who is professor in the field of quality management and organizational development, published a major work *Nie Wieder Qualität* (Quality, never again) with the subtitle: *strategies of paradox-management*.⁴⁴⁴ In my view, this book is a very important contribution to the field of quality management and organizational development, as it successfully debunks ‘improvement-euphoria’, myths of progress and ‘excellence-optimism’, while at the same time still holding up a positive account of what (quality) management can bring. This is achieved by strategies that at the same time reduce and unfold complexity. It is this tension, I will argue later, in which the supervisory board must act. In this chapter I will exhaustively discuss the work of Thomas Schmidt, as it will lay a foundation for how we will understand practical wisdom for supervisory boards.

The argument Schmidt makes is rather dense, and the number of statements and concepts is vast. His theory is mainly based on Luhmann’s system theory. I take that for granted and will not extensively debate these roots. I will try to organize and critically discuss the content matter of Schmidt’s statements. I will do so by explaining the seven propositions of Schmidt at the end of his book and formulate the different paradoxes that are behind them.⁴⁴⁵ I will follow his steps, and highlight how it is relevant for this thesis.

443 Schön, *Educating the Reflective Practitioner*, 69–70. The PDCA (Plan, Do, Check, Act) cycle is often attributed to Deming, but was originally coined by Shewart.

444 Schmidt, *Nie wieder Qualität*.

445 *Ibid.*, 398.

8.4 The contingency of control

Observing quality as a two-sided-form changes the “either-or” of the classical logic (good/bad) into an “as-well-as”: The good side might show itself as the bad side, and the bad side may appear in some circumstances as the better one. Every control can be observed differently. Who wants to escape controlling illusions and fantasies of optimization has to calculate with the contingency of control.

– Schmidt

Openness of setting norms

A remarkable example of the contingency of control is the necessity to report so-called ‘near-accidents’ and accidents regarding the safety of care. It always remains elusive how these controls should be interpreted: is a rise of reports a bad thing (more [near-]accidents have occurred) or a good thing (caregivers experience more social safety to report the [near-]accidents)? It may be different in each situation. We do not and cannot know the future, and we do not exhaustively know how we came in the state we are in. That is briefly what contingency is.⁴⁴⁶ Therefore also: there are no necessary or inescapable decisions, there is always an alternative, both for the norm itself and for its interpretation. Controlling is not simply setting a norm or a new target and checking if this is met. First of all, there is the *decision* of the specific norm and of the control, and decisions are paradoxical themselves – only that on which you cannot decide, you can (and must) decide. Second, quality is in some circumstances not delivered by following the norm, but by deviating from it.⁴⁴⁷ If controlling techniques do not include this possibility, controlling becomes an illusion: it does not measure quality anymore, but only or merely a (random) norm, while this norm itself is contingent – it is not obvious that this is the norm, nor what it means.⁴⁴⁸

Between reducing and unfolding complexity

Schmidt criticizes a specific kind of quality management that thinks that, or acts as if, there is something like perfect quality, natural order and purpose and that there are super-human beings who always want to improve.⁴⁴⁹ On the other hand, though, it does not mean that you can organize without norms. Norms serve as a way to reduce complexity and to absorb uncertainty, which is necessary to make action possible. It makes processes more or less predictable by formulating and formalizing expectations. The point is in the

⁴⁴⁶ Ibid., 262–63.

⁴⁴⁷ See for a care ethical example of this: Timmerman and Baart, *Ongeregeld goed*.

⁴⁴⁸ Schmidt, 373.

⁴⁴⁹ Schmidt, 287.

‘more or less’, and only if this is accounted for, there can be a ‘quality of control’.⁴⁵⁰

In the face of contingency, people can be paralyzed (as with the Gorgons, or as with God and Moses on Mount Horeb), but it might also lead to a dealing with, relating to, paradoxes – an unfolding of them in temporary, tentative and workable reductions. The question is not how paradoxes should dissolve, but about how one can *unfold* and endure them.

The reduction of complexity of the world into relatively stable decisions, concepts and controls is very useful – creates stability. We should however be aware that these reductions do not cover reality, underdetermines it, and the use of reductions should always remain provisional and open to contradiction. Furthermore, every control has unexpected and uncalculated consequences. These side effects might be experienced as good as well as bad.⁴⁵¹ Jessica Mesman has called this the “relocation of risks”, implying that a control of a specific risk might reduce that specific risk, but the risk will be “relocated”, going somewhere else since you cannot analyse risks in a vacuum.⁴⁵² This unmask the illusion of ‘failsafe organizing’.⁴⁵³

Contingency is for Schmidt a key concept, and above I described the radical consequences of thinking through this. In this thesis we have not mentioned it yet, but it is apparent how contingency shows how decisions are reflected in the complexity of ordinary practices. Contingency, equated with conflict by Schmidt, implies a politics about management: technical instruments cannot decide on what decisions to take. It always involves choices that are not merely rational. Claiming technical instruments determine decisions, undermines the possibility of ‘reflection-in-action’, to speak with Schön. The point is, thus, from a governance perspective, paradoxically, how to both reduce and unfold complexity.⁴⁵⁴

⁴⁵⁰ Ibid., 277.

⁴⁵¹ The accountant might do an in-depth control because of a change in billing systematics, and he might find that the books are all right, but in the meantime, employees have become numb and demotivated in searching and delivering so much detailed information, especially because nothing “wrong” has been found. The board might be happy with the audit report, but it might not see what damage it has done. On the other hand, it might well be that the accountant finds a flaw in the billing systematics, refuses approval (which leads to all kinds of financing problems), but it might lead the organization to reform the billing systematics, or find more clever ways in dealing with it.

⁴⁵² Mesman, *Uncertainty in Medical Innovation: Experienced Pioneers in Neonatal Care*; Mesman, ‘The Geography of Patient Safety: A Topical Analysis of Sterility’.

⁴⁵³ Pedersen, *Failsafe Organizing?*

⁴⁵⁴ Schmidt, 305–11.

8.5 The contingency-formula of quality

The contingency-formula of quality hides the paradox that controls may prevent quality, and reforms may ruin organizations. Every quality evaluation is an invisible paradox, as the paradox deprives its validation criteria for control. The organizational contingency-formula of quality of decision refers to the chances of recursive multi-perspectivity: controls deliver irritating confirmations as well as inspiring disappointments. Quality of decision originates from the conscious differentiations of strategies to develop such paradoxes of control.

– Schmidt

Quality controls may prevent quality

This task of reducing and unfolding is not easy, however, as there are deep-rooted conceptions about management and quality that tend to hide this paradox by means of ‘formulas’ – easy solutions. A contingency formula is a kind of spell, an incantation, a creation of a taboo, perhaps even an exorcism. It functions to drive out contingency and to cover up the paradoxes that accompany contingency.⁴⁵⁵ Schmidt argues that in the language of quality management, the concept of quality and its underlying presuppositions form, or more specific, can form, such a formula. His argument is that the concept ‘quality’ in quality management (and other related concepts such as perfection, learning, insufficiency and progress) rests on four interrelated old-European (philosophical, religious and moral) conceptions of perfection. Namely *Telos* (natural order), *Eschata* (heavenly completion), *Ethos* (moral perfection) and *Oikos* (Godly Kingdom as example of how to do things on earth). At the cradle of quality management is the religious and moral inclination to qualify human behaviour as good or bad. In a secular interpretation, as Weber showed, the road to an embedding of purpose- or moral-oriented language in economic utility measurements (efficiency and effectivity) is not a long one.⁴⁵⁶

⁴⁵⁵ Ibid., 183-199.

⁴⁵⁶ Weber, *The Protestant Ethic and the Spirit of Capitalism*.

Intermezzo

Eschatology and quality management

I highlight the eschatological argument Schmidt makes. Already in the Old Testament, there is a constant message that the future will bring justice, that the bad will be overcome. This promise seems always to be suspended: the Jews leave Egypt, but this is only the beginning of new wrongdoings and despair. In the midst of tribulations, people hang on to the promise that over the ages, bad times will end and be turned into good. The longer this redemption is 'delayed', the more urgent it will become, but also the smaller the group who still dare to hope for salvation. In early Christianity the figure of Jesus Christ radicalized this promise and takes it to the here and now. On the one hand there is the saying that "God's kingdom is here with you" (Luke 17,21), but on the other hand Jesus must go to his Father, where he has to prepare the final redemption. Jesus says that one has to be perfect, full, just as the Father is perfect (Matt. 5,48). God comes to earth with mercy and charity, but at the same time expects his followers to do so in order to gain heavenly reward. As Nietzsche would say, a 'reversal of all values' is going on: it is not about being a superhuman to gain heavenly reward, rather in poverty, humility, hunger, weeping, and in being crippled lies perfection (Matt. 5). Being perfect is therefore not about a state of happiness or wealth in the present, but about suffering and enduring for the moral good, knowing that one day you will be redeemed. In early theology this has led to the notion of 'already but not yet'. The kingdom of God can already be amongst us, if we follow him properly, but it will always remain a 'not yet', until the final redemption takes place. Different passages from St. Paul have marked this paradox: "We are confident, I say, and would prefer to be away from the body and at home with the Lord. Hence, we make it our goal to please him, whether we are at home in the body or away from it. For we must all appear before the judgment seat of Christ, so that each of us may receive what is due us for the things done while in the body, whether good or bad (2 Cor. 5, 8-10)." The 'already but not yet' has inspired indeed the ascetic movement of withdrawing from life (into monasteries or isolation), while one still could not really escape it. *Ascese* was however a project of perfection, already on earth, while knowing it was unending until the final ending. In later theology, this doctrine was complemented with Aristotle's ideas of *arête*, excellence of character which can and should be pursued, even though one does not know when one has achieved this. In a secular age, and in late modernity, the idea of self-perfection is more alive than ever, even though it is now without transcendence: the singular self has become an object of improvement and perfection, and this demand →



for authenticity and ‘enterprise’ is a general expectation.⁴⁵⁷ The notion of perfection combined with the Weberian protestant ethic (with its rationalization) has supposedly led to the contingency formula of quality: there is a clear distinction between ‘good’ and ‘bad’ quality, and this is a general feature and it can be evaluated in terms of efficiency and effectiveness. The good will however always postpone itself: it is never enough, one must always improve up to a point of perfect quality – already, but not yet. The question is: is there still a possibility to say that quality is just fine the way it is, despite or thanks to its imperfection?

Everyone who works in a professional context, knows very well that controls may prevent quality (they may distract or undermine) and reforms may ruin organizations – and they are rapidly replaced as they never seem to bring what was promised in the illusion of perfection. The paradox that “deprives validation criteria” is the paradox of control: the good side might show itself as the bad side, and the bad side may appear in some circumstances as the better one.⁴⁵⁸

A workable formula: decisional quality

Schmidt then brings in a new contingency formula, namely that of decisional quality. It seems that Schmidt has a positive view of this formula, in contrast to the earlier mentioned formula of quality. The formula of quality tends to hide the paradox, whereas the formula of decisional quality tends to unfold it. The formula of decisional quality – still a formula – serves to calculate with multi-perspectivity of controls: that in some situations a confirmation of quality might be irritating (we do not learn anything new) and a disappointment might inspire us to do something new or different (we did not receive the Gold Medal, thank god!). It is still a formula in the sense that it does install a control, but the observation is not only focused on the outcomes of the control (first order observation in system theoretical terms), but instead on how the control is perceived and dealt with by the organization (second order observation). Decisional quality is constantly busy working between an overdose and an ‘underdose’ of control mechanisms. Unfolding paradoxes means that one is aware that the reduction of uncertainty is a formula to cope with contingency, that one indeed still applies reductions and formulas, but that one knows they are not absolute, do not represent reality in a determinate fashion, and are therefore open to contradiction and alteration. Energizing the paradox, (keep it on tension, on voltage), is a constant oscillation between fixating (reducing complexity, hiding contingency) and then unsaying (reinstall complexity) controls and

⁴⁵⁷ Reckwitz, *Die Gesellschaft der Singularitäten*; Bröckling, *Das unternehmerische Selbst*.

⁴⁵⁸ Schmidt, 373

decisions. In paragraph 7, I come back to the specific strategies Schmidt has in mind.

For this thesis, practical wisdom must have something to do with these formulas – how not to be blinded by them, while still being able to use them. Also, it forces the supervisory board, that is itself a form of control, to be humble about what it can engineer with controls, and that it needs to consider how its forms of control are themselves controlled. Any striving for perfection (or wanting to be the best, the greatest or the smartest) will inevitably bite its own tail. In a sense, we might say, the role of supervisory board lies not so much in direct controlling activities, but in observing how these controlling activities are received and interpreted in ordinary practice.

8.6 Forms of control

Dismissing the classical ideas of perfection of the authoritarian or bureaucratic controls, post-heroic management searches for acceptable forms of control for the 'next society'. Furthermore, it searches how the interruption of routines can become a routine itself, at least in management and leadership (c.f. Dirk Baecker). The quality management second order observes its own observations, by controlling the quality of its own evolution of paradoxes.

– Schmidt

New ideals in management and making sense in a flood of meaning

Authoritarian and bureaucratic forms of control are pervasive as well as unpopular in management discourses, as became apparent in Chapter 3 and 4. There is some awareness that these controls do not bring what they promise – perfection, effectiveness and efficiency. In popular management literature, this was already mentioned by Peters and Waterman in their *In Search of Excellence* (and was paradoxically also a source of inspiration for New Public Management). In this book, they criticize traditional and rationalistic forms of control as irrational.⁴⁵⁹ Many authors have followed them in this argument. Van Diest has quite rightly shown that these authors never really leave the ideal of effectivity and perfection, but that the way to control and engineer this is relocated to 'values', sensemaking and social pressure.⁴⁶⁰ Schmidt's dismissal of these 'traditional' forms of management are in a way much more profound: they tend to hide the paradox of control, he argues. Building on the German sociologist and organizational theorist Dirk Baecker, who is also

⁴⁵⁹ Peters and Waterman, *In Search of Excellence*. First published in 1982.

⁴⁶⁰ Van Diest, *Zinnig ondernemen*; See also: Sennett, *The Corrosion of Character*.

in the tradition of system theory, Schmidt speaks of a 'next society' (*nächste Gesellschaft*). This term comes directly from Niklass Luhmann in his famous book *Die Gesellschaft der Gesellschaft*.⁴⁶¹ Luhmann argues (in the late nineties) that modern society is on the threshold of a major turnover because of the introduction of the computer in all parts of ordinary life. He compares this 'new' medium with historic revolutions such as the introduction of language, writing in general and the alphabet in particular, and last but not least the introduction of the printing press in the sixteenth century.⁴⁶² The computer (also nowadays the smartphone, internet and intranets, big data and artificial intelligence) creates an overflowing or flood of meaning, and human species has to find ways to make sense of this. This sensemaking occurs through so-called 'cultural forms' – ways in which specific cultures canalize culture specific contingencies. In Aristotle's time, for example, cultural form was the idea of *Telos*. In modern times, it was the idea of "self-referential restlessness."⁴⁶³ Luhmann argues that in the next society, all we have are temporal – provisional – forms. A form "(...) is related to observers having to decide whether they stay where they are or rather switch to the other side of a distinction."⁴⁶⁴ In an era in which there is an overflowing of meaning, complexity reduction can only succeed if meanings are temporarily fixed. Sooner or later new possibilities or circumstances will force people to interpret the fixation on the other hand of the distinction. Recalling an earlier example: there is a lot of data collection in long term care on compulsion or falling incidents. How this data is interpreted might be very different and context related. Is an increased number of reports a good thing or bad thing? Can it not imply that people report more, because they feel it is safe to report? Can this data be manipulated, and who has an interest to do that? And, importantly for cultural forms, how often do the interpretations differ in time? This contingency may cause temporary blindness for quality managers, boards and supervisory boards, so they need to temporally fix how they interpret this data. It might very well be that a new or different stream of data may need other temporal forms – interpret for the time being – to deal with it. Since many things may be interpreted differently, it is necessary to provisionally fixate interpretations.

From governance to disturbance

In this next society, Baecker argues that we need a "post-heroic management".⁴⁶⁵ The time of leaders who lead the way, who steer (*Kubernare*,

461 Luhmann, *Die Gesellschaft der Gesellschaft*; Baecker, *Organisation Und Störung*.

462 Baecker, 'Communication With Computers, or How Next Society Calls for an Understanding of Temporal Form'.

463 Ibid., 416.

464 Luhmann, 1147–48.

465 Baecker, *Organisation Und Störung*, 269–88.

root of the concept of governance) the organization in a direction, is an inadequate way to deal with the complexities of organizing. Following Baecker, post-heroic management is not about *steering* but about *disturbing* – from governance to disturbance. Management is, and Schmidt follows Weick, a matter of complicating yourself.⁴⁶⁶ The organization can no longer be characterized as a machine with inputs and outputs, but rather as a “stable imbalance”, highlighting the ambiguity of organizations.⁴⁶⁷ The manager needs to disrupt organizational routines in order to make it possible that people can learn, so that they can distance themselves from the routines and see whether they need to be altered (or not). This “routinization of routine disturbance”, an art of wielding the paradox, should in its turn create new temporal forms in routines and procedures, while always upholding the possibility of multi-perspectivity and contextual interpretations of good and bad.⁴⁶⁸ Hence, management needs to control the quality of the unfolding of paradoxes, that is, it must at the same time develop and increase complexity (by disturbing and understanding that every solution is a new problem), but at the same time also reducing complexity (acting as if we make rational decisions, controls, procedures, et cetera).

Seeing through simplifications

Management needs to oscillate between unfolding and reducing like a heart rate monitor oscillates. In other words: complexity is the solution to the problem that every simplification necessarily denies – sometimes even violently obscures – what it simplifies. Hence, to speak of and determine quality of care in terms of patient satisfaction and employee satisfaction, perhaps combined together, in themselves perhaps brilliant indicators, obscure what is happening in the complex singular practice of giving care to somebody. The simplifications highlight some aspects of the practice, and therefore also leave all kinds of things out of sight. However, without such simplifications organizations cannot function. From a governance perspective, we are forced to generalize and hence to simplify. Therefore, it is important that management *sees through* these simplifications of the complexity, contingency and paradoxes underneath. It is the ruse of the world to appear to simplify, which remains less than simple. Only temporal and provisional simplifications will do.⁴⁶⁹ Post-heroic management does not claim to know how things ought to be done. Instead, it includes in what is not known, what is left out of sight, and uses this to further disturb routines.

466 Weick, *Sensemaking in Organizations*; Schmidt, 242.

467 *Ibid.*, 243.

468 *Ibid.*, 250.

469 Cf. Beck, Giddens, and Lash, *Reflexive Modernization. Politics, Tradition and Aesthetics in the Modern Social Order*.

Questions a supervisory board may ask

In practice, a post-heroic supervision may be translated into questions that can be asked to organizations:⁴⁷⁰

- Who observes? Who constructs the distinction? Why is precisely this distinction being made? Which interests become visible, and which stay latent?
- Do people prefer usable or optimal solutions? By whom? With what is quality management interchangeable?
- How do functional alternatives become visible? Which system needs are identified?
- Which forms of quality management and quality control can be distinguished?
- How are effects of controls controlled? How is causal coherence being constructed?
- How do people learn? How does knowledge become active?
- How, when and from whom are control techniques deployed? How, and under which conditions are control techniques being relativized?
- How are dysfunctional effects of control activities described? How and by whom are latent structures and functions observed?
- How tight or how loosely are controls coupled? How, and under which conditions, are tight couplings converted into loose couplings?
- How and by whom are the deployed controls controlled?
- How are controls morally evaluated? Which compliance regulations are communicated? How is a violation expressed? How are values employed? How is ethics brought into play? How are the consequences of moral communication and ethical reflection controlled?

What becomes visible in these questions are a couple of things. First is the idea of second order observation: it is not about the control itself, but about how it is employed, perceived, developed, et cetera. Post-heroic management is a very sensitive kind of management: as second order observer it identifies *political* issues of power differences in the organization (who may decide and control); and *moral* issues – especially the second order observing of morally infused management techniques. In the questions, secondly, contingency resonates. It assumes that things could also be otherwise, and it questions at the same time why things are the way they are.

Summing up, the excess of possible meanings in contemporary society and organizations, forces management not to steer but to disturb. Governance becomes disturbance. You cannot of course disturb all the time – that would

⁴⁷⁰ Schmidt, 132.

result in a very unstable organization (and probably in mutiny). Therefore, meanings should also be temporarily fixed. This is the oscillation between reducing and unfolding complexity.

8.7 The paradox of management

In the network of organizations every control has to calculate with counterchecks. The management of the “next society” uses its controlling power to be controlled itself. “Tell me what you are controlling, and I will tell you how you are managing.

– Schmidt

Inescapable democracy

An important issue of the paradox of control is that whoever wishes to maintain hierarchy, – who wants to control – must be willing to be controlled himself.⁴⁷¹ This results in a ‘heterarchical hierarchy’. In post-heroic management, there is no despotism possible, as that form of decision and control will soon lose its legitimacy and also its function as it tends to demotivate.⁴⁷² The counter controls, or counterchecks, designate how much control an organization can endure. Indeed, controls can motivate as well as demotivate. The question of control is a question of dosage, and about the question of who decides, observes and controls the doses of control. To answer these questions, it utilizes counterchecks: how are the employed controls perceived? The last question Schmidt asks in the quote on top of this paragraph expresses the politically complicated heterarchical hierarchy of every modern organization from the perspective of the employee: “you can tell me what you want to control, but I can tell you (or my colleagues, if you are not interested) what I think how well you are doing that.” This experience is also prior to supervisory boards – as seen in Chapter 2. Although the supervisory board has controlling power over the executive board or the organization, it must calculate that the executive board or employees will have an opinion as to how well they are controlling, and that this opinion is just as relevant for the supervisory board as the employed control itself.

For my thesis, this highlights that whatever structure is used in the organization (deployment or network, for example), people always talk back (sometimes, or very often, amongst each other). The paradox of management must calculate with political forms of either resistance or approval. It is a matter of concern if this ‘talking back’ does not reach the ones who control

⁴⁷¹ Ibid., 373.

⁴⁷² Ibid., 173–75.

(the management or supervisory board), but becomes a slumbering gossip, a discontent or, perhaps worse, a neglect. Even in organizations that are very traditionally organized in a hierarchical deployment structure (which might be the case in health care organizations), democratic expressions, albeit informal, will need to be taken into account. The question is whether there is enough awareness of this point in the governance of civil society organizations, and that democracy is accounted for in formal codetermination bodies. In some stories from Chapter 2 I have showed how this might turn out.

8.8 Intelligent quality management

Quality management can only succeed as an oscillation between control techniques and recursive controls of the conflict culture. Management therefore uses the art of integration to encourage changes of perspectives by normative self-descriptions of the organization and to disturb organizational routines of control. Intelligent quality management is a calculus, which oscillates between the technique (reduction), art (integration), and culture (moderation) of control, to control its forms and consequences. (Factual) focusing, which still allows changes of perspectives, (temporal) continuities, which remain sensible for interruptions and (social) acceptance, which cherish conflicts are necessary for the self-organization of recursive networks of control.

– Schmidt

In the paradox of control (that who wants to control needs to calculate with counterchecks, and that sometimes one needs to take off the “glasses of control” in order to see or control better) the notion of counterchecks (recursive controls) is further developed, introducing the idea of conflict culture. This paradox can evolve as an oscillation between control techniques and forms of integration on the one hand and conflict culture on the other. It can also be seen, in other words, as an oscillation between knowledge production and not-knowing (and they stand in relation to each other as will become clear). There are three ways to oscillate, and they must all be in place.⁴⁷³ I describe all three, as these three aspects of understanding ambiguity are for Schmidt the ‘solution’ to the problems of management sketched above.

⁴⁷³ Schmidt, 334–35.

Technique: forms of reduction

Management cannot escape using techniques or methods for controlling activities. Even though this might only be a form of consensus that is formalized, or more thorough, for example an accreditation technique. One cannot do without such reductions. The point is whether one sees that these are indeed reductions. Therefore, controls must be understood as ‘reciprocal self-esteem’: only those controls that calculate with deviant answers offer new chances for successful practice. The techniques focus on ‘facts,’ but allow different perspectives.⁴⁷⁴ Such techniques of reduction are for example the use of dividing responsibility and accountability, process planning, agreements, obligations of organizational actors or protocols. Taking the example of responsibility: you need demarcations of responsibility (the executive board has final responsibility over quality of care) while knowing that in the origin of decision making or in the performance of practice, responsibility is ambiguous, shattered. Using different forms of responsibility – making power possible – is a way to create (temporal) certainty. In supervising the organization, however, the board should be very wary of causally attribute responsibilities to outcomes. Applying forms of reduction is what Schmidt calls ‘decisional quality’.

Art: forms of integration

Making stories, that is a matter of art. Management cannot do with controls alone, it must integrate the whole of controls into a (more or less) coherent story. These stories are, however, not employed in a hierarchal way; the script, or dramaturgy, of the organization goes as a thread through the entire organization. Stories are hard to ‘control’ and engineer.⁴⁷⁵ The way stories are produced usually go through strategy plans (where we come from, where we go to, threats, dangers, opportunities, strengths) and flowing from this ‘projects’, controls and integrative (quality) management systems. These stories should provide coherence of decisions.

Stories are for Schmidt forms of self-description or self-reference of the organization. Every articulation of the self (for example setting core values or something like that) in which something is locked-in and locked-out (“we are not like...”) embodies the paradox of re-entry and may become self-blocking. The paradox of re-entry arises because from a self-referential point of view, a distinction is made between self-reference and external reference (“we are like... and not like...”). This is not a detached form of observation but happens from within acting *as if* one were outside. Hence, the difference between in and out is produced from within – which results in a ‘chicken or

474 Ibid., 361–65.

475 Ibid., 367–80.

egg' question. The point is though that the produced self-reference is not to be confused with reality, but at the same time, one should know that without such helpful constructions of self-reference it does not work.⁴⁷⁶ Uncertainty, contingency, needs to be absorbed – and identity helps to do that.⁴⁷⁷ Hence, every produced self-description, or identity, is a reduction, a simplification and therefore also (as unity) a testimony of not-knowing, that what is not grasped in the simplification. Self-description is formed by text (which might also be speech). Organizations do not have bodies, but they do have texts. Text is the memory of a social system, and the 'dramaturgy' of quality management is more credible if it can appeal to such a script. The script does not define all of the reality, but it is still very useful in what it does capture. However, if the script is not identified as script but as reality itself, it can become self-defeating as alternatives are made invisible – the paradox is then covered. Art functions as a (temporal) continuity by making history and future plans: it structures expectations of decisions and legitimizes controls, but it needs to be sensible of interruptions and different interpretations of time (past and future).

Hence, from a governance perspective, supervision is never about individual decisions that need to be taken or controlled, but about the ways in which these decisions are related in stories. These stories, however, are not to be engineered or produced, but are produced throughout the organization and its history. Stories are often multivocal and may contradict each other. It is a major, but also difficult task of a supervisory board to get to understand the stories of the organization, while at the same time remaining open to other possible 'plot twists'. Attempts of the supervisory board, or the executive board, to grasp the stories of the organizations, immediately also changes it (by promoting this or that story, and not another one) – this is what I have called performativity in the introduction of this thesis. There is no outside position possible. Schmidt calls this art 'reform quality': stories help organizational members to anticipate decisions and help them to see the 'bigger picture'.

Culture: forms of acceptance

A culture is by definition plural and ambivalent.⁴⁷⁸ In an organization it contains assumptions and expectations of decisions. A culture shows ambiguity par excellence: you can talk about it without grasping it. Every self-description of the culture changes that very culture (paradox of re-entry), just as, for example, questioning happiness changes happiness. Talking about the organization (quality) culture is not something detached, let alone

⁴⁷⁶ Both organizations in Chapter 4 used such forms of re-entry and self-description.

⁴⁷⁷ Schmidt, 310.

⁴⁷⁸ Ibid., 381.

something objective, it is performative from the very beginning. Furthermore, culture is not only something that resides in people's minds, but also in techniques, artefacts and routines.⁴⁷⁹ It is possible to have too much attention for culture. If an organization is preoccupied with its culture, it might forget the outside world. Therefore, the culture needs to be inoculated with the outside world, although this will remain an insider perspective.

For Schmidt, the most important feature of a culture is that it can be understood as a drawing back (or acceptance as its counterpart), an objection or counterforce to an instrumentalization of control techniques.⁴⁸⁰ Culture and its inherent conflicts can be utilized to postpone tight coupling, or to transform tight couplings into loose couplings. Tight couplings can be understood as causal interpretations of decisions and controls, an overdetermination of how things came to be.

If someone, for example a board member, calls for a 'better quality culture', one should be on one's guard against all too hasty simplifications. As counterforce you cannot engineer a culture, as that very same culture is the source of objections for engineering processes. In this sense, people shouldn't all be facing in the same direction as that would paralyze an organization. For Schmidt, a culture can be utilized to observe how forms of reduction and forms of integration are perceived in the organization. The extent to which conflict, because of counterforce, is present and possible, cherished perhaps, marks the quality of the organization. But again, conflict should not be made absolute as in: 'conflict is good'. Management should be sensitive to when disturbance and conflict helps to contextualize and alter organizational self-descriptions and routines, and when it is destructive. We should note however that in many organizations, and also in (classical) organization literature⁴⁸¹ there are illusions of harmony (i.e., all facing in the same direction, sharing values and big goals, imprinting values in people's minds), but very often paradoxes will linger beneath the skin. The covering up of paradoxes will have consequences, and especially employees might suffer as a result.⁴⁸² Harmony is not necessarily good, just as conflict is not necessarily bad.⁴⁸³ The function of conflict imposed by culture makes second order observation possible: it is not about the techniques (control methods) themselves but about the degree of saturation and dosage of control techniques, about how they are valued and evaluated. It is not about the stories themselves, but about the extent to which they are accepted, devalued or altered within the

479 Reckwitz, 'Toward a Theory of Social Practices: A Development in Culturalist Theorizing'.

480 Schmidt, 381–82.

481 Cf. Taylor, *The Principles of Scientific Management*; Barnard, *The Functions of the Executive*; Nelson, 'Mary Parker Follett – Creativity and Democracy'; Later also: Collins and Porras, *Built to Last*; Schein, *Organizational Culture and Leadership*.

482 Cf. Sennett, *The Corrosion of Character*.

483 Schmidt, 325.

organization. Culture makes heterarchical control of controls possible. Culture, not governance, is at the very heart of checks and balances. I have already noted how difficult it is for a supervisory board to understand the culture (in its plurality) of the organization. Learning about it may derive largely from the executive board. The question is perhaps not whether they should make their role a full-time job, but rather how they calculate with the knowledge they do have, and whether they apply this judiciously.

This aspect of culture, for Schmidt 'conflict quality', resembles the political nature of organizations and highlights the importance of democratic forms (ability to voice) in order to gain a quality of conflict. The vital insight is that countervailing power does not undermine power, but rather reinforces it.

Combining technique, art and culture

As was shown in Chapter 3, there is a standard critique of classical forms of management control. The answers to that critique are however also rather standard and predictable, but are apparent in many management practices, and I believe, also in supervisory discourse. Let me give two examples central to supervisory dilemmas:

Supervision and control should be based upon trust.

This is true, but we should also remain open to the possibility of not trusting.

Supervisory practice should be more involved in daily practice.

Yes, but we should also remain distant in order not to cross functional boundaries.

In relation to quality management, similar standard critiques and answers are to be located⁴⁸⁴:

We should give more autonomy to the professional.

Perhaps, but still, they will have to comply with organizational and/or professional norms

There should be less bureaucracy.

Of course, but some things will need to be administered.

In such 'conversations', the paradox potentially paralyzes practice. Indeed, those on either side may be right, but how does this help? Schmidt therefore supposes another approach, similar to the 'tacit' approach of Schön.⁴⁸⁵ In a

⁴⁸⁴ Ibid., 313.

⁴⁸⁵ And which we also find in critical organizational theoristst such as: Argyris, 'Some

sense, there are two forms of knowing from the perspective of management and supervision. First is the (active) production (and therefore reduction) of knowledge and is formed by the knowledge of technique (installing successful reductions on the level of controls) and of art (installing successful reductions on the level of stories, self-descriptions, that should contain the techniques). The second form of knowing is the knowledge of not-knowing. Quality management is often compatible with the first form of knowledge but might be blind to the second. Quality management, also supervision, as dialogical process (I come to this later) discovers that the production of knowledge is not merely through technique or art, but rather in the acknowledgement, or the consciousness of not-knowing. It relativizes, humbles itself. The question is whether supervision can accommodate surprises, the unexpected and the not controllable (see also Arendt in Chapter 10). There are limits to the production of knowledge. For example: you cannot educate yourself about everything. Not everything can be of high quality, as that would make the very distinction between good and bad irrelevant. What remains hidden is the central problem of knowledge production.

However, openness for the unexpected, a popular phrase, cannot be guaranteed or organized since that would lead to a contradiction in terms. Some management gurus may promise you that they will teach you how to do this, but this is an illusion. Hence, the point is not to install techniques in order to be open for the unexpected, the point is how an organization deals with not-knowing, indeed, with contingency. Culture, as the possibility of conflict or acceptance, checks and balances, is the proper source for this. The point is, to speak in terms of paradoxes, that the unity of that which is locked-in and locked-out (in distinctions, observations, decisions or controls) is kept in sight. Formulas like: “Be creative!”, “Be flexible!”, “Focus on coincidences!”, “Be hypocritical!” are senseless, as they hide the paradox of contingency with stunningly impossible antitheses. In discussions on reflection in supervisory boards, sometimes people mention the value of the ‘corridor conversations’ – a little informal conversation before or after a meeting which might be more meaningful than the entire meeting itself. However, one cannot instrumentalize this: if sessions in the parking lot were organized, reflection would soon disappear from that spot.⁴⁸⁶ Still again, it is not only about not-knowing, the forms of technique and art remain an impossible necessity. Planning and control do not become superfluous, rather, it is not only about how to know or understand matters, but as well about how what is not-known may undermine this. Scepticism for fashions

Limits of Rational Man Organizational Theory’; Argyris, ‘Integrating the Individual and the Organization’; Tsoukas, ‘A Dialogical Approach to the Creation of New Knowledge in Organizations’.

⁴⁸⁶ See also Wendelin Küpers as will be discussed in Chapter 11.

and formulas in management are, in fact, productive.⁴⁸⁷ For Schmidt, following Luhmann, the organization is not a purposeful system, but rather a non-calculable historical system. This is why, in my view, core values, or value orientations, often miss the point: they have been disconnected from the actual organization, too much oriented towards a universal telos (and that is also why core-values are often so similar in different organizations). To understand an organization, it is perhaps more interesting to ask for its timeline and history than to ask for its values.

8.9 The risk of quality management

Quality management is always a risk, as every control has uncontrollable consequences. It determines forms of control and selects “venturing conflicts” (c.f. N. Luhmann) with incalculable consequences. The biggest management risk is the decision of the organization, in which way it wants to control its decisions.

– Schmidt

Risk management as risk absorption

We have not touched upon the specific theme of risk management, so central in contemporary quality management and in the work of supervisory boards. Bluntly, risk management is about minimizing harm (such as preventing falls) in the light of some (institutional) responsibility when facing complexity. It is to prevent adverse effects. But there is no such thing as a risk-free environment.

There are forms of risk management, however, that go beyond this definition. Risk management is, then, about creating certainty in the present, that in case when the decision leads to damage or hazard in the future, one can still maintain that it was a good decision.⁴⁸⁸ In other words: “It was a good decision, despite the fact that it turned out not to be a good decision.” Or: “We have clean hands, despite the fact that they turned out dirty.” This kind of risk management is therefore antithetical to the care ethical approach, described in the previous chapter, of finding out what turned out to be good.

In ordinary life this might seem awkward, but in organizations this is deemed important because of dispersed accountability – self-justification and self-protection are in fact necessary. In long term care in the Netherlands this is an important feature – but there is a realistic threshold. More than in the past, residents of nursing homes or homes for mentally disabled

⁴⁸⁷ See also Ten Bos, *Modes in management*.

⁴⁸⁸ Schmidt, 319.

persons, are allowed more freedom of movement or choices. This brings some risks, for example falling risks (when cycling) or swallowing incidents with certain food. As long as the risk is calculated and written down, it is usually accepted, even if it went wrong – there is no blame. In this example, this makes sense of course: risk management is applied to enhance freedom of clients, but since it happens in an institutional context, accountability is needed.

There is a risk that control decisions (what will be controlled) will show themselves to be false (they did not assure quality, quite the opposite). Quality management however often tends to hide this possibility, which in itself is quite risky. The quality of quality management, Schmidt argues, is importantly about the way in which one handles risks that are self-produced by quality management (for example, a focus on the computer by the nurse for administrating quality measures may distract her from attention to the patient's needs). The point for Schmidt is that, because of contingency, there can be no decision without risk. This leads to the paradoxical situation that every attempt to reduce risk (by making decisions), is itself risky.

Beck and Holzer on risk society

This has also been very well described by Beck and Holzer.⁴⁸⁹ They argue that the idea that risks are 'controllable' are falsified over and over again by the re-emergence of uncontrollable risks that are often due to scientific and technological innovations (such as in global warming). Thus: "Modern society has become a risk society in the sense that it is increasingly occupied with debating, preventing, and managing risks that it has itself produced."⁴⁹⁰ They analyse that a gap has occurred between 'ordinary people' and experts. Decisions are more and more outsourced to experts, and therefore also more and more depoliticized. However, every time an expert says that the risks are acceptable, the policy will lose legitimacy if the opposite occurs – and that might happen. Therefore, they argue, the allocation of and conflicts about risks should be (re)politicized: stakeholders need to be involved in decision making.⁴⁹¹ Beck and Holzer's theory forms an important bridge to my thesis: quality and risk management can only be of some quality if it is regarded as a political matter, rather than merely as a technical matter. This also aligns with Schön's suggestion of accountability by reflection-in-action – if more people are involved than just professionals, of course. Those who are exposed to risks should be able to codetermine how risks are allocated. This is of

489 Beck and Holzer, 'Organizations in World Risk Society'.

490 Ibid., 4.

491 Ibid., 12–17.

special importance now that we have learned that a risk in one situation may be different in another.

Absorption of uncertainty and the relocation of risks

All this does not mean that risk management is likely to result in something undesirable. As the future remains uncertain, and therefore every decision a risk, absorption of uncertainty is needed. Organizations are, in a sense, systems of risk absorption. Time plays an important feature in this. Time is however a complicated matter, and itself ambiguous. “The time of the merchant is not the time of the monk.”⁴⁹² The problem is that the securing of risks is an unending process: the biggest risk, and fear, is therefore that one has not secured risks *enough*. Risk management is then a form of indulgence (in the religious sense): it buys you certainty for the future, but of course in vain. Very often this is the very motivation for minute documentation and administration: *Wer schreibt, bleibt*. Writing down things binds time, while of course time cannot be bound. Indeed, if something went wrong, but it was calculated *and* written down as a risk, accountability is made possible. In this sense, risk is not just the problematization of the future (and risk management its solution), it also serves as the binding of time by stabilizing expectations. However, even with the best willingness and ‘optimal’ performance, risks can only be transformed into *other* risks, and not into certainties. Even the most reflective supervisory board member does not see, what he does not see.

Searching for the blind spot via conflict

Building forth on the former point: in such cases it is not harmony or consensus that designates the quality of quality management, but rather conflict. For indeed, if what is not seen by the observer (or decider) is even further concealed by fictions of harmony or consensus (everybody agrees, no one protests), the blind spot will linger. Very often, harmony or consensus is sought after by formulas of participation: if employees, subordinates or perhaps even patients have ‘participated’ in the decision, countervailing power might be absent from the very beginning. The same might be true in the boardroom: if the executive board involves the supervisory board in strategic plans from the beginning, then at some point, the supervisory board has no more legitimacy nor possible vision to object or to contradict.⁴⁹³ The supervisory board will then develop the same blind spot it needed to uncover. It is not uncommon however that supervisory boards prefer the harmony model before a conflict model. It remains elusive however as to when either harmony/consensus or conflict is the way to go. The quality of quality

⁴⁹² Schmidt, 319; See for a good thesis on time in public administration: Scherpenisse, *Over het tijdigen van bestuur en beleid*.

⁴⁹³ Cf. Goodijk, *Strategisch partnerschap: wat is wijsheid?*

management, and of supervision, depends on the extent to which one succeeds in switching between consensus and conflict, and this can only be empirically determined from within – and recall that precisely this argument has been made in the ethics of care. Schmidt argues:

The best quality management can do is not installing accepted standards (which are then ignored), but foremost installing conflict, which is triggered by self- and foreign valuations. Quality management is not risk-avoidance, which is itself risky, nor is it in the risky avoidance of conflict, but in the oscillation between an overdose and an underdose of undertaken risks and open conflicts.⁴⁹⁴

Schmidt calls this “juggling”, and this is indeed what supervision might be. It is something extremely vulnerable as a form of knowledge, and the denial of the “juggling-aspect” of this type of knowledge might well turn out to be very risky itself. If quality management is useful at all, it is not about *preventing* risks, but about a transformation of risks, not only the risk of success or failure, but also the risk of acceptance or resistance. Fictions of consensus and harmony might well obscure that there is in fact resistance on the work floor, but this will linger beneath the surface – a big risk!

Compromise as middle ground

We also have to touch on the notion of compromise, which appears to be a kind of middle road between conflict and harmony, and indeed very popular in many boardrooms.⁴⁹⁵ In the appreciative sense, a compromise is a kind of trade, ‘you win some, you lose some’. However, it might also be a form of window-dressing, that people try to force and demonstrate unity when it actually does not exist. Conflict in such a situation is suppressed, and this in its turn may reduce the quality of quality management. Schmidt argues: “The quality of quality management depends ‘decisively’ on the possibility of questioning stabilities, and by that reproducing instabilities that enhance survival.”⁴⁹⁶ However, compromise may serve as a way to gain time, to delay, or to move on in favour of the system. Especially in the Netherlands, we are quite fond of this as a strategy for decision making.⁴⁹⁷ Free spaces need to be created within compromises in order to be able to question them and to reinstall the possibility of conflict.

494 Schmidt, 326.

495 See also Chapter 4.

496 Schmidt, 330.

497 Frissen, ‘De volle plek van de macht’.

8.10 Summarizing: three organizational qualities and why I need to go beyond Schmidt

Organizational ethics invite to a collective self-assessment of strategies to evolve the paradox of control. It uses as heuristics the critique of linear causal control techniques, the art of deconstructing organizational norms as well as the transdisciplinarity as a culture of conflict mediation: organizational ethics is a calculus of decisional quality. It declares with which means and price the control decision is irreversible (expertise) and nevertheless reversible (nescience). Therefore, the calculus of organization can be observed in the factual dimension with an eye toward the responsibility, the mediation, the liability and the impact of decisions. Organizational ethics evaluate the venturous consequences of control acceleration as a calculus of the reform quality. Therefore, in the time dimension, organizational ethics can observe paradoxes of strategies, project management, control and (quality) management and recommend time-outs of control. As a calculus of conflict quality organizational ethics finally evaluate the quality of mediation, to enable new evaluations and contextual and suitable forms of control. In the social dimension the quality of paradox evolvment can be observed in form of heterarchical networking, of (de-)gendering quality, emotional differentiation and as a control of the control. A general rule determines every context: nothing is well without its contrary.

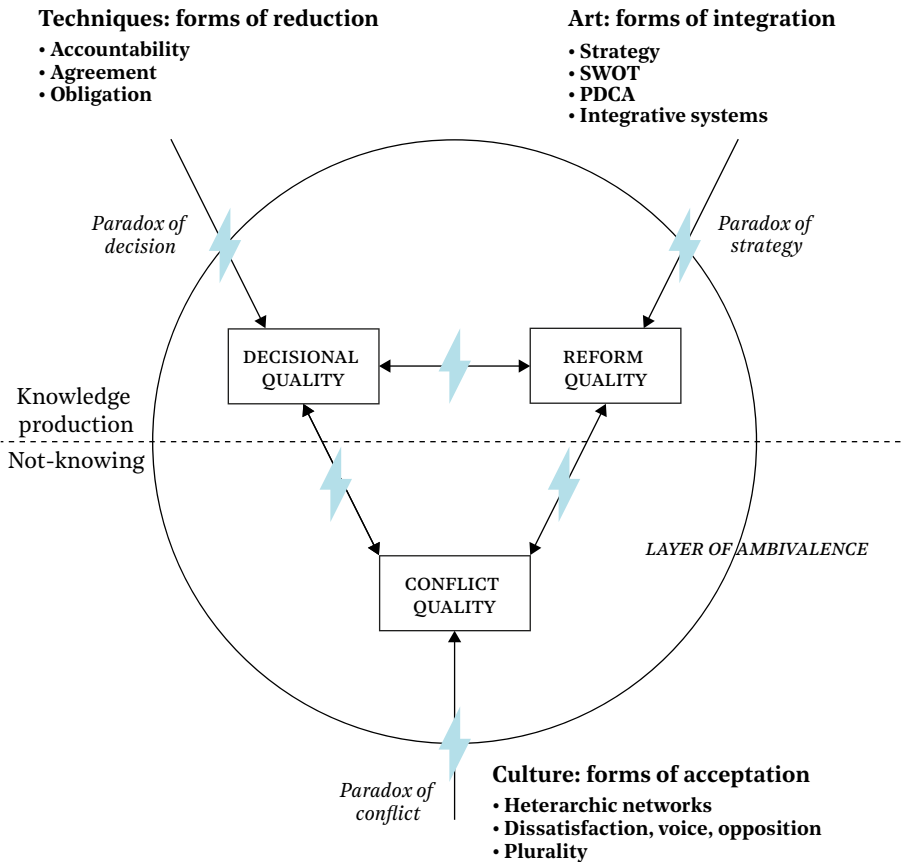
– Schmidt

Schmidt is looking for solutions in what he calls an ‘organizational ethics’. Based upon the three ‘qualities’ described in paragraph 8, he formulates different possibilities for gaining these qualities. His suggestions come close to the care ethical suggestions made in the previous chapter. He is making a case for involving sense and emotions as a component of quality management. He tries to define how on the one hand management instruments can be used, while good management is keen on the indeterminacy of these instruments in concrete practice. It is about complementing the rational/formalistic with sense/intuition in order to come to better *human* judgments. He also, as expected, promotes the possibility of critique and conflict, and with this follows an ethical line of deconstruction.

A comprehensive figure

In order to make this dense ‘German’ argument of Schmidt a little more digestible, I introduce the scheme below that might help us to see the relations of the different positions Schmidt takes. In it I hope to make clear where the points are where an organizational ethics, and in my case, supervision takes place.

Figure 1. A comprehensive figure



In the middle we find the three forms of quality as described in paragraph 8. Each of them is in tension with the other (a conflict may unproductively and unethically undermine as well as productively and ethically transform a decision; a decision may not be expected in terms of reforms, or reforms do not match previous decisions; reforms may lead to resistance and this might be either good or bad; et cetera). Each of the qualities is formed by a ‘source’, that is, the source of conflict quality is culture and its forms of

acceptance; the source of decisional quality is technique and forms of reduction; and the source of reform quality is art and forms of integration. Each of them can be divided into different aspects, which are described in different paragraphs (and there are more than mentioned in Schmidt's work).

I use the concept 'layer of ambivalence': the different qualities are not merely formed by the sources and their aspects, but they must cross a layer of ambivalence, and this indeed may turn things upside down. Ambivalence produces contingency. The layer of ambivalence contains the paradoxes, and I place them around their proper source. The intersection of the sources and the layer of ambivalence denotes that in order to gain a quality (of decision, reform or conflict) one must calculate with and unfold paradoxes. You cannot breach the layer by merely hiding or concealing them. This in its turn implies that only a contextual view of an organization is possible. For example, in the case of reductions: power is needed to make decisions, but it remains elusive when power turns into an abuse of power, or a hiding of the paradox that every decision brings along its alternative. Introducing sense and feelings when it comes to quality, for example, may also imply that there is an overdose of feelings and critique is emotionally immunized.

The final point is the dividing line that makes a difference between knowledge production and not-knowing. This is the working of the blind spot, and how to make this detectable by gaining a conflict quality. Nevertheless, every new perspective has its own blind spot, and, to close with Schmidt himself: "Nothing is good without its opposite."⁴⁹⁸

The little blue "flashes" that mark the tensions are the points where an organizational ethics is in play, and marks, in my view, the difficulty and complexity of the supervisory task. In this sense it relocates supervision from the sources (which appear to have logical attention of supervisory work) to the points of tension with ambiguity and contextuality.

Matters underexposed in Schmidt

I believe Schmidt has analysed the paradoxes of quality management, so important for supervisory boards, with enormous rigor. Schmidt's analyses are dazzling: every time you think you reach firm ground (on high solid grounds), it crumbles underneath your feet. He addresses ambiguity (by contingency and paradoxes) of ordinary practices, highlights (implicitly) the political and democratic dimension of organizations (by conflict and counter argument). Still, building forth on Schön, he is looking for ways to make

⁴⁹⁸ Schmidt, 400.

quality management, for us the supervisory practice, possible: he does not throw away the techniques or arts that we use, but rather places them in a perspective that humbles. Of course, this may also totally crush the reader. But then again: the art is somehow not to turn into stone when facing Medusa the Gorgon.

There are also some aspects for our thesis that are under-represented in Schmidt's analyses. He does not (explicitly) address questions of politics and of institutions. Also, he generalizes organizations: he does not speak about either nonprofit or for-profit organizations, while our quest began by highlighting the peculiarity of civil society and its political and democratic implications. I need to add more precision in the analysis than Schmidt has to offer. Furthermore, Schmidt, in the end, does not really give a perspective of action: now what? Or how? Of course, he offers a framework of quality of quality management, but is it not too complicated for ordinary supervisory practice? I continue this thesis therefore by returning to the institutional question, already posed in Chapter 6 and 7: to what extent is the institutional role of civil society organizations important for the political understanding of governance practices? Have we not lost an institutional account of civil society over the years? These questions will be addressed in the next chapter.

9. Institutional decline and revaluation

9.1 Introduction

In Chapter 6 I argued that institutions create stability in social life. This stability is not fixed, institutions do change, but only gradually. I have argued that an organization institutionalizes when the social value it carries becomes more than its mere function – the stability institutions provide is for an important part also symbolic. Civil society organizations, especially those that have existed for some time and are, or were, embedded in local communities, are examples of this. Linked to practice theories, I argued, in the same chapter that (bundles of) practices run as threads through organizations and institutions. I also argued that, due to ambiguity and a focus on effectivity and efficiency, the symbolic aspect of institutions became under-represented.

Following the care ethical model discussed in Chapter 7, the institutional task of the organization is to “shelter” (*herbergen* in Dutch) the possibility and potential of attentive care, by instilling and conserving a decent institution. What happens in this institution is, indeed, of societal significance. The (long term) health care organization is a practice of living together decently, in the double sense of the word practice, in institutional forms.⁴⁹⁹ As argued, the care ethical model searches the middle ground between the telos of the institution, the political and public rules in which it is embedded, and the (im)possibilities of the actual, executing organization – including its history, traditions, rules and norms, et cetera. The supervisory board is granted a role for institutional care: to oversee that it shelters care. Supervision as caring practice resists complacent simplifications and reductions of (quality of) care, as discussed also in the previous chapter.

In this previous chapter I have extensively discussed the paradoxes of quality management. Although institutions as such were not discussed, it is apparent that institutions can be designated as ‘stable fragilities’. They remain the same and change at the same time. Institutions are historical systems and structures in which practices and meanings are sedimented. Institutions are however also plural, already highlighted in Chapter 6, and radicalized as in the last chapter: there is no way that the meaning of the institution can find firm ground. Institutions are as well products of (potential) conflict

⁴⁹⁹ Kunneman, *Het belang van moreel kapitaal in zorg en welzijn*.

and are, hence, political. We might also expect that institutions in civil society are somehow ‘civic’, involving *citoyen*, therefore also democratic – in the broad sense of the word.⁵⁰⁰

Still, nowadays, we might be inclined to say that traditional institutions do not anymore provide the stability they once did. From the sixties onwards, institutions such as the church, the school or association, were equated with paternalism, oppression, lack of freedom and unemancipated. Moreover, institutions were perceived to be slow and ineffective, didn’t fit the changing society. Other institutions have grown, overshadowed all other institutions, especially that of the welfare state, the nation state and the idea of professional bureaucracies. Typically, these institutions are anonymous, not related to civil society.

Civil institutions, on which I focus in this chapter, have become ‘fluid’, to speak with Bauman, precisely unstable and unable to provide ‘common sense’.⁵⁰¹ In a neoliberal climate, the idea of institutions is superfluous: every public concern can be traced back to individual responsibility.⁵⁰² Thatcher’s “no-such-thing-as-society” is in fact a “no-such-thing-as-institution.” In this chapter I will explore this so-called ‘decline of institutions’ and will discover ways in which a, in my view necessary, revival of institutions in civil society is possible – without however engendering nostalgia. To describe the decline of institutions I will mainly use the works of Dubet and Charles Taylor. In my view, they are able to describe this decline without becoming conservative or nostalgic: the reasons for this decline are not necessarily bad ones. In my search for a possible revival of institutions, looking for new institutional forms, I use a specific essay of Ricoeur on the biblical parable of the Good Samaritan. I am well aware that the decline I speak of is related to institutions in the social sense, while contemporary society does have firm institutions, especially the nation and welfare state. First, let my start by relating the supervisory board, or governance more broadly, to the idea of institutions.

⁵⁰⁰ See Chapter 1.

⁵⁰¹ Bauman, *Liquid Modernity*.

⁵⁰² Biebricher, ‘Critical Theories of the State: Governmentality and the Strategic-Relational Approach’; Tronto, *Caring Democracy*; See also on emotivism and individualism: MacIntyre, *After Virtue*.

9.2 The supervisory board and the institution: a meaningful ritual

The supervisory board has an institutional responsibility, I have argued in Chapter 7. In a sense, it *embodies* the institution and installs an executive board on behalf of the institution. The institution may be regarded as the particular single organization, but as institution, it has connections to the wider institutional forms in civil society. The fact that the supervisory board always acts collectively (each individual member is responsible for the decisions taken as a collective, even if an individual member does not consent), symbolically designates this embodiment of the institutional form. The supervisory board is, as incarnation, and at the same time is not the institution – it does not totally coincide with the totality of the institution – it goes beyond individual responsibility. This is why (the appearance of) conflicts of interests is such an important theme for supervisory boards: as institution, they do not in any way represent someone or something other than itself, the institution. In order to take decisions, it takes a *detour*, so to speak, via the individual actors, in order to gain agency and responsibility, which is however immediately a collective responsibility. Moreover, the supervisory board itself can be seen as a particular institution itself but is closely interwoven with the institution of care as a whole (see Chapter 6). When I speak of the institution therefore, I designate both the organizational institution of civil society (or care in particular), of which the supervisory board is both the incarnation, as well as a specific institution itself – namely a kind of governance model that refers to something broader than merely the health care institution. As an institution of supervision, it holds both a symbolic and functional proposition. It may be something like:

We make sure that there will be continuity of governance and administration and provide that a decent executive board will be installed, and that its words and acts are under our scrutiny, and that their power is never absolute, omnipotent. We are on guard, protecting, instilling, embodying values that can maintain the institution against all odds.

As a proposition, the supervisory board is not merely functional, it also contains an important symbolic function: for instance, in some organizations the supervisory board might feel itself superfluous from a functional point of view (“everything seems fine, we don’t really have a job”). From a symbolic point of view, it is still important that the sheer possibility to intervene and counteract remains present. In this sense, the practice of a supervisory board can be truly ‘ritual’, as in a ritual dance of meetings, site visits and agendas. But this ritual is not at all meaningless, but, as institutional symbol, precisely meaningful.

Supervisory boards often contest this, however. The practice is overwhelmed by an orientation on functionalism. A question that may be frequently asked is: what is, in an instrumental way, the added value of the supervisory board? The focus on quality and risk management – always improving, always preventing – marks the degree of their concrete thinking: they do not as such even recognize the existence or significance of symbols in everyday life. The concept of the ritual implies for them precisely a feeling of meaninglessness. To better understand this, we must turn to what has been called the decline of institutions.

9.3 The decline of the institution

Ever since the sixties, we have witnessed a so-called decline of the institution.⁵⁰³ Different sociologists, social theorists and philosophers have pointed this out.⁵⁰⁴ The analyses are of course not all the same. For this thesis, I use a threefold distinction by Charles Taylor on the “malaise of modernity” or the “ethics of authenticity” (and this ambivalence is an important issue for him).⁵⁰⁵ He points to individualism, instrumental rationality and a loss of political freedom as the main sources for a decline of institutions. This framework is helpful as a heuristic frame to search these different viewpoints of different scholars.

Individualism

For Taylor, individualism is not only a source of loss. It is also partly seen as a form of progress in or achievement of modernity:

We live in a world where people have a right to choose for themselves their own pattern of life, to decide in conscience what convictions to espouse, to determine the shape of their lives in a whole host of ways that their ancestors couldn't control. And these rights are generally defended by our legal systems. In principle, people are no longer sacrificed to the demands of supposedly sacred orders that transcend them.⁵⁰⁶

503 Dubet, *Le déclin de l'institution*.

504 See for example MacIntyre, *After Virtue*; Taylor, *Sources of the Self*; Reckwitz, *Die Gesellschaft der Singularitäten*; Rosa, *Social Acceleration*.

505 Taylor, *The Ethics of Authenticity*. This work can be seen as a summary of his major work *Sources of the Self* to which I will also refer.

506 Taylor, 2; See also *Sources of the Self*, 503.

On the other hand, though, this individualism also marks a loss of stability:

People used to see themselves as part of a larger order. (...) People were often locked into a given place, a role and station that was properly theirs and from which it was almost unthinkable to deviate. Modern freedom came about through the discrediting of such orders.⁵⁰⁷

Institutions used to provide such orders.⁵⁰⁸ Arnold Gehlen, one of the early critics of modernity (already in the 50s), has called these orders 'backgrounds' of human activity in which meaning is taken for granted. The fragile stability institutions provide is important for human beings. By subjectivation, however, these backgrounds are torn apart.⁵⁰⁹ The rise of individualism, and the supposed gain of freedom, was precisely an attack on institutions (such as the church, school, doctor or government), partly inspired by or reflected in the thinking of Foucault, that institutions suppress and restrict people's freedom, albeit in an indirect way.⁵¹⁰ The institutions were thought to exercise power and social control; not by obscure or inhuman practices from the governors aimed at the governed, but rather as a non-intended institutional system of exclusion and normalization.⁵¹¹ Emancipation, exercise of freedom, means breaking with or criticizing such structures. But it remains elusive what emerges to take their place.

Building on the ideas of Tocqueville, Taylor argues that "(...) the dark side of individualism is a centring on the self, which both flattens and narrows our lives, makes them poorer in meaning, and less concerned with others or society."⁵¹² Dubet questions, in this line of thought, whether people can live with so much freedom, or, in other words, can they live, make sense, without the stability of social institutions?⁵¹³ MacIntyre, who is more pessimistic than Taylor about the possible gains of authenticity as moral horizon, questions whether individualism does not bring along an emotivism in relation to values and morality – the conception that everything of value is merely individual emotion, perspective.⁵¹⁴ Reckwitz, an influential contemporary German sociologist, has accordingly argued that the

507 *The Ethics of Authenticity*, 3.

508 *Sources of the Self*, 500; He later refers to these orders as horizons. See *A Secular Age*, 157.

509 Gehlen, *Man, His Nature and Place in the World*; Gehlen, *Anthropologische und sozialpsychologische Untersuchungen*; Berger and Kellner, 'Arnold Gehlen and the Theory of Institutions'.

510 Dubet, 34-35, 52.

511 Most strongly pronounced in: Foucault, *History of Madness*.

512 Taylor, *The Ethics of Authenticity*, 4.

513 Dubet, 15.

514 MacIntyre, *After Virtue*, 11-12.

imperative for authenticity is a *general* imperative, making it highly paradoxical, and problematic as institutional form as it tends to divide rather than to bond.⁵¹⁵ Together with another German sociologist, Bröckling, he notices this especially in the increasing segregation of classes: those who get around to authenticity and the self as entrepreneurial projects, and those whose life stands in the light of mere survival – which, following the entrepreneurial and neoliberal spirit, is their own fault or lack.⁵¹⁶ There is no institution that transcends this individual responsibility – where people can find support.⁵¹⁷ Vosman has argued that ‘survival as a form of life’ is often overlooked, suppressed by those who are busy being authentic, but that also they themselves do not escape the fragility of life: that (at least sometimes) it is mere survival.⁵¹⁸

Whatever optimistic, pessimistic, or perhaps realistic view one takes of individualism, we can still rightfully say that there really is a general concern within Dutch public opinion and political practices that we face a crisis of values, a crisis of reason, a crisis of authority, a crisis of education, a crisis of health care, a crisis of rule of law, a moral crisis indeed. In line with Dubet, this dark side of individualism is due to the erosion or aggressive destruction of institutions.⁵¹⁹ To zoom a little more into the institution of health care: if the family of the professor (recall the story from Chapter 7) chooses to rudely criticize the nurses for improper or disrespectful care, which happens quite often, this is due to the decline of the authority of the nurse (as institution), who, moreover, cannot lean on the institution of care nor on her profession since its management will probably, since there is ‘client centeredness’, choose the side of the family, and will force the nurses to ‘learn’ from this – see the previous chapter. Tonkens has called this institutional development ‘empowered citizens and tamed professionals’ in which, importantly, the citizens take a consumerist, and the professionals are forced into a passive-enduring, stance.⁵²⁰

Hence, although we can generally say that the rise of individualism in modernity can be seen as a gain (freedom, dignity, rights, self-fulfilment and expression, demands of universal benevolence and justice), it also has its dark side (loss of depth, stability, resonance).⁵²¹ It is in this double-hearted nature of individualism that the institution has a peculiar place. For indeed, individualism sets off against ‘coercive’ institutions, but at the same time

515 Reckwitz, *Die Gesellschaft der Singularitäten*.

516 Bröckling, *Das unternehmerische Selbst*.

517 Foucault, *The Birth of Biopolitics*.

518 Vosman, *Overleven Als Levensvorm*.

519 Tjeenk Willink, ‘Bijlage bij eindverslag informateur Tjeenk Willink’; Tjeenk Willink, *Groter denken, kleiner doen*.

520 Tonkens, *Mondige burgers, getemde professionals*.

521 Taylor, *Sources of the Self*, 500–503.

we have by this also lost a common ground, a greater order, that binds all these individuals together – or at least, to some extent.

Instrumental rationality

The second malaise of modernity, Taylor calls the primacy of instrumental reason or rationality, a term we also already noticed when discussing Schön in Chapter 8. Instrumental reason is “(...) the kind of rationality we draw on when we calculate the most economical application of means to a given end. Maximum efficiency, the best cost-output ratio, is its measure of success.”⁵²² The idea that all, or many, (social) problems are technical problems lies at the heart of this, and this technical attitude might induce feelings of loss of depth or relief. Although instrumental rationality has ‘liberated’ us from some forms of religious fundamentalism (as in the Copernican revolution) and hence have made it possible to better understand the world we live in, or at least from a certain point of view, it still has its problems, for instance:

(...) the ways the demands of economic growth are used to justify very unequal distributions of wealth and income, or the way these same demands make us insensitive to the needs of the environment, even to the point of potential disaster. Or else, we can think of the way much of our social planning, in crucial areas like risk assessment, is dominated by forms of cost-benefit analysis that involve grotesque calculations, putting dollar assessments on human lives.⁵²³

According to Taylor, instrumental rationality in modernity is mixed up with romanticism, which was initially a critique of instrumental rationality.⁵²⁴ The combination of creative imagination, self-expression, celebrations of essences and nature, and of course authenticity are curiously combined with notions of social engineering and technical approaches to social problem and organizations. We also noticed this combination in Chapter 8.6: on the one hand a strong adherence to ‘essential’ values, a refocus on the original purpose and on the other hand the techniques of quality management. Modernity is deeply ambiguous, both disengaged via instrumental rationality *and* obsessed with self-expression and universal benevolence, Taylor argues:

Moreover, now that I’m allowing myself the licence of bald statement, I want to make an even stronger claim. Not only are these one-sided views invalid, but many of them are not and cannot be fully, seriously, and unambivalently held by those who propound them. I cannot claim to have

⁵²² *The Ethics of Authenticity*, 5.

⁵²³ *Ibid.*, 5–6.

⁵²⁴ Taylor, *Sources of the Self*, 413.

proved this, but what I hope emerges from this lengthy account of the growth of the modern identity is how all-pervasive it is, how much it envelops us, and how deeply we are implicated in it: in a sense of self defined by the powers of disengaged reason as well as of the creative imagination, in the characteristically modern understandings of freedom and dignity and rights, in the ideals of self-fulfilment and expression, and in the demands of universal benevolence and justice.⁵²⁵

According to the sociologist Weber, this instrumental rationality, originally out of the sphere of natural science, has pervaded all social aspects of life, and has led to a so called “iron cage”, from which we cannot escape anymore.⁵²⁶ Taylor however stresses that there must be a way out of this, at least to some extent, but this is not (only) an individual (moral) task – as romanticism seems to uphold, but precisely an *institutional* one – the first beacon of a post-heroic institutional program:

Our degrees of freedom are not zero. There is a point to deliberating what ought to be our ends, and whether instrumental reason ought to have a lesser role in our lives than it does. But the truth in these analyses is that it is not just a matter of changing the outlook of individuals, it is not just a battle of “hearts and minds,” important as this is. Change in this domain will have to be institutional as well, even though it cannot be as sweeping and total as the great theorists of revolution proposed.⁵²⁷

In line with this, the German sociologists Beck and also Holzer have argued that the instrumental rationality of the Western world has turned against itself.⁵²⁸ Instrumental rationality has itself become a risk (while it is a form of risk management) since we cannot oversee its future causes. This is why he speaks of a ‘risk society’: “The emergence of risk society is emblematic of the process of reflexive modernization, which entails the self-confrontation of modernity with the side effects of modernization.”⁵²⁹ This has supposedly led to a ‘culture of uncertainty’. Many of our contemporary problems are precisely due to the application of instrumental rationality and technique: the financial crises, the environmental crisis, and indeed the institutional crisis. The way we try to ‘solve’ these problems is precisely via the way of instrumental rationality, the very instrument that caused it. Beck & Holzer state that: “(...) it is not the number of dead and wounded and not the financial damage either, but rather a social feature that makes the hazards of

525 Ibid., 503.

526 Weber, *The Protestant Ethic and the Spirit of Capitalism*, 123.

527 Taylor, *The Ethics of Authenticity*, 8.

528 Beck, *Risk Society*; Beck and Holzer, ‘Organizations in World Risk Society’.

529 Ibid., 8.

mega-technology a political issue: their ultimate origin in decision-making.”⁵³⁰ Henceforth, Beck calls, together with Giddens and Lash, for a ‘reflexive modernization’.⁵³¹ This depicts a decision making based on ‘for the time being’ – as there may be many unknown side-effects – within the context of a *politization* of the decisions made in institutions, that is: “The only way to regain legitimacy appears to be a systematic effort to engage the public.”⁵³² Hence, although they argue that a positive response is possible (we do not need to reject instrumental rationality overall), they plead that the consequences of its application are and remain contingent and imperfect:

The key to a positive response to the culture of uncertainty lies in the readiness to make risk a topic of public debate; the willingness to negotiate between different rationalities, rather than to engage in mutual denunciation; and a recognition of the central importance of acting responsibly and accountably with regard to the losses that will always occur despite every precaution.⁵³³

Building forth on Dewey they introduce a political notion to the malaise of instrumental rationality, an argument that is close to ours in the next chapter on the political difference:

In [Dewey’s] view, public discourse grows not out of consensus over decisions but out of dissent over the consequences of decisions. Modern risk crises are constituted by just such controversies over consequences. Where some may see an overreaction to risk, Dewey thus sees a reason for hope. He thinks that such conflicts serve an enlightenment function. They bridge the gap between experts and citizens. And this is what gives them the political explosiveness that the technical diagnosis of the problem seeks to cover up.⁵³⁴

Coming back to Dubet, he argues that the decline of the institution is partly because people have argued that institutions do not and cannot meet the high demands of instrumental rationality. This kind of critique on institutions is more liberal by nature, arguing that institutions tend to social closure, eliminating diversity and enabling inertia, which makes it impossible to anticipate the permanent and increasing flux of social change.⁵³⁵ In this perspective, institutions are but slow, bureaucratic and rusty. We find a same

530 Ibid., 5.

531 Beck, Giddens, and Lash, *Reflexive Modernization*.

532 Beck and Holzer, 20.

533 Ibid., 15.

534 Ibid., 16.

535 Dubet, *Le déclin de l’institution*, 52.

kind of argument in popular management literature, such as in the seminal work “In Search of Excellence” by Peters and Waterman, discussed also in Chapter 8.⁵³⁶ The permanent need to adapt to the ever-changing environment and increasing individualism (which requires a situational response) with flexibility and knowledge, is something Giddens has also noticed. The central idea is that identities, either private or professional, are no longer buttressed by status, communal embedding, or tradition (institutions); rather, human life has come under the stress of permanent *reflection*, that in the end, everything is part and parcel of choice. Following Giddens, this *generalized reflective attitude* in our societies is due to the enormous amount of knowledge that is produced, not only by (social) sciences, but by all kinds of media. These different kinds of knowledge comprise all facets of life: from sexuality to financial management, from health and education up to investment and retirement. Together, they enlarge the reflectivity of *individuals*, and impose “(...) the examination and constant revision of social practices, in light of the new information concerning the practices themselves, which constitutively alters their character.”⁵³⁷ Hence, everything we do in our lives is no longer fixed by stable roles and traditions, rather, we have to, *are obliged to*, reflect on what we, or better: I do and how I do this, and that we need to self-construct our life and social practices in a context of permanent change. It is therefore plausible to argue, and this is key for my argument, that contemporary practices of instrumental rationality in for example quality management should not be confused with more traditional forms of its applications, such as in the scientific management of Frederick W. Taylor, that tends to think of organizations as closed rational systems.⁵³⁸ Rather, contemporary instrumental rationality is exposed precisely as an open system, that is, a system that must permanently adapt to its ever and increasingly changing environment and the need to creatively and expressively respond to this.⁵³⁹

Another contemporary German sociologist, and someone who is close to the school of Beck and Giddens, is Hartmut Rosa. He has also pointed out that our societies are confronted with the increasing acceleration of technical, social transformations and the ‘pace of life’, but that at the same time, paradoxically, the underlying ground – instrumental rationality – of these transformations remains and, referring to Nietzsche, returns to the ‘ever same’. It seems nearly impossible (at least for Rosa) to imagine a change of

536 Diest, *Zinnig Ondernemen*; Peters and Waterman, *In Search of Excellence*.

537 Giddens, *The Consequences of Modernity*, 45.

538 Scott, *Organizations: Rational, Natural, and Open Systems*.

539 Ibid.; Van. Diest, *Zinnig Ondernemen*.

it.⁵⁴⁰ This is what he paradoxically calls a “frenetic standstill”.⁵⁴¹ As possible way-outs, although Rosa is very restrained with these arguments, he also considers an institutional and political program of *deceleration*: “(...) the formation of a new form of institutional facilitation and stabilization of the acceleration process and thus the attainment of a new equilibrium at a higher level of speed.”⁵⁴² He questions however if the “(...) institutional-disintegrating character of the primacy of dynamization” will not make this program utterly hopeless.⁵⁴³ If we want to tame the forces of acceleration by means of the “modern aspiration to shape human affairs” – notice here the stance of a reflexive modernization -, we need an:

(...) emergency brake to prevent the social tempo from surpassing the threshold beneath which it can still be politically and individually controlled. Such a solution would demand both a decisive political intervention in the developmental autonomy of the faster functional systems so as to ‘forcibly resynchronize’ them as well as a deceleration of the movement of dynamization to a level that is, in accordance with the ideas of ‘classical modernity’ compatible with humanity.⁵⁴⁴

This refers back to Taylor’s statement that we cannot accept the determinism of Weber’s iron cage, but that we (rather than ‘I’) still have, albeit marginally, the possibility of changing the course of our days.

To sum up the decline of institutions relating to instrumental rationality, we can distil two main points. The first is that the overwhelming attention for technical solutions to societal problems not only bites its own tail, but also tends to depoliticize and individualize the decisions that are taken, due to the ‘necessity’ of expert knowledge and the romantic ideal of self-expression. Second, in the ‘high speed society’ in which change appears to be a permanent feature and individual reflection and choice are part and parcel of this, the idea of a grounding authority, in institutions, has lost its impetus.

Loss of political freedom

And this brings us to the third ‘malaise of modernity’ formulated by Taylor, which he calls the ‘loss of political freedom’. The political malaise follows from individualism and instrumental rationality. The first aspect of this loss he describes is that: “(...) the institutions and structures of industrial-technological society severely restrict our choices, in that they force societies

540 Rosa and Scheuerman, *High-Speed Society*; Rosa, *Social Acceleration*, 303–4.

541 *Ibid.*, 299.

542 *Ibid.*, 320.

543 *Ibid.*

544 *Ibid.*, 321.

as well as individuals to give a weight to instrumental reason that in serious moral deliberation we would never do, and which may even be highly destructive.”⁵⁴⁵ This holds true both for collective and individual decision making. The second aspect, closer to our project, is the so-called withdrawal of people from the public sphere into their private lives. Building once more on De Tocqueville, Taylor states that:

A society in which people end up as the kind of individuals who are ‘enclosed in their own hearts’ is one where few will want to participate actively in self-government. They will prefer to stay at home and enjoy the satisfactions of private life, as long as the government of the day produces the means to these satisfactions and distributes them widely.⁵⁴⁶

Tocqueville has called this *mild despotism*, in which the government is mild but paternalistic, sustaining some democratic forms but is extensive and in essence utterly tutelary.⁵⁴⁷ The people have no control of, nor understanding of, the outcomes of political consensus. Citizens are no longer interested in participating in policymaking regarding the course of the civil institutions. Hannah Arendt argues in this regard that citizens have retreated from the political sphere of action into the social sphere of conformism, labour and work.⁵⁴⁸ This may apparently be the reason why, for example, so many associations in civil society are transformed into foundations. Citizens are regarded as clients rather than as *citoyen*.⁵⁴⁹ A contemporary mood, at least in the Netherlands, is that people are tired of this paternalism of mild despotism, and that what is happening is a kind of revolution of civil society that disrupts government and public institutions.⁵⁵⁰ Citizens take matters into their own hands, by means of private initiatives, reinforcing civil society. It remains elusive whether this is something that happens on the fringes of the public sphere, or whether this is indeed as common as Tjeenk Willink and De Waal seem to argue. In either way, the alienation of citizens from the public sphere is indeed an institutional decline of a “centralized and bureaucratic political world.”⁵⁵¹ In other words, the twofold critique of institutions we have formulated (suppressing and slow/ineffective), have led to a withdrawal from citizens from this institutional-political sphere, or more precisely, the *depolitization* of institutional decision-making.

545 Taylor, *The Ethics of Authenticity*, 8.

546 *Ibid.*, 9.

547 Tocqueville, *Democracy in America*. Volume 2, 1248.

548 Arendt, *The Human Condition*, 38–49.

549 Cf. Den Uijl et al., *Onderzoek alles, behoud het goede*.

550 Cf. Tjeenk Willink, *Groter denken, kleiner doen*; De Waal, *Burgerkracht met burgermacht*; De Waal, *The Value(s) of Civil Leaders*.

551 Taylor, *The Ethics of Authenticity*, 9.

Shifting from a philosophical view to a perspective from public administration, recently the Dutch Council for Public Administration (ROB) published an important report on this matter, arguing that the so-called democratic deficit – which is usually ascribed to local, national or European government is for a large part due to the democratic deficit in civil society organizations, such as in health care, education and housing.⁵⁵² What happens in these civil society organizations is of primary interest to citizens, but its administration and decision making is not in the hands of (elected) government, but in professional boards (see Chapter 6). Democratic values, such as the primacy of representation, transparency, majority-vote and accountability were not sustained in the so called ‘replacement of politics’ within these organizations.⁵⁵³ Hence, from the government point of view, these civil sectors are primarily policy areas rather than democratic, autonomous sectors. Indeed, these organizations themselves have turned to general and quality management: their management is primarily about the quality of the service and output, not about its democratic and political position in society. Hence, the ROB argues: “The engagement of citizens in shaping society, politically as well as socially, has declined. As a consequence, the feeling of ownership, of public responsibility, is too little present. Citizens are insufficiently challenged by civil society organizations to act, individually or collectively, deliberate, weigh policy, co-determine or co-act.”⁵⁵⁴ The cause of this decline can be found in the ambiguity mentioned in Chapter 6, such as the influence of New Public Management and the influence of market repertoires in board and daily practice:

For too long, the citizen is approached as a mere consumer, and has become one by doing so. The boards of civil society organization are professionalized and ‘corporated’, which has weakened the bond with citizens. Emphasis on free choice of citizens came at the price of (lack of emphasis on) relevant mechanisms of voice and influence. Continuing individualization has decreased collective involvement and has changed its shape. Citizens have unlearned important democratic skills.⁵⁵⁵

Some now see, as mentioned earlier, that some citizens are tired of being side-lined, and have created their own new private initiatives.

The particular argument for our cause, following from the chapter on quality management and on care ethics, is that civil society institutions have been actively depoliticized. That is, they have withdrawn themselves into

⁵⁵² ROB, *Democratie is méér dan politiek alleen*.

⁵⁵³ Bovens, ‘De verspreiding van de democratie’.

⁵⁵⁴ ROB, 45.

⁵⁵⁵ *Ibid.*, 25.

instrumental rationality (or functionalism) and illusions of harmony and perfection: quality management. Notice though, with instrumental rationality, as noted above – and this was also mentioned by Schmidt – that I do not simply intend traditional forms of management control. Also, it precisely points out a romantic quality management that ‘steers with values’ or is ‘value-driven’. First, we need to suspend our ‘doom and gloom’ representation of modern times, which may appear indeed appealing from the analysis above. We need a perspective on institutions and concrete practices that can at the same time address these issues of modernity, while also holding up a dominant place for institutions – or a revaluation of them: an institutional care.

9.4 In search for the revaluation of the institution

For this, we turn to the work of Paul Ricoeur and contrast it with MacIntyre’s approach to institutions and practices. Ricoeur’s analyses are useful for our cause as he explicitly attempts to bridge the question of the institution (by *just institutions*) to practical wisdom. MacIntyre is well known for his criticism of contemporary institutions, and I will show how Ricoeur’s approach is more promising as an aid to understanding the importance of institutions. We finally return to Dubet’s proposal of institutional revaluation by means of democratic and political structures and look for interpretations in the Dutch context of civil society.

The parable of the Good Samaritan

In an early essay, that appears today just as relevant, called *le socius et le prochain*, 1954, Ricoeur addresses the parable of the Good Samaritan and its meaning for both direct relations (face-to-face) and indirect relations via institutions. In this, he distinguishes between the ‘fellowman’ (*le socius*) and the ‘neighbour’ (*le prochain*). The former is a sociological category, the latter, the concrete other that I meet, encounter, face to face escapes sociological reduction. At first glance, the parable is primarily a denial of the science, the sociology of the other. As Ricoeur states: “one does not have a neighbour; I make myself someone’s neighbour.”⁵⁵⁶ Being someone’s neighbour is a *praxis* that leads to a concrete command: go and behave like the Good Samaritan – help people in need whom you encounter. The figure of the Samaritan, for the Jews an utter stranger, an outcast, a complete Other, indeed the category of the non-category, had helped the poor robbed and beaten man, in contrast to a priest and a Levite – categorized by their social institutions – who both

⁵⁵⁶ Ricoeur, *History and Truth*, 99.

passed by the robbed man.⁵⁵⁷ Ricoeur states that this priest and Levite also contain a particular living parable: “(...) of man as a social function, of man absorbed by his role. They show that the social function occupies them to the point of making them unavailable for the surprise of the encounter. In them, the institution (...) bars their access to the event.”⁵⁵⁸ We live in a world however in which there is not just a simple neighbour, one Other, but a numerous ‘Third’ – fellowmen to whom I am not related as neighbour but as citizen, colleague, patient or consumer and this entails the question of (distributive) justice *after ethics*.⁵⁵⁹ If the Good Samaritan would find beaten and robbed people on a daily basis and all along the way, it is not only practically impossible for him to help them all, even if he would encounter them all and feel responsible, but this would also induce the question of justice if he chooses to help this one, and not another. Henceforth, he might need to knock on the door of the ‘mayor’ of Jericho or Jerusalem to point out the unsafe situation on the road between the cities, and that some institutional action was needed.

It may be tempting to interpret the parable as a radical critique on the alienation of modernity (with its instrumental rationality, individualism and closed up grand scale institutions) or contrarily as a dismissal of *petit-bourgeois* asceticism.⁵⁶⁰ The last element we leave for now, as it points to quite another debate, but the first is important. Ricoeur explicitly wants to side-step or overcome this strong dualism between institutional decline or violence and personal charity or benevolence, especially proclaimed by Levinas in the idea of ‘small goodness’ – *la petite bonté*.⁵⁶¹ Ricoeur calls this a false alternative, between the concrete relation of the neighbour, and the abstract relation of the *socius*, whose relation to us is always mediated by function or indeed: institution. Ricoeur:

(...) seeks out the unity of intention underlying the diversity of my relations to others. It is the same charity which gives meaning to the social institution and to the event of the encounter. The brutal opposition between community and society, between personal and administrative or institutional relationships, can only be one stage of reflection.⁵⁶²

Ricoeur states that the parable only makes sense if we interpret it from a particular social-historical situation: it cannot be a simple universalism. In a concrete historical situation, there is always “(...) a perpetual debate between

557 Ibid., 99.

558 Ibid.

559 Cf. Levinas, *Totalité et Infini*.

560 Buijs, *Publieke Liefde*, 15.

561 Levinas, *A l'heure Des Nations*, 104–5.

562 Ricoeur, *History and Truth*, 103–4.

the ‘direct’ person-to-person relationships, and the ‘indirect’ relationships within the context of institutions”.⁵⁶³ He goes on, and here comes a crucial part for our argument:

When the theme of the neighbour is cut off from the social context wherein it finds its historical impact, it turns to sterile regret and becomes the victim of some frightful propensity for avenging disaster. It is much more necessary to remain attentive to the historical scope of charity and to discern the whole wealth of the dialectic of the socius and the neighbour. At times the personal relationship to the neighbour passes through the relationship to the socius; sometimes it is elaborated on the fringes of it; and at other times it rises up against the relationship to the socius.⁵⁶⁴

Hence, the direct relationship is always necessarily embedded within an institutional (social-historical) context, albeit its relation towards it may differ (passing through, on the fringes, or critique against). “There are very few pure events”, Ricoeur argues, “and they cannot be retained nor even forecast and organized without a minimum degree of institutionalization.”⁵⁶⁵ Therefore, the question of the parable of the Good Samaritan is not only one of a face-to-face ethics, but precisely (also) an institutional one: “The parable does not relieve me of the responsibility of answering this question: what does the concept of ‘neighbour’ mean in the present situation? This may be to *justify* an institution, *amend* an institution or *criticize* an institution.”⁵⁶⁶ Henceforth, the abstract, the anonymous, perhaps not so spectacular, is what protects and makes possible the concrete intimate relation – indeed care.⁵⁶⁷ There is no concrete care or charity without institutional care in this threefold relation towards concrete care.

Confronting Ricoeur with MacIntyre

Here we link up with the work of MacIntyre, especially *After Virtue*.⁵⁶⁸ His (profound) critique of institutions is I think exemplary of the contemporary critical attitude towards institutions or organizations (see Chapter 3 and 7) on the one hand, and the romantic attitude towards the beauty of ‘small goodness’. But this brutal opposition can only be a first stage of reflection, as noted. As Ricoeur, MacIntyre admits that practices, which I for argument’s

563 Ibid., 105

564 Ibid.

565 Ibid.

566 Ibid., my italics.

567 Ibid., 106.

568 MacIntyre, *After Virtue*.

sake compare with what Ricoeur calls “the concrete”⁵⁶⁹, are carried by institutions:

For no practice can survive for any length of time unsustained by institutions. Indeed, so intimate is the relationship of practices to institutions – and consequently of the goods external to the goods internal to the practices in question – that institutions and practices characteristically form a single causal order (...).⁵⁷⁰

External goods are equated with the acquisition of power, fame and money. Internal goods form the *telos*, purpose, of a particular concrete practice. Without going into the debate about the nature of these “goods”, MacIntyre follows by stating that the:

(...) ideals and the creativity of the practice are always vulnerable to the acquisitiveness of the institution, in which the cooperative care for the common good of the practice is always vulnerable to the competitiveness of the institution. In this context the essential function of the virtues is clear. Without them, (...) practices could not resist the corrupting power of institutions.⁵⁷¹

Hence, institutions by their very nature tend to corrupt practices, and do not entail much more than the wielding of power, fame and money. Only virtue can tame them, make them less evil, so to speak. We can well say that MacIntyre has a cynical, or at least a one-sided, stance towards institutions, although he also admits that one cannot do without them. Ricoeur also sees this possible, or inherent, ‘evil’ of institutions, but his position is more ambivalent, acknowledging that also the institution follows the same intention of charity as the concrete relation. The point of institutions, Ricoeur argues, with Arendt, is that they contain both and at the same time the possibility of *power-in-common* and *domination* or force.⁵⁷² Institutions make things (charity, justice) possible and sustainable, that one cannot do on one’s own, but by making this possible, by becoming an objective norm or value, they at the same time *restrain* or *dominate* in the Foucauldian sense.⁵⁷³ Hence, institutions always risk emphasizing or abusing this latter issue:

569 This comparison is somewhat blunt, as the way MacIntyre speaks of practices is somewhat similar to Ricoeur’s idea of institutions. Hence, the concepts are not used in exactly the same way.

570 MacIntyre, 194.

571 Ibid.

572 Arendt, *The Human Condition*, 200.

573 Ricoeur, *Oneself as Another*, 194–95.

Whenever an oligarchy is established, be it technocratic, political, military, or ecclesiastical, it tends to make this mechanism a means of domination and not one of service. (...) Within the centre of the most peaceful and harmless institution lies the beast, obstinacy, the tendency to tyrannize the public, and the abstract justice of bureaucracy.⁵⁷⁴

However, it makes no sense to condemn the instruments themselves: the machines, the bureaucratic apparatus, the administration or the social security. There is not a 'human scale' inscribed in nature, and the size or span of control of the institution itself is not the problem (at least not the ethical or political problem). A private protest against anonymous and abstract social institutions for a lack of charity might well be hypocritical, for indeed, the concrete is made possible by the abstract and anonymous.⁵⁷⁵ Therefore:

The ultimate meaning of institutions is the service which they render to persons. If no one draws profit from them they are useless. But this ultimate meaning remains hidden. No one can evaluate the personal benefits produced by institutions; charity is not necessarily present wherever it is exhibited; it is also hidden in the humble, abstract services performed by post offices and social security officials; quite often it is the hidden meaning of the social realm. (...) The criterion of human relationships consists in knowing whether we influence people. But we have neither the right nor the power to apply this criterion.⁵⁷⁶

Thus, the 'boring' and administrative institution of the supervisory board, or management in general, watching over, is born from the same charity, care, as the nurse to the professor (see Chapter 7). Both concrete care and the abstract work of the institution are indeed specific forms of caring, although the latter is more hidden and indirect. Proper checks and balances; good, just and accessible procedures; knowing what can and what cannot be done, is nothing more unworthy than the actual care itself. As I have noted earlier however, due to the dominating institutional critique (and perhaps rightly so), supervisory boards want to see more results, effects, from their existence, legitimizing themselves by an increasing occupation with quality management and 'added value'. I would say that it might be useful if the supervisory board would aim its course at the very institutionality of its due, a specific kind of care, rather than with technical day-to-day questions. But, on the other side, institutional care and concrete care needs to be connected,

574 Ricoeur, *History and Truth*, 107.

575 *Ibid.*, 108.

576 *Ibid.*, 109.

in and through the very three forms I have mentioned: justify, amend or criticize the institution. Within the vast discourse of values and purposes, it is important to see Ricoeur's realistic standpoint: that there is always the possibility that the institution perverts, shows its dark side, and that this needs to be accounted for.

Civil democracy

Dubet, also in line with Beck and Holzer, discussed early in this chapter, is not very optimistic about how institutions can revive. But if there is any chance, it needs to go through a process of democratization. Institutions have too much fallen into the hands of either professionals, experts or professional politicians (and the extreme number of rules they produce), he argues, and searches for ways to bring this back to ordinary people. Only by ordinary engagement can institutions revive and the contradictions of and conflicts of values be worked out.⁵⁷⁷

Civil society institutions in the Netherlands

Let me relate this to the insights from the Dutch perspective. The Dutch Council for Public Administration (ROB), discussed before, argues that what they call 'civil democracy' is vital for the legitimization of civil society organizations, but also for the quality of its services as part of a system of institutional checks and balances. The ROB distinguishes different levels of democracy (ownership, voice, influence) in these organizations: at the level of the individual, both of the patient and the professional, what treatment they get or how they will do their work. On the second level is the 'collective voice', such as panels or councils of relatives or residents in the organization. The third level is that of co-determination on the level of operational issues, which can be about the cleaning services, planning, food, et cetera. The last level is that of strategic co-determination which might be about the financial position, takeovers and mergers, appointment of board members (both executive and supervisory). Especially on this level the idea of checks and balances is important. I come back to these different forms of voice in the final chapter when I discuss some possible practical approaches for my argument.⁵⁷⁸

Tjeenk Willink has recently argued quite the same, in the context of a decline of institutions and a crisis in Dutch public sectors, that traditionally, the government is supposed to be a countervailing power for the market, and civil society is supposed to be a countervailing power for government.⁵⁷⁹ Due

⁵⁷⁷ Dubet, *Le déclin de l'institution*, 391–402.

⁵⁷⁸ ROB, *Democratie Is Méér Dan Politiek Alleen*.

⁵⁷⁹ Tjeenk Willink, *Groter denken, kleiner doen*, 54.

to ambiguity, these traditional checks and balances seem to be eroded. He states that the government has failed to counterbalance the market but has rather embraced it in the mass privatization of public services (postal services, energy, public transport, health care insurance) and the introduction of New Public Management.⁵⁸⁰ On the other hand, civil society has failed to counter government, as it has embraced the same kind of abstract and anonymous bureaucracy. The Dutch sociologist Schuyt has argued that this loss of countervailing power against the state is due to the latter's increased power over citizens in such a way that the citizens do not recognize themselves anymore in these institutions.⁵⁸¹ It is in this respect not very helpful that citizens are seen both as citizens *and* consumers of these institutions. Tjeenk Willink has little hope that these institutions will retrieve this countervailing power themselves, as they sit tightly in the centre of power. His hope is for renewed private initiatives of citizens who start alliances on a small scale at the level of neighbourhood care, living environment and energy. This may have some prospect, but I do still think that the traditional institutions can retrieve the countervailing power, and this must be done precisely by what Ricoeur has called *charity* – going beyond the dualism of institutions (and its management) and the concrete care combined with a renewed attention for democratic forms, a politicization, of organizations. For indeed, as long as the private initiatives of citizens do not institutionalize – that is: does not 'objectify' their values in order to survive, they abstain from becoming political, and will not be a countervailing power. The charity of an institution is precisely its capability to establish enduring communal or political values and justice, or to *decelerate*, in terms of Rosa. However, this also runs the risk, as it may have become clear, of the inherent evil of institutions.

9.5 Looking forward: Politics in institutions

In this chapter I have argued how the focus on functionalism in governance leads to neglect of an institutional perspective. This is no surprise however, as institutions have declined in modern times, leaving us with individualism, technical rationality and a loss of political freedom – although these are all not necessarily bad things, as I argued. The question I addressed is how we can revive an institutional program within today's context. With Ricoeur, I wanted to give a positive interpretation to institutions, arguing that they are born out of the same charity as face-to-face relations. The institution may go off track however (just as concrete caring relations, by the way), and needs to be constantly on its guard to seek out whether concrete care passes

580 Cf. Kuiper, *De terugkeer van het algemeen belang*.

581 Schuyt, *Steunberen van de samenleving*, 51.

through the institution smoothly, is on the fringes of the institutions, or poses a critique on the institution. This marks the ambiguity of ordinary practices: things may turn out differently. This, then, leads to a permanent reflection on whether the institution needs to be justified, amended or criticized from within. This threefold distinction of the institution is in line with the three organizational qualities described in the previous chapter. The possibility to *criticize* the institution marks the conflict quality of the organization. The possibility to *amend* the institution marks the idea that decisions and reforms may appear to look good from the safe high grounds but may be very difficult in concrete contexts. If the institution can be *justified*, then apparently, there is a good integration of the three qualities of organization.

The ongoing reflection on whether the institution needs to be justified, amended or criticized, as the argument continues, can only happen if institutions are (again) regarded as political. Following some critical interpretations in the Dutch context, civil society institutions have lost contact with their constituency, retreated into formalism and functionalism. There is a plea for a repolitization and a reinforcement of civil democracy. To understand what this means or can mean, we now need to dig deeper into political theory to understand the political nature of institutions, and to provide a political theory that suits the idea of an institutional care combined with the notion that concrete care is always surrounded by conflict and contingency – as argued in the previous chapter.

10. Institutional care as political concern

10.1 Introduction

Before we actually proceed to practical wisdom in the next chapter, I have one more step to make in aiming to fully understand the institutional care of the supervisory board, or the nature of governance in general. Institutional care encompasses two interconnected elements. First, it implies that the responsibility, the concern, of the supervisory board has an institutional relevance. Second, it refers to caring practices within an institutional setting. I have already argued in Chapter 7 that care is political, that it involves (different forms of) power and it is about how ordinary caring practices are nested in wider political institutions and conceptions. The need for accountability is one matter that flows from its political embeddedness, and the same might be true for the striving for perfection and improvement, or the prevention of harm – quality and risk management. Although I depicted care as political in the tradition of care ethics, I also argued that we need to go outside care ethics for a proper understanding of politics and how politics relate to the ordinary. I have made a start with that in Chapter 7 and will continue that program here.

In the previous chapter, I have also argued that institutions are political, and that the contemporary institutional crisis is precisely a lack of political engagement of citizens (*citoyen*), either because they have retreated to their private lives and consumerism, and/or because the institutions have been depoliticized. That is, institutions and its governance arrangements, especially in health care, are perceived to be professional matters that address technical questions that need to be addressed by experts. Although there has been a revival towards a focus on institutional values, I also argued that, if this is a mere technical instrumentality hidden in a romantic package – not much has been gained in coming closer to the ambiguity of ordinary practice. With different contemporary philosophers and sociologists, I have shown that, when push comes to shove, citizens have but little power to wield in the institutions that are vital to their everyday life. I called for a program of reevaluation of institutions by means of repoliticization and democratization.

And that is where I pick up the pace. If we need to politicize institutions, the supervisory practice in particular, then we at least need a thorough understanding of politics that can be applied to civil society (and must therefore go beyond politics of the state) and that encompasses not only

political ideals or power, but also ordinary life and practices. This chapter wants to make clear why a focus on expert-knowledge in civil society governance and supervision is not enough – that we also need an ability to politicize matters of governance: the human ability of judgement, in relating values to concrete contexts, understanding that certain forms of governance and administration produces orders that influence the everyday life of people that dwell in or near to the organization. In this chapter I therefore ask the question: what is politics? And why are civil institutions political, and in what way? What is the political tension through which the supervisory board needs to navigate? To answer these questions, I need to make the classical distinction in political philosophy between ‘the political’ and ‘politics’ – first coined by the controversial Schmitt.⁵⁸² I will not discuss his theory in depth but will instead focus on four political thinkers that have also made this distinction, all in different ways. They can all be regarded as ‘postfoundational political theorists’. This means that there is some awareness that politics or authority in modern times cannot be grounded in metaphysical ideas – such as in the law of God or a rule of justice – due to the common experience of plurality. However, it is also not anti-foundational: it seeks for ways to deal with both political ideals and plurality – it goes beyond ultimate foundations. I will first turn to Castoriadis, who has explicitly related this distinction to institutions, sedimentation processes of institutions and contingency (related to the previous chapter and Chapter 7). Then I will go to Ricoeur, who has profoundly shown how political ideals, values, and the use of power (and therefore always the potential dark side of ideals) are interwoven (related to Chapter 7 and 8). As we already introduced Ricoeur in the previous chapter, this gives his view on institutions and politics more depth. We then turn to Lefort, in the slipstream of Machiavelli, for a proper understanding of the meaning of conflict, contingency and democracy in politics (related to Chapter 8). Finally, we turn to Marchart, to make sense of the relation between ordinary practices (and their plurality and potential conflicts) and political institutions. From these interpretations of ‘the political difference’, as the relation between the political and politics called, I will distill three political tensions through which the supervisory board needs to navigate. This ‘navigating’ will be the steppingstone towards the final chapter (before the conclusion) on practical wisdom. Before we start with Castoriadis however, we need to ask the question to what extent we can speak about ‘politics’ in civil society. Of course, there have been many other different interpretations of the political difference, such as in Wolin and Oakeshott, and sometimes more implicit as in Arendt and Weber. Mouffe and Laclau are closely related to both Lefort and Marchart, whom I will discuss. I will turn to Arendt, and the idea of

⁵⁸² Schmitt, *The Concept of the Political*.

citizenship, in the next chapter on practical wisdom as she relates the political difference to the question of *phronesis*.⁵⁸³

Politics in civil society?

There has been some philosophical debate as to what extent the question of ‘the political difference’ can refer to spheres outside the state – such as in economics, ethics, aesthetics or indeed civil society.⁵⁸⁴ I need to make clear why I speak of politics ‘outside Parliament’ or the state. Also, it introduces the question of politics.

Schmitt was quite clear in this regard: politics can be reduced to the (ideal) distinction between ‘friend’ and ‘foe’ and should belong to the question of the state, different from, for example ethics (between good and bad), economics (between profitable and unprofitable) or aesthetics (beautiful and ugly). According to Schmitt, these spheres need to be preserved and should not be reduced to one another. However, as he regretfully confirms, politics and society have penetrated each other to such an extent that *everything* can be regarded as political. Society is (democratically) seen as a counterforce to the state and therewith involved in politics; and the state is no longer seen as something *above* society but is rather juxtaposed relative to other spheres (market, society, family).⁵⁸⁵ For Schmitt, it was important that the state remained strong and autonomous, not necessarily in a totalitarian way, however: he initially wanted to prevent the state to become all-pervasive. When Foucault held his lectures on biopolitics and governmentality (also discussed in Chapter 7), he, on a different plane, had doubts about the rationalization of problems by governments in the individual sphere of health, hygiene, birthrate and lifespan, leading to “excessive government”.⁵⁸⁶ *Governmentality* describes the all-pervasive rationalized practices of government – but like a body without a head, without a(n) (imagined) unity (no Leviathan, not a monster or a God). It is anonymous and apparently kind. Its instruments are the science of communication, control and regulation.⁵⁸⁷ Foucault argued in response to Schmitt that if everything is political: “(...) nothing is political, everything can be politicized, everything may become political. Politics is no more or less than that which is born with resistance to governmentality, the first uprising, the first confrontation.”⁵⁸⁸ The idea

583 Cf. Wiley, *Politics and the Concept of the Political*.

584 Schmitt, 37–38.

585 In Dutch politics, this element was an important political assumption of the protestant prime minister Abraham Kuyper (and founder of the Vrije Universiteit Amsterdam) and his philosophical fellow thinker Herman Dooyeweerd. The catholic idea of ‘subsidiarity’ is contrarily based upon hierarchies in social spheres.

586 Foucault, *The Birth of Biopolitics*, 13, 317.

587 Foucault, *The Essential Works of Foucault, 1954–1984. Ethics*, 68.

588 Foucault, *Security, Territory, Population: Lectures at the Collège de France, 1977–78*, 390.

As referred by the editors to an unpublished manuscript of Foucault.

that civil society should be a counterforce to government is hence not *a priori* political but is rather something that has been institutionally politicized – and should indeed be regarded as a resistance towards excessive government.⁵⁸⁹ Hence, for Foucault, the idea of the politicization of everything is related to an expanding government. In this process of politicization, then, politics transforms into structures of power in which government is just another player. Of course, we see this kind of politicization also in civil society and health care: the endless debates in Parliament with indignant politicians intruding into administrative matters that are apparently not theirs to pronounce or of which they have only but the smallest understanding. However, there is another interpretation of politics that we need to understand, and which represents the way I perceive the politicization of governance of civil society. I certainly do not intend to ‘invite’ government into the sphere of civil society, but rather to understand the governance of civil society as political in a different sense than mentioned by either Schmitt or Foucault.

This starts from Tronto’s argument on moral boundaries, discussed in Chapter 7. The argument goes the other way around. She poses the problem that, due to entrenched moral boundaries, everyday moral questions have become irrelevant for political arguments, and private concerns are distinguished from, and seen as less important than, public concerns. Questioning these boundaries, as Tronto did, will lay bare the political nature of ordinary practices and the private sphere, and therefore also of civil society. Not only are ordinary practices nested in wider political practices; these wider political practices and the exercise of power appear in a commonplace fashion (rather than in abstract political concepts), for example in regimes and repertoires of quality and risk management, of governance and accountability, of bureaucracy and the individualization of responsibility. Politics in this regard, the attempts we make to live together with the inherent need of people to make decisions, is present both on the level of the state and of a particular civil society organization. Or, more closely, on how ordinary practices of care are nested in the administration and governance of civil society organizations. This is the argument for my needing to discuss the political difference related to governance in civil society organizations. In the conceptions of the four authors we will discuss next, there is also the possibility to see politics as a concept that has wider implications than just for government (and its intruding practices).

589 Cf. Tjeenk Willink, *Groter denken, kleiner doen*; Foucault, *The Birth of Biopolitics*, 303.

10.2 Castoriadis and political institutions

Why are institutions political, also outside the arena of government? And in what sense are these institutions political? For an answer for this we firstly turn the work of Cornelis Castoriadis (1922-1997), a Greek French philosopher, who was, as many of his French-philosophical contemporaries, highly influenced by the happenings and antecedents of the student uprisings in Paris in '68. A better example of a challenge to traditional western institutions (as highlighted in the previous chapter) is hard to think of: 'why do we need to listen to the teacher?' Although it is not my task here to interpret or summarize Castoriadis' vast philosophical system, we still want to use some of the core features, especially because his interpretation of institutions, and their meaning in society, forms an explicit critique of functionalism (a concept that resembles to instrumental rationality). Functionalism in institutional life means that we institute (create institutional structures) because there are rational problems that need to be rationally solved. Moreover, he has a special relevance today, as many of our traditional institutions are challenged. Different contemporary scholars are picking up this perhaps 'forgotten' French philosopher of the twentieth century.⁵⁹⁰ I will also use some of these contemporary interpretations.

Imagined institution of society

On a very basic level, institutions make it possible for people to imagine and order the world we live in. These institutions however are not something given from above, or from outside, but are *socially-historically* formed and imagined. 'Imagined' does not mean that they are actually not real.⁵⁹¹ Socially-historical means, in short, that institutions arise out of slow sedimentation processes of *Legein* (the representing ability to distinguish-choose-posit-assemble-count-speak) and *Teukhein* (the doing of assembling-adjusting-fabricating-constructing) through time.⁵⁹² Therefore, society is not a structure of 'sets', or a structure of structures – any categorization of society misses the point of its complex interactions. Rather, it is a "magma, and a magma of magmas".⁵⁹³ Magma signifies an ambiguous, sedimented and

590 Cf. Kioupiolis, *Freedom after the Critique of Foundations*. Klein, 'Bringing Values Back in: The Limitations of Institutional Logics and the Relevance of Dialectical Phenomenology'; Adams, *Cornelius Castoriadis: Key Concepts*; Karalis, *Cornelius Castoriadis and Radical Democracy*; Karavitis, 'On the Concept of Politics: A Comparative Reading of Castoriadis and Badiou'.

591 Castoriadis, *The Imaginary Institution of Society*, 127.

592 *Ibid.*, 227, 260.

593 *Ibid.*, 228; Adams, *Cornelius Castoriadis: Key Concepts*, 65. Literally magma: "(...) signifies a blend of molten or semi-molten rock, volatiles and solids found beneath the surface of the Earth. Besides molten rock, magma may also contain suspended crystals, dissolved gas and sometimes gas bubbles. It may seep into adjacent rocks, extrude onto the surface as lava or in explosive ejections."

layered substance of liquids, semi-liquids and solids. His claim is that: “what *is*, is structured as an ever-changing, stratified magma.”⁵⁹⁴ As social metaphor it designates: “(...) the complex modes of being of our human societies, traditions and institutions, that is, of the ways in which we make sense and create meaning in and for our world.”⁵⁹⁵ Hence, the social, by institutions, is both and at the same time stable (*legein*) and ever-changing (*teukhein*). Society is always underdetermined, there is always a possibility that things are different (contingency). On the other hand, this does not imply that everything that *is*, is simply and merely arbitrary, no, it is social-historically imagined. Institutions are (temporal) orders, but this order is always a matter of *creative* imagination, not of individuals, but of an anonymous collective in the social-historical formation of the world. Without institutions or the process of instituting, there can be no (stable) meaning: “Is there any possible meaningful human action outside an instituted society, the relations, the meanings, the purposes, the values posited by this instituted society?”⁵⁹⁶

The point of institutions is that they contain besides a functional, a decisive symbolic aspect. There are no mere functional or technical problems: both the supposed rationally identified problems and the rational solutions are from the outset already part of the symbolic.⁵⁹⁷ The imaginary is closely tied to this symbolism. It makes no sense to argue that symbols are arbitrary. It *actually* creates and sustains meaning in the socially instituted world. It signifies, represents, something supposedly real, that without this representation would be without meaning – for instance, the rising incense of a prayer in a Catholic Church. The (protestant-evangelical) counterargument that it is perhaps possible to pray *without* the rising incense, only makes sense from outside the Catholic institution, not from within, as this is how the form of prayer is socially historical imagined. The symbol makes the prayer moving upwards more real, visible, tangible – indeed imaginable.

A doctorate title, and the piece of paper with the university stamp that belongs to it, is a symbol that refers to some kind of studied expertise (or at least to some asceticism). The formal rite de passage of receiving the doctorate is perhaps functional, in the sense that the thesis is adequately defended without dishonouring the opponents – but is also symbolic in the sense that the formalism refers to something extraordinary, something sacred. Other more daily examples are, following Castoriadis:

594 Adams, 65.

595 Ibid., 65.

596 Castoriadis, *Philosophy, Politics, Autonomy*, 21.

597 Adams, 34.

A property title, a bill of sale is a symbol of the socially approved 'right' of the owner to undertake an unlimited number of operations with respect to the object of his ownership. A paycheque is the symbol of the wage earner's right to demand a given number of banknotes, which, in turn, are the symbol of their possessor's right to perform a variety of acts of purchasing, each of which will be symbolic in its turn. The work itself which is the basis for the paycheque, although it is eminently real both for its subject and in its results, is, of course, constantly bound up with symbolic operations (in the mind of the person working, in the instructions he receives, etc.). And it becomes a symbol itself when, after being reduced to hours and minutes multiplied by given coefficients, it enters into the accounting office's calculations of the paycheque or the company's 'operations account' (...).⁵⁹⁸

Taking the institution of the hospital as example: in 2018 two Dutch regional hospitals went bankrupt, supposedly out of the blue. The Minister of Public Health, responsible for the accessibility of health care in the region, stated that a hospital is only a "pile of stones" and that there is no need to sustain this as long as the requirement of accessibility is met. This is a typical functionalist view of the hospital as institution. If it no longer serves a specific function, it is meaningless altogether. Parliament and public opinion turned against the Minister however: how could he be so denigrating about the hospital? Indeed, the hospital, as institution, including its building (perhaps the modern temple) has an important symbolic function: a symbol of shelter, care and science, progress and modernity. Hence, any functional aspect of an institution can only be understood, made sense of, from the perspective of symbols: the embedded practices that give the institution meaning in the first place.

The turn to the symbolic links up with the phenomenological turn from knowledge to meaning or lived experience: "According to Castoriadis, each stratum of our world, each layer in the magma, has its own specific mode of being."⁵⁹⁹ This entails that although different layers link up with each other, are intertwined, it still implies that the mode of being of one layer, cannot be reduced to the other. Music, for example, cannot be reduced to a difficult mix of waves coming into the ear (with all its complexities) into the brain (with even more complexities), although this might be called knowledge. The experience or meaning of music cannot be reduced to these 'waves', although it is obviously connected to them. Music has its own mode of being, for example aesthetics, affections, taste, perhaps nostalgia, or social. Another

⁵⁹⁸ Castoriadis, *The Imaginary Institution of Society*, 117.

⁵⁹⁹ Adams, 67.

example would be that we know, scientifically, that the earth turns around the sun. Still, we speak, in lived experience, that the sun comes up. To say that this description is false, misses the point of different meanings in different strata.

Quality management, functionalism and social constructivism

The same anti-reductionist argument is true for quality management, as discussed in Chapter 8. The experience of care cannot be reduced to a schematic imposition of a PDCA cycle, nor can the relation between nurse and patient be reduced to a 'net-promotor-score' or satisfaction rating. It cannot even be reduced to any *set* of measures, as the experience of care is precisely and necessarily beyond measure – a matter of meaning instead of knowledge. Of course, these measures are connected and relevant for (institutional) care. The moment however that the symbolic meaning is being reduced to a rational functionalism, things get out of hand. Functionalism often goes hand in hand with constructivism, the naïve interpretation of the social historical institution. The problem of constructivism is that the relation between individuals and society is all too direct and leads to a perspective of social engineering: if you want it to be different, well, then why don't you make it? However, the idea that society produces individuals, and individuals produce society misses the point.⁶⁰⁰ Society is the work of the instituting *imaginary*, and this cannot be simply reduced to the people who live in it. The other way around, although individuals make and remake society, it would be erroneous to say that society as a whole can be reduced to this individual making and remaking. Hence, a specific institution is more than simply the sum of those who are active in it. The institution has, in some respect, become autonomous relative to the participating individuals, has a life of its own. This anti-reductionism therefore points to the very magma itself, the social imaginary significations of a specific society, which cannot be reduced to individual or collective intentions.⁶⁰¹ Indeed, each individual and group is shaped by an already instituted magma, and this shaping was there long before the specific individual or group could have intentions at all. Of course, there is still the possibility of *teukhein*, adjusting, but this is only possible to some extent – contrary to for example Kuhn's ideas of paradigms (and other popular versions of transition and change management).

This corresponds, for instance, to the experience of (excessive) bureaucracy (both functional and symbolic) in health care: bureaucracy seems to have become an autonomous process. Every attempt to eliminate it seems

⁶⁰⁰ Castoriadis, *Philosophy, Politics, Autonomy*, 78.

⁶⁰¹ Adams, 70.

hopeless, precisely because people think it is a mere construction, a matter of individual action and choice.⁶⁰² The social imaginary of Castoriadis forces us to understand an institution as something that carries value and meaning that make sense as lived experience in that specific institution. To evaluate these values or practices without acknowledging this entrenched lived experience misses the point of the importance of symbolic meaning to understand institutional practices in the first place. Such an evaluation is typically functionalist: an outside, technical and expert view.

The political and politics in Castoriadis

This brings us to politics. As mentioned, society is autonomous – lives its own life. But this does not mark a determinism, but rather precisely makes internal critique possible:

That is to say, a society capable of explicitly self-instituting itself, capable therefore of questioning its already given institutions, its already established representation of the world. This society also could be described as one which, in living entirely under laws and knowing that it cannot live without law, does not become a slave to its own laws; a society, therefore, in which the question, ‘what is a just law?’, always remains effectively open.⁶⁰³

This is what Castoriadis refers to as the reabsorbing of *the political* into *politics*. *Politics*, for Castoriadis: “Amounts to the explicit putting into question of the established institution of society” and entails the project of establishing both individual and social autonomy.⁶⁰⁴ *The political* on the other hand refers to explicit power, that is, the institution of “(...) instances capable of formulating explicitly sanctionable injunctions.”⁶⁰⁵ The Greeks had sublimated this, by making explicit political power open to participation and contestation – and this is how the political is absorbed in politics. The true object of politics, Castoriadis argues, is therefore to: “Create the institutions which, by being internalized by individuals, most facilitate their accession to their individual autonomy and their effective participation in all forms of explicit power existing in society.”⁶⁰⁶ Individual autonomy (making your own law) in Castoriadis must always be seen relative to the autonomy of the social. “If we want to be free, nobody should have the power to tell us what we should think.”⁶⁰⁷ The question is how free we are, and up

602 Cf. Ten Bos, *Bureaucratie is een inktvis*.

603 Castoriadis, 73.

604 Ibid., 84, 90.

605 Ibid., 83.

606 Ibid., 91.

607 Ibid., 85.

to what point? We do need socially imagined institutions, but they will exercise power over individuals.⁶⁰⁸

What we have reached so far is that institutions are linked up with politics in an inextricable way. There can be no institutional analysis without questions of politics. In the table below, I insert Castoriadis' view. The table will extend as the other thinkers are discussed.

CASTORIADIS	
The political	Explicit power, institutions that can decide and sanction
Politics	Participation and contestation of institutions on behalf of autonomy

In short, institutions are political for Castoriadis as they on the one hand exercise power over individuals (the political), and on the other hand because institutions have the ability to question and alter its own ways of instituting (politics). This holds true for all imagined, social historical institutions. Crucial for my understanding of institutions is that they, as I also argued in Chapter 6, bear an important symbolic function and that it is tricky to reduce institutions to their (instrumental) functions. As we will see, the political difference as formulated by Castoriadis is different from other political theorists and appears to be the other way around to theirs. Also, as noted in the introduction and in Chapter 6, the idea of sedimentation of practices is worked out in detail by Castoriadis and provides a convincing argument for understanding institutions as autonomous. Importantly, the way institutions should develop (how the political is absorbed in politics) is by participation and contestation of individuals. Furthermore, building forth on Chapter 8, here also contingency is related to conflict (contestation). Castoriadis explicitly marks that contingency is not the same as arbitrariness: as the institution is autonomous, the imagined meaning is not an 'anything goes', while there is still the possibility of an alternative. For my argument this is important as my critique on the use of general values is not meant to become a relativism. Rather, the point is how the use of institutional values can relate to the ordinary and how they can become political.

⁶⁰⁸ This point of autonomy seems miles away from the 'relational' perspective introduced in Chapter 7. But I think that in care ethics, there is also this same sense of autonomy: within systems and practices of power, the point is how to care without making a law for someone else (based on for example generalized conceptions of care).

10.3 Ricoeur's 'realistic idealism' in politics

The political paradox: the problem of values

In the previous chapter we introduced Ricoeur for an understanding of institutional care. It is no surprise, then, that for Ricoeur this institutional care is closely related to his idea of the political difference. Institutions, Ricoeur argues, are born out of the same charity as the face-to-face encounter. However, the institution may also precisely prevent or obstruct the possibility of care (just as quality improvement may make things worse). He thinks of this as a paradox between ideals and realism (power): ideals may turn out to be fragile whenever they are applied to practice or made active in political judgment and actions. In another early essay of Ricoeur, 1957, called *The Political Paradox*, he introduces the idea of politics. He discusses the problematic of power. Throughout history, power is paradoxical in the sense that it can progress in 'rationality', that is, to refer forward to *Oneself as Another*, by sustaining 'just institutions' and it has at the same time the possibility to derail, to be abused.⁶⁰⁹ Now, what is precisely paradoxical about this, rather than being just two aspects of power? Well, the point for Ricoeur is that *the political*, for him the *ideal* sphere of political organization and historical rationality, has some relative autonomy against *politics*, the empirical and concrete manifestations of this ideal sphere by means of power.⁶¹⁰ Historically, following Machiavelli, every creation of a new order, every conquest that made things better, is often founded by ways of evil. So, to counter Marx, if economic exploitation should disappear, the question is how this is done, by what means, and what will come in its place. Hence, the paradox of power is "that the greatest evil adheres to the greatest rationality."⁶¹¹ Or, like Schmidt in Chapter 8: nothing is good without its opposite.⁶¹²

Now, why must the political be autonomous from politics? Following the Greek philosophers, Ricoeur argues that within the political existence of man, there must be at least some rationality. Politics is not mere powerplay – and this is a comparable argument to Tronto's in Chapter 7 on moral boundaries. Hence: "(...) politics discloses its meaning only if its *aim* – its *telos* – can be linked up with the fundamental intention of philosophy itself, with the Good and with Happiness."⁶¹³ The concept of the good life in Aristotle is from its very inception a political concept (and may have regrettably become private, as Arendt argued). The specific meaning of the political,

609 Ricoeur, *History and Truth*, 248; Ricoeur, *Oneself as Another*, 194–202.

610 *History and Truth*, 248, translator's note.

611 *Ibid.*, 249.

612 Schmidt, *Nie wieder Qualität. Strategien des Paradoxie-Managements*.

613 Ricoeur, *History and Truth*, 249.

therefore, must have at least some teleology, some foundation. The pursuit of this aim is what the political community is all about. Because of its rationality, the political is autonomous. However, precisely because the political has the ideal in its possession within the context of a State, or smaller, an organization that exercises power, through history it has advanced through *decisions*. This is where power comes in. The ideal of the political is made concrete in decisions – that is what Ricoeur calls *politics*. Hence, the political necessarily involves politics.⁶¹⁴ This implies that rationality involves power. So, and here Ricoeur follows Machiavelli, “(...) politics is the sum total of activities which have as their object the exercise of power, therefore also the conquest and preservation of power.”⁶¹⁵ Politics becomes the problem of political evil. Not that power is evil of itself though: power is the vehicle on which rationality (the political) passes through – that is the paradox. Power is akin to evil since it can also be played by ways of lies, flattery and untruth, the very opposite of discourse and reason.⁶¹⁶ The true problem of political violence is not its random violence but rather a calculated and limited violence designed to establish a state. Every republic, every (re)organization is violent by its inception. Every ideal (the political) has a reality of power (politics: an administration or police force). Ricoeur calls upon us to never forget this paradox: that every constitution, every leadership, is prone to political violence. This is not pessimism, but clarity.⁶¹⁷ For a democratic organization, the task is to make it possible for the people to control the state, or to:

(...) devise institutional techniques especially designed to render possible the exercise of power and render its abuse impossible. The notion of ‘control’ derives directly from the central paradox of man’s political existence; it is the practical solution of this paradox.⁶¹⁸

The exercise of power must be made possible, institutionally organized, but it must not be too much (to evade becoming tyrannical), as well as it must not be too little (to avoid anarchy). Ricoeur finally argues that it is precisely *discussion* that must be organized. Democracy is discussion – quarrelling. This is what Machiavelli had pointed out in the *Discorsi*. Quarrelling is by many political thinkers and governance practitioners perceived as *ineffective*. However, Machiavelli stated that quarrelling is essential for any political constellation that strives for freedom:

614 Ibid., 255.

615 Ibid.

616 Ibid., 257.

617 Ibid., 260.

618 Ibid., 261–62.

I maintain that those who blame the quarrels of the Senate and the people of Rome condemn that which was the very origin of liberty, and that they were probably more impressed by the cries and noise which these disturbances occasioned in the public places, than by the good effect which they produced; and that they do not consider that in every republic there are two parties, that of nobles and that of the people; and all the laws that are favourable to liberty result from the opposition of these parties to each other.⁶¹⁹

In *Oneself as another* Ricoeur takes this point further. He argues that it cannot be decided what the ultimate 'good' of politics is. When talking about 'the aim' of politics he states that:

(...) the plurality of ends of "good" government is perhaps irreducible; in other words, the question of the end of "good" government is perhaps undecidable. The irreducible plurality of the ends of "good" government implies that the historical realization of one set of values can be obtained only at the expense of another set; in short, this implies that one cannot serve all values at once.⁶²⁰

There is always a shortage when it comes to values, because of plurality. He argues with Lefort, to whom we will come to in a moment, that there is a fundamental indeterminacy as the basis of power, law and knowledge. Practical wisdom is needed, he argues, but not in the sense of 'solving' problems and questions, but rather as good council in the form of a debate and discussion on convictions (the alternative to universal values). These convictions, in their turn, can therefore only be thought of in the light of doubt – either in content or in its institutional form (we come back to this in the next chapter).

This must not lead to a Schmittian analysis that political thinking is mere thinking in terms of friends and foes – that can only be one stage of reflection. It is rather to understand the crucial notion of discussion for a political community, up to and over its non-effective and non-efficient outcomes. Hence, this discussion is not primarily important for a *functionalism*, but is rather symbolic: it carries the value of value plurality and indeterminacy. For our context, there is no *ultimate* meaning, aim or purpose of care. At the side of the political, however, it is still necessary to attempt to define the purpose of care understanding from its inception that this 'ideal' can only be made concrete by using power and stumbles on a plurality of ideals. Hence,

619 Machiavelli, *The Prince and the Discourses*, 119.

620 Ricoeur, *Oneself as Another*, 259.

the task of the political difference, between ideal and power, becomes how to sustain discussion.

Following from our preliminary analysis of the Good Samaritan in the previous chapter, added with this essay on the political paradox, we notice that the institution and political action are closely aligned for Ricoeur. The *charitas* of the institution amounts to the Good, the rationality, of the political, but its inception adheres to evil. That is why also checks and balances come forth out of the same *charitas*. *The political* as ideal can only become concrete in the exercise of power – *politics*. The plurality of ideals leads must be explicit due to (institutional forms) of discussion and questioning. There is public love to be located in checks and balances.⁶²¹

	CASTORIADIS	RICOEUR
The political	Explicit power, instances that decide	Rationality, <i>telos</i> , ideal, value pluralism, convictions
Politics	Participation and contestation of institutions	Power, decision, in democracy also discussion and control

Moreover, an ideal or a pursued value must be understood as conviction rather than as something universal. Hence, the mode of the political is discussing (and that is how the political is absorbed in politics), or, to side with Machiavelli: quarrelling. In the scheme above we see how the two authors appear to interpret the political difference, conceptually, exactly the opposite – while the content of the argument is very much the same. It seems to me that it makes more sense follow Ricoeur’s distinction, as this is close to Lefort’s and Marchart’s as well. We come back to Ricoeur a third time in the next chapter, as he has related the idea of ‘just institutions’ to practical wisdom.

10.4 Lefort and the empty seat of power

With Castoriadis we can now understand institutions as social historical political *magnas* – sediments of (imagined) values and symbols – beyond instrumentalism. With Ricoeur, we can now understand how difficult (general or universal) values are in political contexts as they always bring about power. We learned that we need to speak about convictions when talking about values, and that the political difference is foremost a matter

⁶²¹ Buijs & Den Uijl, ‘Publieke Liefde’.

of quarrelling (and how this quarrelling is institutionalized – which must itself also be questioned).⁶²² To get a better understanding of conflict and democracy, we turn to Claude Lefort. We introduce him for different reasons. First of all, his linkage with Ricoeur is of importance, due to their references to Machiavelli – perhaps the first political philosopher who introduced the implicit idea of the political difference.⁶²³ Furthermore, Claude Lefort more explicitly argues for a democratic regime being bound up with the political difference, and what concrete consequences this has for institutions in such a society. Also, the symbolic aspects in political regimes he deems important, which links up with Castoriadis. Lefort, in his turn, spends more attention on the role of conflict and radical democracy that is, following Lefort, inherent to the political difference.

Question of democracy

In his 1981 essay *La question de la démocratie* Lefort argues that in a democracy, the ‘place of power’ is ‘empty’.⁶²⁴ Before democracy, in the *ancient regime*, power was incorporated by the monarch: “The kingdom itself was represented as a body, as a substantial unity, in such a way that the hierarchy of its members, the distinction between ranks and orders appeared.”⁶²⁵ Against this foundational model, democracy sets off. The seat of power is empty, not incorporated. Institutional arrangements, checks and balances, are in place precisely to prevent an executive or administrator from appropriating and incorporating power:

Democracy combines these two apparently contradictory principles: on the one hand, power emanates from the people; on the other, it is the power of nobody. And democracy thrives on this contradiction.⁶²⁶

And:

The important point is that this apparatus prevents governments from appropriating power for their own ends, from incorporating it into themselves. The exercise of power is subject to the procedures of periodical redistributions. It represents the outcome of a controlled contest with permanent rules. This phenomenon implies an institutionalization of conflict.⁶²⁷

622 See also Chapter 8 when I spoke about the paradox of the ‘routinization of deroutinization’.

623 Lefort, *Machiavelli in the Making*.

624 Lefort, *Democracy and Political Theory*, 17; Lefort, *The Political Forms of Modern Society*, 279.

625 Lefort, *Democracy and Political Theory*, 17.

626 Lefort, *The Political Forms of Modern Society*, 279.

627 *Democracy and Political Theory*, 17.

What Lefort calls 'the political', the constitutive principle of a given society, is for democracy the empty seat of power. The instance of power, its emptiness, is symbolic. The organization of a political stage (*politics*), on which conflict is performed, shows that the *disunity* is constitutive for a symbolic *unity* of society (*the political*). This is the paradox of democracy.⁶²⁸ This entails that the power-in-place permanently needs to legitimize itself. The political community, on the other hand, needs to form an identity by means of confronting its internal resistance, diversity of stakes, opinions and beliefs.⁶²⁹ This brings Lefort to discuss the matter of representation of the people, not only in a parliament, but in all kinds of institutional arrangements in which representation is supposed to take place, such as, in my interpretation, the administration and governance of civil society organizations. Lefort sees the diversity of forms of representation in a society as vital for its effectiveness.⁶³⁰ He names labour unions, different associations, organized minorities or social movements. He appears here to be speaking about society, not merely about the state. Therefore, one might think, social institutions, such as civil society, must be included. It is not necessary for Lefort that the representatives are chosen by public vote (supervisory board members are not chosen by public vote), but it needs something similar, which represents a firm base (a ground or foundation). As he states:

I wish to stress that representation cannot be fruitful if it is not established as a ground, connected to a societal space in which information flows, different opinions can be uttered, and different groups and individuals can be sensitive to stakes and desires which are not their own. Representation demands, in short, the institutionalization of a public space in which people among themselves can change their viewpoint (...).⁶³¹

There may be some discussion on this point as to whether the political difference in Lefort, or more specifically the institutionalization of conflict, can or should be applied to spheres outside of the state. In other essays, Lefort argues, comparable to Schmitt and Foucault, that the political sphere of *the state* should be clearly divided from other spheres – such as civil society in order to prevent democracy from turning into totalitarianism and to prevent the state from becoming omnipresent.⁶³² However, he does not discuss how,

628 Ibid., 18–19.

629 Lefort, *Wat is politiek?*, 103; See for an English translation of this essay: Lefort, 'Democracy and Representation'.

630 Ibid., 109.

631 Ibid., my translation. The final phrase of this quote is also pronounced by Arendt, as we will see in the next chapter.

632 *The Political Forms of Modern Society*, 79, 280, 284, 316; See also: Wiley, *Politics and the Concept of the Political*, 188–89.

within a democracy, civil society administration – politics – can be addressed in a similar fashion. For now, it suffices to say that I will incorporate this idea of an institutionalization of conflict in relation to representation – something that seems relevant in civil society.

Politics and expertise

Lefort connects this form of representation with participation. Not solely in the sense of concrete voting or direct democracy, but rather by way of citizens having the feeling that the political game does not pass them over, that they can feel that they need not passively wait on regulations for approval, but rather that they are accounted for in the very political process of debate and decision. This means that citizens can imagine the motivations for certain actions by political actors.⁶³³ This amounts to the saying addressed in the previous chapter that democracy is more than mere politics.⁶³⁴ We have seen in different stories in Chapter 2 how this may create tension with the supervisory board model and the modus operandi of quality management. The fact that supervisory boards appoint themselves, barely with any democratic control, makes this point even stronger. From the perspective of the expert however, it is necessary and obvious that experts appoint experts. And of course, since health care has become such an ambiguous and complex sector, the input of experts on a strategic level can be an important necessity. On the other hand: political matters are precisely political in the sense that they do not require expertise. As Castoriadis argues, following Aristotle: “(...) there can be no experts on political affairs.”⁶³⁵ If supervisory practice is indeed political, a mere professional outlook does not suffice. So, to find some middle ground in this – in our times, many decisions, even political ones, do in fact need expertise due to complexity – I uphold that supervision is first of all a task of *citizenship*, only then a possible expertise or profession.

Politics, for Lefort, comprises the factual political actions and institutions in a given society. As a political philosopher, he appears to have more interest in ‘the political’ than in politics, but only in order to understand factual politics. Hence, we ask: what is the constitutive principle of the caring institution? Democratically, however, there is no other way to define this principle than by means of politics and the empty seat of power. Only politics can decide on what is called ‘the political’. Different than Ricoeur, who argues that the idea of a rational purpose (ideal) is possible to some extent, Lefort places more emphasis in the constitution of society on the element of (temporal) power and conflict.

⁶³³ *Wat is politiek?*, 110.

⁶³⁴ ROB, *Democratie is méér dan politiek alleen*.

⁶³⁵ Castoriadis, *Philosophy, Politics, Autonomy*, 57.

The table is now as follows:

	CASTORIADIS	RICOEUR	LEFORT
The political	Explicit power, instances that decide	Rationality, <i>telos</i> , ideal	Constitutive principle that precedes societal relations
Politics	Participation and contestation of institutions	Power, decision, in democracy also discussion	Concrete political actions and institutions that decide on the political

In this section we have extracted insights from Lefort – but interpreting them in such a way that his ideas on politics can be applied to civil society organizations, not in a totalitarian sense but precisely in a democratic sense. Of course, there is no ultimate ‘law enforcement’ in civil society, so we need to be careful. The first point is that we need to stress the importance of representation (by the executive and supervisory board) and participation (of ordinary citizens). Both need not to be coined in terms of voting, but, more importantly, as a sense of ownership and recognition. This is all the more important now that the purposes of care, education or public housing (the constitutive principle) cannot be grounded in a universal way. It must be grounded, or better, decided upon by those who are in the empty seat of power. But, and this is the problem, the seat of power in civil society organizations, especially in foundations, is often not empty: the seat of power is co-opted. Therefore, the urge and need for legitimization of power is permanent. This can only be found in an institutionalization of conflict – rather than in formulating core values (which precisely undermines legitimization by defining the political without the possibility of questioning it). We would wish to apply Lefort’s insights more closely to ordinary practice. However, it remains difficult in Lefort to imagine a politics that is directly relevant to ordinary practices. Therefore, I finally turn to Oliver Marchart.

10.5 Marchart and the political as potential conflict

Marchart is a less well-known political thinker but has in my view made a great contribution to the theory of the political difference. His main point of reference is the philosophy of Laclau (partly together with Mouffe, Nancy and Badiou), but he also refers to Ricoeur, Lyotard and Lefort.⁶³⁶ I will

⁶³⁶ Marchart, *Das Unmögliche Objekt*; Marchart, *Post-Foundational Theories of Democracy*;

elaborate on his view on the political difference and will show that his conception is especially useful for formulating the political tensions supervisory boards are in. What is of special interest in Marchart, contrary to the thinkers addressed above, is that he tends to think of the political difference not only on the level of state or society, but also on a much smaller social scale, what he calls 'minimal politics', for example in caring relations in institutions: "(...) that what appears unpolitical on the surface may, in fact, have deeply political roots."⁶³⁷ Especially the way he addresses how ordinary ambiguous practices relate to political questions is important for my thesis. This comes close to the care ethical analysis I have done in Chapter 7 when discussing Tronto's moral boundaries and the four modes of power. Moreover, we have seen in Castoriadis, Ricoeur and especially Lefort that conflict plays a vital role in understanding political action. Marchart is elaborating on this matter more precisely, in my opinion, and it comes close to Schmidt's analysis of quality management in terms of contingency and potential conflict as well.

Postfoundational political philosophy

Marchart's point of departure is that we have come into an historical situation in which we have found out that 'the social' is not founded (anymore) upon an ultimate principle or foundation. God does not do, nor Spirit, nor Leviathan and nor does king's blood. On the other hand, this does not imply that the social is without any ground at all, as in (allegedly) Margaret Thatcher's 'no such thing as society'. We do in fact need institutions and the ground it lays in order to live together at all: "'Contingency', as the technical term for the fundamental absence of an ultimate foundation, does not imply that societies are able to make do without any foundations, principles or norms."⁶³⁸ Marchart searches for ways to reinstitute the world whose grounds have become compromised, just as I argued in the previous chapter. The attempt of making solid ground (that is *the political* for Marchart) will appear to be quicksand (*Abgrund* in German) in politics. The solid ground is contested, contingent and temporary: "(...) all social affairs are political in terms of being grounded, to greater or lesser degree, by the political, that is to say: through instances of conflict, power, subordination, oppression, exclusion and decision as much as, of course, resistance, opposition, confrontation, association or consensus-building."⁶³⁹ Building forth on Heidegger's distinction between the ontological (ground) and the ontic (what is actually

Marchart, 'Laclau's Political Ontology'; Marchart, *Post-Foundational Political Thought*. Parts of this paragraph are also formulated in a (yet) unpublished paper that I wrote together with late Frans Vosman.

⁶³⁷ *Thinking Antagonism*, 12.

⁶³⁸ *Ibid.*, 14.

⁶³⁹ *Ibid.*, 12.

grounded), he argues that the ground must necessarily be grounded as quicksand.⁶⁴⁰

The solid ground is always retreating, from its very moment of inception. Still, this ground needs to be actualized in ordinary politics: no society can be built on anarchy, on mere quicksand. No, it needs to be, paradoxically, *solid as quicksand*. Therefore, the actualization of a solid ground is necessarily imperfect and temporal. Referring back to Schmidt: this is not a problem of implementation, but of the very nature of the political difference, the never-ending play between the political and politics; Marchart calls this *antagonism* – after Laclau. If there is to be any ground of the social or the political, it is contingency and conflict, which permanently reverses the search for a ground.⁶⁴¹ We are already familiar with these concepts due to our analysis of quality management, but here they are placed on the political stage. Contingency is not mere arbitrariness or mere uncertainty. Contingent is that “(...) what could have also been not or different.”⁶⁴² Contingency presumes conflict, and vice versa. If things are contingent, they are so because they are contested, and if things are contested, they are so because people think or experience that they could be different. Conflict does not entail disruption, in the sense that the total structure of society must be under conflict. Very often, structures are somehow half-way acceptance and consensus, we have to deal with it, and people need to ‘choose their battles’.⁶⁴³ Fundamentalism, thinking in terms of ultimate grounds, precisely refuses the reflection of contingency and flees to necessity.⁶⁴⁴ This, in its turn, often leads to illusions of harmony and post-conflictual politics, in which only its administrative functionalism is important. This fundamentalism is not only found in the explicit metaphysical accounts of the social, but also in the ‘objective’ social sciences: “Any attempt at anchoring social phenomena in a prior and grounding ‘objectivity’ (an objective agent, social structures, functional imperatives, economic laws, etc.) can be called metaphysical.”⁶⁴⁵ For anti-foundationalism, on the other hand, which we might find in the radical postmodern thinkers or in the sociology of social constructionism – which appears to be merely the opposite of the objective social sciences – the idea of solid ground is not available, there is only politics: quicksand. Marchart, referring to Ricoeur’s discussed essay on the political paradox above, wants

640 Ibid., 15. Hence, there are ontologies of all things political (such as institutions, functions, et cetera): what is the ground of a particular health care institution? But there are also ontologies of the political: the constitution of the very social. The first he would then call ‘ontic’ and the second ‘ontological’, after Heidegger.

641 Marchart, *Das Unmögliche Objekt*, 31.

642 *Thinking Antagonism*, 30.

643 Ibid., 33.

644 Ibid., 42.

645 Ibid., 87.

to find a *post*-foundationalism: the moment of (objective) grounding is both impossible and yet necessary.⁶⁴⁶

Potential conflict

Recalling Ricoeur's interpretation of institutions in the previous chapter, the way ordinary practices relate to institutions need not always be conflictual. Marchart, contrary to Mouffe and Lefort, resists the substantiation of antagonism. Indeed, he proposes to distinguish between the 'associative political' (attributed to Hannah Arendt, the power-in-common) and the 'dissociative political', which in his view characterizes Mouffe's substantiation of the political.⁶⁴⁷ For Marchart, *the political* is about the meeting of citizens, the *potential* association and clash between them, whereas *politics* is about governing, or rather, it is about directing developments in society, when power to direct has in some way or another already been established – institutionalized. The political is about the never-ending quest to live together. It is about "the initial grounding of the social – a moment that as such (...) cannot be reached" but nevertheless necessarily has to be sought.⁶⁴⁸ This precisely, with regard to democracy, is the never-ending source of contestation: any form of ultimate grounding of a well-ordered society or ultimate value is counteracted. The political is not necessarily conflictual or violent, but there is always this possibility – a zone of friction: there may be association, bonding, as well as dissociation, conflict.⁶⁴⁹ Hence, building forth on Chapter 7 when we spoke about care ethics and politics: the relational aspect of care should be understood in terms of friction – there is no possibility to ontologically ground care (once and for all) in relations. This friction in politics must be understood in a bodily sense: the coming together of moving bodies in ordinary practices.⁶⁵⁰

Minimal politics

In order to understand how this interpretation of the political difference is relevant outside the sphere of the state, we turn to Marchart's idea of *minimal politics*. Marchart seeks to find out when politics is born and where to locate it. He argues that politics is always a moment of protestation, a moment in which a 'request' turns into a 'demand'. The social sphere, different from politics, is the field of sedimented, unquestioned rituals and institutions. The social sphere:

646 *Das Unmögliche Objekt*, 229, 428; *Post-Foundational Political Thought*, 158.

647 *Ibid.*, 38–43.

648 Marchart, 'Democracy and Minimal Politics: The Political Difference and Its Consequences', 972.

649 *Das Unmögliche Objekt*, 259.

650 Coole, 'Politics and the Political'.

Is nothing but the political in the sleeping mode, ready to be reactivated at any moment. Those social practices that are usually considered ‘politics’, because they are ritualised, rule-guided and institutionalised in the shape of the political system, belong to the register of the social.⁶⁵¹

He calls practices of governance social, although in the context of general requests, for example from different stakeholders, as long as it is not reactivated by the political – when its practices are suddenly experienced as contingent and conflictual.⁶⁵² Political action, then, starts by this protest or demand. Hence, whether something becomes political has not so much to do with the entrance of the state in the social sphere: the social sphere may become political from the inside out. Political action must account for both politics (in the Machiavellian realistic sense of the term, that it is based upon historical conditions, institutional constraints and the immanent role of power) and the political (in the sense that precisely the ‘aim’ of the social practice is contested) – it is never merely about power.

Political action therefore means: “(...) calculation with that which cannot be calculated – the groundless – but still never without premise, and always under the conditions of a concrete, as political scientists would put it, ‘opportunity structure’, i.e., in the presence of partial grounds.”⁶⁵³ It resembles Ricoeur’s idea of *conviction* but is for Marchart rooted in ordinary lived experience rather than in an abstract ideal. Hence, Marchart questions, when can we still speak about political action, before it ceases to be political?⁶⁵⁴ What is the *minima politica*? He establishes a number of conditions which need to be met in order for something to be political.

A political project, as *minima politica*, is directed towards the expansion of its own project, in the hegemonic sense of the word. It needs to desire *becoming major*, wants to establish a collective will, it tends towards maximizing the number of participants.⁶⁵⁵ Since we have to account for ‘realistic politics’, political action always involves strategy. It is never merely an ideal, simply because the ideal itself need to be made concrete and actual in politics, in which it competes with other political projects. This also requires that it has some long-term orientation, not just some isolated everyday tactic.⁶⁵⁶

651 Marchart, *Thinking Antagonism*, 133.

652 Ibid., 129.

653 Ibid., 140.

654 Ibid., 130.

655 Ibid., 135–36.

656 Ibid., 141.

To make this possible, political action also needs a form of minimal *organization*. There must be some formational or institutional agent that carries directed collective action.⁶⁵⁷ This also implies that politics is never an individual project. Finally, minimal politics is met when *potential conflict* is accounted for. That is, any political project that aims to become major is eventually bound to fail, as it will (and must) never succeed in gaining or sustaining power over the whole.⁶⁵⁸ That is what we have learned from Machiavelli and is the very idea of democracy. This implies there is at the same time an *openness* in the political, as well as a *lack*, an incompleteness, an imperfection.

Hence, if we indeed argue that the world we live in is a political world, we are required to engage in the practice of politics. Not in the sense of ‘party politics’ in the parliament, but in the sense of ‘minimal politics’. We must want to awake the social (a similar argument to that Hannah Arendt made in *The Human Condition*). This opens up the question of contingency: “What is to be done?”⁶⁵⁹

Now let us go to our final comment on Marchart, regarding the relation of minimal politics, and the political nature of civil society organizations in general and caring institutions in particular. We can by now state in more depth, what we have argued before, that these organizations are not mere producers of services, but rather are sites of political action and democracy, that is, not on the level of state (in the sense of voting or becoming a member of a political party), but on the level of civil participation or contestation. The way care is ordered is not something that can be grounded in some ultimate ideal but may and must always remain open for potential contestation. From a political point of view, the question is not so much how to most effectively manage the organization, but rather how to sustain the political difference within the institution: how contestation of the political is made possible, how conflict is possible, and how decisions are made and communicated – and this is the political interpretation of Schmidt’s analyses in Chapter 8. If we indeed assume that an institution thrives on political difference, then it is the task of someone who supports the particular institution, the supervisory board, to uphold the tension of the political difference. Its actions and reasonings must therefore be beyond foundationalism (fixing what good care is, fixing what good governance is, dogmatism, objectivism) and anti-foundationalism (the cynicism of mere power). If there is to be expertise in supervisory practice, it is expertise in how formulate temporal grounds and

657 *Ibid.*, 142.

658 *Ibid.*, 150.

659 *Ibid.*, 182. In the next chapter I will discuss Sophocles’s *Antigone* as interpreted by Ricoeur in the light of practical wisdom. The central political question in *Antigone* is: ‘how should I live?’

how to institutionalize the possibility and potentiality of association and conflict over this ground.

If we complete the scheme, it would be as follows:

	CASTORIADIS	RICOEUR	LEFORT	MARCHART
The political	Explicit power, instances that decide	Rationality, <i>telos</i> , ideal	Constitutive principle that precedes societal relations	Attempt of grounding the social, potential association and clash of citizens.
Politics	Participation and contestation of institutions	Power, decision, in democracy also discussion	Concrete political actions and institutions	Governing, directing, established power

What we have gained by adding Marchart to Castoriadis, Ricoeur and Lefort is that the political is a potential association – and therefore potential dissociation – with the way the social, or care, is ordered in some way (the political is more ordinary than in Ricoeur or Castoriadis). For example, it does matter whether mentally disabled people are separated from society (for example into the forests) or whether they live in neighbourhoods; it does matter whether elderly people are treated at home or in a nursing home. Care cannot be grounded once and for all (there are no universal values of good care), while it is still important to attempt this grounding (it is not mere powerplay as in Lefort). This leads to a modest political theory, with few pretensions to produce ethical stances. There is no given universal ‘good’ such as justice, equality or ‘freedom for all’.⁶⁶⁰

A modest political theory, a modest approach to values of care and organization, needs to, again and again, relate to friction within ordinary practices – how concrete care may sometimes function successfully within the established order, how it sometimes is performed on the fringes of it, and how it sometimes challenged. The political difference of care and its governing institutions, in this sense, shows that care is thoroughly ambiguous and not primarily a matter of (normative) ‘quality improvement’ but about (possible) questioning established orders and ways of doing. It is about the, rather simple, acknowledgement that running an organization in a specific way, and the supervision thereof, influences the lives of ordinary people. Caring may be and actually proves to be humanizing, but ambiguity and friction are always there.

⁶⁶⁰ As seems to be argued by Tronto, *Caring Democracy*, 23.

10.6 Main tension: the political difference

From these abstract political philosophical reflections, we now turn back to the practice of governance and oversight. Based upon the previous reflections, I can now describe the main tensions through which the supervisory board in particular, or governance and management in general, needs to navigate. The political difference requires the supervisory board to oscillate between the difference between the political and politics – the ordinary experience of care and abstract decision-making. This tension lies at the heart of the supervisory practice and precedes quality management. After the main tension, I describe two ‘sub-tensions’ that are inherent to this main tension. The first is ‘stable fragility’: how to deal with the need for permanence and change at the same time (Castoriadis). The second is ‘democratic deficit’: how to deal with the need for decision-making and switching perspectives (contingency and conflict) at the same time (Ricoeur, Lefort). Let me start with the first mentioned, ‘the political difference’, or: the impossible necessity of grounding care. The requirement of supervision is to, again and again, relate to ordinary practices of caring in a context of governing and being governed. The political difference is the recurring attempt to keep one’s feet on the ground. Supervision is, in this respect, not a matter of collecting information followed by formulating a judgment, rather, supervision somehow needs to contribute to the question how care in this organization can contribute to a decent living together and question on the other hand, the orders and positions it produces. In short, institutional care is about keeping open to, and keep relating to, the ‘firm quicksand’ of the institution.

The political task

I argue that, broadly speaking, politics firstly has to do with governing and being governed, thus with some form of representation, legitimation and decision-making.⁶⁶¹ Whether one sees representation – a deeply problematic issue – as horizontal (a basic trait of democracy: equality in sovereignty) or vertical (potentially: representational, oligarchic, authoritarian or monarchical) is a subsequent question. Secondly, politics is about wicked problems, tough issues like the ongoing reproduction of poverty, irrecoverable loss of biodiversity, or, closer to my object of study: the persistence of fragility in and through caring and organizational practices and of caregivers themselves.⁶⁶² These issues make some kind of readjustments necessary.⁶⁶³ However, these adjustments may not necessarily be just, fair, deeply democratic or dignified. Politics is about dealing with tough issues that

661 Wiley, *Politics and the Concept of the Political*, 222.

662 Cf. Vosman, *Overleven als levensvorm*.

663 Daviter, ‘Policy Analysis in the Face of Complexity: What Kind of Knowledge to Tackle Wicked Problems?’

determine the possibility to live and to live together, without however having a clear ‘problem-solution’ structure. Politics – governance and care – makes repugnant issues liveable, endurable at best.

This is where politics touches upon the political. Politics is about all kinds of issue-based ordering, through governing and being governed. The notion of order is, of course, a classical concept in political theory, and says something about what politics is about, but it is topical as well. Isabell Lorey has, I believe rightly, reintroduced the idea of order, position and positioning into political theory by defining ‘precarity’ as a matter of ‘social positionings of insecurity’, thus putting positioning and insecurity at the heart of *politics*.⁶⁶⁴ Any inquiry into *the political* – as I wanted to make this plausible – will deal *also* with order and positions: of patients, of relatives, of citizens or caregivers. Dealing with the political, in this sense, is done best by looking bottom-up, envisaging actual relations, and looking at the way people enter or leave relations in an actual, concrete setting. The political has a never-ending beginning: positioning, distancing, drawing closer, paying attention to others, ignoring them. Politics is about ordering relations, to be observed in the everyday activity of people that are embedded in social historical institutions.

Enabling and restraining power as the main tension

What can we make of this? In our elaboration of institutions, we have seen that *rationalization* (by means of professionalization, functionalism) is one of the major sources of the ‘problems’ in late modernity. Quality management is rationalization *par excellence*, as it tends to obscure contingency and potential conflict and sees citizens primarily as clients and its services as products. From different perspectives, I have tried to show how the governance of civil society organization is in need to revalue its political nature.

The tension of the political difference lies at the heart of the supervisory practice. In the previous chapter, I argued that concrete caring practices may relate to the institution in three ways: concrete care may effortlessly proceed through and thanks to the institution; concrete care may proceed successfully on the fringes of the institution – albeit despite the institution; and concrete care may not proceed through an institution – concrete care fails due to the institution. In the first case, politics as association is possible. In the second case, association is fragile and conflict possible. In the third case, there is explicit critique on the institution. The task of the supervisory board is to check whether this association *and* critique and conflict is actively made

⁶⁶⁴ Lorey, *State of Insecurity*, 12.

possible. This requires proper ways of *contestation* and *participation* of citizens (in general, or as patients or professionals) – also, or precisely, if these citizens are not positioned in such a way that their voices will be heard. Their contestation must somehow be imagined.

The main tension of the supervisory practice is in this sense how to simultaneously enable and restrain power. Enabling means: finding a purpose or a conviction of what good care or the organization thereof is; making responsibility, representation and accountability possible. Restraining means: understanding that every such foundation and order may turn out differently in practice and that this requires the institutional possibility of participation, discussion and conflict. The tension is, in short, how to resist the temptation of ultimately defining what good care is and how to evaluate this – while still a meaningful evaluation is necessary. Navigating this tension will require a practical wisdom. We will discuss this in the next and final chapter before we turn to the conclusion.

10.7 Sub-tension 1: fragile stability

First, I will go into the two sub-tensions that arise out of this main tension. The first is related to our topics on quality management, and the ‘undecidable’ questions that need to be answered. From the institutional perspective, it may not always be good to change, but in practice and discourse, there is a strong imperative for change.

This is also the case on the level of the board and management, as we saw in Chapter 2, 3 and 4. Also Schmidt, discussed in Chapter 8, argued that contemporary quality management is related to this permanent change, or *improvement*. He comprehensively demonstrated that not every change is an improvement, and that change needs to be handled with care. From the viewpoint of the institution this is of even bigger importance: how can institutional permanence (of values, stability, predictability) be balanced out against the intrusive imperative for change? I maintain that there are *three layers* to this imperative for change, which are of special relevance to supervisory board.

Biographical layer

The concrete task of the supervisory board, within the context of the political difference in the institution of care, is to appoint an executive board. We have seen in Chapter 2 that this can go with difficulty. We know that whenever a new executive board member is installed, he or she wants to add a ‘biographical’ layer, they want to add something of his or her own to the

organization. Merely holding the fortress isn't quite good enough; there is this tendency to expand or to improve, from whatever preferred perspective. Some may have high beliefs in some or other organizational structure, others in economies of scale, networking or leadership. Although in some cases such a breath of fresh air may have some positive effects for stirring up something dormant, this is indeed contingent, it may work the other way around, which may in its turn lead to another new appointment or reorganization. Hence, the appointment of a new executive board may have some big impact on the organization due to the biographical urge for change, to leave a marker. For a supervisory board it is important to take into account this layer whenever a new board is installed.

Euphoric layer

The second layer is what I have described in Chapter 8 as the euphoria of improvement: change is always better than staying the same or doing nothing. It is easy to invent an ideal. When it comes to quality management and change in health care, there is an imperative for optimism, that we can have better quality by just having better (self-)management, controls, technology, integration, leadership or implementation strategies. The promises are that of 'patient centeredness' combined with minimal or reduced costs. Of course, very often, we are disappointed, and the quality of implementation is often scapegoated. Although there is not necessarily a reason to be pessimistic, or whatever *emotional* state, there is a reason to hold back on change programs that are beckoning.⁶⁶⁵ Very easily, the swampiness and political nature of ordinary care is overlooked and marginalized.

Ontological layer

This leads us to a third more fundamental layer, namely the modernistic belief that we can control the world by means of technical rationality, even though we may speak of 'open systems'. From the perspective of the political difference, this is the denial of politics, that every ideal stumbles over ordinary practice – contingency and conflict. The promise and expectation of excellence and (moral) perfection, and the constant striving for this is the imperative of change and reorganization. We have seen however, both in this chapter as well as in Chapter 8 and 9, that every political institution is precisely marked by imperfection, and that this is not something to overcome but something to be upheld, as in this imperfection democracy and participation becomes possible in the first place. This 'fragility of goodness', as referred to by Nussbaum, induces us to think that sometimes, and perhaps

⁶⁶⁵ Cf. Homan, *De veranderende gemeente*. He made a similar argument regarding change management practices in local governments in the Netherlands.

more often than not, 'it doesn't get any better than this'.⁶⁶⁶ Or, from another angle: to acknowledge and see how good it already is; what skilfulness and compassion there is already in place. We can indeed look at the story of 'the professor' from both viewpoints. The blind spot of the ontology of perfection, in terms of epistemology (instrumental rationality), ethics (moral perfection, from leaders for example) and politics (everyone facing the same direction) is the spot we need to rediscover if we are to place the political difference at the heart of civil society organizations.

Politicizing the compelling logic of adaptation

Of course, every organization needs to relate to its environment, and it is important to adapt or even to anticipate its changes. We have argued this in our elaboration on institutional theory in Chapter 6, as well as the system theoretical perspective of Schmidt in Chapter 8. I do not at all argue that change or adaptation is bad. What I contest is that the choices that are made in the organizations are depoliticized, that is, when it is said that there are no alternatives, due to environmental change. That if there is no adaptation, the organization will either starve or become irrelevant. We have learned that there is always an alternative, and that this needs to be politicized. Also, we have learned that every reorganization changes the organization, even if the reorganization is seen to have failed. Even if some things appear as inevitable from the perspective of the individual organization (for example in Dutch elderly care: that elder people need to live at home as long as possible, pressured by government policy, which means that the traditional nursing homes are being dismantled), it is still a task of caring institutions not to give up, not to become neglectful of or waver in their responsibility. There is always the task of permanence, of institutionalization (of the change). Hence, there is a permanent tension between change and permanence, fragility and stability, acceleration and deceleration at the core of the supervisory task.

Practically, this becomes visible in the relation with the executive board. For example: when should one decide to suspend or dismiss the executive board? The swampiness and the uncertainty of this question are often experienced within this tension.⁶⁶⁷ Upholding this tension, being aware of it, on the one hand, preserves a board from being stubborn or inert, not seeing or wanting to see the changing society or environment. On the other hand, it preserves a board from misguided euphoria or complacency about yet another fundamental change. But, most importantly, keeping up this tension forces a supervisory board, and the decisions taken, to become political, that is, addressing this tension as tension implies an awareness for contingency and

⁶⁶⁶ Nussbaum, *The Fragility of Goodness*.

⁶⁶⁷ NVTZ, *Mandaat en moeras*.

conflict. Nothing is indeed good without its opposite, and every decision that implies change is therefore rooted in the political difference rather than in quality improvement.

10.8 Sub-tension 2: democratic deficit

As we have noted, the tension of the political difference urges for a democratization, a participation, in the sense of *civil* democracy. However, democratization is not a boundless possibility as it is not the same as the representative democracy of the state (the division and polarisation between Parliament and government for example, is very different from the relation between the executive and supervisory board, which is perceived to be more of an alliance or co-leadership). When push comes to shove, decisions need to be taken in the light of uncertainty (undecidability, as Derrida has named it). This means that one cannot forever collect or account for perspectives or stakes that are somehow conflictual within decision-making processes. Administratively, one cannot linger in conflicts: at some point, a (partial) integration and settlement is needed.⁶⁶⁸ There is therefore always necessarily a democratic deficit: at some point, and in some cases sooner than later, those in charge must take decisions, need to order and position care, even if the legitimacy of the decision is still unclear or even absent. Even voting for all decisions (something that happens in the dystopic novel *The Circle* by Dave Eggers) will not necessarily make things more democratic. How, for example are minorities properly protected or taken into account? For the supervisory board, as discussed in Chapter 4, this question of a democratic deficit is often related to the question of legitimacy. This, in its turn, is related to accountability, transparency and the relative involvement of the supervisory board with daily (management) practices. Legitimacy is also related, as we have seen, to sound dialogue, whether there is openness, a moral compass or a sense of social responsibility. This is, I believe, of crucial importance. Still, one might critically ask whether the supervisory board's mandate is not far too big. It is very difficult, sometimes nearly impossible, to counteract decisions of the supervisory board. To some extent, this might be a strength: in a conflict, the executive board cannot easily encourage, for example, a codetermination council to revolt (as happened in on 'a cornered supervisory board' in Chapter 2). It might also be a weakness, especially if the supervisory work is understood primarily as a professional and expert task rather than a political task. In such cases, there may be little left of the 'civic' in civil society organizations. In the next chapter, I will look at this point more closely when discussing Hannah Arendt. For now, it suffices to say that the tension

⁶⁶⁸ Cf. Follett, *Dynamic Administration*.

of the political difference brings about another tension for the necessary democratic deficit.

10.9 Towards a practical wisdom

I have come a long way to arrive here. From Chapter 6 onwards, I have been analysing and criticizing the *modus operandi* of supervisory boards: the focus on professionalization and expertise on the one hand, and quality and risk management on the other – including its value-oriented variant. I showed, using care ethics and by analysing the paradoxes of quality management, that care is ambiguous, not a technical matter nor to be captured in general values, but rather a political concern. While care is ambiguous, and the complexity of it needs to be unfolded, there is still the need to ‘reduce’ care into language or understanding that make sense from a relative supervisory distance. Also, I have shown how an instrumental focus of the supervisory board may lead to neglect of its institutional task. I have argued that its institutional task is a form of care (*charitas*) and comprises a sheltering of care, providing a durability and stability, while there is also the need for justifying, amending and criticizing the organizational direction. Subsequently, in this chapter, I have related the institutional care to political philosophy and discussed which political considerations are of importance for an understanding of politics in civil society. I have formulated three tensions that form the very basis of the supervisory practice (that is, one tension out of which two others arise): the political difference, stable fragility and the necessary democratic deficit. But how to navigate these tensions? I started this thesis with the ‘simple’ question: ‘what is wise supervision?’ I therefore need one more step before I come to a conclusion: what is practical wisdom in the light of the political and institutional reflections above, what are the perspectives of action, and what does this imply for a practical wise supervision?

11. Practical wisdom in governance

11.1 Introduction: turning to practical wisdom

In the previous chapter I have formulated the central tension(s) for supervisory boards in caring institutions. This tension, the political difference, urges the supervisory board to navigate through on the one hand the need to ground the purpose of the organization in everyday orders and positions of caregivers and care receivers, while on the other hand this 'grounding' will appear to be quicksand: the grounds need to be postponed, made provisional for the time being due to potential conflict and contingency. Supervisory practice is an unstable and oscillating practice. From this I formulated two other tensions: between the need for both stability and change and between the need for participation and decision-making. The main question of this thesis is, however, what is practically wise supervision? In other words: how to navigate through these tensions? What we will see in this chapter is that many themes that have been discussed and said in the previous chapters, are here articulated again, albeit in the philosophical tradition of practical wisdom.

This 'how' is what I will explore in this chapter as I elaborate on the concept of practical wisdom in relation to the supervisory practice. However, I will immediately need to stress that practical wisdom cannot serve as a detour to certainty and firm grounds for the supervisory practice. As will become apparent, practical wisdom will remain, at least to some extent, itself a concept that resists a logic of implementation or application. There is no toolbox or golden bullet. This is also what might be expected in the light of the reflections in the previous chapters. The revived interest in practical wisdom in recent decades, though promising, also has its pitfalls. It is not, above all, a simple remedy or solution for the problem of rationalization. We cannot get out of Weber's iron cage simply by clinging onto practical wisdom:

A phronesis that serves to re-enchant a disenchanting world of demoralized, desecrated and devalued professionalism is in danger of becoming another version of techné or a set of moral principles. Therefore, it cannot guarantee that the good will be done, for anyone, let alone for everyone.

The hope of recovering *phronesis* from the deformity of practical reasoning caused by scientism, technocratic rationality and means–ends instrumentalism is problematic and may itself be unwise.⁶⁶⁹

Hence, practical wisdom has itself the danger of falling into moralism and simplification if it does not address the paradoxes of ethics in general and organizational ethics in particular that are encountered. Still, practical wisdom can help to understand what it means to navigate the central tensions of governance of civil society organizations. The concept of practical wisdom provides, I believe, precisely the conceptual framework to help *unfold* complexity.

A preliminary definition of practical wisdom is, in the words of Aristotle:

Now it is thought to be a mark of a man of practical wisdom to be able to deliberate well about what is good and expedient for himself, not in some particular respect, e.g., about what sorts of thing conduce to health or to strength, but about what sorts of thing conduce to the good life in general.⁶⁷⁰

Practical wisdom has had many different interpretations ever since Aristotle's writings entered Europe in the scholastic era (12th and 13th century A.C.). I will not describe all the different interpretations, nor do I intend to give the 'correct' interpretation of it. Instead, I will focus on interpretations of practical wisdom that suit my purpose in relating practical wisdom to the tensions of the supervisory practice. For this, I will turn to four major philosophers of the 20th century who have interpreted practical wisdom in the tradition of hermeneutic-phenomenology: Hannah Arendt, Hans-Georg Gadamer, Paul Ricoeur and Maurice Merleau-Ponty. My aim is not so much to exegetically explain their respective philosophical systems (if that is a proper designation for these complex thinkers) nor their respective shortcomings or controversial points, but rather to heuristically pick up some concepts and ideas they provide for understanding practical wisdom, all from different perspectives. Indeed, they become pawns in my scheme while still doing justice, I hope, to their perspectives. I propose to regard these philosophers as 'critical friends' of supervisory boards. In order to avoid falling into the trap of 'simplicity', as described above, I will describe the features of the different philosophers in a philosophical way. At the end of each discussed philosopher, I will translate what has been adduced in a more

669 Küpers and Pauleen, *A Handbook of Practical Wisdom*, 4, referring to: Kemmis, 'Phronēsis, Experience, and the Primacy of Praxis'.

670 Aristotle, *The Nicomachean Ethics*, 106, 1140a25.

concrete way to supervisory practice. At the end of the chapter, I will collect together the different ideas and make a statement about what, considering all this, can be regarded as practically wise supervision in the light of navigating the tensions described in the previous chapter as well as arguing that practically wise supervision needs an anti-reductionist understanding of the practice. This final paragraph will lay out my theoretical contribution to the idea of practically wise supervision.

Manifestations of practical wisdom

One of the questions that guide us through this chapter is where exactly practical wisdom can be located. For Aristotle, as the definition above shows, practical wisdom is an individual trait of character. However, it seems to me that, and this will become apparent when we discuss the different philosophers, practical wisdom can and must be located not only in the individual but also as manifestations in practices and institutional arrangements. I have chosen Arendt, Gadamer, Ricoeur and Merleau-Ponty as they put emphasis on different aspects of these three manifestations of practical wisdom – in the individual, in practices and in institutional arrangements. The wisdom is in how to bring them together, as especially institutional arrangements may tend to alienate from concrete contexts. The institutional task is precisely to keep institutional arrangements close to concrete practices. The concepts or ideas I introduce are chosen because they are relevant to supervisory practice and may also be recognizable as ideas for practitioners in governance (such as common sense, participation or trust). The other reason why I chose these philosophers is that they explicitly interpret practical wisdom as a political ability, intertwined with moral outlooks (except for Gadamer, who is primarily interested in the moral and epistemological aspect rather than the political).

Arendt gives clues for all three manifestations when she discusses the ability of judgment, common sense, action in concert and the idea of civic participation. Gadamer, whose outlook is more epistemological, focuses on the individual (moral judgment, interpretation) as well as on practices (immersion, play and dialogue) and institutions (by means of the idea of tradition). Ricoeur discusses the idea of trust and doubt on the individual level and discusses practices and institutions with the concepts of ‘just institutions’ and the relation between aims (purposes) and norms. Merleau-Ponty highlights the importance of bodily experience and engagement in understanding practices. Institutional practices need to be ‘responsive’. He suggests that the organizational task is to ‘read between the lines’, or in his words, to think ‘inter-practices’. This leads to the following table of concepts related to practically wise supervision:

Table: Manifestations and concepts of practically wise supervision

	ARENDT	GADAMER	RICOEUR	MERLEAU-PONTY
Individual	Judgment	Immersed judgment, interpretation, moral knowledge	Trust/doubt	Bodily experience
Practice	Common sense, action in concert	Dialogue, play	Aims and norms	Ambiguity, Inter-practice
Institutional	Association, participation	Traditions	Just institutions, discussion	Responsiveness

I will discuss each concept as I discuss the different philosophers. This table is to some extent also a heuristic: in the different philosophical approaches it is not always easy to distinguish and unravel individual, practice and institutional manifestations – they are of course also interrelated. Let this be my reduction of complexity. This interrelatedness will however show up to be the core of the argument: practical wise supervision must be located in all three of these manifestations and should not be reduced to any one of them.

For my interpretations of these philosophers, I have mainly used some of their original texts, and sometimes turn to guides who have interpreted these thinkers on their account. Especially when discussing Merleau-Ponty, I primarily build on the interpretations made by Wendelin Küpers, a contemporary organizational thinker who has been doing a lot of work in relating Merleau-Ponty to organizational practices.

Before I will respectively discuss the ideas mentioned above in Arendt, Gadamer, Ricoeur and Merleau-Ponty and how they can be a critical friend with practical advice to a supervisory board, I will first work out the definition given above of practical wisdom by introducing Aristotle's original idea of the concept. I will briefly describe his outlook and will then formulate a number of problems with his conception of practical wisdom in late modernity and regarding some theoretical perspectives I have introduced in the previous chapters.

11.2 Aristotle on *phronesis*

The concept of *phronesis* is mainly attributed to the Greek philosopher Aristotle as a proper form of knowledge *and* virtue, but was already mentioned by Plato, the teacher of Aristotle, as a general notation of wisdom or good judgment.⁶⁷¹ Although more than 2300 years old, this idea is still of the greatest relevance, especially today and in health care or education, where the focus on scientific (evidence-based) knowledge appears to be hegemonic (despite, or perhaps thanks to, the omnipresent talks on values and professional autonomy). Less tangible or non-measurable forms of knowledge are deemed to be all too vague – there is indeed no evidence for practical wisdom. The revival of *phronesis* in our time probably has to do with a general feeling that the rationalistic approach may sometimes be itself irrational and that another form of knowledge requires our attention.⁶⁷² Regarding *phronesis*, there are different translations and concepts that are associated with the term: practical wisdom, practical reason, (good) judgment, sagacity (between wisdom and cleverness), discerning taste or prudence (the Latin version). Aristotle himself, for example, appears to use the term ‘practical intellect’ (*nous praktikos*) in *On the Soul*, for apparently the same concept.⁶⁷³

Aristotelian *phronesis*

According to Aristotle, especially in the *Nicomachean Ethics*, there are three forms of knowing i.e., intellectual virtues: scientific knowledge (*episteme*), art (*techne*) and practical wisdom (*phronesis*). Scientific knowledge deals with things “eternal” and “necessary”.⁶⁷⁴ It is about the universal knowledge we can acquire by studying the world. Art (the word technique is derived from the Greek *techne*) is about things that are made and done (*poiesis*).⁶⁷⁵ Often this is associated with the classical idea of craft, involving skilled knowledge of how-to-do things that create a certain end. Making is not the same as action, as making is instrumental and action is an end in itself. Art is in principle based on an *eidos*, a kind of a blueprint to make things. A classic example is from making musical instruments: the purpose of making a violin lies in the finished violin, not in the activity of making itself. In its turn, the purpose of playing the violin lies in entertaining the audience. In art, the end and how to get there is more or less fixed.

671 Plato, *Complete Works*, 129, 1350. In ‘Cratylus’, 411; also in ‘Laws’, 659a (translated as ‘discerning taste’ or ‘good judgment’).

672 C.f. Schwartz and Sharpe, *Practical Wisdom*; Kinsella and Pitman, ‘Phronesis as Professional Knowledge: Practical Wisdom in the Professions’; Bontemps-Hommen, Baart, and Vosman, ‘Practical Wisdom in Complex Medical Practices: A Critical Proposal’.

673 Aristotle, *De Anima*, 94, III.10, 10–30.

674 *The Nicomachean Ethics*, 104, 1139b15–35.

675 *Ibid.*, 105, 1140a1–20.

Practical wisdom cannot be scientific knowledge, because practical wisdom does not deal with universals, but rather with particulars, in concrete situations that are never really the same: “Therefore, since scientific knowledge involves demonstration, but there is no demonstration of things whose first principles are variable (for all such things might actually be otherwise)”⁶⁷⁶ Practical wisdom precisely does not deliberate on *necessities* but on *contingency*. Practical wisdom can also not be an art, as practical wisdom is oriented towards good action or the good life, happiness (*Eudaimonia*), and good action is an end in itself, whereas art – making – has an end other than itself.⁶⁷⁷ *Phronesis* is linked to the activity called praxis, action, and is therefore considered by Aristotle as a virtue. He distinguishes between moral virtues and intellectual virtues. The moral virtues can be achieved by constantly deliberating about and practicing and repeating ‘an intermediate’ of certain actions.⁶⁷⁸ For example, the intermediate of courage cannot be described exactly, but is somewhere in between cowardice and recklessness. This intermediate is even so not something fixed but needs to be re-established in every new situation.⁶⁷⁹ The virtue is a state of character rather than a passion or a capacity.⁶⁸⁰ The moral virtues depend on the intellectual virtue of *phronesis* as this is precisely about knowing what the right thing is to do in general and in concrete situations.⁶⁸¹

This *praxis* is furthermore not so much present in certain particular actions but is rather the very way people live together in a political fashion, for Aristotle, how free men live together for the sake of the common good in the city state, the *Polis*.⁶⁸² Humans are, different from animals, political creatures.⁶⁸³ Hence, the end or purpose (*telos*) of praxis lies within praxis itself and cannot be found outside of it. The *Polis* is contrasted with the *Oikos*, the household management (the root of the word economic) – the place of hierarchy, slaves, patriarchy, reproduction and perpetuation of biological life (labour in Arendt). Importantly, *Phronesis* is not about the application of knowledge to concrete situations, nor merely the possession of some ethical ideas that have to be planted on concrete situations, it is rather a kind of resourcefulness and discernment to know or sense what the right thing is to do in general and in a concrete situation, without knowing in advance what the right thing is. It is about doing what a situation demands but still refers to something good in general. Here it links up with the idea of virtue, that one needs to master (*arete*) by habituation and deliberation. In sum, 1)

676 Ibid., 106, 1140a30-35.

677 Ibid., 1140b1-10.

678 Ibid., 29, 1106a-1106b.

679 Ibid., 24, 1103b25-1104a35.

680 Ibid., 1105b20-1106a10.

681 Ibid., 117, 1144b30.

682 See also Aristotle, *Politics*, 92, 1277a12.

683 *The Nicomachean Ethics*, 10, 1097b.

phronesis involves situational judgment, 2) is a virtue, 3) is embedded in social practices which are an end in themselves (although these provisional ends are themselves embedded in the end of *Eudaimonia*) and require excellence or mastery and 4) involves interactions between what is considered general and particular.⁶⁸⁴

Why we need to go beyond Aristotle

The reason why we cannot just copy Aristotle's conception of practical wisdom to our thesis for practically wise supervision is many-sided. I will shortly discuss the shortages of Aristotle's approach in the light of our previous reflections. These objections, however, have nothing do with the lucidity and brilliance of Aristotle. It is just the case that late modernity and contemporary society are so much different from, perhaps even incommensurable with, Aristotle's political context. For example, the ambiguity we described in Chapter 6, requires us to think about social institutions and organizations beyond a strict opposition between *praxis* (political action) and *poiesis* (instrumental making) and requires us to give an account of the interconnectedness of social and political practices.⁶⁸⁵ Also, many elements of Aristotle's philosophy have resonated throughout the history of philosophy, leading of course to concepts starting to make their own way.⁶⁸⁶

Problem of telos

The first problem we encounter is Aristotle's teleology: everything (nature, including humans) strives towards the realization of its purpose, its telos. This teleology is transposed to activities that, one way or another, contribute to this purpose of happiness. Through the practice of virtues, within the place that is given to him, man can find his essence. Hence, the purpose of a certain social endeavor (such as a political organization) can be defined, and indeed, grounded. This is problematic, as I have argued that although we do need attempts to find firm ground for social practices, we need as well to postpone claims of ultimate essences. This has, as I have argued, mainly to do with the experience of pluralism: not only in the sense that in late modernity moral essences are distrusted, but foremost since general and universal conceptions of the good may turn out to be 'violent' in concrete practices.

684 Ellett, 'Practical Rationality and A Recovery of Aristotle's "Phronesis" For the Professions'; Noel, 'On the Varieties of Phronesis'.

685 Cf. Diest and Dankbaar, 'Managing Freely Acting People: Hannah Arendt's Theory of Action and Modern Management and Organisation Theory'; Hui, Schatzki, and Shove, *Nexus of Practices*.

686 Hence, my objections do not cover his acceptance of slavery, gender discrimination and disdain for disabled people – although these are of course serious matters from our perspective and in our time.

Problem of the individual outlook

Aristotle's practical wisdom is applied to individuals: they can gain the virtue of practical wisdom. Although it is a mark of common sense that virtues apply to individuals, I believe that in the quest for practical wisdom in supervisory boards this is too one-sided. I have noted in the introduction of this thesis how a practice approach leads us to de-center individuals in understanding social practices. Some approaches in care ethics have also followed this path, as argued. Moreover, a supervisory board is more than the sum of its individual members, as they embody the organization's statute: they speak with one mouth. In Chapter 9 I have furthermore argued the importance of an institutional outlook for an understanding of practical wisdom in governance – far beyond the individual outlook.

Problem of a cognitive approach

This problem is related to the latter formulated problem. Aristotle's approach is mainly cognitive: practical wisdom is about deliberating, thinking and judging: the *phronimos* is a rational man. At first glance, there appears to be little room for emotions, feelings and personal considerations. It is said however that that the excellence of character strives for harmony and therefore involves both the intellect and feelings.⁶⁸⁷ But besides emotions and feelings, there is ample room for routinized bodily performance, implicit norms, structures and processes, things and their use – all the things we have attributed to social practices.⁶⁸⁸ The emphasis on the rational, and perhaps also emotional, element of practical wisdom misses the point of the thorough interconnectedness of social practices in late modernity, and that behaving well may not be so easily within our power as Aristotle suggests.⁶⁸⁹ We are (luckily) not at the mercy of the individual moral courage (or moral compass) of a supervisory board member; more is at stake for understanding practical wisdom in this context. The philosophers I discuss in the next paragraphs take this into account and therefore deepen our understanding of practical wisdom.

Problem of excellence

Aristotle's virtues and teleology are optimistically aimed at gaining an *excellence*: "We may remark, then, that every virtue or excellence both brings into a good condition the thing of which it is the excellence and makes the work of that thing be done well."⁶⁹⁰ Excellence is about doing things well. Within

687 Cf. van Baardewijk, *The Moral Formation of Business Students*, 253. He here refers to Nussbaum's commentary on the *Nicomachean ethics*.

688 Reckwitz, 'Toward a Theory of Social Practices: A Development in Culturalist Theorizing', 249

689 Aristotle, *The Nicomachean Ethics*, 46, 1113b5-10.

690 *Ibid.*, 29, 1106a15.

the teleological framework, it is principally possible to determine excellence and to reach it. In Chapter 7 and 8 I have extensively retreated from this idea of excellence. The very idea of excellence has, at least in organizational theory (see for example the discussed book *In Search of Excellence*), ignored or pushed away the swampy lowlands of organizational practices, its ambiguity and the problem that ‘nothing is good without its opposite’. In Chapter 7 I have argued that it is in fact possible to figure out what turns out to be good (care), but this has not so much to do with individual excellence and general purposes, but with a much more delicate form of goodness – only to be found from within a certain context and practice. The problem I have with excellence is, hence, its optimism, its ‘showing-off’ and the illusions of perfection it may bring. The excellence of one may lead to others being humiliated, degraded or vexed – and indeed this was the case in former times, as women and slaves were not free. It is not a matter of thinking excellence away, but I must consider how imperfection and mediocrity play a vital role in everyday (political) life and understanding this is vital to understanding practical wisdom.

Towards contemporary interpretations of practical wisdom

The problems I addressed in Aristotle’s conception of practical wisdom led me to turn to contemporary philosophers, mainly in the tradition of hermeneutic phenomenology.⁶⁹¹ As argued, the phenomenological approach lies close to my political approach in the previous chapter.

Also, these authors use concepts that are, more or less, recognizable for practitioners in governance – although the attributed meanings may be experienced as surprising. This is of course an advantage. I will start with Hannah Arendt.

691 Someone knowledgeable may ask why I do not turn to MacIntyre (instead of, or next to, Arendt, Gadamer, Ricoeur and Merleau-Ponty) for a contemporary understanding of Aristotle. Although MacIntyre’s cultural criticism in *After Virtue* is very compelling (for example in the way he unmasked ‘emotivism’, a sort of relativism, in modernity; or the way he criticizes modern ethics such as deontology or utilitarianism), I do not see how his approach actually helps in understanding the swampy lowlands of organizational practices. Moreover, he upholds the idea of (standards of) excellence, while my argument tries to go beyond this, dealing with imperfection – even showing that ‘standards of excellence’ (for example of the supervisory practice) may prevent good things from happening. Moreover, he is rather pessimistic about institutions, and his theory does not allow organizational practices (such as management or supervision) to be called practices – as they are not about what he calls ‘internal goods’. I have, so far, followed a different line of argument.

11.3 Hannah Arendt: enlarged mentality

ARENDT	
Individual	Judgment
Practice	Common sense, action in concert
Institutional	Association, participation

Introduction: practical wisdom in Arendt

Hannah Arendt (1906-1975) was a German American philosopher and political theorist. She is well-known from the Eichmann-controversy, and her book on his trial called *The banality of evil*. In it, she argued that Eichmann was an ordinary man with ambitions and loyalty, who just followed orders without questioning them.⁶⁹² She accused him of “thoughtlessness”: the inability and refusal to *think*, distancing oneself from reality. This is not only an individual matter, but a danger of bureaucratic and authoritarian structures.⁶⁹³ This has caused great evil, on banal grounds. Eichmann was not, she argued, a monstrous ideological devil but appeared as an ordinary man. Nowadays, we know that Eichmann was perhaps less banal or ‘innocent’ than she thought he was.⁶⁹⁴ Still, her contribution to understanding totalitarianism, the role of ‘thinking’, politics and action are of great importance. In this paragraph, I focus on three concepts she uses in relation to practical wisdom: judgment as political action; common sense or enlarged mentality; association or participation. At the end of the paragraph, I highlight what Arendt, as critical friend, might advise a supervisory board and relate this to the table above (individual, practice, institutional).

Judgment as (not quite) political action

Although Hannah Arendt does not very often refer explicitly to the term practical wisdom or *Phronesis*, still her thinking about both the life of action and the life of contemplation points in that direction. I believe this comes together in the concept of ‘judgment’.⁶⁹⁵ In the beginning of *Thinking*, Arendt deliberates on how apparently the active life (which she has described in *The Human Condition*) and the life of the mind are so separated from each other. And indeed, some interpreters of Arendt have said that there is a cleaving in

692 Arendt, *Eichmann in Jerusalem*, 144.

693 *Ibid.*, 288.

694 As shown by: Stagneth, *Eichmann before Jerusalem*.

695 Arendt, *Lectures on Kant’s Political Philosophy*, 104, in the interpretative closing essay; Arendt, *Between Past and Future*: 217–18. In the latter essay (Crisis in Culture) she explains how the Aristotelian *phronesis* and the Kantian *judgment* refer for her to the same political ability.

her thoughts, that the life of the mind is of no political significance.⁶⁹⁶ But rightly here at the start of her project of *The Life of the Mind*, she is looking to connect the two, referring to Cicero, she writes: “Never is a man more active than when he does nothing, never is he less alone than when he is by himself.”⁶⁹⁷

For Arendt the ability to *judge*, the third, never finished part of the threefold *Life of the Mind*, is a political ability, interpreting the *Critique of Judgment* by Kant as his “hidden” political philosophy.⁶⁹⁸ We find politics however first of all in the realm of the *vita activa*, in the human activity of action.⁶⁹⁹ Still, judging is always *in* and *about* the world, although it is a faculty of the mind: it is being a spectator. Judging, it appears, is the faculty which bridges the *vita activa* and the *vita contemplativa* in Arendt’s work. Arendt argues that the core phenomenon is an *experience* and not an idea, in which we discover *plurality*, the fact that we find ourselves surrounded by men, in the plural, not Man in the singular.⁷⁰⁰ Arendt then hermeneutically highlights these existential dimensions of plurality by thinking through, for example, the Greek *Polis* or the American Revolution, but also the dark side, with the Eichmann trial as exponent. She then argues that also in the mass-consumer society the human condition for plurality, for action (*praxis*), is at stake, as it tends to force people into the social domain, becoming indifferent about political or public affairs.⁷⁰¹ Therefore, she calls for the revaluation of action as political activity: together people have the power to be of meaning in the world that is given to them. *Phronesis* is, in this regard, related to the experience of plurality, and politics must be about the recognition of the many-sidedness of political matters. Practical wisdom is for Arendt, referring to Kant, an *enlarged mentality*: “To think from the position of every other person.”⁷⁰² She does not refer to this as an abstract ideal, but rather as a concrete activity, a political capacity: the coming together of people who discuss and decide on matters that is their concern.⁷⁰³

Individual: soundless dialogue of the I with itself

Arendt has contributed a great deal of her work to the question of the sources of good and evil. Especially after her experiences in the Eichmann trial she believed that *thoughtlessness*, the refusal or (implicit) prohibition to ‘stop

696 To which she points in Chapter 3 of *The Human Condition*.

697 Arendt, *The Life of the Mind*, 7,8.

698 *Lectures on Kant’s Political Philosophy*’.

699 *The Human Condition*.

700 *Ibid.*, 7,8.

701 See Chapter 6 in *The Human Condition*.

702 Arendt, *The Promise of Politics*, 168.

703 Cf. Lederman, *Hannah Arendt Participative Democracy*, 46.

and think' was one of the most important sources of evil (and the banality thereof). Thinking is the opposite of thoughtlessness. She writes:

If thinking – the two-in-one of the soundless dialogue – actualizes the difference within our identity as given in consciousness and thereby results in conscience as its by-product, then judgment, the by-product of the liberating effect of thinking, realizes thinking, makes it manifest in the world of appearances, where I am never alone and always too busy to be able to think. The manifestation of the wind of thought is not knowledge; it is the ability to tell right from wrong, beautiful from ugly. And this, at the rare moments when the stakes are on the table, may indeed prevent catastrophes, at least for the self.⁷⁰⁴

Critical moments – when things get difficult, when complexity is unfolded, and we face paradoxes – are related to a focal point in which one needs to judge and act *in* this particular situation. Listening to what is necessary, what needs to be done, without knowing in advance what in this situation the right thing is to do, and without having the time to actually reflect on it. This soundless dialogue was originally placed by Plato in the sphere of contemplation – outside politics and action. Arendt's aim is to relate thinking (contemplation) to politics (action).⁷⁰⁵ Although thinking partly withdraws itself from the world, by turning inward, it also produces 'side-effects' in the world: the ability to tell right from wrong. Supervisory boards, also the ones studied in Chapter 4, refer to this as 'reflecting' and that 'you need to be able to look at yourself in the mirror'. This, in its turn, is related to the idea of the moral compass. The practice of 'stop and think' may actually help supervisory board members to make up their minds.

Practice: common sense

Arendt's way of pointing to this political notion is by referring to the idea of common sense, *sensus communis*. A sense for that what is a common concern to a community, which goods are valued or at stake, is developed in the *interplay* between mind and world – the faculty of judgment: in our thinking we already always anticipate what others may think. Building forth on Kant's *Critique of Judgment*, she connects common sense to taste, or good taste. In common language, this sounds strange – is it not that taste is in the eye of the beholder and that every notion of *good* taste is already aristocratic? And is taste not irrevocably related to relativism? Arendt answers:

704 Arendt, *The Life of the Mind*, 193.

705 *Ibid.*, 6.

We all know very well how quickly people recognize each other, and how unequivocally they can feel that they belong to each other, when they discover a kinship in questions of what pleases and displeases. From the viewpoint of this common experience, it is as though taste decides not only how the world is to look, but also who belong together in it. If we think of this sense of belonging in political terms, we are tempted to regard taste as an essentially aristocratic principle of organization. But its political significance is perhaps more far-reaching and at the same time more profound. Wherever people judge the things of the world that are common to them, there is more implied in their judgments than these things. By this manner of judging, the person discloses to an extent also himself, what kind of person he is, and this disclosure, which is involuntary, gains in validity to the degree that it has liberated itself from merely individual idiosyncrasies. Now, it is precisely the realm of acting and speaking, that is, the political domain in terms of activities, in which this personal quality comes to the fore in public, in which the “who one is” becomes manifest rather than the qualities and individual talents he may possess.⁷⁰⁶

Taste cannot solely be found in the eye the beholder, and is not a mere subjective or private matter, but is found in the interplay between world (a community) and beholder – who is never detached but always already part of that world. To say that a work of art is beautiful, is never only your own judgment, but is already an anticipated judgment of what others may think or have been thinking about it – while there is also no ‘universal’ common sense. Judging involves disclosing and positioning yourself (against neglect), affirming at the same time the plurality of human beings (different tastes) and the notion that we have something in *common*. This refers back to the enlarged mentality: it is about being able to judge what in a concrete situation appeals to judgment of others in that specific community, transcending one’s own mentality. This without losing the ability to stop and think. Judgment has no validity in a cognitive or scientific sense, like “the sky is blue” or “two and two are four”.⁷⁰⁷ These are no judgments at all, but simply a state of affairs. This also implies that although one may have a good community sense, one can never compel the other to agree with a judgment. Judgment is in fact a matter of persuasion, dialogue or perhaps indeed rhetoric. Judgment is never absolute, nor finished.

⁷⁰⁶ Arendt, *Between Past and Future*, 223.

⁷⁰⁷ Arendt, *Lectures on Kant’s Political Philosophy*, 72.

Institutional: ideal of citizenship

Although Arendt has sometimes been accused of promoting an aristocratic or elitist account of democracy (becoming ‘immortal’ by great deeds and having the time and ability to share opinions in the public sphere),⁷⁰⁸ there is another interpretation of her works that does the opposite. Recently, this has been well and thoroughly elaborated by Lederman.⁷⁰⁹ He argues that for Arendt, politics resembles freedom (from work and labour), and that politics requires a *small* space in which freedom, in the sense of *power in concert*, can be exercised.⁷¹⁰ Lederman shows how Arendt criticizes large governments that by their very nature address ‘mass-men’ and will, whether intentionally or not, deprive men of their political ability – that is: practical wisdom.⁷¹¹ Arendt does not only theoretically think about politics in the concepts of action and speech, but actually suggests institutional arrangements: namely, a *council system*. Small councils, whether in municipalities, neighbourhoods or revolutionary groups, are the place where *ordinary* citizens can speak and act together, make decisions for themselves. Arendt suggests in *On Revolution* that the council system may be the best weapon against mass-society with its tendency for pseudo-political mass movements – and therefore against the banality of evil. We do notice here similarities with what I argued in Chapter 9, when talking about civil democracy as opposed to political democracy. If I would transpose this idea of the council system to civil society organizations, which is not such a big leap, then I might say that practical wisdom is not only and primarily to be found with those who supervise or govern, but rather is to be found in ordinary citizens. Hence, for Aristotle, *phronesis* was not a virtue that everyone could possess. It was only for the happy few men, who had had good education, plenty of resources and were well nurtured. They were indeed liberated from work and labour.⁷¹² In a sense, traditional perspectives on governance do cherish such an elitist account of supervision: it is generally accepted that ordinary citizens should not be able to decide on matters that the supervisory boards decide on. Arendt democratizes the idea of *phronesis*: every citizen is able to decide about what matters for the community he or she is part of. The scale, however, needs to be relatively small. We can make two more distinctions in this regard in contemporary organizations in which work and action are entangled. There may be a *politics in production* and a *politics of production*.⁷¹³ Politics in production is about the freedom workers or professionals have, to make

708 See Chapter 3 in *The Human Condition*.

709 Lederman, *Hannah Arendt and Participative Democracy*.

710 *Ibid.*, 46.

711 *Ibid.*, 51, 74.

712 *Ibid.*, 72.

713 Diest and Dankbaar, ‘Managing Freely Acting People: Hannah Arendt’s Theory of Action and Modern Management and Organisation Theory’.

decisions about the way they think the work should be done. This is indeed professional autonomy. Politics *of* production deals with institutional arrangements of codetermination and about decisions of the course of the organization. Understanding governance from an Arendtian point of view will need to address both of these points.

The problem of individual conscience

With these institutional arrangements, Arendt also criticizes the modern belief in individual conscience. We have seen this belief in our reflections in Chapter 3 and 4: good supervision is often equated with being able to look in the mirror, to have a proper moral compass. Arendt argues, in *The Banality of Evil* and adjacent writings that individual conscience (or gut feeling) is not at all a reliable source or indicator for good and evil. For indeed, conscience is, in common sense, always already attuned to a particular ethos in society. Hence, conscience does not question this ethos, but rather deviations from this ethos. Arendt believes that this was the (tragic) strength of Nazi-Germany.⁷¹⁴ In order to gain a really critical attitude of morality (inwardness), that goes beyond conscience, people need to go *outward*.⁷¹⁵ Or, in my words, in order to say something about values, they need not be searched for in universal or general concepts, nor solely in an inner moral compass, but must be found in ordinary practices and the equal participation of citizens in decision-making.

Summing up: Arendt as critical friend of your board

I can now collect a couple of reflections that may pose critical questions or may give more conceptual depth to already present practices of governance. I use this table with the differentiation of individual, practice and institutional elements of practical wisdom.

⁷¹⁴ Lederman, *Hannah Arendt and Participative Democracy*, 128.

⁷¹⁵ *Ibid.*, 131.

Individual

Judgment as (not quite) political action

The basic idea of supervisory work becomes *seeing the world from the others' point of view*: being a spectator, between mere contemplating and executive work. This must be related to the attempts to ground care in ordinary practices. The question of supervision becomes how it is possible to 'stop and think' beyond entrenched beliefs about what good care and organization is. The individual board member must be able to have a 'soundless dialogue' within him- or herself, which may appear impossible due to compelling agendas or technical discussions. The basic idea of judgment is that you do not supervise facts or 'states of affairs'. Supervision is aimed at positions and beliefs on what is thought to be good care or a good organization. It remains important not to trust too much on individual morality and behavior. Practical wisdom is institutional as well.

Practice

Common sense

For a supervisory board, judgment is also risky. If indeed common sense always already anticipates how others believe things should be done, it is a big risk if supervisory boards see and speak to only a few people in the organization (which is often the case). Conformism (routinization) is always a risk of common sense. The question remains: whose common sense? Hence, judgment in the context of common sense is related to positions, positioning and taking positions. A supervisory must hold, defend and question certain positions on what it thinks good supervision, organization or care is. Politics is about persuasion and therefore about the potentiality of conflict.

Institutional

Association, participation

The plea for a council system is, I believe, the most challenging point of Arendt, a true revival of civil democracy. But, as argued, the governance model and practice in Dutch civil society has become elitist and based on expert-knowledge rather than on the practical wisdom of citizens. Of course, there is codetermination and professional autonomy is applauded everywhere – but does this do the job? I believe that it makes sense to rethink the way ordinary citizens are involved in decision making, whether for example new forms of association (such as social cooperatives) should not be cherished more by government policy, and whether the governance model does not sacrifice practical wisdom for independence.

11.4 Hans-Georg Gadamer: practical wisdom as dialogical interpretation

GADAMER	
Individual	Moral knowledge
Practice	Game, dialogue
Institutional	Traditions

Introduction

Hans-Georg Gadamer (1900-2002) is the kind of philosopher who is mainly known due to one single project, in this case: *Truth and Method*. Although he published a lot of different books as well, this work supposedly has it all. In it, he has made great contributions to the humanities by his hermeneutics. He altered Dilthey's and Schleiermacher's conception of *understanding* in such a way, building forth on Heidegger, that we are able to understand our everyday situatedness as hermeneutic understanding, instead of merely a methodology for the study of humanities. Gadamer uses Aristotle's *phronesis* to pinpoint hermeneutic understanding. In *Truth and Method*, he is opposing Kant, or interpretations of Kant, and the idea that we should give up our pre-conceptions if we want to understand the world. For Gadamer, this is not only impossible, but it is also important to think with pre-conceptions from the beginning. In other books however, it becomes clear that Kant is not put aside altogether.⁷¹⁶ Different from Arendt, Gadamer's hermeneutics are more epistemological (and slightly more ethical) rather than political.

Phronesis as moral knowledge

Phronesis is for Gadamer not about true or even probable knowledge, but about concrete situations in which this knowledge must grasp the 'circumstances' in their infinite variety.⁷¹⁷ In this passage, he equates practical wisdom with *sensus communis* – discovering what is evidently good or bad (without argumentation). Gadamer denotes *phronesis* as *moral knowledge*: "It is clearly not objective knowledge – i.e., the knower is not standing over a situation that he merely observes; he is directly confronted with what he sees. It is something he has to act on."⁷¹⁸ Moral knowledge coincides with the faculty of judgment, which implies that every general law or claim (or a value) cannot contain practical reality in its full concreteness. The general is always deficient. The logic of application or implementation

⁷¹⁶ Gadamer, 'Practical Philosophy as a Model of the Human Sciences'; Gadamer, *The Enigma of Health*; Dostal, 'Gadamer, Kant, and the Enlightenment'.

⁷¹⁷ *Truth and Method*, 20.

⁷¹⁸ *Ibid.*, 324.

is not relevant for a practical wisdom.⁷¹⁹ Moral knowledge involves self-knowledge of moral consciousness (as interpreter), as well as finding oneself always already in a situation in which one needs to act, and hence:

We must already possess and be able to apply moral knowledge. That is why the concept of application is highly problematical. For we can only apply something that we already have; but we do not possess moral knowledge in such a way that we already have it and then apply it to specific situations.⁷²⁰

Although we might have some ideas about our values, on the common good or virtues (virtue ethics), or perhaps of our Kantian duties and maxims, it is not simply a matter of applying them like a craftsman applies his knowledge to his creation. Rather, it is like interpreting a law, judging a situation, in which the law gives input, but only partly determines the judgement.

Another observation Gadamer makes is that practical wisdom has a peculiar relation to means and ends. He argues that practical wisdom is not about knowing in advance what kind of means one needs to have to achieve some desired end (like it sometimes seems to be in the Scholastic tradition), nor is it about some clear and fixed *anterior* end which practical wisdom searches to find means for (as appears to be the case in Aristotle). Instead, "(...) this knowledge is sometimes related more to the end, and sometimes more related to the means to the end."⁷²¹ Practical wisdom cannot be taught in a way technical knowledge can be taught, rightly because of this ambiguity. It can be accomplished only in and through the situation of the moment. Hence, what is considered or judged practically wise cannot be explained from *outside* by some fixed values or virtues. That what is good, wise, is found in *and* through the mundane practice. Practical wisdom cannot be evaluated in traditional scientific terms, nor can it be thought of in a technical or professional matter. Since it is moral knowledge, it concerns the human good or goods both in general and in a particular situation.

719 Ibid., 328.

720 Ibid., 327.

721 Ibid., 331.

Practical wisdom as a game

An important aspect of the hermeneutic-phenomenological approach, following Gadamer, is that the position of the one who interprets in practical wisdom is not detached, but rather immersed in a practice or game.⁷²² The interpreter belongs to the tradition of the practice he or she is interpreting. Therefore, there are no objectifying (detached) methods available. The observer or knower is not standing over a specific situation that he or she merely observes but is rather directly confronted with what he or she sees. He or she has to act upon it.⁷²³ Gadamer compares this interpreting process with playing a game. Players do not only play a game in the sense that they play the or *with the* game; rather, the game also and more importantly plays with the players. The practice of the game partly determines how people play the game. Practical wisdom therefore cannot solely be found inside the mind or hands of an actor, but must be found in the interplay, the interaction, between interpreter and interpreted, between players and game. Games have their own particular logic. Any disconnection of practical wisdom in this sense leads either on the one hand to detached knowledge, skill or over-relying on individual moral agency (which cannot be practical wisdom), or on the other hand to materialism and determinism (which makes practical wisdom a superfluous or empty concept).

Practical wisdom as dialogue

For Gadamer, practical wisdom is in the *interplay* or *movement* between the interpreter and the interpreted. A specific interpretation can only be understood in the light of the *horizon* and prejudices or pre-conceptions of the interpreter, and the *Wirkungsgeschichte* (the effect of a living tradition) on what is interpreted.⁷²⁴ At the same time, in concrete action, the interpretation is not totally determined by this history but is becoming something new itself as the interpreter is in dialogue with what is interpreted. Thereby, an openness in every tradition is achieved to ‘alterity’ (difference) and different possible interpretations. Practical wisdom cannot be reduced to either historicism or situationalism but is always somehow in the movement between them. A preconception is the horizon one has before interpretation, because of history, situatedness, etcetera. It is less specific than a prejudice, that are already closed ideas about the text. The radical hermeneutics of practical wisdom calls into question the idea of independence of judgment. Since Kant, we have been used to say that in judging we should abolish our prejudices. Gadamer restores, or re-evaluates, preconceptions (as pre-existing notions or beliefs, hence as pre-conceptions) and tradition

⁷²² Ibid., 110–14.

⁷²³ Ibid., 324.

⁷²⁴ Ibid., 294.

and makes them the matter of the process of interpretation. *Sapere audi*, of course, but do calculate with authority that has proven itself. The idea of unbiased and independent judgment is traditionally very important for supervisory boards. Although this might be true for conflicting interests, it does not hold for the judgmental part of supervision.

The role of tradition for institutions

The role of tradition is for Gadamer of institutional significance. Building on Gehlen's institutional theory, that institutions provide backgrounds in which foreground practices can have meaning (without the need for permanent reflection or legitimization)⁷²⁵, Gadamer argues that traditions provide a ground beyond rationality (not instead of rationality, as some Romantic criticisms purport).⁷²⁶ Institutions symbolize meaning, and only by means of this symbolization institutions gain their meaning.⁷²⁷ Traditions are not antithetical to reason, neither are institutions. Institutions can be understood as a process of the effect of a living tradition (*Wirkungsgeschichte*). Gadamer argues:

(...) there is always an element of freedom and of history itself. Even the most genuine and pure tradition does not persist because of the inertia of what once existed. It needs to be affirmed, embraced, cultivated. It is, essentially, preservation, and it is active in all historical change. But preservation is an act of reason, though an inconspicuous one. For this reason, only innovation and planning appear to be the result of reason. But this is an illusion. Even where life changes violently, as in ages of revolution, far more of the old is preserved in the supposed transformation of everything than anyone knows, and it combines with the new to create a new value. At any rate, preservation is as much a freely chosen action as are revolution and renewal.⁷²⁸

Institutions, in this regard, need to be preserved (which is not the same as staying the same). Hence, in understanding the organization of care and its institutional embeddedness, it is more interesting to look at the effects of a living tradition, history and former interpretations than to universal, detached values on care.

725 Ibid., 389.

726 Ibid., 292–93.

727 Ibid., 155.

728 Ibid., 293.

Summing up: Gadamer as critical friend of your board

From this elaboration on Gadamer, I sum up the following elements that are important to understand practically wise supervision.

GADAMER

Individual

Moral knowledge

Supervision is not primarily about having a proper information position, but about a proper *interpretation* position. Supervision is not a practice that stands outside of what it supervises, as a view from nowhere, even though it may be experienced that way. The organization, or care, is not an object. In order to interpret it, one must already be immersed in it. That is, understanding of the organization and its practices, judging it, is only possible by means of the already present interpretations. Hence, practical wisdom is not expert knowledge, but rather a knowledge of contingent matters. Supervisory practice is not a professional practice, but, in my words, a political practice.

It is therefore unclear or ambiguous how one can learn to be a good supervisory board member. It cannot be taught in class. Of course, one can learn in class how to read a financial report, about possible psychological processes in the boardroom, or about perspectives on quality of care or innovation. Taken together however, it does not comprise, it underrepresents, what supervision is all about.

Practice

Game

Supervisory practice is like a game. It is not only an individual board member who merely 'joins' the game; the game also has its own logic and historical development of (implicit) rules. Therefore, the game of supervision also plays with the individual board members. Therefore, what is deemed practically wise can only be found from within a specific game. General wisdoms (clichés) on good governance may blind the practitioners. Hence, even the smartest or wisest (in a general sense) supervisory board member cannot escape the logic of the game.

Dialogue

Supervision is embedded in a chain of interpretations about the organization and how things go on. The only way to interpret what goes on is building on already existing interpretations. That is why history and dialogue are more important than the *telos*, purpose, of the organization. Supervision is therefore dialogical: about trying to understand how others (other supervisory board members, executive board, people from inside and outside) understand the organization, with their pre-conceptions and experience, and let these resonate with one's own interpretations and pre-conceptions. There must be space and openness in pre-conceptions in order to have a more comprehensive and rich understanding of the organization.

Institutional

Traditions

There is no fixed end (purpose, *telos*) of a health care practice. There is, however, institutional perpetuation of traditions. Traditional thinking is distrusted in some governance discourses: there is a talk of values, disruption, innovation, et cetera *as opposed to* traditional thinking. Supervisory boards however, as already highlighted in the tension of stable fragility, need to preserve the traditions of the organization (which does not imply that it does not change). Patients and professionals need to have an institutional background, an authority, in order for them to flourish. Hence, making plans for strategy or reorganization should always calculate with and appreciate the historical traditions of the organization. Preservation of the institution is not primarily about the *function* of the organization, but about its symbolic value for a certain community.

11.5 Paul Ricoeur: just institutions

RICOEUR	
Individual	Trust/doubt
Practice	Aims and norms Problem of principles Convictions
Institutional	Just institutions

Introduction

Another important contribution to a contemporary understanding of practical wisdom comes from Paul Ricoeur, especially from his seminal work *Soi-meme comme une autre* (oneself as another). Although his main task in this work, it appears, is to establish a narrative ontology of the self, he sets the idea of practical wisdom at the heart of this ontology. Ricoeur tries to settle between the Aristotelian idea of the good life as telos, aim, and Kant's ethics of duties. The basic ethical intention in this ontology is: "(...) aiming at the 'good life', with and for others, in just institutions."⁷²⁹ Nobody would argue against such a statement of course, but it hides great treasures. I will here not go in depth into the ontology of the self, rather I want to highlight how *phronesis* operates here, especially in relation to the idea of "just institutions", of which we hope health care organizations are or can be. We have already discussed Ricoeur at some length both in Chapter 9 on institutions and in the previous chapter on the political difference.

Between trust and doubt

An important aspect of practical wisdom for our cause is Ricoeur's notion of *attestation* in relation to trust and doubt – an important and recurring theme in boardrooms. Ricoeur argues that self-understanding can only be attained in an indirect fashion. It is not given to the self in an immediate or transparent manner, but only by means of interpretations of signs that were left behind, in its memory, or in culture.⁷³⁰ These signs are symbols, narratives or myths, referring to a structure of meaning that must be interpreted. You cannot get to the self or the world but by this detour. These symbols, Ricoeur argues, are always linguistic. As this self-understanding is always mediated, by interpretation and language, there arises a conflict of interpretations, and this leads to the tension between trust and doubt. Symbols refer to the

⁷²⁹ Ricoeur, *Oneself as Another*, 172.

⁷³⁰ Van der Heiden, 'On the Way to Attestation: Trust and Suspicion in Ricoeur's Hermeneutics'.

self and the world only in an ambiguous way. This means that symbols can be interpreted in different ways and are therefore also capable of disclosing new meanings. However, one may not only have faith or trust in symbols, using them for an interpretation of the self, or the world, one may also distrust the symbols for what they do not show, what remains hidden. Nietzsche gave a famous example, that the symbols of evil and grace in Christianity made something hidden, namely the exercise of power behind them.⁷³¹ Considering our earlier arguments, this may also be true for quality management.

Hermeneutics, following Ricoeur, relies on this dialectic of trust and doubt, it cannot rely solely on a naivety of trust, nor on a cynicism of suspicion.⁷³² He searches a middle ground between Descartes (who exalted the cogito) and Nietzsche (who shattered the cogito all together).⁷³³ If there is any form of certainty in hermeneutics, it is that of attestation – staying true to your word. Now, an attestation in daily language is close to the idea of a testimony, in which one may believe or not, both in the speaker and the content spoken. Ricoeur gives the example of a promise. If someone promises something to me, I must believe in the capacity of that person to keep that promise, even while we both know that he or she, as well as the circumstances, will change. I do not know for certain whether he or she will keep the promise, nor that I will keep him or her to it, but we must still hold on to the idea that this person has the capacity to do so – otherwise the promise would be mere illusion. Hence, we must accept the fact that attestation does not give us certainty. Therefore, there is a “(...) hermeneutic struggle between trust and distrust, credibility and suspicion.”⁷³⁴ Doubt is the path towards attestation, towards trust: the possibility of doubt, critique indeed, is the path towards credibility.⁷³⁵ The notion of trust is indeed central to a human existence with and for others in just institutions.⁷³⁶ This requires practical wisdom, that is, a contextual knowledge of when to trust and when to distrust in an ongoing fashion as well as the institutional possibility of doubt.

731 Ibid., 133.

732 Ricoeur, *Oneself as Another*, 302.

733 Ibid., 23.

734 Van der Heiden, 137.

735 Ricoeur, *Oneself as Another*, 73, 302.

736 Buijs, *Waarom werken we zo hard?* Buijs argues that this basic of trust also holds true for economics.

Recourse of the norm to the aim

Ricoeur makes the distinction between ‘aim’ and ‘norm’. Whereas the idea of aim, *telos*, stems from the Aristotelian heritage, the idea of a norm comes from Kant’s deontology. In the latter, there is an obligation to follow the norm by hypothetical imperative, regardless of the situation at hand. Ricoeur argues that the relation between the two is reflexive. A developing idea of the ‘aim’ leads to norms, which can be sustained and preserved in institutions, traditions and practices (such as in law, government, or more specifically in businesses or indeed health care organizations). Practices may have ‘standards of excellence’:

Practices, we observe following MacIntyre, are cooperative activities whose constitutive rules are established socially; the standards of excellence that correspond to them on the level of this or that practice originate much further back than the solitary practitioner. This cooperative and traditional character of practices does not exclude controversy but instead provokes it, mainly with respect to the definition of standards of excellence, which also have their own history.⁷³⁷

Whenever a norm leads to “impasses in practice”, the norm must recourse to the aim.⁷³⁸ This reflexivity is the very point of practical wisdom for Ricoeur. On the one hand, as George H. Taylor argues in discussing Ricoeur, it is the wisdom to see that institutions and the adherent values, by normalization, are constitutive for living a good life at all.⁷³⁹ On the other hand, practical wisdom serves to see in concrete practices when or if a norm meets the aim, as many practice matters are aporetic, undecidable, in nature, in which deciding what the good thing is to do cannot be reduced to simply following norms or applying values. It is instead about “grasping the situation in its singularity.”⁷⁴⁰ In referring to MacIntyre, Ricoeur argues that the ‘standards of excellence’ are indeed norms, but as they are formed in and through practice, the contestation or controversy of these norms is more fundamental to the practice at hand than the actual norms (which may also be implicit). This refers to the aim, and is political by nature, that is, the very possibility and necessity of contestation, and the *sense politique* to aspire for the plausibility of certain aims in the eyes of others, is central to it. To speak with Schmidt: there is always an alternative when it comes to a purpose.

⁷³⁷ Ricoeur, *Oneself as Another*, 176.

⁷³⁸ *Ibid.*, 170.

⁷³⁹ Taylor, ‘Ricoeur and Just Institutions’.

⁷⁴⁰ Ricoeur, *Oneself as Another*, 175.

Antigone and the problem of principles

When Ricoeur starts his tenth study on practical wisdom in *Oneself as Another*, he analyses Sophocles' tragedy of Antigone. In this tragedy, the different characters who live up to a different set of principles end up in misery. The tragedy reflects the "agonistic ground of human experience", that when it comes to principles there can be unsurpassable differences between humans.⁷⁴¹ The point Ricoeur seems to make is close to that of passage from Ecclesiastes which says:

In this meaningless life of mine I have seen both of these: the righteous perishing in their righteousness, and the wicked living long in their wickedness. Do not be overrighteous, neither be overwise – why destroy yourself?⁷⁴²

Hanging on to principles, general values or universalities when it comes to concrete decisions can be practically unwise, even if the principles themselves appear to be righteous. The very point is that since human life is plural, there is no principle (norm) that can claim to establish the aim of the good life. As the aim needs to be contested, is always for-the-time-being, merely following a norm is not sufficient in particular cases – which are always in the reflexive mode between the aim and the norm. The motto of the tragedy indeed is: to live the good life, you need to act prudently (but what is acting prudently?) and not to defy the gods (but what is defying the gods?). Practical wisdom serves on the edge of the undecidable. It is precisely a claim of universality of principles that denies this.

The tragedy, in short, describes how Creon, the new king, decides not to bury the body of Polyneikes, whom he declared a traitor and a coward to the city, as he besieged his own city, Thebes, while his brother was on the throne. The battle ended with an epic duel between the two brothers, and both tragically died. The body of Polyneikes would serve as food for the birds, which means he cannot pass into the afterlife, as his body is desecrated. It is forbidden to grieve over him, nor to trespass this rule. Antigone, however, the sister of Polyneikes and fiancée of Creon's son Haemon, did wish to grieve over Polyneikes, and decided to secretly bury him anyway – and so she did. People found out however that she did this, brought her to Creon, and he decided in anger and pride to bury his future daughter in law alive. Antigone's sister, Ismene, had helped Antigone, and she insisted on having the same fate as Antigone. The gods

741 Ibid., 243.

742 Ecclesiastes 7,15-16 (NIV).

however, by way of a blind prophet, have let Creon know that they disapproved and condemned Creon's decision. He therefore revoked his decision, and he intended to bury Polyneikes himself. In the meantime, however, Antigone had already hung herself to avoid being buried alive. When, following this, Creon wanted to bury Antigone in shame, he was attacked by his own son, but as he found out that he was about to kill his father, he killed himself instead in this moment of reflection and insanity. When Creon's wife, Eurydice, heard about the death of her son, she killed herself as well. In the end, Creon had to see all of his family die because of his 'pride and principles', and that his repentance had come too late.⁷⁴³

Creon was too righteous in his principle that the rule of the King, or the rule of law, and the love of the nation are universally applicable, regardless of context. On the other hand, Antigone, normally an audience-favourite because of her non-violence, applies the same one-sidedness. She states that love for family is always above any other love or value, even if this would bring her fiancé into heavy trouble, and she would have to disobey the law gravely. Hence, it is by way of simplification, by reduction of complexity, a denial of ambiguity, that this tragedy unfolds. It is not so much in the one-sidedness of the characters, but in the one-sidedness of the principles themselves that are confronted with the complexity of decision making. The complexity of decision making is the source of conflict in politics and institutions and highlights the trouble of relating the aim to the norm, and vice versa, and needs to give rise to a 'judgment in situation', a practical wisdom.⁷⁴⁴

The relevance of conviction

Ricoeur however, like Arendt, wants to maintain an idea of moral conviction, not to leave practical wisdom over to either moral relativism or arbitrariness. Following Charles Taylor, values cannot be just 'an option' or mere projection on reality.⁷⁴⁵ Close to Gadamer, Ricoeur argues that such a hermeneutical understanding of the self requires convictions, but these convictions are never fixed, but always dynamic, unfolding as a narrative. If it is indeed the case that we need to be open to all conflicts on the political level, then we must also acknowledge that these conflicts are carried by convictions rather than by mere arguments or rationality.⁷⁴⁶ It is precisely the task of a practical wisdom, in a democratic sense, to install procedures of arbitration, not only

⁷⁴³ Based on Sophocles, *Oidipous - Antigone*; See also: Amiridis, 'The Shadow of Sophocles: Tragedy and the Ethics of Leadership'; Castoriadis, *Philosophy, Politics, Autonomy*, 62–63.

⁷⁴⁴ Ricoeur, *Oneself as Another*, 249.

⁷⁴⁵ Taylor, *Sources of the Self*, 52–53.

⁷⁴⁶ Ricoeur, *Oneself as Another*, 290.

to resolve conflicts, but also to reach for an understanding of the convictions that lie beneath it.⁷⁴⁷ This is all the more important as the convictions about values and norms, habits, the ethical or the religious perspectives on health care are fragmented. In the face of so many technical complexities that for example boards in health care face, it is hard to keep this debate on convictions alive. The political task is to criticize the convictions and ideologies that play a background role. Practical wisdom, then, is about the debate itself on these moral convictions, and the institutional perpetuation of this debate. And here we come to just institutions.

Just institutions

Health care organizations can indeed be seen as institutions in the sense that Ricoeur is aiming at, as discussed in Chapter 9. I will build on those analyses, but I do here primarily refer to *Oneself as Another*. Institutions are for example the law, a nation, a religious institution or indeed a (business) organization.⁷⁴⁸ The institution is: “(...) the regulation of the distribution of roles, hence as a system, is indeed something more and something other than the individual who play these roles.”⁷⁴⁹ He argues that institutions arise when we move beyond face to face relations and determine how to allocate the rights, duties, responsibilities, and abilities—the prerogatives and burdens—of a community.⁷⁵⁰ We here quite clearly notice what we would call a system of governance. Institutions, Ricoeur argues, mediate practical wisdom. Hence, only in and through institutions, practical wisdom becomes possible. This highlights first of all the impossibility of reducing practical wisdom to an individual *phronimon* and contends that we need a concept of practices in a broad sense to understand and let practical wisdom flourish. This also implies that institutions can make or break practical wisdom. This, then, has precisely to do with the ability of institutions to relate the norm to the aim, the manner in which they can allow contingency to exist, the way in which perpetuation and dynamization are in balance. Governance is then about how the norms are embedded in structures (in the allocation of right, duties, responsibilities and abilities), in the light of values, the aim – which needs to be grounded again and again in ordinary practices.

The institutional condition of practical wisdom becomes clear when Ricoeur insists that institutions are carriers of values, such as justice, care, solidarity, citizenship, et cetera. The fact that these values are institutionalized, become objectified – beyond the fashion of the time-, makes durability possible. This however implies that institutions both and at the same time *generate* and

747 Rocard and Ricoeur, ‘Justice et Marché: Entretien Entre Michel Rocard et Paul Ricoeur’; Visscher, Paul Ricoeur. *De Weg Naar Verstaan*.

748 Ricoeur, *History and Truth*, 110.

749 *Oneself as Another*, 200.

750 Taylor, ‘Ricoeur and Just Institutions’, 574.

restrain. As institutions formalize values into norms, it *generates* the possibility of durability, but it also *restrains* the people in that specific community to the norms that are set, it has the power to dominate.⁷⁵¹ Hence, this is how I defined governance in the introduction of this thesis: *simultaneously enabling and restraining power*.

The question of practical wisdom is how to debate the norms and values possible; how decisions are based on the singularity of the moment, without losing on the one hand durable foundations and on the other hand not being blind to the complexities of organization that demand dynamics and flexibility.⁷⁵² For him, practical wisdom transcends individual judgment: practical wisdom is to be found in, or stronger: resembles the plural, public and therefore institutional character of the debate.⁷⁵³ “Political decision is without conclusion, although it is not without decision.”⁷⁵⁴

Summing up: Ricoeur as critical friend of your board

From this elaboration on Ricoeur, I sum up the following elements that are important to understand practically wise supervision.

RICOEUR	
<i>Individual</i>	<i>Trust/doubt</i> Practically wise supervision is at the interface of trust and doubt. An idealization of trust may lead to the undermining of trust, as doubt will linger beneath the surface. Trust and credibility require scrutiny and the possibility of doubt. It is not about the scrutiny of facts, however, but about attestations.

751 Cf. Suazo, ‘Ricoeur’s Ethics of Politics and Democracy’; Azouvi et al., *Critique and Conviction*. See also Chapter 7 on different forms of power. Ricoeur, with this, refuses to slavishly follow the school of Foucault and others who state that every institutionalization and normalization is automatically a form of domination (governmentality), something Ricoeur calls reification. In reification, the values and norms of human existence are destroyed by turning human activity into mere ‘things’ that can be dominated. For Ricoeur however, this need not happen per se. Objectification of values is or can not only be possible but is also a precondition for human values to flourish at all.

752 Ricoeur, *Oneself as Another*, 269.

753 *Ibid.*, 261, 273.

754 *Ibid.*, 258.

Practice

Aims and norms

Rules and norms are important as they make values sustainable, however, practical wisdom is knowing and acting on such knowledge when a rule does not anymore meets the aim. Institutions serve to sustain values. In order to sustain them, values become norms, and these are creative as well as restrictive. The space that is left between them is the space where practical wisdom operates.

Problem of principles

Be reluctant, or careful, with general principles and values. Have a good look at everyday distress. Principles reduce complexity, and that might end in tragedy.

Convictions

Supervision is about convictions about what good care is, or how to organize this. As we deal with so many technical matters in health care organizations, the question of convictions is often not asked or is suspended.

Institutional

Just institutions

Practical wisdom makes the dialogue, or conflict, on these convictions possible, or checks whether this is possible, throughout the organization. This is the very idea of checks and balances, that convictions are allowed to be legitimate convictions, and are given voice. It might be that this is a just procedure.

Hence, institutionalization is creating a norm, but this norm needs to be reassessed continuously in the confrontation with ordinary practice (and its possible conflicts). The task of the supervisory board is, thus, to institutionalize the possibility of conflict.

Governance is about the allocation of rights, duties, responsibilities and abilities, held together by practical wisdom to make recourse to the aim. However, practical wisdom needs structures that create a space to allow such a recourse.

11.6 Merleau-Ponty: embodied experience

MERLEAU-PONTY	
Individual	Embodied experience
Practice	Ambiguity and inter-practice
Institutional	Responsiveness

Introduction

For our understanding of the relevance of Merleau-Ponty to practical wisdom in organizations, we mainly turn to Küpers, who has explicitly made this connection for organizational practices, while remaining true to a philosophical style of analysis.⁷⁵⁵ Merleau-Ponty was a phenomenologist who has worked out extensively the role of the body in our understanding of the world. In Plato, Christianity and also for example in positivism, the body is made inferior to the mind.⁷⁵⁶ Merleau-Ponty restores the body to its proper place – a third term (the flesh) that connects mind and world.

Practical wisdom beyond individual cognition

In an article with Statler, Küpers argues that practical wisdom “can neither be generated nor exercised except in and through experience.”⁷⁵⁷ This implies that practical wisdom is not the intellectual processing of information, and it is not something that can be accumulated or lost. Practical wisdom is an activity instead of something one owns. It is not about the ‘haves’ or ‘have-nots’ but is an active becoming. This becoming however is not something merely individual or cognitive, as many scholars appear to argue, but is also part of other aspects of human experience: emotions, culture, places, values, routines, in other words: daily practices. Küpers points to the fact that many individual-cognitivist interpretations of *phronesis* underestimate the incommensurability of the old Greek culture and our modern society. For example, Aristotle’s idea of an individual, as we understand it now, did not have any (neo)liberal attachments of the concept of individuality. Moreover, an individual-cognitivist approach easily leads to heroism and *hubris* of what individuals can do as ‘great leaders’ to change and influence circumstances. Küpers and Statler argue:

755 Küpers and Pauleen, *A Handbook of Practical Wisdom*; Kupers and Statler, ‘Practically Wise Leadership: Toward an Integral Understanding’; Küpers, *Phenomenology of the Embodied Organization*; Küpers, ‘Phenomenology and Integral Pheno - Practice of Wisdom in Leadership and Organization’.

756 This is also the point Hannah Arendt makes in Chapter 3 of *The Human Condition*, as noted earlier.

757 Kupers and Statler, ‘Practically Wise Leadership: Toward an Integral Understanding’, 379.

Finally, it is important to recall in general how much attention the Greeks paid to hubris; the tragic flaw associated with leaders. Hubris presents itself whenever an individual attempts to gain more control over the fated contingencies of life than is possible. In this light, contemporary organizational researchers should develop a post-heroic understanding of wisdom in order to overcome the bias toward individual, rational cognition and avoid the suffering that may result from trying to bring the dynamic variation of human experience under analytic control.⁷⁵⁸

As formulated in Chapter 8, also Schmidt, with Baecker, argues for a post-heroic management. Küpers takes on the same argument, but from the viewpoint of *phronesis* in the light of hubris.

The relevance of embodied mundane experience

The argument he sets up, following Merleau-Ponty, is that practical wisdom is an embodied kind of wisdom. Experience or know-how of things is not attainable outside of bodily engaged practice. Embodiment is here not simply ‘physical’ (like doing a site visit as supervisory board member), but rather it means “(...) being grounded in everyday, mundane experience and being inherently connected to the environment in an ongoing interrelation.”⁷⁵⁹ This is what Merleau-Ponty, following Husserl, calls the lifeworld.⁷⁶⁰ The living body functions as a mediation, as a threshold, between internal and external experience, between the life of the mind, and the *vita activa* – in Arendt’s words. The body is what Merleau-Ponty has called a “third term.”⁷⁶¹ Without the bodily senses we would have no idea of time and place, about what is here and now. The practices in which we are situated have perceptual, emotional, social and systemic (institutional) dimensions. Meaning is not foremost “generated” in the mind, but “(...) in the midst of a world of touch, sight, smell, and sound.”⁷⁶² Anyone who is involved in organizations, even if it is mediated by virtual networks or, indeed, boardrooms, will encounter the practice at hand by the bodily organs. This “bodily consciousness” implies that wisdom is not only found in what managers “think”. What they feel and what is lived through is always already in relation to, or better: embedded in, embodied practices.⁷⁶³ As it is embedded practice, the intentionality is always responsive to a situation, an answering practice.

758 Ibid., 381.

759 Ibid.

760 Merleau-Ponty, *Phenomenology of Perception*, 8. The concept of lifeworld is also taken up by Hart in *Lost in Control*, highlighted in the introduction of this thesis.

761 Merleau-Ponty, *Phenomenology of Perception*, 103.

762 Küpers and Statler, ‘Practically Wise Leadership: Toward an Integral Understanding’, 382.

763 Küpers and Pauleen, *A Handbook of Practical Wisdom*, 23; Merleau-Ponty, *Phenomenology of Perception*, 78.

Thus, embodied practical wisdom is not only a discerning intellectual and virtue-oriented process of deliberating the means and reflecting the ends of contextually constrained actions. Rather, it also involves sensing, perceiving, making choices and realizing actions that display appropriate and creative responses under challenging circumstances through bodily ways of engagement.⁷⁶⁴

Building on the practice theories discussed in the introduction and mentioned throughout this thesis, Küpers argues that we should speak of *inter-practices*, highlighting that practices are always open and interconnected with other practices.⁷⁶⁵ This implies that in the organizational lifeworld, there is a constant “(...) negotiating interplay of inherently entwined materiality, subjectivities, intersubjectivities and objectives.”⁷⁶⁶ This complexity, they argue, calls for a practical wisdom that goes beyond a mere virtue or cognitive approach, it should also include “being, feeling, knowing, doing, sharing, structuring and effectuating”, in the midst of tradition, values, norms procedures and routines.⁷⁶⁷ Dealing with this complexity, leadership is more a muddling through (a swampy lowland) of iterative wayfinding and dwelling, than a planned navigation or building. This leads to ‘strategies without design’, learning on the way instead of knowing beforehand.⁷⁶⁸ I suppose this is challenging for supervisory boards. Indeed, as they are at a relative distance, it is appealing to demand from the executive board a well-established plan or strategy beforehand as this gives a ‘firm ground’. This however may lead to the paradox of strategy (attempting to make the future present, while evaluation is often impossible due to changing circumstances) as formulated by Schmidt. It demands great faith from a supervisory board to acknowledge that practical wisdom gives so little to hold on to.

Practical wisdom as responsiveness

Küpers introduces the idea of *responsiveness* as a focal point for understanding this practical wisdom. This is also a term we find in the ethics of care, and Küpers indeed refers to ethics of care as “careful responding.”⁷⁶⁹ In an organizational context, it means that people need to answer to questions at hand. This might be anything, like questions, requirements, stakes, claims

764 Küpers and Pauleen, 24.

765 Sometimes also called the nexus or bundles of practices. See: Hui, Schatzki, and Shove, *Nexus of Practices*.

766 Küpers and Pauleen, 27.

767 *Ibid.*; Reckwitz, ‘Toward a Theory of Social Practices: A Development in Culturalist Theorizing’.

768 Chia et al., ‘In Praise of Strategic Indirection’. In Chapter 4 I mentioned how the director of organization X refused to make a traditional strategic plan – a fine example.

769 Küpers, *Phenomenology of the Embodied Organization*, 148–49.

or practical problems. It is a relational form of responsiveness, which means that it is beyond mere effectiveness. It may also apply to what I have called 'institutional care'. It implies that "an organization and its members are bodily aware and sense how changing circumstances or situations 'call for' or incite, that which motivates people to find appropriate ways of answering."⁷⁷⁰ Just as care, management is about finding out (with all the senses) what turns out to be good in this particular situation. Responsiveness in this sense is a dialogic and democratic form of management. Dialogic, in the sense that it:

(...) contributes to overcoming one-sided individualistic, instrumental rational-choice and normative conceptualizations of intentionalities as they are often found in organizational studies and practices. As a dialogical answering behaviour, responsiveness is a living empathetic doing or 'letting', in which there is openness to issues of various parties involved in organizing, and thereby sets of patterns and standards are co-created and then co-evolve.⁷⁷¹

Democratic, in the sense that:

Management or supervisory responsiveness can be defined as the extent to which employees perceive their managers as fair, prompt, unbiased, willing to take action and effective in dealing with their voice.⁷⁷²

Democracy in organizations is always tricky as the dynamics of patients or workers councils may also tend to alienate institutional arrangements from concrete contexts. Democracy can also become part of the safe high grounds. Hence, democratization is not of itself able to foster practical wisdom: it requires an ethical and political sense to give this value. Having good interaction and dialogue on this institutional level is very difficult by of major importance.

Practical wisdom as responsiveness, then, is not only about doing the right thing in the situation, but also understanding that this can only be achieved by embodied, dialogic and democratic means. This holds not only true inside the organization, but also outside. Responsiveness is not only about interpreting the world around you and then adapting to that but is determined by "(...) the extent to which the organization discusses activities with outside groups, makes information freely available to the public and accepts input from outside in decision making and the willingness to be

⁷⁷⁰ Ibid., 145.

⁷⁷¹ Ibid., 146.

⁷⁷² Ibid., 149.

publicly evaluated for corporate activities.”⁷⁷³ Responsiveness, as well, requires institutionalization. Since there is so much going on in and around the organization, it is, of course, impossible to anticipate or account for every contingency, or every voice, every ambiguity. Therefore, responsiveness requires trustful relationships that need to be nurtured – which, in its turn, as I have argued above, requires doubt.

Ambiguity and inter-practice

The everyday encounters in practices are not straightforward but tend to inhibit ambiguity. There is no goodness or universality implied in the encounter of bodies – they may also chafe, collide or turn away from each other. Care, also institutional care, in other words, is not something ‘natural’ in the metaphysical or instinctive sense of the word. Bruce Bégout, a phenomenologist of the ordinary, describes it incisively as an encounter that is characterized by ambiguity, an everyday reality people deal with.⁷⁷⁴ It is indeed this kind of everyday occurrence that Merleau-Ponty has reflected upon in his work and political thinking. In his phenomenology of what happens when people encounter each other, Merleau-Ponty has succeeded in avoiding the liberal myths of the unencumbered individual and of *tabula rasa* situations.⁷⁷⁵ He proposes to describe the phenomenon of encountering, rather, as follows: people are primordially next to each other ‘in the flesh’, are aware of each other as body beside body. This is where his notion of ‘chiasm’ or intertwining point of the flesh, becomes relevant; not in reference to the objective body, as viewed from a third person’s perspective, but to the lived, heavy, material body that always finds itself among other bodies. “There is this thickness of flesh between us.”⁷⁷⁶ This is not an I-Thou encounter, but a meeting of *bodies* – and is therefore plural. Likewise, as in Arendt, ‘the many’ has precedence over ‘the one’.

Dealing with ambiguity, following Küpers, is one of the major organizational tasks. It is not a merely cognitive task, but involves sensible perceptions and feelings such as fear, rapture, anger, disgust, contempt, shame, guilt, sadness or interest, surprise, curiosity and joy.⁷⁷⁷ It is about withstanding the concealing appeal of ‘promising instruments.’ Some things, that may apparently look the same, may show up as appreciations or dis-appreciations – as also argued in Chapter 8. If there is something Küpers wants to show us, it is that organizations are not teleological and rational systems, but are

773 Ibid., 152.

774 Bégout, *La Découverte Du Quotidien*, 308. As referred to in an unpublished article by Frans Vosman and Henk den Uijl on ‘the political difference and care ethics’.

775 Merleau-Ponty, *The Structure of Behavior*, 168–71.

776 Merleau-Ponty, *The Visible and the Invisible: Followed by Working Notes*, 127.

777 Küpers, *Phenomenology of the Embodied Organization*, 125.

organizations based on ambiguous lived experience and 'bodies at work', for example in:⁷⁷⁸

- The pleasure or pain experienced by observing the dis-+/functioning of formal and informal rules or ways of behaviour;
- the radiant fairness or otherwise of storied and performed lines of co-ordination among employees and managers;
- the ambivalence that certain ideas charm as much as others tire those involved;
- the toughness of unbending procedures, excluding the performance of certain practices;
- the irrational influence of figures and quantification or accounting approaches with their monetarizing controlling consequences;
- the ridiculous and foolish aspects of specific power-politics;
- the kitsch-like nature of feedback that is either pretentious or shows faux-gravity;
- the grotesque nature of hypocritical acknowledging and praising;
- the ugliness of prejudiced and unjust criticism;
- the stressful strain of time pressure and annoying or inauspicious distractions;
- the boredom and dullness of unproductive work-meetings or empty rhetoric;
- the stifling suffocation of stress, frustration and demotivation;
- the painful discomfort of cognitive and emotional dissonance;
- the insidious violence of subtle, superficial gossip or the downright assault from disgusting bullying.
- the painful distress and anxiety of fears concerning workplace security and employability.

But also:

- the ambivalent feelings of emotional work;
- the satisfying play-like 'being in flow' as 'optimal experience';
- the good qualities of managerial work including an element of artistry;
- the encountering of commitment and trust;
- the occurrence of fulfilling win-win situations;
- the pleasure of experiencing the creation of added value;
- the gratifying and delightful fulfilment of attained quality at work;
- the elegance of succinct and cogent presentations;
- gracefulness of befitting or just responsiveness to problems that arise;
- the genuineness of innovative organizational developments;

⁷⁷⁸ Ibid., 124-125.

- the uplifting drive of successful performance achievement or;
- the beauty of fulfilling work-satisfaction

This ambivalence – in its good and bad sides – in organizations requires a *phronetic* perspective on the organization as *inter-practice*, literally looking *between practices*, like you can read between the lines:

The concept of inter-practice helps to reveal and interpret the interrelationship between being, feeling, knowing, doing, sharing, structuring and effectuating in and through action, both individually and collectively, as implicated in organization. Correspondingly, the concept of inter-practices can be used for inquiries into the negotiating interplay of the inherently entwined materialities, subjectivities, inter subjectivities and objectivities as well as individual and collective intentionalities and responsiveness as they occur and are processed in organizational life-worlds. Embedded within the complexities of human and systemic pragmatics, an embodied and integrative inter-practice includes the experiential and social interactions of actors and institutionalized operations of organization as collective agency.⁷⁷⁹

This looking – or better: sensing – inter-practices is the never-ending pursuit of getting behind a curtain, in which the way decisions or representations of the organization will appear to be ambivalent in everyday practice. This is not only problematizing practice, but the in-between practices (beyond either-or) may provide precisely the space that is needed to come to new and creative solutions.

Practical wisdom, in such a context, requires ‘muddling through’ rather than a planned strategy. Only by a relational perspective that includes human emotions, feelings, their commonalities and politics will management and governance make sense. Governance means ongoing reconfigurations rather than blueprints.⁷⁸⁰ Hence, practically wise supervision is not an individual or cognitive trait or ability. Rather, practical wisdom can ‘appear’ or can be *affirmed* by pointing to the tendencies, doings and becomings of organizational and caring practices of interacting practitioners and the specifics of their situated contexts and ambiguous relations. Understanding organizational inter-practices requires a gaze not aimed at individualized performances, but rather at ‘responsive patterns’.⁷⁸¹

⁷⁷⁹ Ibid., 173.

⁷⁸⁰ Küpers and Pauleen, 27.

⁷⁸¹ See also complexity science, for example: Stacey, ‘The Science of Complexity: An Alternative Perspective for Strategic Change Processes’; Stacey, *Strategic Management and Organisational Dynamics*; Morin, *On Complexity*.

Intermezzo

Pilote de guerre

To understand better how values are at work in organizations, I turn to Antoine de Saint-Exupéry and his autobiographical novel *Pilote de guerre* from 1942.⁷⁸² Merleau-Ponty refers to this in his *Phenomenology of Perception* in the final quote of the book. Saint-Exupéry – known from *Le petit prince* – served the French air force as a fighter pilot. During the German invasion in 1940 he makes a flight over the north of France, to Arras, for intelligence on German positions. This flight however is considered to be a suicide-flight. He and his co-pilots are sent out for this mission in pure despair by the generals. The pilots obey, knowing that it will probably be their last flight. During the flight, he moors over life and war. But also, he is occupied with the flight itself, evading enemy fighters and anti-aircraft. Miraculously, they survive the flight, and he wrote down his experiences and thoughts in this novel. Saint-Exupéry will however lose his life as jet fighter in this war, in 1944.

A very important aspect in the novel is that, during the flight, the confounded controls of the plane, such as the throttle, the rudder and the wheel, get frozen due to the high altitude in order to evade enemy eyes. These planes are not at all built to fly at this great height – although this was technically possible at that time. As we read through the novel, encountering this problem of frost several times, we notice that the concerns of the pilot are totally fixated on to this frost, and how to deal with this problem. The pilot appears to come into a vacuum, in which the purpose of his flight, the relevance of enemy or friend, or any patriotism – indeed any values – appear to become irrelevant. He is only doing and focusing on what this specific situation is asking from him. He writes:

It came to this, that I was working at my trade. All that I felt was the physical pleasure of going through gestures that meant something and were sufficient unto themselves. I was conscious neither of great danger (it had been different while I was dressing) nor of performing a great duty. At this moment, the battle between the Nazi and the Occident was reduced to the scale of my job, of my manipulation of certain switches, levers, taps. This was as it should be. The sexton's love of his God becomes a love of lighting candles. The sexton moves with deliberate step through a church of which he is barely conscious, happy to see the candlesticks bloom one after the other as the result of his ministrations. →

⁷⁸² Saint-Exupéry, *Flight to Arras*.



When he has lighted them all, he rubs his hands. He is proud of himself.⁷⁸³

And:

For me, piloting my plane, time has ceased to run sterile through my fingers. Now, finally, I am installed in my function. Time is no longer a thing apart from me. I have stopped projecting myself into the future. I am no longer he who may perhaps dive down the sky in a vortex of flame. The future is no longer a haunting phantom, for from this moment on I shall myself create the future by my own successive acts. I am he who checks the course and holds the compass at 313°. Who controls the revolutions of the propeller and the temperature of the oil. These are healthy and immediate cares. These are household cares, the little duties of the day that take away the sense of growing older. The day becomes a house brilliantly clean, a floor well waxed, oxygen prudently doled out.... Thinking which, I check the oxygen flow, for we have been rising fast and are at twenty-two thousand feet already.⁷⁸⁴

It is as though in concrete action, the overarching purpose (or future) or value disappears from stage. Hence, professionals, when they do their jobs, do not act while constantly having organizational values or purposes in mind, such as a statement of core values or a code of ethics. In fact, they just do what needs to be done – immediate cares – in a specific and concrete situation. Although values seem to disappear from stage, this does not imply that they are outplayed. The pilot does have a sense of duty, but not while he flies. The pilot does know who the enemy is, and why he fights on French side, but as soon as a breakdown or disturbance draws his attention, when the chips are down indeed, this disappears or moves to an unconscious background. While flying, he needs to do what the situation asks from him, that what appears to be good. This background is not irrelevant. It can return, so to speak, in reflection – as the novel is full of reflection. This reflection lifts one up from immediate cares, and makes one “stop and think”, referring to Arendt. Some reflection is immediate, perhaps not even conscious. Schön has called this reflection-in-action. There is also reflection that is more fundamental, reflection-on-action, but requires a delay or detachment in time and space. It is indeed turning to the ‘whole’ in the hermeneutical circle. The fighter pilot needs some sense of that what is general in a concrete context, without concrete presence of the general aspect. In contemporary international Air Force →

783 Saint-Exupéry, Chapter IV.

784 Chapter IV.



practice, this is in fact called 'situational awareness': sensing what is going on around the jet plane and relating intuitive actions to the purpose of the flight without explicitly doing so.

As one might expect, this kind of knowledge that the pilot has is not at all merely technical knowledge of the plane, nor merely calculated knowledge. In fact, it is a corporeal knowledge, immersed activity, to have insight in a practice. Saint-Exupéry writes:

To know is not to prove, nor to explain. It is to accede to vision. But if we are to have vision, we must learn to participate in the object of the vision. The apprenticeship is hard.⁷⁸⁵

And:

But I know that nothing which truly concerns man is calculable, weighable, measurable. True distance is not the concern of the eye; it is granted only to the spirit. Its value is the value of language, for it is language which binds things together.⁷⁸⁶

Saint-Exupéry connects this kind of knowledge to that which truly concerns man. That what is valuable cannot be controlled in any technical or detached fashion. Values can only be understood as background aspects of what a concrete situation is asking and come only to the foreground in moments of reflection. Values are not pre-given in practical wisdom but are rather intertwined with the moment of judging in a concrete situation. What appears to be good, can be found only in concrete practice. In reflection – “to stop and think” – space is created for values and one can perhaps learn from this as experience, (such as Saint-Exupéry shows), but this cannot determine what a concrete situation is asking. Hence, I argue, what the right thing is to do, in a moral and political sense, is not totally determined by general values. Rather, practical wisdom is about making possible judgment and action.

785 Chapter V.
786 Chapter XII.

Summing up: Küpers as critical friend of your board

From this elaboration on Küpers, I start to sum up the following elements that are important to understand practically wise supervision.

MERLEAU-PONTY

Individual

Embodied experience

The supervisory practice is not only about individual cognition of the supervisory board member, but about the ability of a supervisory practice to include different forms of perception to understand the organization. The individual supervisory board member should pay attention to ordinary affects and emotions, praise of stories and problems of structures. Already, many supervisory boards do site visits and have conversations with people in and around the organization. However, this may be done with primarily a cognitivist approach: collecting and processing information. The involvement of the supervisory board in ordinary organizational and caring practices could be more oriented towards how the organizational and institutional practices might be justified, amended or criticized due to the experience of the ordinary. Furthermore the supervisory practice, in the boardroom, is a practice of friction, of scanning and exploring how practices work, how people relate to each other.

Practice

Ambiguity

Dealing with ambiguity demands that supervisory boards should hesitate from asking in advance what targets be set, or strategies be completed, as this will force the executive board to abandon flexibility. Dealing with ambiguity is more than dealing with matters rationally. Conflict must be possible, and this possibility needs organizational backup. Ambiguity, furthermore, requires a modest attitude. Practically wise supervision, in the end, provides very little to hold on to.

Inter-practice

The 'art' of supervision becomes how to read between the lines, to look at 'inter-practices'. This is a very delicate task and requires indeed not a mere moral compass or a gut feeling, but rather a practical understanding of what there is to be done by the organization, where or whether it tends to conceal ambiguity, what may not, or precisely must be said. Inter-practices may open up possibilities for making decisions or working through, as it opens up many different interrelated aspects that can all be clues for intervention: being, feeling, knowing, doing, sharing, structuring or effectuating.

Institutional

Responsiveness

Responsive supervision is both dialogic (openness to different perspectives and experiences) and democratic (a supervisory board is devoted to listening to people, being responsive). This requires a transparency, and the permanent quest for justifying, amending or criticizing the institution. A responsive supervisory board withstands the temptation to fixate on ideas about good care or good governance, but rather takes up the challenge to, again and again, figure out what turns out to be good in this particular situation. Or, of course, to make this responsiveness possible – in concrete care or in organizational practices.

11.7 Practical wisdom and the political difference

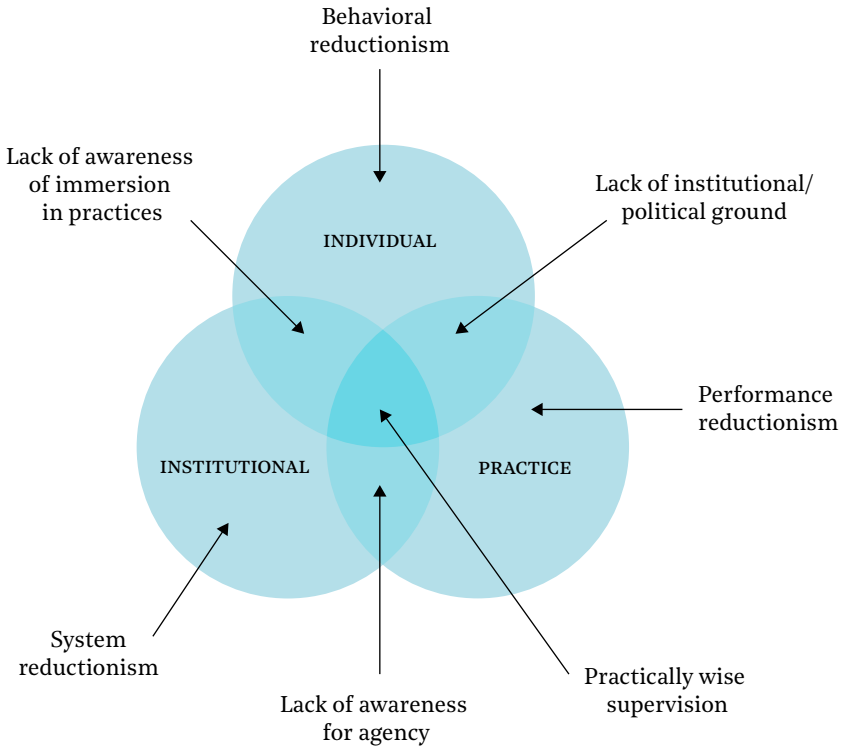
In the beginning of this chapter I promised that I would work out concepts that would help to navigate the tensions described in Chapter 10. What I want to do in this final paragraph of this chapter just before the conclusion and discussion is to relate these concepts to the different tensions, and how, in my view, they are related. But first I need to mention something different that shows up from these reflections above (and what was already mentioned in Chapter 7 and 8). Any conceptualization of supervisory practice must withstand, in my view, reductionist approaches.

Practically wise supervision as anti-reductionist

This may seem like a truism, but in fact, as the supervisory practice is about the entire organization in all its facets and complexities, it is very tempting, perhaps sometimes also necessary, to reduce it to either/or distinctions or to give some final explanation. For example, in contemporary discourses, as shown in Chapter 3, good supervisory practice (and the promise thereof and therefore also the ‘tweaking’ point) appears to be reduced to the individual behavior and competencies of supervisory board members. Structural or institutional interventions are distrusted – in the end, it is supposed to be all about behavior. If there is one thing that I hope that this thesis debunks, then it would be this one-dimensional view of the supervisory practice. We need to include not only individual behavior or competencies, but also an idea of consciousness, of culture and of institutional systems and arrangements.⁷⁸⁷ An anti-reductionist view, in its turn, requires a permanent open space for possible conflict and different cues for intervention and decision. Hence, practically wise supervision is not *merely* about the individual board member (with its ability to think, to judge or to interpret), is not *merely* about the practice of governance (with its routines, friction, implicit and explicit norms, game-like structure) and is not *solely* about its institutional arrangements (imposed values, temporality of values, checks and balances, enabling and restraining power). These three aspects are intertwined with each other in such a way that they cannot be reduced to one another. In a Venn-diagram, this appears as follows:

⁷⁸⁷ See Kupers and Statler, 385.

Figure 1. Practical wisdom as overcoming three kinds of reductionism.



Behavioral reductionism

If the supervisory practice is individualized – everything comes down to the individual behavior of a board member; whether he shows courage, trust, processes information correctly, et cetera – I speak of behavioral reductionism. A focus on professional abilities and competencies also belongs here. The problem of this reduction is that it overlooks the fact that board members are immersed in practices (beyond individual cognitivism) and overstates the possibility that individuals have to change the course of events. It also overlooks the institutional task, that behavior needs to be carried out by institutional arrangements that foster and stabilize the possibility of conflict over values, checks and balances and democratic structures.

Performance reductionism

If supervisory practice is reduced to mere practice, it leads to a reduction in common performance. This may show itself as a focus on *boardroom dynamics* (see Chapter 3) and hence becomes a psychology and sociology of boardroom practices. This undermines the possibility of individual deviation from expected common behavior and does not accommodate the need to go beyond

immediate practice – towards an institutional care. This reduction may also show itself in a bureaucratic form: the practice is reduced to doing things that belong to the practice (formulate a vision, following relevant regulation, implementing information protocols, et cetera). Quite easily, it is forgotten that governance is also a political practice.

System reductionism

There is a widespread distrust in civil society of governmental (or insurance companies') interventions to 'secure' quality of care or of governance by means of regulation and control. The belief that institutional arrangements will provide better practices as such – for example shaped in systems of checks and balances or accountability – appears to be water under the bridge, at least in governance practices in civil society. This also explains the focus on behavior and practices, as a reaction against so many regulatory actions (although it appears that many bureaucratic structures in organizations are induced by internal quality management systems). Reductionism within systems may indeed lead to an alienation of the board and management from ordinary practices and may undermine the necessity to be flexible – to seek out what turns out to be good care or good management in concrete practices.

Three lacks

Then there are three areas in which two elements may be addressed, but one is overlooked. This leads to a 'lack' or shortage. There may be attentiveness to the role of good practices and institutional forms but blindness to individual agency. There may be sensitivity towards a combination of practice and individual approaches but may overlook the necessity of institutional care and the political aspect of organizing care (and I believe this is a common mistake). Then there may also be a focus on institutional structures and individual behavior, but the practice elements are forgotten, and this lack will easily lead to hubris.

Practically wise supervision can only be possible if there is a non-reductive approach towards these three elements. That is: it needs to account for all three, which may indeed lead to ambiguity. Practically wise supervision is also about the unfolding of complexity, rather than merely reducing it.

Practical wisdom and the political difference

Let me now turn to relating the idea of practically wise supervisions to the tensions described in the previous chapter. Recalling, the tension of the political difference was that the supervisory practice needs to navigate through on the one hand the need to ground the purpose of the organization in everyday orders and positions of caregivers and care receivers, while on the other hand firm ground will appear to be quicksand: the grounds need

to be postponed, made provisional and for the time being due to potential conflict and contingency in ordinary care. This keeping open the grounds of the organization, its decisions and 'quality management' is a matter of critical questioning (trust/doubt), or diving into ordinary organizational practices (bodily experience), of being aware that there is no outside position (immersed judgment) and that you somehow need to think beyond yourself (judgment, enlarged mentality). However, it is not merely individual. Dialogue serves as a way of having openness towards different perspectives on the process of 'grounding'. Ambiguity of practices forces a board to understand how decisions may turn out in practice. Norms may need to be altered in the light of aims that are disputed. Moreover, navigating this tension is not possible if its institutional aspects and the political ground (and quicksand) are not included: organizing institutional forms of participation, traditions, debate, discussion and potential conflict. There is no trust without the possibility of doubt.

Practical wisdom and fragile stability

The tension of fragile stability has to do with the need to promote stability and change at the same time – or knowing what is needed in this regard. I believe the point is here to understand that the need for adaptation to the environment can never be deterministic. The way the environment is interpreted is not done from a view from nowhere but is always already immersed from within the governance and organizational practice. Whether the organization needs to adapt, in whatever way, is not a result of detached rational deliberation, but involves political choices of value (recourse of the aim to the norms) facing contingency and ambiguity. There is always an alternative. This is all the more urgent as the cry for change is omnipresent, while institutional stability may prove its own value. Moreover, institutions and practices can be sturdy – for good or for bad. The permanent urge for change may lead to a permanent dissatisfaction and may overlook how incredibly capable practice turns out to be – thanks to, or despite the institution.

Practical wisdom and democratic deficit

Decisions always need to be taken while the possibility of conflict is always present. In the end, there are always people or bodies (as in: boards) who make decisions. My reflections on practical wisdom led to the following points. First of all, on a small scale, it is important that practitioners and patients are able to influence the immediate practices they are in (action in concert, participation). Only in and through concrete practices can it be decided what turns out to be good care. The tension of the democratic deficit urges a modest and cautious mode of management that would wish to instill good care by means of quality management systems (although they may of

course help and are also inevitable to some degree). Secondly, there need to be institutional arrangements that foster the possibility of conflict. This may be done by actively showing the uncertainty and temporality of decisions and being able to admit that there is no certainty or determinism in decisions. The question is whether the supervisory board model within the structure of the foundation is a barrier or not: are there enough institutional ways to counter or criticize decisions of boards? And is not the technocratic focus on professionalization and expertise contradictory to the need for grounding politics (decision-making) in ordinary practices?

By this, I will end these philosophical reflections on the nature of practical wisdom for supervisory boards in caring institutions. I introduced different concepts that help to understand practical wisdom in the boardroom, while at the same time these concepts never really lead to a repertoire of action, precisely because of the ambiguous nature of the supervisory practice and caring practices. Still, we need to address some practical questions, problems and rebuttals. These will be discussed in the conclusion and discussion.

12. Conclusions and discussion: towards practical wisdom in supervising care institutions

12.1 Introduction

I started this thesis with a poem; *The Doubter* by Bertold Brecht. Indeed, I have been to a considerable degree in doubt about the central question: what is wise supervision? The core of the argument may be that the supervisory board needs to be that man on the scroll, while this doubting must also always find temporarily rest and persistence in a decision. There may always be a proper reason to start over again – that is the core of the political difference that is central to a practically wise supervision. In its relating to the swampy lowlands of ordinary caring practices, the practice of supervision itself becomes swampy. The focus on the purpose of the organization must be approached by a detour in ordinary practices and will appear to be a necessary yet swampy ground.

As became apparent, this thesis was not only about the supervisory practice that operates in vacuum. It was also a thesis on caring practices, on quality management, on civil society, on institutions and on politics. This is in line with my perception of ethics described in Chapter 7: concrete practices embedded in wider institutional and political discourses and structures. I wanted to sort out how the concepts of ambiguity, politics and democracy are or should be part of a reflection on the nature of the supervisory practice – always already oriented towards organizational practices of care (or other civil services).

Still, I have been making things rather difficult. A practitioner may question, quite rightfully or perhaps desperately: *now what?* In this final chapter, the conclusion and discussion, I will formulate and defend a number of recommendations that flow out of this explorative thesis addressed to supervisory board members (and its collectives and associations), but also to managers and directors, to researchers in the field of civil society governance and to government policy – this I will do in the third paragraph. In the second paragraph (after this introduction) I will briefly return to the different chapters and highlight the thread running through them all. At the end of that paragraph, I will integrate three perspectives that have been introduced in Chapter 9, 10 and 11. In the fourth paragraph, after the statements, I will discuss some objections that my

thesis may evoke. In the fifth and final paragraph I will give some concluding remarks.

12.2 Thread through this thesis

In this paragraph I will briefly highlight the building blocks of the different chapters, in order to highlight the thread of this eclectic explorative inquiry. The concern I raised in the introduction was that the dominant discourses of professionalization and value-orientation of supervisory boards and governance appears to me as a quest and desire for certainty and anchor points. I had doubts about this desire, as to me both caring and organizational practices are ambiguous (difficult to grasp). Moreover, the practice of governance and the organization of care, although related to social responsibility, is seen as an apolitical practice while I suspected that care and the organization thereof has inherent political aspects. With this professionalization, also the idea of 'civil society' is more and more suppressed and replaced by an idea of the expert-knowledge of technocrats – again, often with all good intentions of social responsibility. This thesis sought out to describe the practice of governance once we take into account the ambiguity of care and organizing, the political nature of care as well as the democratic aspects of civil society. Governance, then, was described as the practice of enabling and restraining power as an institutional task (rather than a mere functionalism).

I divided this thesis in two parts: an exploration of the supervisory practice and a theoretical exploration, building on the explorations in Chapter 1. I started the Part I (**Chapter 2**) with describing five stories in long-term care nursing and mentally disabled care in which there were 'troubles' for the supervisory board. With these stories I wanted to show the complexities boards may face when matters get away from. I also wanted to show how these governance practices are intertwined with political questions about what good care is, and how this is institutionally and organizationally embedded. Different stories also highlighted the autonomous position of the supervisory board, and how big the separation between supervisory board (and its practices of strategy making, controlling activities, trying to understand care from a distance) and daily organizational culture and practices may become. This leads us to question the democratic aspects of the supervisory board model.

Thereafter, in **Chapter 3**, I focused on common or ordinary practice of supervisory boards, and contemporary interpretations (by scientists, management thinkers and advisors) in the Dutch context of civil society governance. I described the four roles of supervisory board as a convention about what the supervisory task involves. I also showed that, by a description

of common practice, supervisory practice is not a mere rational and functional practice – but involves emotions, routines, implicit and explicit norms and materials (e-mail, agendas).

In this chapter I argued that although there are clues, in practice as well as in literature, to think about wisdom, values, moral compass or social responsibility – the potentiality and radicality of these concepts are neutralized by the professionalization discourse and the focus on expertise. In the next chapter (**Chapter 4**) I zoomed-in on two supervisory boards in mentally disabled care. I performed an interpretative analysis of dialogues in order to understand how they, in their ‘conversations’, understood their task related to the concepts of understanding care from a distance, how they perceive their political role and what they thought about the democratic content of their job. These supervisors were well aware of the difficulty in understanding what goes on in the organization. They were cautious with the use of ‘measures’ from quality and risk management systems, although they also appear to strongly lean on them. In both cases, it was shown that they do not perceive themselves as rational machines, but rather as professionals whose expertise is sensing what goes on in the organization or the boardroom. On the other side they are also in strong need of reducing the complexity they face. They may have difficulty in precisely describing their task, and they extensively used metaphors to make sense of it. Also, I distilled a ‘value talk’ – a repetitive set of phrases about the core values of the organization as a kind of mantra. Although this is attractive on the one hand, it may also make critical matters invisible, and may induce an ambience in which conflict or disagreement is disapproved of.

Regarding politics (although as concept very controversial within these boards) it appears that they in fact do have some active values and ideas about what they think good care is. The ‘value talks’ of course perpetuate this. They do not heavily lean on traditional quality management instruments, but favour (honest) stories and reflections. Moreover, they appear to regard the task of the supervisory board as a form of leadership: it is important that they show to people in and around the organizations what the organization stand for. Looking more critically, it appeared that both boards desired harmony and consensus – conflict appears to be evaded. Moreover, although they deny playing the political game, in their discourse a strong we-they opposition can be found.

Regarding democratization, I found that they interpret this notion as the need for (implicit) representation, legitimacy and transparency. One organization explicitly related democracy to the need for professional autonomy and the possibility (and necessity) of patients to co-determine how care will be given. From a different angle, I found that they do not see any reason to doubt the supervisory-board model as such – with its autonomy

and co-optation. They find it important that they are not appointed or can be suspended by some kind of assembly, as their job is a job of expertise in the light of social responsibility.

At the end of Part I (**Chapter 5**) I raised a bundle of questions that would serve as a guide for Part II of this thesis. What is the genealogy of governance in Dutch civil society/health care? What does it mean to say that care is ambiguous and political? How are quality and risk management ambiguous? How is the role of governance (an institutional task) related to deinstitutionalization process in modernity and late modernity? Is a civil democracy still thinkable, or is this water under the bridge? What does it mean to say that institutions in civil society are political? What, finally, is practically wise supervision?

In **Chapter 6** I extensively discussed the theoretical and historical background of civil society governance as we know it today. From different theoretical perspectives, I showed how the practice of governance became ambiguous. I showed how supervisory practice became dominated by ideas of expertise, independency, professionalization and administrative experience. The idea of civil society, although still visible, is under great pressure due to both processes of privatization and 'governmentalization'. The introduction of general management techniques was welcomed and reinforced a technocratic perspective on quality of care and organization (improvement, competition, measures, perfection).

I continued the theoretical exploration in discussing the ambiguity of care, and in its slipstream the political nature of care, when discussing care ethics (**Chapter 7**). I argued that care can be properly denoted (in relation to governance) by using four critical insights care ethics provide: relationality, responsibility, contextuality and politics. These reflections urge us, theoretically, for the first time to perceive the supervisory practice as a political practice that somehow needs to understand what goes on in deeply ambiguous practices. It needs to take into account different forms of power. Furthermore, this is then understood as taking care of a proper institutional embedding of caring practices. I said that supervisory practice is itself indeed a caring practice.

The next chapter is meant to further develop the idea of ambiguity, this time not from the perspective of care, but from the perspective of the organization and its management practices and instruments (**Chapter 8**). By means of Schön and Schmidt I lay bare some fundamental paradoxes that are present whenever management techniques are installed. I showed how management practices contain illusions of simplicity, perfection, harmony and social engineering. Management practices bear paradoxes that many practitioners themselves do not (want to) see or admit (quality controls may prevent quality). This is also no surprise, as the reduction of complexity (the opposite of unfolding complexity, trying to gently deal with

paradoxes) is also an inevitable and necessary part of management. You need to reduce responsibility in order to have accountability. You need to divide tasks and roles. You need to control whether things go as planned. The point is that there needs to be awareness that these practices actually reduce complexity, and you need to find ways to actively unfold complexity. With Schmidt, I argued that the supervisory task is focused on three organizational qualities:

1. *decisional quality, forms of reduction*

Are about the necessity to reduce complexity to more or less simple decisions, structures and agreements. You need them, but you also need to understand how to let them go when necessary.

2. *reform quality, forms of integration*

Is about an art of storytelling (which is never really in the hands of management), and deals with how organizational members can anticipate to decisions – do they make sense to them?

3. *conflict quality, forms of acceptance*

The third quality questions the first and second quality: have you been allowing for what is not known? Are the decisions or stories accepted? Are the levels of controls accepted in the organizational community and culture? Whoever wants to control, needs to allow for conflict. A conflict quality cherishes the possibility of conflict without things getting out of hand.

For this thesis, I needed to go beyond Schmidt, especially in addressing the question of politics and institutions, a matter he does not address. Furthermore, I believed we needed a better perspective of action rather than mere questioning of organizational practices. To address the institutional question, I sought to figure out the so-called institutional decline in recent times (**Chapter 9**): its origins, its advantages and disadvantages. I made a plea for a reevaluation of institutional thinking, beyond the functionalism (technical instrumentality and individualization) of governance and management practices in civil society. With Ricoeur, I argued that institutional care of governance arrangements and practices, abstract as it may be, may be born out of the same social responsibility, *charitas*, as concrete caring practices. There is no natural opposition between concrete care and institutions. The relation between them, however, may be hard to grasp. I argued that there are three ways in which the institution relates to concrete caring practices:

1. Sometimes the institution may be *justified*, praised, as caring practices proceed through the institution effortlessly.
2. Sometimes the institution needs to be *amended*, as caring practices proceed through the fringes of the institution – barely able to succeed. The institution does not really help, but care is still, with some creativity in ordinary practices, possible.
3. Sometimes the institution needs to be *criticized*, as the institution frustrates and perverts good care.

I argued that a revival of institutions is only possible by democratization (civil democracy) and repoliticization of institutional arrangements: instilling discussion, contradictions and the possibility of conflict.

To properly understand institutional care as a (re)politicization of governance, I needed to develop an idea of what politics is and may be in civil society, building on the political analysis in Chapter 7 on care ethics. I therefore turned to the *political difference* between *the political* and *politics* – a common difference in political philosophy (**Chapter 10**). By discussing Castoriadis, Ricoeur, Lefort and Marchart on the political difference, I argued that the political is potential association – and therefore potential dissociation – about the way the social, or care, is ordered in some way. *Politics*, the practice of governing and directing (making decisions) need to be grounded in the political. Care, however, cannot be grounded once and for all (there are no universal values of good care), while it still important to attempt this grounding (it is not mere powerplay as in Lefort). This leads to a modest political theory, with few pretences to produce ethical stances. There is no pre-given universal ‘good’ such as justice, equality or ‘freedom for all’. *A modest political theory, a modest approach to values of care and organization, needs to, again and again, relate to or be grounded in ordinary practices of friction – how concrete care may sometimes pass through successfully within the established order, how it sometimes is performed on the fringes of it, and how it sometimes criticizes it.* The political difference of care and its governing institutions, in this sense, shows that care is thoroughly ambiguous and not primarily a matter of (normative) ‘quality improvement’ but about (possible) questioning established orders and ways of doing. Caring may and actually proves to be humanizing, but ambiguity and friction are always there. After that, I formulated the first answer to the question of wise supervision as navigating through the tension of the political difference (the *impossible necessity* of grounding care). This proceeds through two other tensions, the tension of a *stable fragility* and a *democratic deficit*. The stable fragility refers to the task to change and provide stability at the same time. I contested perspectives on change or adaptation that rule out political decisions (adapt-or-perish perspectives). The democratic deficit refers to the problem of the necessity to include perspectives on (decisions on) good care, while there is

always the possibility that the answer is not univocal – decisions need to be taken. The democratic deficit questions the institutional arrangement of supervisory boards: does it provide enough institutional ground for legitimacy and civil democracy?

In order to gain a perspective of action on practically wise supervision, I turned to the very concept of practical wisdom, as discussed in the hermeneutic-phenomenological works of Arendt, Gadamer, Ricoeur and Merleau-Ponty (**Chapter 11**). Heuristically, I distilled a number of *concepts* that help to understand what practically wise supervision is about in the individual, practice and institutional sphere:

Table: Manifestations and concepts of practically wise supervision

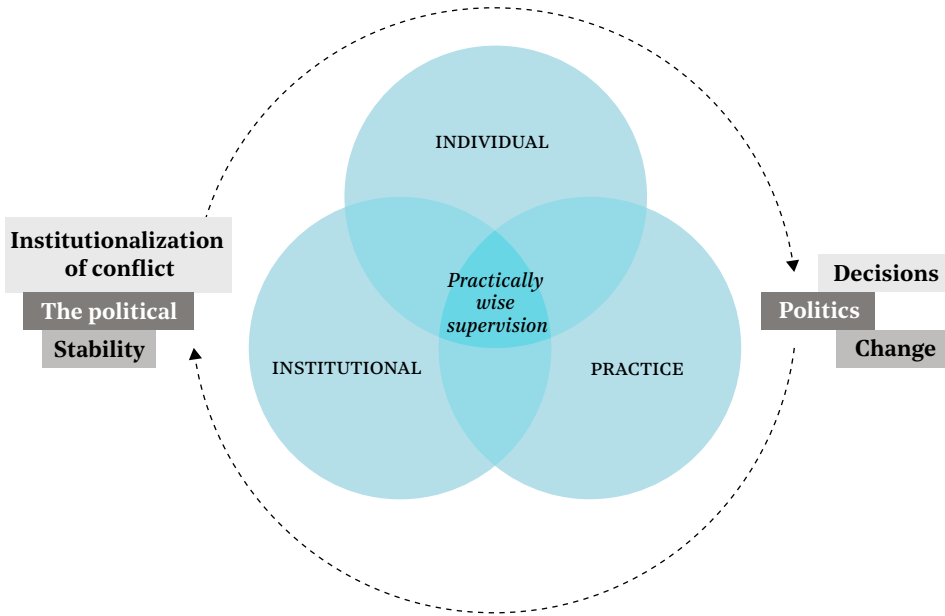
	ARENDR	GADAMER	RICOEUR	MERLEAU-PONTY
<i>Individual</i>	Judgment	Immersed judgment, interpretation, moral knowledge	Trust/doubt	Bodily experience
<i>Practice</i>	Common sense, action in concert	Dialogue, play	Aims and norms	Ambiguity, Inter-practice
<i>Institutional</i>	Association, participation	Traditions	Just institutions, discussion	Responsiveness

In the final paragraph, I related this conceptual framework to the tensions of the political difference. I argued that practically wise supervision cannot rely on individual intentions or practical abilities but must also have an institutional ground. Due to common discourses, there is the tendency to reduce practically wise supervision to either systems, behaviour or performance, while I argue that they always need to be taken into account together.

The conclusion in a few words and a figure

Taken together, I now draw the following figure that integrates the critical insights of care ethics (Chapter 7), three organizational qualities (Chapter 8), the three institutional relations with ordinary practices (Chapter 9), the tensions of the political difference (Chapter 10) and the conceptual framework of practically wise supervision (Chapter 11).

Figure 1. Scheme of practical wisdom in governance



In the middle, we find practically wise supervision as the taking into account of the individual, as well as practice, as well as institutional aspects of practical wisdom. The three tensions of the political difference (in shades of grey) image represent a permanent back and forth – a navigating – through these tensions by means of practically wise supervision. Within the tension of the political difference, the three organizational qualities (decision, reform and conflict) as well as the three institutional relations to ordinary practice (justify, amend, criticize) need to be located. The political difference finds its firm ground *and* quicksand in concrete caring practices (with its relationality, responsibility, contextuality and politics): this marks the task of the supervisory board and requires practical wisdom. Navigating ambiguity, understanding the political nature of supervision, management and care and promoting democratization may lead to ‘caring institutions’. If there is to be any professionalization of supervisory work, in the civic sense, then it is about the human ability to judge, to make matters political, to understand values in concrete contexts, deliberate and take decisions knowing that they have real consequences for people’s lives.

12.3 Recommendations

As mentioned in the introduction of this chapter, this still remains rather philosophical – despite the concepts that mark practical wisdom. In order to get closer to ‘ordinary practice’ (which of course needs to be my aim) I have formulated a number of statements that are directly about the supervisory practice. As this thesis is explorative and non-representative, these statements do not flow from my study as ‘evidence’, but rather as clues, ideas or possible directions. Also, such statements still require practical wisdom – they do not provide, after everything said, a ladder to the safe high ground. They do not provide new ‘techniques’ or tricks. Some statements directly apply to supervisory boards, some to governance in general. Others have also implications for further research.

1. Refocus on open purpose

In the introduction I mentioned the impact the term ‘refocus on purpose’ (*terug naar de bedoeling*) has had in the different civil society sectors.⁷⁸⁸ I gave conceptual words to a widely shared feeling that ‘systems’ had taken over the ‘lifeworld’. In supervisory boards, this concept was and is widely embraced as well. What I have done in this thesis is to provide this concept with a rigorous theoretical ground. The purpose for which a refocus is needed cannot be captured in ultimate values but must again and again be grounded in ordinary swampy practices and in the historical development of certain values that are imposed to the organization (as argued in Chapter 10). There is no essence in the purpose, however: it is about finding out what turns out to be good care (in terms of relationality, responsibility, context and politics, see Chapter 7) – including the possibility of conflict, and thanks to or despite the system world (with its quality management and institutional proceedings). The purpose is open, evolving. Or more precisely: attempts must be made to figure out a purpose – but it must be kept open, contingent and for the time being. The reception of the concept of ‘refocus on purpose’ seems to have led to a distrust of institutions, as they are commonly equated with the system world (with its distortions, lack of effectivity and inertia). I have argued that a refocus on purpose precisely needs a strong institutional care and a revaluation of institutions (including a politization and democratization, see Chapter 9). In order to refocus on purpose in daily practices, we need institutional arrangements (as well as practices and individual behavior) that promote civil democracy – with its due possibility of conflict.

⁷⁸⁸ Hart, *Lost in Control*.

2. From professionalization to politization.

The supervisory role is not primarily and only an individual professional expertise (technocracy) but rather a common practice of an institutional care for a civil democracy. This entails, as noted in Chapter 11, a practical wisdom that counts with, relates to and reflects on ambiguity, politics and democratization. Expertise is required, surely, but decisions do not follow from expertise, but rather from political deliberation. Wisdom may indeed come from ordinary places: ordinary citizens that are involved in the organization (as volunteer, as caregiver, as patient, as local residents). One might argue that professionalization *involves* this politization or political judgement. However, as argued in Chapter 6, the term professionalization is interwoven with the developments of governance: independence, expert knowledge, non-democratic. The political aspect of the supervisory task has its root in citizenship, not in expert-knowledge (see Chapter 11). This argument may have consequences for search and selection of supervisory board members. It may also have consequences for agenda of and conversations in the board: there will be more focus on, for example, dilemmas, which values are involved and how people in ordinary practices are positioned in these questions.

3. Supervision is not primarily about the position of information, but rather about the position of interpretation.

Although this may seem a semantic trick, it is important to understand that there is no objectivity or detached knowledge available in supervisory practice. Of course, the more perspectives you can gather, the richer the interpretation position will be. Interpretation also implies that the organization is interpreted by means of pre-conceptions of how one looks at good care or just institutions. Following Gadamer, discussed in Chapter 11, the task is not how to process knowledge gathered 'out there' but how to bring different horizons of interpretation in dialogue. This also implies that there is no objective norm to evaluate whether care is or was *good*. That what is considered to be good arises out of the interplay between interpreters and interpretations. Following practical wisdom, there is no subject-object relation between supervision and organization, but rather an interplay. This 'game' is not only played, but this game also plays with the supervisory board. From the very beginning, supervisory board and organization are interwoven and reflexive. Hence, for a supervisory board it is better to have a proper dialogue (all across the organization) rather than a load of information – even though the latter might give the board member more comfort.

4. Governance is both and at the same time about enabling and restraining power.

There is neither optimism nor skepticism implied in governance. The supervisory practice enables power by handing over a mandate, by giving trust and by backing up the executive board and the organization – *power in common* (see Chapter 7). The supervisory board, in this sense, makes organization and institutional care (with responsibility, accountability) possible. Enabling power involves the institutional task of sheltering (also Chapter 7).

Supervisory practice, on the other hand, *restrains* power by being able to block certain decisions, to be suspicious, and by the power to suspend or fire the power-in-place. This possibility and responsibility of institutionalized conflict is important due to the very nature of civil society organizations: it needs political deliberation, separation of power and checks and balances (Chapter 10). Enabling and restraining may be individual, in the group or institutional. Judging when and how to enable or when to restrain requires practical wisdom (Chapter 11).

Supervision, in this respect, requires a permanent oscillation between enabling and restraining power and is a delicate task.

5. Practically wise supervision requires modest interpretations of good and bad.

Supervisory practice should be aware of the (necessary) limitations of quality management (Chapter 8). Do not overinterpret outcomes of quality and risk management systems. Roaring strategies and grotesque moral language should be distrusted, as nothing is good without its opposite, and things may turn out differently. Any normative conclusion needs to be temporary and informed by ordinary practices. A golden quality mark may be both good and bad (see also Chapter 2). I have shown extensively how ambiguous quality management is while it communicates unambiguity. What is considered to be good (in and through practices) is to some extent out of reach from a supervisory perspective (Chapter 7). It requires, therefore, an enlarged mentality, abilities of responsiveness and dialogue to get a hang of it (Chapter 11).

6. Understanding the organization as a historical system

As organizations are not mere purposive but also social-historical systems (in which purposes are embedded, changed and developed), a focus on the core values of an organization may be misleading. Core values can easily trap you into the safe high grounds – they lose touch with the swampy lowlands. Even more, they may lead to an illusion of harmony and perfection that can never be achieved in practice. Core values may then denigrate concrete practices – it is never good enough (Chapter 8). Moreover, moralization of

ordinary practices with – in themselves – attractive values, may block one's vision of the swampiness of ordinary practice (see also Chapter 11 and the narrative of Saint-Exupéry). It is, therefore, also interesting to understand where the organization came from, what stories are being told, how people think about good care, about management and control, what bothers them and makes them proud in ordinary settings.

7. Relate to dilemmas in ordinary practice.

Although supervisory boards are far more active than before in doing site visits or visiting meetings or parties in the organization, I believe that there is much more that could be gained. It is not only important to show interest or to give praise, but also to really sense and feel the dilemmas and deliberations that are experienced in daily practice.⁷⁸⁹ As noted in Chapter 11, it is important not only to judge analytical/rational, but also to involve sense, intuition and emotions. This can bring something to mind that a rational analysis cannot do on its own. Sensing requires not mere thinking, but embodied practice. One of the key aspects of practical wisdom in respect to supervision is to relate to what is *not known*. Not in the sense that this should also be known that there is lacuna, but rather that, from the very nature of the supervisory board, relating to what is non-known marks its key feature. This means being able to accept that, to play with it, to imagine how things are, to place oneself in some else's shoe. Hence, site visits or co-working activities from supervisory board members is about relating to ordinary dilemmas – not to collect it as information, but to understand it as practice.

8. Institutional care is born out of the same *charitas* as ordinary care

There is *a priori* no reason to think that institutional care is somehow less empathetic or less compassionate about care than people active in ordinary caring relations (such as nurses or doctors), as argued in Chapter 9. My advice would be not to worry too much about a (causal) relation between actions in the boardroom and the benefits in daily practice (whether or not you have added value). Added value must of course be pursued, but institutional care ought not lead to self-justification but rather to humility (Chapter 7). The experience of being in the board (episodic, abstract, distant) may induce members to pursue such a causal relation. As everyone, supervisory board members want to be meaningful. It marks a practical wisdom to suspend this need of recognition or of being valuable.

⁷⁸⁹ The NVTZ has given several clues for this in their publications called *Zienderogen Beter* (noticeably better).

9. Do not be blinded by strategy

Strategy is important as guidance and for providing security for supervisory boards. However, strategies may be paradoxical, may turn out differently, and causal relations are hard to attribute (Chapter 8). The evaluation of strategy by means of indicators is very risky, as it is often ambiguous why some things worked, and others didn't. A fixation on strategy may alienate management practices from ordinary care and may lead to a permanent organizational change. It is important to keep strategy fluid, to center responsiveness rather than to fixate strategic plans. This is even more relevant due to what is called 'reflexive modernity': meanings may change very quickly, and decisions can only be for the time being (Chapter 8 and 9).

10. Ducks need not stand in a row

A dominant management ideal is to have the ducks in a row (everybody facing the same direction). I have argued that a conflict quality benefits if ducks are dispersed, if people are not on the same page. This is, of course, in itself not a general truism (it may ruin the organization), but *plurality* of voices and the possibility to look in another direction bears a democratic value of its own. Moreover, there is often not one single way to give good care. This means that management must go beyond common illusions of harmony and should cherish and make possible objection, even whistleblowing. As noted in Chapter 11, this is an individual task of a supervisory board member, a task of the practice (group) of the supervisory board, but is also institutional: how, in the organization, practices of dissent are made possible. This dissent need not always to be dissent with decisions but may also involve the possibility of workers to bend the rules as necessary to give good care in concrete practices. It is making possible to say: 'this is what is needed, despite the organization tells me differently'. This also relates to the idea of sheltering (Chapter 7): protect workers from superfluous standardization and accountability from either inside or outside. This is, as is the lived experience in many organizations and of many boards, not an easy task.

11. Rethinking the supervisory board model

The reflections in this dissertation urge for a rethinking of the governance model as we know it in the delivery of public services in the Netherlands (two-tier board in a foundation). The model of co-optation, the focus on expertise and the vacuum of accountability of the supervisory board, may not provide the institutional ground needed for a living civil democracy. Different esteemed experts on governance in the public sphere have argued that democratization will lead to an ineffective form of governance. This may be the case, but I believe that albeit democracy may lead to less decisional effectiveness (if that is indeed the case), it is still worthy to pursue it in order to regain a civil democracy. Already, we have noticed in the Netherlands a

revival of the cooperative model (in neighborhoods, streets and villages) and we have heard strong claims that civil society has become too much reliant on the state and/or market repertoires (see also Chapter 9). In the rule of Benedict there is a line that the more important a decision is – the more impact it has on the community – the more people should be involved in the process of decision making. I tend to think that in the actual Dutch board culture in health care, it might be the other way around: the more impact it has on the community, the less people are involved. There needs to be more exploration and dedication for alternative governance models that include ordinary citizens in decision making, control and ownership, such as the council system, the cooperative model, the community interest corporation or the traditional association.

12. Democratization as theme in associations of supervisory boards

Until now, there has been little discussion and debate on the democratization or politization of governance in civil society. Debates and discussions on governance themes are for an important part driven by the associations of supervisory board members (such as in health care, education and public housing). The past decade, there has been a lot of debate on professionalization, social responsibility and value-orientation; but a genuine questioning of the role of governance in promoting a civil democracy has, in my knowledge, not yet occurred. The discourse of professionalization, in my view, and this is a more general claim, needs to be succeeded by a discourse on democratization. Only in combination with such a discourse, a practical wisdom of supervision is possible, as argued in Chapter 11.

13. The indirect influence of government policy and inspectorates

Inspectorates, such as the inspectorate for health and youth care in the Netherlands, use what they call system- and governance-oriented form of inspection. This implies that they believe that good governance will deliver good care – and they do not use their own norms to control the organization and quality of care, but the quality management systems of the organizations themselves. They have therefore developed different frameworks of inspection (*toezichtkaders*) in which they explicate the role of governance – also that of the supervisory board. It is said that if the inspectorate trusts the system of governance and the quality of the supervisory board, the inspectorate can be more withholding with their inspections. Although this makes some sense, it eventually leads to a perpetuation of the supervisory board model as we know it. Government formalizes what they ‘hear’ in ‘the field’ of governance. This becomes an outside norm to which boards will conform. Hence, it is a self-fulfilling practice and will lead to isomorphism (as described in Chapter 6). Moreover, as we might expect, the function of the supervisory board is rather different than that of an inspectorate. The

supervisory board has a political role in institutional care, while the inspectorate checks whether the organization is compliant with current legislation. However, many inspectorates believe that their role should be much bigger: helping organizations to improve quality beyond legislation and compliance. This is of course noble, but also implies a governmentality: the power of the state pervades civil society, while civil society should be a counterforce towards the state. Hence, I believe it makes sense to think that government inspectorates should be cautious and hesitant in delineating what good governance and quality of care is. This also goes the other way around: health care organizations need to find and take their position in relation to government policy.

14. The tragedy of governance codes

In Dutch health care, in the widest sense of the word, organizations in different sectors are organized in sector organizations, as argued in Chapter 6. These sector organizations together have developed the governance code for health care (*Zorgbrede governance code*). Although there may be nothing wrong with code itself, its principles or values, I believe it leads to strange form of self-regulation. More firmly, government and its inspectorates use this code to direct and control organizations. Insurance companies and banks check whether organizations live up to this code. The code starts to live its own life, while at the same time the code does not count with the vast diversity of organizations in the health care sector. Hence, although such codification may have helped to transform, in a positive way, the effort and orientation of boards, it has become compulsory and leads to homogenization of (the governance of) organizations. If we would take plurality seriously, and the wisdom of boards therein, a governance code should be nothing more than an attempt to collect – rather than to enforce, directly or indirectly – a common practice.

12.4 Possible objections

This thesis raises perhaps more questions than it provides answers. This makes sense from a philosophical perspective, but the question is whether practices would benefit (whatever that may mean) from this analysis. There are, I believe, some possible and obvious objections to my thesis that need to be identified and answered. Giving answers to these questions may also provide clarity about my aims, as described in the introduction of this thesis.

Do I not mix up management and supervision while they are separated bodies with different responsibilities? Does my thesis not apply first of all to management rather than supervisory practice?

There are two sides this. First of all: yes, I do mix them up as I believe that supervision is always oriented towards a certain practice. Hence, thinking about supervision must go beyond the mere idiosyncrasies of the supervisory practice itself, but must also, or perhaps primarily, discuss what it supervises. Of course, the supervisory role is different from the executive or management role, but I believe that the separation between executive and supervisory roles is more fluid than often professed. Being aware of and transparent about this may be more helpful than acting as if the lines of demarcations are always clear – although of course, this acting *as if* makes supervisory practice possible in the first place.

The other side of the answer to this objection is that I believe that supervisory practice has been focusing too much on what it does *not* do. This may be historically explained (see Chapter 6) and is to some extent also inherent to the dual-board model. What may be positively formulated is the *substantive* task of the supervisory board (other than process-oriented tasks, such as controlling or giving advice). I believe that it makes sense to give the supervisory board, as they are on the threshold of the inside and outside the organization, an institutional task: not to control activities of the organization as such, but to control whether controlling activities (or decisions) are themselves controlled by means of internal critique; not to praise good-looking core-values that are made-up during an awayday, but to question again and again whether these values are relevant or irrelevant in ordinary practices.

Do I not make things more difficult than they are? Do I not demand too much from supervisory boards?

I do not make things more difficult than they are, I try to show in detail how difficult things are (unfolding complexity), while practitioners at the same time need to make things less complicated (reduction of complexity). My goal is to argue that practitioners need such constraints, but that they need to be aware that these are indeed required, and that it is sometimes necessary to

unfold complexity, to embrace or deal with paradoxes that are inevitable present in organizations.

In this sense, I do not think I demand too much from supervisory boards. Of course, in an intellectual sense, the level of ambition is high. But I have met many supervisory board members, I'm aware that they are clever, experienced and well-educated people. In a practical sense I do not make excessive demands of them, I believe. As far as I am concerned, the supervisory task need not to be a daily task. What I do intend is to question and challenge images of a practice that have become set in stone (about professionalization, independence, et cetera). Of course, the substantive task of a reevaluation of institutionality of the organization is quite a big one, and I argued that if things (models, structures, activities) need to change because of that, I would not object.

In the thesis, I move back and forth between civil society in general, public services and health care in particular. This is confusing. Which is the thesis really about?

In the introduction I have explained why I do this. The difficulty of this topic is that it is both and at the same time a general and specific question. My *general* argument is that any supervisory practice needs to be oriented on the substantive elements of the practices it supervises. The institutional care applies to all boards in civil society. However, in order to make this clear, I especially focused on health care – and even more particular long-term care (as this so obviously is about ordinary lives of people and how this is politically nested). Also, organizational ambiguities may be similar in different sorts of organizations (as argued in Chapter 8). Hence, although institutional care in, for example, primary education (also civil society in the Netherlands), requires as well to relate to ambiguity, politics and democratization – the very concrete practices, the social historic developments of practice and governance as well as the relation with government and market differ quite a bit from health care.

Is independence of the supervisory board not desirable? Do I not sacrifice independence by a plea for more democracy?

First of all, my argument does not automatically lead to the dismantling of the independence of the supervisory board. I do question its democratic content; I suggest that directly involved citizens should or could have a place in the supervisory board – but this need not undermine independence at all. A more important argument, as we have seen when discussing Arendt in Chapter 11, is that a supervisory board must be able to think beyond itself. This, decisively, does not only require independence, but also social embeddedness. Secondly, in one of the stories as presented in Chapter 2, it becomes visible how the independence of the supervisory board appears to

be important for institutional care. As an independent board, they could withstand and survive political scheming within the organization. My plea for an institutional civil democratic revival needs not (only) to apply to the structure of the supervisory board. The challenge is more general: what can be done to make civil societies civil again? Even within an association or a co-operative, it is possible to invent structures that institutionally arrange independence of supervisory boards – for example by mixing up board members that are directly involved and board members from outside with certain expertise.

Third, I believe that one of the key insights is that there is no golden bullet when it comes to institutional arrangements. I have made this clear as I argued that practically wise supervision cannot be reduced to its institutional forms.

What is so wrong with the current governance arrangements in civil society? Haven't there been many improvements in terms of social responsibility, and does not evidence show that it goes quite well?

I have endorsed the developments in the governance and supervisory practice in civil society and health care. My point is not that supervisory boards do not function properly all together. They may indeed function perfectly well within the institutional and historical structures.

I critiqued a particular and possible supervisory practice that does not take into account the ambiguity and political nature of ordinary practices. I wanted to highlight something that has, in my view, been underestimated in supervisory practice – due to its specific history, practices and discourses.

I furthermore questioned the institutional and historical structures, not the quality of the supervisory practice as it is. My criticism has an institutional nature: although supervisory boards appear to function just fine, in sum we have a governance, management and caring practice in which civil society has been eroded.

Also, I would agree that it is quite important that supervisory boards cannot be rejected easily. I would also agree (and this may differ from branch to branch) that there needs to be expertise in the supervisory board (on complex matters such as finance, real estate and administration). Both elements do not contradict my aim: the question of civil democracy is still important, even if the supervisory board needs some form of protection from political scheming; expertise is necessary, but it may not depoliticize decisions.

12.5 Final remarks and reach of this thesis

This thesis turned out to be a fundamental reflection on what appeared to be at first glance, a relatively marginal practice (the supervisory board). On a second look, a very complex world appeared when we dived into this practice. Although the function of the supervisory board could be seen as an ancillary position, I have shown the enormous social impact that it may have.

International reach

I have one more point to make about this thesis, and that is its reach. International readers may question to what extent this applies for public service organizations (health care, education, public housing) when these are organizations belong to the state (NHS, for example) rather than civil society. Apart from the fact that many analyses described in this thesis will also apply to public service organizations (such as institutional decline, political difference, organizational paradoxes, critical insight of care), the democratic and political question is only different in terms of the accountability and autonomy of boards. Other questions that I addressed are also relevant in public service organizations: to question the responsibility for and given to practitioners, a sense of ownership and involvement for citizens, et cetera.

There are not so many countries in the world in which the dual-board structure is dominant in public service and private organizations. Although the analyses in Chapters 1-6 may be at odds with and alien to unitary board practices, I believe that the chapters that follow have a much wider reach than merely one kind of board model. Unitary boards have as well the need to provide for institutional care.

Reach in private sector

The reach of this thesis within the private sector opens up a totally different debate. Although I think that some elements apply to private organizations (paradoxes of management, possibility of conflict, the need for ownership in concrete practices) it all depends on how one looks at the role of private organizations in society. It also depends on the product made or service delivered. Not everything is ambiguous, relational or political. But if private organizations have indeed an inherent social responsibility (which is more than a mere add-on or a choice), then it is reasonable to argue that the institutionalization of conflict and democratization is not only functionally feasible but is also grounded in normative or moral elements. Even if shareholders have a final say, they are still in need to 'politicize' decisions (as argued with Beck and Holzer in Chapter 9).

Further research and practice

I hope that this research will encourage supervisory boards, executive boards – but also their collectives, to explore the issues I raised. Especially for further research, it would be useful to investigate institutional arrangements that promote civil democracy, and to look for ways that the entrenched organizations may adapt to this. It is controversial to question the supervisory board model (and the foundation): practitioners do not want to talk about institutional arrangements, so it appears. I hope that this thesis will reopen this debate – not to change it in a blink, but to be aware that there is indeed a problem of quality of civil democracy, in general and in concrete caring practices, and that institutional arrangements do matter for the potentialities people have to achieve things together.

Samenvatting (Dutch summary)

Tijdens één van de dialogen die ik had met raden van toezicht in het kader van dit proefschrift sprak één van de deelnemers, een bestuurder, het volgende over wat hij aantrof toen hij jaren geleden begon bij de organisatie waar hij bestuurder was:

Hoe kan het toch in godsnaam zijn dat mensen die een ondersteuningsvraag hebben, of zorg nodig hebben, dat zij aan allerlei voorwaarden moesten voldoen om de juiste ondersteuning te krijgen? Er wordt gedacht vanuit de instelling! Toen ik daar in de kortverblijfzorg (gehandicaptenzorg, red.) terecht kwam, greep mij dat eigenlijk onmiddellijk aan. Hoe kan het nou zijn, dat als iemand doorgeplaatst moet worden, dat haast onmogelijke zoektochten waren? Want als iemand dan autistisch was kon hij niet komen. Als de ouders niet voldoende geld hadden konden ze niet komen. Als iemand niet zwaar genoeg gehandicapt was, van een te hoog niveau, of juist van een te laag van niveau... Er was altijd wel een motivatie om mensen niet te helpen. En dat heeft me eigenlijk van meet af aan beziggehouden. Dat kan niet waar zijn! Toen was dat nog de tijd van grote wachtlijsten. Mensen kwamen op plekken terecht waar ze niet hoorden, en ze werden weggehaald uit hun sociale omgeving. Toen realiseerde je je misschien nog niet eens hoe dat allemaal precies in mekaar zat. Je kunt je daar wel iets bij voorstellen.

Dit soort maatschappelijke kwesties en engagement heb ik altijd beschouwd als het hart van het institutionele werk van bestuurders en toezichthouders. Maar het is niet vanzelfsprekend het hart, omdat we, zo betoog ik, de politieke en maatschappelijke implicatie van de *maatschappelijke organisatie* (nog) niet voldoende doorgronden. Dat toezicht en bestuur soms ver af lijken te staan van maatschappelijke alledaagse kwesties, dat was mijn initiële verwondering en startpunt voor dit proefschrift.

Aanleiding

De rol en positie van de raad van toezicht in het Nederlandse maatschappelijke middenveld, zoals in zorg- en onderwijsinstellingen, is veelbesproken het afgelopen decennium. Ik richt me voornamelijk, maar niet uitsluitend, op de (langdurige) zorg. Er is veel aandacht is geweest in de praktijk en in de wetenschap voor het verbeteren van dit *interne toezicht*. Het gaat dan bijvoorbeeld om professionalisering, meer aandacht voor ethiek en waarden, strategisch partnerschap en een verlegde focus van bedrijfseconomie naar kwaliteit en veiligheid van zorg. Toch beargumenteer ik dat de wijze waarop

dit debat doorgaans wordt gevoerd te nauw is om de rol en verantwoordelijkheid van de raad van toezicht goed te begrijpen. Deze nauwe blik wordt geladen met kwaliteits- en risicomanagement, corporate governance, professionalisering, bedrijfskunde en waarde-georiënteerde benaderingen. In deze nauwe benadering van toezicht schuilt een permanente zoektocht naar zekerheid, eenduidigheid, helderheid en eenvoud. Omdat in de ervaring van het toezichthouden deze zekerheid dikwijls ontbreekt, heeft deze zoektocht een verlamme werking op het debat over en de praktijk van toezicht – en mogelijk ook op de daadwerkelijke zorg zelf. We hebben een perspectief op toezicht nodig dat de ambiguïteit en dubbelzinnigheid van zorg en organiseren als vertrekpunt van de praktijk neemt.

Er is een bestuurlijk concept uit de klassieke Griekse filosofie dat dergelijke ambiguïteit en dubbelzinnigheid centraal stelt. Dat begrip is *praktische wijsheid* (*phronesis*). Praktische wijsheid is een vorm van kennis die noch wetenschappelijk, noch technisch (vakmanschap) is. Praktische wijsheid is een moreel en politiek weten en delibereren. De vraag die ik daarom stel in dit proefschrift is: *wat is wijs toezicht?* Omdat het gaat over toezicht op zorg, gaat het ook om de vraag wat zorg en de organisatie daarvan omvat – en hoe daarnaar te kijken. Dit wordt ook wel *governance* genoemd, dat ik dubbelzinnig definieer als het tegelijkertijd mogelijk maken én beperken van macht.

Soort onderzoek

Dit proefschrift is een filosofisch proefschrift, maar begeeft zich ook op het vlak van bedrijfskunde, bestuurskunde en sociologie. Mijn bedoeling is een argument op te zetten om het toezicht vanuit een hernieuwd perspectief te bekijken, dat, naar mijn idee, onderbelicht is. Wat ik dus niet doe is iets *bewijzen* op basis van empirisch onderzoek. Ik heb wel veldonderzoek gedaan (dialogen met twee raden van toezicht en casusonderzoek) en ook mijn ervaring als beleidsmedewerker bij de Nederlandse Vereniging van Toezichthouders in Zorg en Welzijn (NVTZ) speelt een rol (hoofdstukken 2 t/m 4). Echter, het is een theoretisch wijsgerig proefschrift dat geen representatie veronderstelt, maar juist een bepaald perspectief inneemt van waaruit het toezicht en zorg wordt geïnterpreteerd.

Hoe toezicht werkt

In Nederland kennen maatschappelijke organisaties, voornamelijk zelfstandige stichtingen die (voor het grootste deel) publiek gefinancierd worden, twee bestuursorganen: de raad van bestuur en de raad van toezicht. Samen zijn ze verantwoordelijk voor goede zorg en alle publieke waarden die daarbij horen (zoals toegankelijkheid, effectiviteit, betaalbaarheid). De raad van bestuur heeft de dagelijkse leiding. De raad van toezicht stelt de bestuurder en zichzelf aan, keurt grote voorgenomen besluiten van de raad van bestuur goed en houdt toezicht op de organisatie van zorg. Er heeft altijd veel nadruk

gelegen op de scheiding van deze rollen ('je moet niet op de stoel van de bestuurder gaan zitten'). Toch leg ik meer nadruk op de gezamenlijke verantwoordelijkheid van deze twee bestuursorganen – juist omdat het voor veel zaken ambigu is waar precies de grens tussen toezicht en bestuur te trekken is.

Dit komt onder andere doordat de rol- en taakopvatting van raden van toezicht de afgelopen tien jaar flink is ontwikkeld. Waar toezichthouders eerst vooral met een bedrijfseconomische bril naar het bestuur en de organisatie keken, zijn zij nu veel vaker betrokken, soms ook in het strategieproces, bij inhoudelijke en strategische vraagstukken. Deze ontwikkeling is een reactie op een aantal casussen die in de media breed zijn uitgemeten waarin het interne toezicht zou hebben gefaald integriteitskwesaties of grootheidswaanzin onder ogen te zien (te denken valt aan Meavita of Amarantis). In bredere zin klonk er steeds luider maatschappelijk ongenoegen over de wijze waarop deze organisaties bestuurd worden (bijvoorbeeld te 'managerial', bureaucratisch, risicomijdend). Overheidscommissies, wetenschappers en verenigingen van toezichthouders gingen zich bezighouden met de professionalisering van het toezicht. Professionalisering betekent bijvoorbeeld het beter onafhankelijk positioneren van de raad van toezicht (geen nepotisme meer bij de aanstelling van leden van de raad van toezicht), meer diversiteit (in expertise, gender, culturele achtergrond en leeftijd), meer scholing, meer reflectie en evaluatie, meer rolbewustzijn en gevoel voor groepsprocessen. Een belangrijk onderdeel van deze professionalisering, zo komt ook naar voren in mijn literatuurstudie en de dialogen die ik heb gevoerd met twee raden van toezicht, is aandacht voor de meer 'zachte' kant van het toezicht. Het gaat dan om zaken zoals vertrouwen, onderbuikgevoel adresseren, openheid en varen op het (of een) 'moreel kompas'.

Hoewel deze ontwikkelingen op zichzelf goed zijn of lijken, vraag ik me af of ze diep genoeg reiken in het hart van de vraag hoe we denken over zorg en de organisatie daarvan in de context van de maatschappelijke organisatie. Worden deze ontwikkelingen vooral gezien als een soort 'waarborg' voor dat dingen niet meer mis kunnen lopen? Herbergt deze ontwikkeling niet ook een stil en soms luid verlangen naar zekerheid en grip? Is alle aandacht voor waarden en vertrouwen niet soms ook een vorm van zelfrechtvaardiging in een positie die fundamenteel onzeker is? Een 'waardenpraat' die eerder in de weg zit dan dat het helpt om te ontdekken wat er te doen staat? Staat de maatschappelijke organisatie niet voor meer dan alleen de onmiddellijke dienstverlening?

De ambiguïteit van governance van zorg, een vijfluk

Aan de hand van vijf theoretische perspectieven laat ik zien hoe op verschillende analytische niveaus de governance van zorg ambigu, niet eenduidig, is.

Luik 1: corporate governance

De wijze waarop we zorginstellingen in Nederland besturen is ambigu: het is moeilijk vast te stellen wat voor soort organisatie een zorgorganisatie is. Dit geldt zowel voor het 'zorgstelsel', organisatie en bestuur en toezicht. Nederlandse zorgorganisaties maken van oudsher onderdeel uit van het maatschappelijk middenveld of *civil society*, voortgekomen uit particulier initiatief. Hoewel het zelfstandige organisaties zijn, is het maatschappelijk middenveld wat anders dan de private sector – de markt. In de loop van de jaren is de organisatie van zorg steeds verder 'gehybridiseerd', dat wil zeggen, kenmerken gaan vertonen van zowel een markt-, een overheids- en een maatschappelijke organisatie. Een belangrijke invloed op het denken over bestuur en besturing (governance) van maatschappelijke organisaties is het zogenaamde *corporate governance* geweest. Dit gaat over de vraag hoe je ondernemingen aanstuurt waarin bestuur en eigenaarschap (aandeelhouderschap) van elkaar zijn gescheiden. Hoe zorg je ervoor dat het bestuur in het belang van de aandeelhouders handelt in plaats van in zijn eigen belang? Er zijn veel verschillende antwoorden op deze vraag geweest. Grofweg kun je een onderscheid maken tussen meer 'Angelsaksische' benaderingen (nadruk op controle en verantwoording) en meer 'Rijnlandse' benaderingen (nadruk op meepraten en vertrouwen). In de praktijk is echter gebleken dat elementen uit beide tradities onderdeel zijn geworden van het Nederlandse bedrijfsleven, en óók van maatschappelijke organisaties.

Luik 2: New Public Management

Een andere belangrijke invloed op het bestuur van maatschappelijke organisaties komt uit de bestuurskunde en staat bekend onder de noemer New Public Management. Het ontstond als reactie op de roep om overheidsbureaucratie terug te dringen, meer 'klantgericht' en efficiënter te werken. Het geloof in 'de markt' speelde hierbij een belangrijke rol. Het is dan ook niet verrassend dat dit type denken ook put uit de traditie van *corporate governance*, zoals hierboven beschreven. Inmiddels is gebleken dat het eerder een tegenovergesteld effect heeft gehad, onder andere door de steeds toenemende eis van standaardisatie, verantwoording en transparantie. Ondanks de permanente roep bureaucratie terug te dringen lijkt dit bijna nergens echt te lukken.

Luik 3: Institutionele logica's

Vanuit een institutioneel perspectief wordt wel gezegd dat de zorgorganisatie verschillende 'logica's' met elkaar moet zien te combineren. De wijze waarop een arts naar de wereld kijkt is anders dan die van de patiënt of verwante. Hetzelfde geldt voor de blik van de manager. Van verschillende kanten worden verschillende en soms botsende normen gesteld aan wat van zorg verwacht mag worden. Het aansturen van en toezicht houden op een dergelijke complexe organisatie (*professional bureaucracy*) vereist, gedacht vanuit complexiteitstheorie, juist een terughoudende opstelling van bestuur en toezicht, en veel verantwoordelijkheid in de uitvoering.

Luik 4: sociale praktijken

De ambiguïteit van governance in de zorg hoeft niet abstract of theoretisch gedacht te worden: het gaat om concrete, zichtbare praktijken waarin van alles door elkaar heen loopt en verschillende praktijken elkaar raken en overlappen. Dat is wat theorieën over sociale praktijken ons leren. Het gaat niet alleen om normen, en de benadering van sociale praktijken als 'logica's' denkt te veel vanuit het hoofd en te weinig vanuit het lichaam. Sociale praktijken worden gevormd, en onderbepaald, door (impliciete) waarden, lichamen, dingen (zoals computers of rollators), emoties, routines, repertoires, managementsystemen, ritmes, et cetera. Het is, vanuit een sturingsperspectief, moeilijk vast te stellen wat het is dat een praktijk beweegt of bestuurbaar maakt. Vanuit het perspectief van praktijken hangen al deze elementen als een ensemble samen, en zijn niet te reduceren tot individuele elementen die je kunt 'tweaken'. Er is niet zoiets als een eenduidige praktijk.

Voorbeeld: Zorg voor mensen met dementie in verpleeghuizen (psychogeriatric) is veel meer dan een zorgrelatie tussen verzorger en bewoner. Er komt van alles bij kijken wat onderdeel uit gaat maken van de zorgrelatie. Denk aan de wijze waarop de gebouwen zijn ingericht (zoals deurcodes, mogelijkheid om oneindige rondjes te wandelen, bushaltes, zelfs nagebouwde treincoupes). Steeds vaker zijn huiskamers, in plaats van appartementen, de centrale punten in de zorg. Ook wordt er veel gebruik gemaakt van technologie, bijvoorbeeld om te registreren of bewoners in de nacht hun kamer verlaten of dat ze uit hun bed vallen. Om relatieve vrijheid en bewegingsruimte mogelijk te maken worden er uitgebreide zorg- of behandelplannen geschreven waarin afspraken worden gemaakt met verwanten over mogelijke risico's. Verzoekers ontwikkelen routines in hun samenspel die een leven op zichzelf kunnen gaan leiden. Al dit soort elementen raken met elkaar verknoopt. Het gebouw, de technologie, het zorgplan of de routines zijn niet meer 'slechts' een instrument van zorg, maar bepalen zelf ten dele wat die zorg is.

Luik 5: Identiteiten

Als laatste ambiguïteit stel ik vast dat de identiteiten die toezichthouders hanteren niet gezien moeten worden als ‘paradigma’s’ – waarbij het ene paradigma het andere vervangt – maar als sedimentatie – waarbij identiteiten als lagen over elkaar heen liggen. Theorieën over identiteiten stellen dat zij gedacht dienen te worden als gelaagd. Ze zijn vaststaand en veranderlijk tegelijkertijd. Concreet gezegd: hoewel er veel aandacht is geweest voor ‘nieuw’ toezicht, of ‘nieuw’ organiseren zal het ‘oude’ toezicht en organiseren (wat dat dan ook precies is) toch in meer of mindere mate zichtbaar én relevant blijven.

Het politieke karakter van zorg

Toezicht op zorg moet tenminste zich de vraag stellen wat zorg eigenlijk is en hoe dat tot stand komt. Om zicht te krijgen op alledaagse zorgpraktijken en dit te duiden vanuit een toezichtperspectief maak ik gebruik van inzichten uit de zorgethiek. Dit is een stroming binnen de ethiek, gericht op en uitgaand van zorg in de breedste zin van het woord. Het komt voort uit de feministische filosofie, en vraagt aandacht voor hen die gemarginaliseerd worden of onder druk komen te staan door beleid en/of bepaalde opvattingen over ethiek of kennis. Dat kan bijvoorbeeld gaan om vrouwen, zwarte mensen of mensen in armoede. Ik noem vier kritische inzichten uit deze denktraditie:

- Zorgethici hebben nadruk gelegd op het relationele karakter van zorg en zetten zich af tegen dominante opvattingen over autonomie of ‘eigen regie’.
- Zorgethici onderzoeken hoe verantwoordelijkheid om te zorgen wordt mogelijk gemaakt of juist belemmerd.
- Zorgethici willen zorg beoordelen en waarderen vanuit de context waarbinnen het plaatsvindt.
- Zorgethici bepleiten het politieke karakter van zorg. Je kunt een zorgrelatie niet begrijpen als je niet ook de maatschappelijke en politieke context daarin meeweegt.

Het politieke karakter wil dus zeggen: zorg is niet een private aangelegenheid die toevallig publiek wordt gefinancierd. Zorg, zeker institutionele zorg, zegt iets over hoe we met elkaar proberen fatsoenlijk samen te leven, hoe macht en middelen verdeeld worden, wie het voor het zeggen heeft, hoe mensen zijn gepositioneerd in en gemarginaliseerd door zorg en hoe bepaalde ordes in stand worden gehouden.

Dit betekent dat de vraag naar wat 'goede zorg' is niet een technische, maar een morele en politieke vraag is. Een vraag van praktische wijsheid. Zo bezien is ook toezicht een politieke én zorgende activiteit. Ook de toezichthouder dient te werken vanuit de relatie tussen bestuur, toezicht en organisatie. De toezichthouder moet verantwoordelijkheid mogelijk maken én begrenzen. Verder staat de toezichthouder op het grensvlak van concrete alledaagse zorg en de politieke context, het institutionele kader, waarbinnen dat plaatsvindt. Deze institutie dient goede zorg te herbergen, vanuit het kleine (zorgverlener en ontvanger) naar het grote (politieke en maatschappelijk context) – en andersom.

De paradoxen van kwaliteitsmanagement

Hoewel de vraag naar zorg dus geen technische vraag is, wordt dit toch heel vaak technisch aangevlogen. Dit staat bekend onder de noemer 'kwaliteitsmanagement'. Veel zorgorganisaties hebben er speciale stafafdelingen voor. Kwaliteitsmanagement heeft als groot risico dat het zorg- of organisatiepraktijken beoordeelt vanuit 'hoge veilige gronden' en daarbij de 'moerassigheid' van alledaags(e) zorgen en wat dat voor type aandacht vraagt niet alleen uit het oog verliest maar zelfs perverteert.

Kwaliteitsmanagement houdt zich veel bezig met de vraag 'hoe het beter kan'. Het is nooit goed genoeg, zorg komt nooit tot rust en lijkt geen 'zo is het goed' te kennen. Echter, iets kan alleen maar beter gemaakt worden als je eerst een norm stelt, als je enerzijds kunt vaststellen 'hoe het is' en anderzijds 'hoe het zou moeten zijn'. Vervolgens gaat er gemeten worden. Maar de ervaring van zorgverleners en zorgontvangers is dat verbeteringen ook als verlies worden ervaren, of dat dat wat gemeten wordt niet relevant is voor de verleende zorg. Goede zorg betekent dikwijls juist het afwijken van de norm. Als 'kwaliteitssystemen' daar niet goed mee om kunnen gaan dan is dit 'verbeteren' een illusie. Het controleren van kwaliteit kan kwaliteit ondermijnen net zoals dat grote strategische veranderingen organisaties kapot kunnen maken. Kwaliteitscontroles kunnen zowel 'irritante bevestigingen' als 'inspirerende telleurstellingen' teweegbrengen. De gestelde norm is, bovendien, contingent: er is geen wetenschappelijke of technische logica voorhanden die deze norm bepaalt. De norm veronderstelt een (politiek) besluit. Dit betekent niet dat de norm willekeurig is – het kan weloverwogen zijn. Maar er is tegelijkertijd ook een alternatief (er is tenminste het alternatief van geen norm stellen). Het vaststellen van kwaliteit is paradoxaal omdat iets klaarblijkelijk goeds slecht uit kan pakken, en dat wat ogenschijnlijk slecht is kan in sommige omstandigheden goed zijn. Hierdoor weet je eigenlijk nooit of je meet wat je wilt weten en of de 'verbetering' wel iets verbetert.

Complexiteitsreducties

Dit alles betekent niet dat we maar niet meer hoeven te meten, of dat kwaliteitsmanagement irrelevant is. Waar het om gaat is dat iedere vorm van kwaliteitsmanagement een *reductie*, een versimpeling is van de complexe werkelijkheid. Deze reducties zijn nodig omdat dit een organisatie 'min of meer' bestuurbaar maakt: je hebt abstracties nodig om besluiten te kunnen nemen en legitimeren. We *doen alsof* verantwoordelijkheid eenduidig is toe te wijzen en te scheiden, en we *doen alsof* een kwaliteitsverslag iets zegt over kwaliteit. Echter, zodra uit het oog wordt verloren dat het hier om reducties gaat, en kwaliteitsmanagement dus *absoluut* wordt, raakt de alledaagse moerassigheid van zorg en organiseren uit het zicht en heeft men zich teruggetrokken op de hoge veilige grond. Een besluit is alleen een besluit in een conditie van besluiteloosheid: er is altijd een alternatief. Het is daarom van belang om naast complexiteitsreductie ook processen te hebben van complexiteits*ontvouwing*: onder ogen zien dat de alledaagse werkelijkheid aan eenduidig begrip ontsnapt. Dit kan onder meer tot stand worden gebracht door niet zozeer te kijken naar de directe uitkomsten van kwaliteitsmanagement, maar eerder te kijken naar hoe kwaliteitsmanagement in de organisatie 'landt', hoe er op wordt gereageerd, hoe het wordt bediscussieerd en of er verzet tegen is. De manier waarop er gestuurd en gecontroleerd wordt moet een open karakter hebben, steeds gevoelig voor tegenspraak. Dit veronderstelt een permanent heen-en-weer-bewegen tussen vastzetten en openbreken, tussen reduceren en ontvouwen van complexiteit, tussen een te veel en een te weinig aan controlemechanismen. Toezicht draait erom dat de controles zelf gecontroleerd worden. Dit betekent dat er ook sprake moet zijn van 'tegentoezicht' vanuit de organisatie of het bestuur: alleen de raad van toezicht die zich laat tegenspreken is in staat om controles te controleren. Nog scherper: een raad van toezicht kan alleen maar besluiten nemen voor zover deze worden geaccepteerd in de organisatie.

Sturen en verstoren

Als we deze paradoxale aard van organisaties verder beschouwen, moeten we vaststellen dat de idee dat een organisatie 'bestuurd' wordt in feite misleidend is, zeker als daar een mechanisch wereldbeeld aan ten grondslag ligt. Het houdt te weinig rekening met het complexe karakter van organiseren en van zorg. Besturen draait niet om het creëren van orde, maar om het hanteren van ordeverstoringen – een subtiel verschil. Besturen is daarom beter aan te duiden als verstoren. Mensen in organisaties ontwikkelen patronen en routines. Mensen en praktijken hebben dit ook nodig om überhaupt ergens in gezamenlijkheid toe te komen. Routines zijn een bestaansvoorwaarde voor een organisatie. Toch is het eveneens belangrijk dat routines verstoort of onderbroken worden, omdat dit een belangrijke bron van leren is. Dat wordt dan ook de algemene taak van management: het

verstoren van routines, anders gezegd, het jezelf moeilijk maken. Dit verstoren moet vervolgens zelf ook geroutiniseerd worden, waardoor er een paradoxaal spel ontstaat van het routiniseren van verstoren van routines. Het verstoren daarvan kan daarom ook verkeerd uitpakken. Dit is een relevant gegeven, omdat het verstoren van orde dus ook juist kan draaien om het brengen van rust in organisaties die als 'orde' in een permanente reorganisatie verkeren. Toezicht draait er dus om te begrijpen dat besturen als verstoren draait om het heen-en-weer-bewegen tussen verstoren en bestendigen, in de 'wetenschap' dat de alledaagse praktijk zich niet eenduidig of causaal aan laat sturen.

Risicomanagement

Een belangrijk onderdeel van kwaliteitsmanagement, en ook van toezicht, is risicomanagement. In professionele zorgorganisaties moet nu eenmaal verantwoording worden afgelegd over keuzes die gemaakt worden. Ieder besluit is risicovol omdat het anders uit kan pakken. Echter, kwaliteitsmanagement is dikwijls bezig met het bediscussiëren, voorkomen en managen van risico's die het zelf heeft geproduceerd. Dit geldt niet alleen in organisaties, maar is een fenomeen dat in de gehele moderne maatschappij en het bestuur daarvan aanwezig is. Hierbij valt op dat risicomanagement in toenemende mate een vak is geworden van experts. 'Gewone' mensen die te maken hebben met de risico's worden vaak te weinig of te laat betrokken in de vraag hoe risico's worden afgewogen en wie de gevolgen moet dragen mocht het verkeerd uitpakken. Dit afwegen van risico's is een politieke activiteit en heeft zijn weerslag op het alledaags verkeren van mensen in organisaties, zeker in de zorg. Het is daarom van belang om bij risicomanagement mensen om wie het gaat – patiënten, cliënten, verwanten en professionals – mee te laten praten en beslissen over risicoafweging.

Institutionele zorg

Instituten geven betekenis en stabiliteit aan het (samen)leven. In de laat-moderniteit is dit geen vanzelfsprekendheid. Onze grootste en meest dominante institutie is die van de overheid als verzorgingsstaat – en die is ook grimmig gebleken. Juist maatschappelijke instituten, zoals de kerk, de school of de vereniging hebben niet meer de dragende kracht die ze ooit hadden. De kritiek die deze instituten hebben verzwakt is bekend: ze neigen naar sociale geslotenheid, het wegduwen van diversiteit en ze zijn niet flexibel. Deze kritiek komt voort uit de opkomst van het individualisme en instrumentele rationaliteit (het technisch willen beheersen en besturen van de wereld) en, als gevolg daarvan, een verlies aan politieke vrijheid. Dat wil zeggen, burgers zijn steeds minder actief betrokken bij de publieke zaak, vrijheid wordt steeds meer beleefd in de privésfeer. Er is geen nostalgie in deze analyse: zowel individualisme als technische rationaliteit hebben ook

goede gevolgen gehad, maar tegelijkertijd staat er wel iets op het spel. Ook zorgverlening kan steeds minder leunen op institutionele kracht en stabiliteit van een maatschappelijke organisatie. In plaats daarvan is er een permanente noodzaak ontstaan om je aan te passen aan een steeds sneller veranderende omgeving, om het steeds weer beter of anders te doen. Gedacht kan worden aan de grote hoeveelheid vormen van verantwoording (van binnen en van buiten) waar zorgpraktijken mee te maken hebben. De institutie lijkt ze hiervoor niet te behoeden of te beschermen, en kan het soms zelfs juist aanwakkeren.

Een herwaardering van maatschappelijke instituties is nodig, maar is ook omstreden. Instituties worden niet alleen geassocieerd met systeemdenken, maar ook met een mogelijke pervertering van het goede. Ze hebben de neiging te gaan domineren of een nadruk te leggen op macht of geld. Maar dit is maar het halve verhaal: instituties gaan ook over dat wat mensen, burgers, samen voor elkaar kunnen krijgen wat ze alleen niet kunnen – ook in morele zin: macht ten goede. Instituties, en het dragen daarvan door bestuurspraktijken, veronderstellen een publiek engagement – hoe onzichtbaar die vaak ook lijkt.

Ik pleit er daarom voor om maatschappelijke instituties te *repolitiseren*. Dat wil zeggen: erkennen dat de besluiten die worden genomen politiek van aard zijn, en raken aan de levens van burgers en (een bepaalde) uitdrukking geven aan wat goed samenleven is. De besluiten kunnen niet louter worden genomen op basis van wetenschappelijke kennis of vakmanschap. Dit betekent dat er een brug geslagen moet worden tussen experts en burgers. Door een nadruk te leggen op expertise en professionalisering (instrumentele rationaliteit) is het bestuur en toezicht van maatschappelijke organisaties steeds verder af komen te staan van de leefwereld van burgers. Er is een democratisering van het bestuur en toezicht van maatschappelijke organisaties vereist. Dat is een institutionele zorg. Aanknopingspunten voor een dergelijke democratisering is het beter in stelling brengen van tegenmacht, discussie en conflict én eigenaarschap op het niveau van zowel toezicht en bestuur als op het niveau van alledaagse zorgpraktijken.

Institutionele zorg als politieke aangelegenheid

Politiek en democratie gaan over veel meer dan wat er aan het Binnenhof gebeurt. Ik vat maatschappelijke organisaties op als politieke instituties. Het zijn plekken waar we, zo goed en zo kwaad als dat gaat, met elkaar pogingen doen fatsoenlijk samen te leven. In deze organisaties hebben mensen posities en/of worden gepositioneerd. Bepaalde ordes van samenleven worden in deze organisaties bewerkstelligd en bestendigd. Maar instituties kunnen ook veranderen, ze zijn *open*, of moeten open zijn. Dit vereist democratie – de mate waarin burgers, in gezamenlijkheid, in staat zijn hun leven en omgeving

te beïnvloeden. Dit geldt zowel voor het alledaagse niveau van zorggeven en -ontvangen, alsook voor het niveau van bestuur en toezicht.

Ik maak in dit verband onderscheid tussen ‘het politieke’ en ‘de politiek’. Hét politieke gaat over idealen, overtuigingen, belangen en de daarbij horende noodzakelijke pluraliteit. Met pluraliteit is de altijd aanwezige én alledaagse mogelijkheid van zowel *vereniging* als *conflict* verbonden. Dé politiek gaat over macht, wie het voor het zeggen heeft en besluiten mag nemen, welke instituties daarvoor zijn aangewezen. In een democratie is de politieke macht noodzakelijk tijdelijk, open en onderwerp van discussie. In een democratische samenleving is er een onoplosbare spanning tussen de politiek en het politieke. Dit komt doordat de legitimiteit om besluiten te kunnen nemen, alsook het besluit zelf, in het politieke – het alledaagse domein van met elkaar verkeren – geen absoluut fundament kent. In deze zin kunnen kernwaarden, die meer dan eens met grote morele inzet worden geëtaleerd, een oriëntatie geven, maar, en dat is voor mij een beslissend punt, ze kunnen ook in de weg zitten. Juist vanwege de grote inzet en universele aanspraak ontnemen ze het zicht op de alledaagse moerassigheid en ambiguïteit van zorg. Er is dan sprake van een ‘moreel teveel’. Voor zover er een abstracte ‘bedoeling’ van zorg is, dan is het dat de bedoeling altijd (potentieel) omstreden is. Verschillende groepen verschillen in wat ze als belangrijkste doel van zorg zien: bestuurders, patiënten/cliënten, verzekeraars, overheden en zorgmedewerkers kunnen verschillende opvattingen hebben over ‘de bedoeling’ van zorg, nog los van de vraag hoe die doelen dan gerealiseerd zouden moeten worden.

In mijn ogen is toezicht daarom niet eerst en alleen een zaak van professionalisering, maar ook, en vooral, een politieke praktijk. Anders gezegd: het gaat niet allereerst om de technische vraag van besturen, maar om de menselijke vraag van en betrokkenheid bij institutionele zorg. Toezicht gaat over het steeds weer grond proberen te vinden in dat wat mensen in alledaagse zin aangaat en welke waarden daar van belang en in het geding zijn. Omdat er sprake is van pluraliteit, is er tegelijkertijd de noodzaak om toch besluiten nemen op basis van bepaalde waarden.

Voorbeeld: Vanuit de algemene waarde van ‘inclusie’ is er de laatste decennia veel gestuurd op het plaatsen van woonvormen voor verstandelijk gehandicapten in reguliere woonwijken. Maar het is eigenlijk onduidelijk of deze mensen daar inderdaad beter af zijn dan bijvoorbeeld ‘in het bos’. De ervaring buitengesloten te zijn, of een gevoel niet mee te kunnen doen, kan sterker zijn naarmate dat meer zichtbaar en voelbaar is. Dit betekent evenmin dat de woonvormen weer meer gescheiden moeten worden van reguliere woonwijken. Waar het om draait is dat het uitgaan van algemene

waarden, idealen of principes je zicht kan vertroebelen op de concrete ervaring van hen die het aangaan of ondergaan. Die woonvorm moet uiteindelijk wel ergens staan, dus een besluit moet worden genomen – en dat besluit kun je ook niet met een handomdraai weer ongedaan maken (want het steeds wisselen van woonplek, zeker als dat door een ander wordt besloten, is voor niemand heilzaam).

Dit is het centrale spanningsveld waar toezicht zich toe dient te verhouden. Deze waarden en besluiten moeten dus een open en tijdelijk karakter hebben. Toezicht is zo omgeven door een fundamentele twijfel, terwijl die twijfel niet kan blijven bestaan – besluiten zijn nodig. Je kunt niet oneindig perspectieven en posities integreren in besluitvorming, en het is evenmin onduidelijk of het noodzakelijk is te veranderen, aan te passen, of juist te bestendigen en voet bij stuk te houden. De kunst is deze twijfel niet op te lossen door managementreducties te verabsoluteren (zoals in veel kwaliteitsmanagement gebeurt), maar je steeds weer opnieuw leren te verhouden tot en navigeren door het paradoxale karakter van organiseren en management. Toezicht dient zich te verplaatsen in de posities van hen die in en door zorg onder druk komen te staan, hoewel tegelijkertijd dit verplaatsen geen eenduidige antwoorden oplevert.

Voorbeeld: zorg kan er ook toe leiden dat een situatie van bijvoorbeeld een tiener met een meervoudige hulpvraag (bijvoorbeeld autisme, depressie en een trauma) verslechtert door de hulp die deze tiener krijgt, bijvoorbeeld als hij of zij van het kastje naar de muur wordt gestuurd, met te veel verschillende professionals te maken krijgt die bovendien net niet voldoende tijd hebben of nemen om zich te verdiepen in zijn of haar leven.

Praktische wijsheid

En juist dit leren verhouden tot en navigeren door het paradoxale karakter van organiseren en management in een politieke context vereist *praktische wijsheid*. Dit is een eeuwenoud begrip gemunt door Plato en, vooral, Aristoteles. De laatste ziet praktische wijsheid als zowel een deugd als een kennisvorm. Praktische wijsheid onderscheidt zich van een techniek (vak) en een absolute kennis (wetenschap): hij vat praktische wijsheid op als een moreel en politiek weten. Praktische wijsheid is de vaardigheid te *delibereren* over wat in concrete gevallen het goede is om te doen, dat wat bijdraagt aan 'het goede leven'. Dat wat het goede is laat zich niet vooraf kennen, komt niet van buitenaf, maar wordt bepaald in en door een concrete praktijk.

Ik vat, in het verlengde van een viertal moderne filosofen (Arendt, Gadamer, Ricoeur en Merleau-Ponty), praktische wijsheid op als een vorm van kennis die niet alleen een individueel aspect heeft (de wijze toezichthouder), maar

ook een praktijkaspect (de wijze toezichtpraktijk) en een institutioneel aspect (institutionele wijsheid). Toezichthouden gaat niet alleen over het concrete gedrag van toezichthouders, maar ook over het samenspel tussen samenleving, toezicht, bestuur en organisatie alsook om de wijze waarop dit institutioneel is ingebed – wie het voor het zeggen heeft, wie besluiten mag nemen en wie dat tegen kan spreken. Mijn argument is dat met name dit aspect van institutionele wijsheid, institutionele zorg, onderbelicht is in het nadenken over en vormgeven van governance.

Op het *individuele niveau* gaat praktische wijsheid voor toezicht over de vaardigheid te oordelen, te interpreteren en de morele en politieke kant van besluiten te zien. Toezicht is niet een kwestie van informatie verzamelen, verwerken en op basis daarvan besluiten nemen – nee, toezicht gaat over interpretatie vanuit een bepaalde invalshoek en positie terwijl tegelijkertijd ook een positie die vreemd aan je is meegewogen dient te worden. Ook gaat het om het hanteren van het spel tussen vertrouwen en twijfel en je niet te verliezen in één van beide. Praktische wijsheid gaat niet eerst en alleen over denken en spreken, maar vooral over handelen. Dit betekent dat de aan- of afwezigheid van toezichthouders betekenisvol is.

Op het *niveau van de toezichtpraktijk* gaat praktische wijsheid voor toezicht over *common sense*, een gevoel voor dat wat ons aangaat, een vaardigheid ‘buiten jezelf te denken’. In het oordelen moet de positie van de ander van meet af aan al verdisconteerd zijn. Het gaat verder over inzien dat goed toezicht samenhangt met politiek handelen van mensen in gezamenlijkheid. Praktische wijsheid op dit niveau gaat ook over het organiseren van dialoog, omdat het ‘spel’ van toezicht niet alleen gespeeld wordt, maar het spel speelt ook met de actoren: de toezichtpraktijk heeft een interne dynamiek en ervaring die je niet zomaar kunt ontsnappen. Zo is er altijd de ervaring van afstand, van een groepsdynamiek, van een bestendigde cultuur of van machtsverschil. Hiernaast gaat praktische wijsheid erover hoe in praktijken doelen (*telos, purpose* of bedoeling) in verbinding gebracht moeten worden met normen, en vice versa, en dat dit een proces is dat steeds opnieuw doorlopen dient te worden. Tenslotte gaat het om het leren omgaan met de ambiguïteit van zorg- en organisatiepraktijken die paradoxaal van aard zijn.

Op het *institutionele niveau* gaat praktische wijsheid voor toezicht over vereniging en participatie, over hoe mensen betrokken zijn bij zowel de alledaagse als bestuurlijke zaken van een maatschappelijke organisatie. Het gaat verder over de wijze waarop tradities een rol spelen in instituties, hoe in de loop van de tijd de organisatie is gevormd en hoe deze historische bestendiging van belang is voor het handelen, begrijpen en waarderen in alledaagse praktijken. Er zit wijsheid in de traditie. Het maakt toezicht

terughoudend over maakbaarheidsambities. Institutionele zorg gaat ook over de mate waarin we kunnen zeggen dat instituties rechtvaardig zijn, en dat er voldoende mogelijkheden zijn om hierover te discussiëren – wat op zichzelf al een kenmerk van een rechtvaardige institutie is. Als laatste gaat praktische wijsheid op dit institutionele niveau over de responsiviteit van instituties zich aan te passen aan kritiek, met name als blijkt dat mensen in het ontvangen en geven van zorg dóór de institutie en organisatie onder druk komen te staan. Immers, de macht die instituties uit kunnen oefenen kunnen ten goede en ten kwade worden aangewend.

Hoe nu verder

Uit deze analyse en interpretatie van de toezichtpraktijk als praktische wijsheid blijkt hoe enorm kwetsbaar en ambigu het besturen van en toezichhouden op maatschappelijke organisaties is. Er zijn dan ook geen ultieme oplossingen – ik heb juist beredeneerd dat ultieme oplossingen vaak zelf het probleem zijn omdat ze niet ‘rekenen’ met de alledaagse moerassigheid van sociale praktijken. Toezicht houden als praktische wijsheid is een individuele, praktijkgerichte en institutionele houding gebleken die zich niet gemakkelijk laat instrumentaliseren.

Wel zijn er denkrichtingen en kernvragen die een andere richting op wijzen dan doorgaans het geval in de toezichtpraktijk. We moeten een discours en praktijk op gang brengen die minder is gericht op professionalisering, expertise en kwaliteitsmanagement, en meer op politisering, burgerschap en het bevorderen van democratie. Hier staat wat op het spel. De route van technocratisering, die, ondanks of dankzij alle goede bedoelingen, inmiddels alom geaccepteerd is in het bestuur en toezicht van maatschappelijke organisaties, zal uiteindelijk de maatschappelijke legitimiteit van deze instituties ondermijnen.

Dit geldt op twee niveaus. Op het niveau van alledaagse praktijken leidt technocratisering (in de gedaante van kwaliteitsmanagement) tot een onteigening van zorg van zowel degene die verzorgd wordt als degene die zorgt. Eigenaarschap op dit niveau vereist een vaardig in kunnen spelen op dat wat de situatie vraagt, doen wat nodig is. Dat vraagt om ruimte en verantwoordelijkheid.

Op het tweede, institutionele, niveau leidt technocratisering tot een oordeel- en besluitvormingspraktijk die, door het politieke karakter van deze besluiten te ontkennen, uiteindelijk niet bezig is met kwesties die voor burgers, patiënten, bewoners, verwanten en verzorgenden van belang zijn. Dit belang is inderdaad niet eenduidig en juist dat moet tot uitdrukking kunnen komen in een maatschappelijke organisatie. Deze mensen hebben geen of maar een kleine stem in bestuur en toezicht, omdat zij niet als experts worden erkend.

Onder het mom van 'bestuurbaarheid' is van werkelijke tegenmacht ten opzichte van bestuur en toezicht nauwelijks sprake. Tegelijkertijd leidt het erkennen van het politieke karakter van oordeels- en besluitvorming er juist toe dat toezicht niet 'autonoom' besluiten neemt of toezicht houdt op besluiten, maar juist is gebonden aan de mate waarin de besluiten in en door de organisatie worden geaccepteerd. Je houdt niet toezicht op de kwaliteit van de besluiten of kwaliteitssystemen (vanuit een expertise) maar op de *acceptatie* van besluiten en kwaliteitssystemen. Dat is een democratisch gegeven.

In mijn analyse heb ik betoogd dat praktische wijsheid niet alleen te lokaliseren is in het individu of in het gedrag, maar ook in verband moet worden gebracht met de ontwikkeling van praktijken en de vormgeving van instituties. Juist het professionaliseringsdiscours legt zich sterk toe op het 'gedrag', vaak ook in relatie tot een individu (denk aan de wijze waarop toezichthouders worden getraind). Institutionele vormgeving, zoals het governance-model en de wijze waarop medewerkers en cliënten zeggenschap hebben, wordt simpelweg niet meer gezien als een relevant aspect van het organiseren van wijs toezicht. Zo zou de vereniging in mijn lijn van denken heel goed passen, maar dit is in de zorg, en in toenemende mate ook in het onderwijs, steeds meer een relik.

Mijn aanbeveling zou zijn om de machtsverhoudingen zoals die nu zijn uitgedrukt in het dominante raad-van-toezicht-model (in een stichting) kritisch onder de loep te nemen. Dit hoeft niet per se een ander bestuursmodel, zoals de vereniging, in te houden, maar vooral een praktijk waarin zeggenschap zowel dialogisch (en indien nodig met conflict) en formeel wordt ingezet.

Ook de (indirecte) macht die de overheid en de inspecties uitoefenen op maatschappelijke organisaties moet bevraagd worden, waar dat tot op heden weinig gebeurt. In zekere zin zijn deze maatschappelijke organisaties steeds verder verstatelijk, met name door verregaande verantwoordingssystemen en nauwe banden tussen belangenorganisaties en Haagse politiek en ambtenarij. Maatschappelijke organisaties hebben dit ook laten gebeuren en trekken niet snel een grens als het aankomt op het handelen van de staat: 'tot hier, en niet verder!'. Praktische wijsheid zou voor maatschappelijke organisaties ook heel goed kunnen betekenen dat de 'adviezen' en goede bedoelingen van deze koepels en overheidsorganisaties ter kennisgeving worden aangenomen, maar dat men uiteindelijk zelf koers bepaalt. Dat wil zeggen: in politieke en democratische zin nadenkt over dat wat goede zorg voor deze mensen is.

Omdat mijn onderzoek een meer fundamenteel en verkennend karakter heeft, is meer onderzoek nodig om de precieze(re) antwoorden te geven op vragen wat het precies betekent voor de inrichting van instituties en de ontwikkeling van praktijken. Deze vragen zijn en blijven van groot belang. Ik heb getracht daar een wijsgerig fundament voor te leggen. Niet alleen voor goede zorg, maar ook voor de vraag hoe we in de toekomst met elkaar de samenleving willen vormgeven en de democratie willen behouden.

Summary

Context

The role and position of the supervisory board in Dutch civil society organizations, such as in health care or education, has been discussed intensively in the past decade. My interest is primarily, but not exclusively, in (long term) care organizations. There has been much attention in practice and academia for improving the practice of supervision of these boards. Issues that are addressed are mostly about professionalization, ethics and values, strategic partnerships and shifting the focus from business administration to issues of quality and safety of care. Despite this shifting practice and attention, I argue that this debate has been too narrow to truly understand the role and responsibility of supervisory boards. This narrow view consists of a focus on quality and risk management, corporate governance, professionalization and value-oriented approaches. In this narrow view there is a permanent quest for certainty, unambiguity, clarity and simpleness. As these are usually absent in the experience of practicing governance, this quest paralyzes the debate and practice of governance, and possibly also that of care itself. We need a perspective on supervisory boards and governance that takes ambiguity and equivocality of care and organizing as a point of departure. And this is the perspective of this thesis.

There is in fact a concept from ancient Greek philosophy that takes ambiguity and equivocality as a starting point. This is practical wisdom (*phronesis*). Practical wisdom is a form of knowledge that is neither scientific nor technical. Practical wisdom is a moral and political knowledge, inoculated in deliberation. The question I ask in this dissertation is therefore: *what is wise supervision?* As I am dealing with supervision in relation to health care, this question is automatically about the question what care and the organization thereof comprises – and how to look at it. This is also called governance, which I define as enabling and restraining power at the same time.

Nature of this research

This dissertation is a philosophical dissertation, but also touches the disciplines of organizational studies, public administration and sociology. My aim is to create an argument to look at the supervisory practice from a renewed perspective, which, in my view, has been underexposed.

It is a theoretical philosophical dissertation that does not assume representation, but rather precisely interprets the practice from a particular angle. In order to do so, I have analysed the practice of supervisory boards in a sensitizing way: I interpreted cases, analysed popular books on governance and had dialogues with two supervisory boards.

The practice of supervisory boards

Dutch health care organizations, usually private foundations with public financing, usually have a two-tier board structure: the executive board and the supervisory board. Together they are responsible for good care and public values such as accessibility, effectivity and affordability. The executive board runs the organizations. The supervisory board appoints the executive board (and itself) and oversees the organization and governance of care. Ever since this governance model is practiced, there has been much attention for properly delineating the different roles these boards have. Still, I emphasize the common responsibility they have – precisely because it is often ambiguous how and when to draw a line between steering and overseeing.

This is partly related to the development of the practice of governance in the past decade. This development is a reaction to different cases that have drawn public attention in media. It is said that supervisory boards have failed to notice issues of integrity or megalomania. More broadly, there appears to be public discontent about the organization of civil society organizations (all too managerial, bureaucratic and risk avoiding). Public committees, scientists and associations of supervisory boards urged to professionalize the practice of supervisory boards. Professionalization may imply, for example, a more independent position of the supervisory board, more diversity in the supervisory board, more and better education of supervisory board members and more reflection and evaluation within the supervisory practice. An important aspect of this professionalization, as my interpretation of popular literature and performed dialogues shows, is attention to the ‘softer’ aspects of having oversight. This is about matters of trust, gut feeling, openness and having and maintaining a ‘moral compass’.

Although these developments considered to be good, I wonder whether they dig deep enough into the heart of the question how to think about care and the organization thereof within the context of civil society. Are these developments not all too easily interpreted as an assurance that there will be no more failures? Is not the attention to values and trust also a form of self-justification in a position that is fundamentally uncertain? Does this ‘value-talk’ help or obstruct to possibility to discover what is to be done? Is not a civil society more than just its immediate service delivery?

Ambiguity of governance of care, a pentathlon

With five theoretical perspectives I show how, on different analytical levels, governance of care is ambiguous.

1. Corporate governance

The governance of the health care sector in the Netherlands is ambiguous: it is hard to define the kind of organization a health care organization is. This is true for the health care system, as well for the concrete organization and governance of care. Dutch health care organizations are historically part of civil society, originally started as private initiatives. Although these are independent organizations, they are not market organizations. Over the years, these organizations have become hybrids, which means that they bear characteristics of market, government and civil society organizations. An important influence on the conceptualization of the administration of these organizations has been *corporate governance*. Corporate governance deals with the question how to steer organizations in which ownership and control is separated. How do you ensure that the board acts in the interests of the shareholders instead of its own interests? There have been many different answers to this question. Roughly, one can distinguish between Anglo-Saxon (emphasis on control and accountability) and Rhenish approaches (emphasis on codetermination and trust). In practice, elements from both traditions have become part of the Dutch private sector, as well as of civil society organizations.

2. New public management

Another important influence on the governance of civil society organizations is from public administration and is known as New Public Management. This originated as a cry to reduce government red tape and to work more 'client focused' and efficient. The belief that market-oriented incentives in public services would help to do this is an important part of this. It is no surprise that New Public Management also uses elements of corporate governance, especially agency theory. In the meantime, it is commonly assumed that New Public Management has had an opposite effect, especially due to an increasing demand for standardization, accountability and transparency. Despite the omnipotent call to reduce red tape, this hardly seems to succeed anywhere.

3. Institutional logics

From an institutional perspective, it is said that health care organizations are supposed to integrate different 'logics'. The doctor looks at the world differently than a patient or a relative. There are different stakes. The same is true for the manager. From various sides, different and sometimes conflicting demands and norms are present in what is expected from the organization of care. Controlling and overseeing such a complex organization demands, as complexity theory tells us, a modest disposition of management and supervision and requires enlarged responsibility in ordinary caring practices.

4. Social practices

The ambiguity of governance of care does not need to be abstract or mere theoretical. It is about concrete practices in which different elements and different practices touch and overlap. This is what theories on social practices tell us. Governance is not merely about norms or logics. Social practices are formed and underdetermined by (implicit) values, bodies, things (such as computers or quality management systems), emotions, routines, repertoires, rhythms, et cetera. From a governance perspective, it is difficult, if not impossible, to determine what determines the performance of a practice. All these elements form an ensemble which cannot be reduced to singular elements that can be ‘tweaked’. There is no such thing as an unequivocal practice.

5. Identities

In the final analyses of ambiguity, I hold that formed identities of supervisory boards are not to be seen as paradigms – in which one paradigm is replaced by another – but as sedimented identities – in which different identities overlap as layers. Identities are fixed and flexible at the same time. Concretely: although there has been much attention for ‘new organizing practices’ or ‘new supervision’, the ‘old’ elements (whatever they may be) remain, to a certain extent, visible and relevant.

The political character of care

A supervisory board of a health care organization should at least ask itself the question what care, in this particular practice, is. To understand care, also from a supervisory perspective, I use insights from the ethics of care. This is a discipline within ethics, aimed at and grounded in care in the broadest sense of the word. It originated in feminist philosophy. It draws attention to those who are marginalized or suppressed by policy or certain conceptions of ethics or knowledge. This may be for example women, black people or people in poverty. I list four critical insights care ethics provide:

- Care ethicists have emphasized the relational character of care and are critical against dominant (ideal) conceptions about the autonomy of individuals.
- Care ethicists investigate how the responsibility to give care is enabled or restrained.
- Care ethicists want to evaluate and judge care from within the context in which care is performed.
- Care ethicists argue that care is a political category. A relation of care cannot be properly understood if the political and social context in which care is given and received is not taken into consideration.

The political character of care means that care is not a mere private activity that, in the Dutch case, is ‘accidentally’ financed publicly. Care, especially institutional care, reflects to some greater or lesser extent our attempts to live together in a decent way. It says something about how power and means are attributed, who has a say and who has not, how people are positioned in and marginalized through care, and how these orders are maintained or questioned.

This implies that the question of ‘good care’ is not a mere technical matter, but rather also a moral and political question. It is indeed a question of practical wisdom. From this angle, also governance is a political and caring activity. Supervisory board members need to understand their work as being ‘relational’, i.e., between boards and the organization. The supervisory board needs to enable and restrain responsibility. Moreover, the supervisory board is on the boundary of concrete everyday care and its political context, the institutional framework, in which care is nested. This institution needs to accommodate care, from the small context of concrete care to the larger political and social context – and vice versa.

The paradoxes of quality management

Although the question of care is not a technical question, it is common to address this question in a technical fashion. This is known as quality management. Many health care organizations have special staff departments for this task. The risk of quality management is that it evaluates caring and organizational practices from the ‘safe high ground’, forgetting the ‘swampiness’ of everyday caring. This forgetting may turn out to subvert the caring practices.

Quality management is often occupied with the question how to make things better. Care is never good enough, never finds rest, nor is it ever pleased with the way things are. However, if you want to improve something, to get from ‘is’ to ‘ought’, one needs to set a norm. This means that there will be measures and controls. In practice, however, some improvements are experienced as a loss, or the indicators are not experienced as relevant parameters to understand care. Good care may turn out the different than the norm suggests. If quality systems cannot ‘calculate’ with this, improvement is illusionary. Therefore, controlling quality may subvert quality and big strategic changes may ruin organizations. Quality controls may provide irritating affirmations as well as inspiring disappointments. The norm, moreover, is contingent: there is no scientific or technical logic available that sets a particular norm. Setting a norm requires a (political) decision. This does not imply that the norm is random – it may be well considered. But there is also always an alternative (at least the alternative to not set a norm).

Evaluating quality, therefore, is paradoxical since something apparently good may turn out to be bad, and something supposedly bad, may in some circumstance turn out to be good. Because of this, it can never really be known whether one measures what one wants to measure, or whether the improvement does improve something.

Complexity reductions

All this does not imply that measuring is useless or that quality management is irrelevant. The point is that every form of quality management is a reduction, a simplified representation of complex reality. These reductions are helpful as it makes an organization more or less controllable. Abstractions are needed in order to make and legitimate decisions. However, as soon as the reduction is made absolute, the swampiness of care is lost out of sight. Management, then, retreats to the safe high grounds. A decision is only a decision in a condition of undecidability: there is always an alternative. Besides a reduction of complexity, therefore, there is also a need to unfold complexity, which means understanding that everyday reality escapes unequivocal representation. Unfolding complexity may be possible by not looking primarily at the outcomes of the controls of quality management, but to look at the extent to which these controls are accepted in the organization, how people react to the controls and whether there is (silent) resistance. Hence, management needs to be open, sensitive for counter speech or action. This implies a permanent oscillating between fixating and opening, between reducing and unfolding complexity, between too much and too less control mechanisms. Supervision is fundamentally about controlling the controls itself. This means that supervision presupposes counter-supervision: only the supervisory board that addresses counter speech is able to control the controls.

Steering and disturbing

If we consider this paradoxical nature of organizations a little further, we need to state that the idea that organizations can be 'in control' is misleading, especially in the mechanical sense of the word. The idea of being in control does not account for the complex character of the organization of care. Management is not about creating order, but about dealing with disorder – a subtle difference. Management is a practice of disturbing. Organizational practices develop patterns and routines. This is necessary to come to any organization at all. But it is just as important to disturb routines, as this is a source for learning. This becomes the general task of management: disturbing routines, complicating yourself. This disturbing itself also needs to be routinized, resulting in a paradoxical play of routinizing and disturbing. Indeed, disturbing routines may turn out wrong. This is a relevant notion, as the disturbance of order may consist in bringing calmness if an

organization's 'order' is a permanent flux. Supervision is therefore about understanding management as disturbance, and about oscillating between disturbing and perpetuating, knowing that the everyday practice cannot be controlled causally or unequivocally.

Risk management

An important aspect of quality management, as well as for the practice of supervision, is risk management. In an institutional context it is, after all, necessary to be accountable for decisions. Every decision is a risk as it may turn out differently. However, quality management is often occupied with discussing, preventing and managing risks it has itself produced. This is not only true in organizations but is a phenomenon that is present in the whole of modern society and administration. Notably, risk management is a 'craft' of experts. Laypeople that need to deal with the (consequences) of risks are often too little too late involved in the deliberation process of how risks are considered and who is accountable if things go wrong. The consideration of risks is a political activity and has its repercussions on everyday practice in care. Therefore, in risk management, laypeople such as patients, clients, relatives and caring professionals need to be able to deliberate about risk consideration and analysis.

Institutional care

Institutions provide meaning and stability to life and society. In late modernity, this is no commonality. Our biggest and most dominant institution is that of the welfare state. Precisely civil or social institutions, such as the church, school or associations are not as powerful as they once were. The critique that has declined these institutions is well-known: social institutions tend to social closure, exclude diversity and are supposed to be inflexible – sturdy. This critique is related to the rise of individualism and instrumental rationality (the will to control the world technically), and, as a result, a loss of political freedom. That is to say, citizens are less and less involved in public life, freedom is more and more a private matter. There is no nostalgia implied in this argument: both individualism and technical rationality have had good consequences, but still, something is at stake. Caring practices are less able to find meaning and stability in the civil society organization. Instead, there is an urge and need for a permanent change and accommodation to a rapidly changing environment. It needs to be better and different all the time. The vast and increasing number of controls (from inside and outside the organization) caring practices have to deal with is an example of this phenomenon.

A revaluation of civil institutions is necessary but is also controversial. Institutions are not only association with sturdy systems, but also with

subverting what is good. Institutions tend to dominate or emphasize money and power. But this is only half the story: institutions are as well about what people, citizens, can do together what they cannot do on their own – also in a moral sense. Institutions, embodied by boards, presuppose public engagement – even if this sometimes seems to be invisible.

I therefore argue that civil institutions need to be (re)politicized. That is, we need to acknowledge that decisions taken have a political nature, and touch upon the lives of ordinary citizens. These decisions cannot be taken solely based on scientific or technical knowledge. The gap between experts and citizens needs to be bridged. By emphasizing expert knowledge and professionalization, the boards of civil society organizations have lost their connection with the everyday lifeworld of citizens. A democratization of governance is needed. This is an institutional concern. Clues for such a democratization are supporting more checks and balances, discussion, conflict, and responsibility at both the level of the board as well as in daily caring practices.

Institutional care as political matter

There is much more to politics and democracy than what happens in Parliament. I argue that civil society organizations are political institutions as well. They are places where we, as good and bad as it gets, attempt to live together in a decent way. In these organizations, people, citizens, have positions and/or are positioned. Certain orders of care, of living together, are being made and remade in these organizations. Institutions also change, of course, they are *open* – or at least they should be. This demands democracy – the extent in which citizens, in common, are capable of influencing their proper lifeworld. This is true for everyday practices of care, as well as for the level of governance.

In this regard, I conceptually distinguish between ‘the political’ and ‘politics’. The political is about ideals, stakes, convictions and implied plurality. Connected with plurality is the possibility of both association and conflict. Politics, on the other hand, is about power, about who may make, or influence decisions or which institutions are legitimated to do so. In a democracy, political power is always temporarily, open, and a matter of debate. In a democratic society, the tension between the political and politics is irreconcilable. The legitimacy for making decisions, just as the decision itself, does not have any absolute ground. It is in this sense that ‘core values’, often installed with great moral display, may provide some orientation, but may also – and this is crucial – conceal what is needed in concrete practices. Precisely because of this great moral display and universal pretention, they deprive themselves of vision on the ambiguity of care. If there is to be a

purpose in care, then this purpose itself needs to be (potentially) controversial. For indeed, different groups and people in organizations differ in their convictions about purpose – apart from the question how this purpose is to be realized.

In my view, therefore, supervision is not primarily a matter of professionalization. It is also and foremost a political practice. Put differently: to supervise is not first a technical question of expertise, but about the human question of engagement and participation in institutional care and human concern. Supervision is about, again and again, trying to find ground in what matters to people in an everyday sense, understanding what is at stake. Because of plurality, however, there is also the necessity to take decisions based on certain values. This is the central tension supervisory boards must deal with and relate to. These values and decisions need to be, therefore, open and temporarily. Supervision is thus surrounded by a fundamental doubt, while this doubt cannot remain and linger – decisions are needed. There is a practical end in collecting and integrating perspectives and positions. Also, it remains elusive whether change or adaptation is needed, or whether there is a need for perpetuation, to stand ground. The art is not to dissolve this central tension by means of absolutizing management reductions (as in quality management often appears to be the case), but to, again and again, learn to relate and navigate through to the paradoxical character of organizing and management. Supervision needs to incorporate the positions of those who are troubled, inside and outside the organization. At the same time, this incorporation does not lead to unequivocal answers of what to do.

Practical wisdom

Precisely this relating to and navigating through the paradoxical character of organizing and management in a political context requires practical wisdom. This ancient concept was introduced by Plato and, especially, Aristotle. The latter considers practical wisdom as both a form of knowledge and a virtue. Practical wisdom is to be distinguished from technique (or craft) and absolute knowledge (science). Practical wisdom is a moral and political knowing. Practical wisdom is about the ability to deliberate well about what is good to do in concrete situations, that what contributes to the good life in general. That what is good cannot be known in advance, does not come from outside, but is to be found and developed in and through concrete practices.

I conceptualize practical wisdom, in line with four contemporary philosophers (Arendt, Gadamer, Ricoeur and Merleau-Ponty) as a form of knowledge that is not a mere individual trait (the wise supervisory board member) but has

a practice aspect (the wise practice) and an institutional aspect (institutional care) as well. Supervisory practice is not only about the behavior of its practice members, but also about the interplay between society, supervision, management and organization – as well as the way in which this is institutionally embedded: who has a say, who may take decisions and who can counteract. My argument is that especially this aspect of practical wisdom, institutional care, has been underexposed in thinking and practicing governance.

On the individual plane practical wisdom in governance is about judgment, interpretation and to understand the moral and political aspects of decision-making. Supervision is not merely a matter of collecting and processing information and making decisions. Instead, supervision is about interpretation from a certain angle and position, while at the same time angles and positions that are alien to yours need to be considered. Supervision is about trust as much as it is about doubt, and you cannot make one of these absolute. Practical wisdom is, furthermore, not only a matter of thinking or speech, but is about acting. This implies, among other things, that the presence *and* absence of supervisory board members is meaningful.

On the level of the *practice* of supervision, practical wisdom is about common sense: a sense for that what matters to people in the plural. It is an ability to think outside yourself. In the act of judging, the position of the other is already present. Furthermore, practical wisdom as practice is about understanding that good governance is related to political action of people in common. The practice of supervision is about dialogue, in the sense that the game of governance is not only played, but that the game also plays with the players. The practice of governance has its own dynamics and experience that cannot be escaped overnight. There is, for example, always the experience of distance, of a group dynamic, of a perpetuated culture or of power differences. Also, practical wisdom is about how a sense of purpose (*telos*) is related to norms, and vice versa, and that there is a need to constantly move back and forth between them. Finally, practical wisdom is about learning how to navigate amidst ambiguity, and the paradoxical character of care and organizing practices.

At the level of the institution, wise supervision is about promoting and sustaining association and participation of involved people in ordinary and administrative questions. It is furthermore about the role traditions have in institutions. That is, how over time the organization is formed (instituted) and how this historical perpetuation is meaningful for action in, understanding of, and valuating ordinary practices. There is wisdom in tradition. This implies that supervisory boards and management need to be

careful with aspirations of social engineering and reform. Also, institutional care is about to what extent we call institutions just, that there is enough openness to discuss this (which is, as possibility, itself a mark of just institutions). Finally, wise supervision at the institutional level is about the responsiveness of institutions to adapt to criticism, especially in situations in which people who give or receive care are wrongfully positioned or treated by the institution.

Where to go from here

From this analysis and interpretation of the practice of supervision as practical wisdom follows the vulnerability and ambiguity of governance and management of the civil society organization. There are, therefore, no simple solutions. I have precisely argued that ultimate solutions are often part of the problem as they do not take into account the everyday swampiness of social practices. Wise supervision requires that individuals, boards and institutions adopt a practice-oriented view that is not easily instrumentalized.

Still, there are directions of thoughts and core questions that point to a different direction than the commonplace directions of governance. I suppose that we need to initiate a discourse and practice of governance that is less focused on professionalism, expertise, and quality management – and more focused on political matters, citizenship and promoting forms of democracy. This is a high stake. The road of technocratization, which has become, despite or thanks to good intentions, generally accepted in the governance of civil society organizations, will in the end erode the legitimacy of these civil institutions.

This is true on two levels. On the level of everyday practices, technocratization (in the form of quality management) leads to an expropriation of care for those who give and receive care. Ownership, at this level, requires a practice that is able and enabled to respond to the situation, to do what is deemed necessary. This, in turn, requires capacity and responsibility.

At the second, institutional, level, technocratization leads to a practice of decision-making and judging that, by denying its political character, is in the end not aligned with what is at stake for citizens, patients, residents, relatives and caregivers. Precisely the ambivalence of these stakes needs to be expressed and addressed in a civil society organization. Usually, these people have little to say in management and governance as they are not regarded as experts. Under the guise of ‘manageability’ there is barely any true countervailing power to management, executive boards or supervisory boards. At the same time, as soon as the political character of decision-making and judgment is acknowledged, it becomes clear that supervisory boards do not make decisions or monitor autonomously. They are bound to the extent in which the decisions and controls are accepted within the

organization. Hence, a supervisory board does not primarily observe the quality of decisions or outcomes of quality controls (from a certain expert-role), but rather observes the *acceptation* of decisions and quality controls. That is a democratic matter of fact.

In my analysis I have argued that practical wisdom is not only to be located in individuals or their behavior but is also associated with the developments of practices and the design of institutions. Behavior is, however, the focal point of professionalization discourse, often of the individual (most trainings for supervisory board members are individual). Institutional design, such as the structuring of governance or the way codetermination is organized, is often regarded irrelevant for organizing wise supervision. A reevaluation of the association or cooperation as governance model, for example, would fit my argument. But as such, there are barely any associations left in Dutch health care, and less and less in education.

My recommendation would be to critically assess the power relations that are entrenched in the two-tier board model within the structure of the foundation. It is not necessary per se that another governance model is pursued, such as the association. But a revalued practice, in which codetermination is both dialogical (with the possibility of conflict) and formalized, is required.

Also, the (indirect) power government and inspectorates exercise on civil society organizations needs to be questioned. In a sense, these organizations have become more and more part of the state, especially due to far-reaching requirements of accountability and the narrow ties between sector-lobby organizations and national politicians and government. Civil society organizations have let this happen and are not eager to draw a line. Practical wisdom for civil society organizations might imply that an organization is able to make its own decisions. That is, that it thinks about what, in a political and democratic sense, is needed to take care for the people they are entrusted with.

Since my thesis is of a fundamental and explorative nature, more research is needed to get more precise answers to questions about the design of institutions and practices. These questions are and remain important. I have sought to lay a philosophical foundation for this. Not only for good care as such, but also about the question how we are willing to live together and how to foster civil democracy.

Attachment:

Bills and regulation overview

In this attachment, I have a look at some general features of the supervisory practice in the Netherlands. I illuminate these features by following the relevant laws or other (professional) regulations.

These are the relevant rules and regulations:

- Burgerlijk Wetboek (Dutch Civil Code, including bill for the governance and supervision of legal persons)
- Wkkgz (law for quality, complaints and disputes in health care)
- WTZi (law for the admission of health care institutions)
- BoZ Zorgbrede Governancecode 2017 (Health care wide governance code of interbranch organizations)
- Statutes and regulations of a specific organization
- NVTZ Goed Toezicht (a semi-accreditation program from the society of supervisory boards in health care)
- Framework of supervision of national inspectorates (IGJ, inspectorate for quality and safety and NZa, inspectorate for financial streams and declarations).

Dutch Civil Code

Almost all health care organizations in the Netherlands are (private) foundations (a few are limited liability companies, others are associations or cooperatives, and these are growing in numbers but remain proportionally small). Foundations are civil society organizations, rather than public organizations (so, not like the NHS in Britain). The way these organizations are financed however is to a great extent public (taxes, national insurance policies and mandatory private insurance policies). This makes the ‘third’ or non-profit sector in the Netherlands extremely large. However, the laws for foundations in Civil Law are quite limited. The laws that deal with governance and supervision are about limited corporations. There is a part in Civil Law on foundations, but a supervisory board is not enshrined in it. There is however a Bill on governance and the supervision of legal persons in general that should include the foundation.

Although in the Netherlands there is a perpetuated practice of two-tier boards (separate boards for executive and non-executive functions), this bill also allows a unitary-board or one-tier board (one board distinguishing

executive and non-executive, supervision, function). In long term care in the Netherlands, only two-tier boards can be found. This tradition of two-tier boards is mainly found in Rhenish oriented economies, such as the Netherlands, Germany and Austria. The main considered strength of two-tier boards is the neutrality and independence of the supervisory board and a clear division of duties between execution and control (Du Plessis et al., 2012, p.9; Hopt & Leyens, 2004). The executive board bundles final responsibility and general management and is fully mandated by Civil Law. The supervisory board has no final responsibility regarding the organization but is only responsible for good supervision, although they may intertwine.

In contrast to limited liability companies, foundations have no shareholders or association of members. Hence, the supervisory board appoints its own members. Different internal councils have advice or nomination rights. An often-discussed question is to whom the supervisory board is accountable, referred to as the “vacuum of accountability” and which interests they actually defend or represent. Civil law defines for supervisory boards of limited corporations that:

Bij de vervulling van hun taak richten de bestuurders/commissarissen zich naar het belang van de vennootschap en de met haar verbonden onderneming. | In the fulfilment of their task, the board of directors/supervisory board act in accordance with the stake of the corporation and the connected enterprise.

– Article 2:129/239 lid 5 respectively 140/250 lid 2 BW

In the proposed bill for governance and supervision of legal persons, this also applies to foundations. However, other regulatory bodies, such as the inspectorates (which we will discuss below) argue that the supervisory board should act in accordance with public interests. These different interests are not always easy to separate in practice and it is clear that there are some loose ends to this.

Wkkgz, law for quality, complaints and disputes in health care

This law is the successor of a law for quality in health care organizations. Besides general requirements of quality for good care, namely: safe, purposeful, effective and client-focused, it prescribes how organizations should deal with complaints and disputes. It connects good care to the establishment of a quality management system following the Deming-circle (also known as Plan, Do, Check, Act). Governance (executive and supervisory board) of the organization is endowed with the task of establishing organizational conditions to comply with the law.

WTZi, Law for the admission of health care institutions

The most important reason why there is a two-tier governance structure in long term care in the Netherlands is because of the Implementing Decree of this law. Every organization that wants to be a health care institution needs to apply for admission.⁷⁹⁰ In the decree there is a demand for a *body* that supervises policy, daily and general management (article 6.1.1.a of WTZi). Since it is called a body, it is assumed that this cannot be the same body that is endowed with general management, as would be the case in a one-tier board. However, following the bill for Dutch Civil Code as well as for the WTZi for governance and supervision, this might be adjusted to also make a one-tier possible. It is obvious that this also marks a point of discussion for in the field.

The decree furthermore mentions that a member of a supervisory board cannot also be a member of the executive board. Moreover, the body of supervision is composed in such a way that the members, relative to each other and general management of the organization, or to whatever partial interest, should be able to act *independently and critically*. This latter point is also food for debate. Independence should be realized by not having any financial or personal relation with the organization and its members. This however does not apply to having family or relatives as clients of the organization.

Health care wide governance code

Traditionally, every sector in Dutch health care has its own interbranch organization that defends interests and provides standards of excellence for the specific field. A majority of these organizations are collected in the umbrella BoZ, *Brancheorganisaties Zorg* (Interbranch organizations health care). Since 2005, they have formulated a health care wide governance code to which all members are accountable. Since then, however, different revisions and renewals took place, and the prevailing code is from 2017. In practice, this is the most important and most often referred to form of regulation in the field of health care governance. The national inspectorates hold the individual organizations accountable for following and applying this code. It can also be a part of commissioning and contracting, as for example health care insurance companies or commissioning offices which demand that organizations follow the governance code.

Since 2017 the code is principle-based rather than rule-based, something that is highly appreciated in the field. In the 2010 rule-based version however, an apply-or-explain rule of thumb was included, while in the 2017 version it

⁷⁹⁰ Some 'institutions' are automatically admitted, such as autonomous general practitioners and dentists.

remains a little unclear as to whether this rule of thumb is still applied. This might be due to the fact that principles are harder to “apply” than concrete rules. Therefore, they added the notion of “apply-*and*-explain”. One might however question whether the principle-based code does not in the end apply a rule-based approach, notwithstanding. If it is interpreted like this, the apply-*and*-explain features has only made things stricter. Generally considered though, the principle-based code is progress, so it is argued. These are the seven principles:

1. The public purpose and legitimation of the health care organization is providing good care to clients.
2. The board of directors and the supervisory board act in accordance with values and norms that fit the public position of the health care organization
3. The health care organization provides conditions and assurances for an adequate influence of stakeholders.
4. The board of directors and supervisory board are, considering their distinguished respective roles, responsible for the governance of the health care organization.
5. The board of directors manages the health care organization in the light of its public purpose.
6. The supervisory board supervises in the light of the public purpose of the health care organization.
7. Both the board of directors and supervisory board continually develop their professionalism and expertise.

It is remarkable how much attention is paid to the societal or public position of the health care organization, especially compared to its predecessors. This might create tension with Civil Law and the article that notes that the supervisory board should act in the light of the interests of the organization, rather than the interests of society, although they do not necessarily exclude each other. Some people argue that because of Dutch Civil Code, there is no need to serve public interests, while others argue that due to for example jurisprudence one might well argue that there are also public interests involved.⁷⁹¹

I highlighted a few principles that are important for this research. An important point of principle 2 is advancing a culture where people are encouraged to raise issues with both their peers and their superiors. This is all the more important when it comes to the ‘difficult’ conversation between executive and supervisory board. There should be a counsellor as

791 See for example the discussion on this in Den Uijl and Van Zonneveld, *Zorg voor Toezicht*.

well as a proper whistle blower regulation. It promotes proper opposition and challenge in the light of checks and balances.

Following principle 3, it is necessary for supervisory boards to be transparent and accountable for how they deal with and relate to co-determination. They should maintain an autonomous relation with co-determination councils. In the working-out of principle 6, it is noted that the supervisory board has its own responsibility for 'gathering' (relevant) information, also from other organizational members than just the executive board, and that the executive board must support this.

It is indeed hard to disagree with the principles from the code. Nevertheless, they only make sense or be of significance in a concrete context. For example: which values and norms fit the (or a local) public? What is an adequate influence of stakeholders in a given situation? And who decides and who has a say? Questions that remain open, but in the working out of the code a lot of specific rules are added. For example, in the working out of principle 3, it is noted that the supervisory board should not contact or meet members of co-determination councils outside the knowledge of the board of directors. It is remarkable that such a rule is formulated under a principle-based code that only has meaning in concrete contexts. One might argue that there are situations imaginable in which this might actually be a good thing to do.

In a sense, a governance code tries to codify common practice. It overrules, so to say, common law, in that common practice is now codified. However, the question is whether this new governance code does not primarily aim to *modify*; that is: it tries to influence actual practice to look into new and better practice.

Statutes and regulations

The mandate of the executive board according to Civil Law is limited by the institution's statutes. In it, although statutes slightly differ from organization to organization, the four roles of the supervisory board are mentioned, including some further details on for example the composition and appointment of the supervisory board and other procedures of governance. Sometimes, specific regulations are formulated, for example to install an audit or quality committee of the supervisory board.

Accreditation programs

The society for supervisory boards in health care and well-being (NVTZ) has, partly under pressure of Parliament, developed a non-obligatory accreditation program (called *Goed Toezicht*, Good Supervision) for supervisory boards, in order to contribute to the professionalization of boards. It is built on three values or principles, namely 1) be prepared for the job, 2) be reflective and 3) be transparent. Boards themselves need to find ways to live up to these principles. Although it is not obligatory, it is expected that non-compliance with this program can lead to problems with health insurance companies, inspectorates or local communities. As this program started in 2017, the situation is not yet so imminent.

Also, the society for executive boards in health care (NVZD) has developed an accreditation program that is in fact obligatory on the penalty of being disbarred as a member of the society. It has formulated areas of expertise that a health care director should possess, namely leadership, result-oriented management, working together, social relevance and continuous development. This dense and intensive accreditation comprises a 360-degree feedback, self-evaluation, making personal development plans and having conversations with formal auditors.

Framework of supervision from the national inspectorates

Two national inspectorates, the IGJ⁷⁹² (inspectorate for quality and safety of care) and the NZa⁷⁹³ (inspectorate for financial aspects of health care) together formulated a framework for their supervision regarding the administrative responsibilities. Besides concrete care, they also check the governance system of a health care organization, as they believe there is a direct connection between good governance and good care, and the other way around, also a risk to quality of care where the governance system is lacking. The supervisory board is supposed to do or be the following:

- Invest in and formulate a vision on supervision, including targets and actions.
- Control the quality of risk management, including culture and behaviour.
- Serve the public good, also beyond the scope of the particular organization.
- Take care for diversity and professionalization (craftsmanship).
- Is independent and prevents conflicts of interests.
- Controls transparency and careful decision-making processes, including public accountability.

792 www.igj.nl

793 www.nza.nl

Following the framework, the supervisory board should monitor the reflective or learning capacities of the organization, both on the level of concrete care and on the level of administration. This indeed encompasses the “culture” of the organization. The idea of the learning organization is a dominant framework for the inspectorates, and this also noted in common discourse.

Contrary to for example Civil Law, this framework explicitly directs the supervisory board to issues of quality and care. However, the answers to the questions posed are not pre-determined. How, for example, does one determine that an intervention is actually needed? Although there is attention to culture, this remains a little vague. On the other hand, it is expected of the supervisory board that they closely watch the quality management system and its parameters. It is important to note that both inspectorates have, when push comes to shove, little authority to actually intervene in the governance of health care organizations, due to their private status. Recently, they have asked parliament to give them more authority for intervening in the governance structure of health care organizations.⁷⁹⁴

794 <https://www.igj.nl/documenten/publicaties/2019/03/05/versterk-de-integriteit-en-professionaliteit-van-de-bedrijfsvoering-in-de-zorgsector>.

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About the author

Henk den Uijl (1987) is a researcher and teacher at the Netherlands School for Public Administration (NSOB) in The Hague. His research connects political philosophy, ethics and public administration. He has published various reports and essays on these topics, and co-edited the book *Zorg voor Toezicht* (Mediawerf, 2015).

He holds degrees in Business Administration (BSc) and Philosophy (BA) from the University of Groningen, and Philosophy of Management (MA) from the Vrije Universiteit Amsterdam.

Den Uijl began working on his PhD while working as a policy advisor at the Dutch society for supervisory boards in health care (NVTZ).

Besides his PhD studies at the Vrije Universiteit Amsterdam, he taught classes on business ethics, philosophy of science, and philosophy of management and organization.

Currently, he is a member of the supervisory board of the JP van den Bent stichting, and editor of the practitioner journal *Goed Bestuur & Toezicht*.



Of all virtues we value in supervisory boards, wisdom is perhaps the greatest. But what exactly is this wisdom? In the Netherlands, there is a trend that supervisory boards should professionalize, and need to acquire more and more expertise to perform their role. Such expertise relates for instance to strategic, quality or risk management. Simultaneously, there is also a tendency that emphasizes the importance of values or purpose for supervisory boards and their organizations. Both tendencies reflect a broader cultural quest in management practices for certainty and reduction of complexity.

This thesis offers a critical interpretation of this cultural quest by introducing the Aristotelian concept of practical wisdom into the practice of supervisory boards in care institutions. Digging into care ethics, political philosophy and hermeneutic-phenomenology, the author argues that practical wisdom for supervisory boards in civil society organizations requires the ability in governance to handle and tolerate ambiguity of caring and organizational practices. Also, it is argued that caring practices in an institutional context are political practices, in that the question of ‘good care’ or ‘good organization’ is not (only) a technical question. It is showed how practical wisdom is not only an individual trait, but also a trait of practices and institutions.

As a result of this interpretation, this thesis presents a fundamental study into the practice of supervisory boards in Dutch care institutions. In order to sustain civil institutions and civil society, it urges the need to further explore how different forms of democratization, on different levels, can be embedded or return in the governance of these institutions.