TOWARDS A FRAMEWORK TO STUDY
INFLUENCE AND ACCOUNTING USE

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The autonomous regions of Spain have responsibility for healthcare. The Galician
Health Service aims to achieve a higher level of health for Galicians with an appropri-
ate primary healthcare system. The law requires healthcare to be promoted within
a system of participative management directed by an upper level of management.
The healthcare system is changing, and the upper level managers are introducing
new systems to improve the provision and administration of care. These changes
will include the provision of accounting data in the normal course of managing.
This paper is before a study of the changes. The paper provides the background to
constructing a Framework and then constructs a Framework for our empirical work.
It uses the constructs of information and influence with markers of the information
areas and styles of influence in the form of an Information–Influence Matrix (Purdy,
1993b). It also uses personal construction (Kelly, 1955) to help create a dynamic
approach to change and the use of accounting information. It finally provides a
framework of our anticipations of what might happen to a Health Centre Manager
and an Upper Manager.

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Introduction

This paper aims to add to our knowledge about the interaction of individuals and
financial management data, an area in which there is a dearth of material. The
authors were made aware of legal changes that created the situation for changes to
occur in the Galician system of primary healthcare. The law expects the clinicians,
who manage the Health Centres, to take on more responsibilities, handle financial
management data and be more participative with the senior manager concerned.

The authors considered that this situation would give an opportunity for them to
use their research approaches to the matters outlined in the legal context, and to

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Received 26 January 2002
anticipate what the authors thought could occur. The paper discusses a topical area about organisational change and the implications of this for the provision of financial accounting information and decision-making. This paper is anticipatory in nature and in that sense is theoretical. Through its anticipations it is developing this area and also creating anticipations, or theory, about accounting in action. Although beyond the scope of this paper, after the basic anticipations had been set down the Galician author started some field-work. Subsequent papers will undertake a comparison of the anticipations with the practice as construed by the authors.

The structure of the paper is as follows. We introduce, briefly, our approach to research which is based upon individuals and the creation of Frameworks. This leads to a discussion of one of our anticipatory, theoretical, bases used here, the notions of information and influence. The Galician legal situation is explained together with our construing of what could change in the Galician system of primary healthcare. Finally, we consider how these changes could affect a Health Centre Manager and an Upper Manager and anticipate how change might occur for a single Health Centre Manager and a single Upper Manager.

Some Anticipatory Frameworks with Individuals—Theoretical Background

General personal construction

There are different approaches to matters concerning organisations, their accounting systems, their decision-making and their processes of change (Purdy, 1991b). The authors accept these differences as valid, but have their own approach. We are interested in the interactions of individuals with accounting data and accounting systems. Our approach to our understanding of what individuals think and how they behave is through George Kelly’s elaboration of the psychology of personal constructs (Kelly, 1955). Kelly’s ideas are largely self-contained within the theory of personal constructs, and only several notions will be used here.

Following Kelly, we accept that each individual is unique, and therefore different. Associated with uniqueness is the notion that because each person is different, when two or more people “see the same event”, although it is “the same event” each will perceive it differently, and therefore each will think and behave differently. At the same time, it is accepted that there are similarities between people, and so it is possible to appreciate that two or more people have some commonality between themselves (Kelly, 1955).

Applications of personal construction

An early study, based upon Kelly’s personal construct psychology, was undertaken to ascertain the thinking of managers about the accounting data they received during the course of their jobs. This longitudinal study was unusual in that it evaluated what happened to people’s thinking during the course of their normal jobs and the usual accounting data that they received and used. It was conducted with managers in a UK Regional Health Authority and showed that the managers varied in their ability to understand the accounting data provided. The ability to understand might have
affected their ability to handle the data and might have altered with training but did alter with learning on the job (Purdy, 1991a).

Purdy proposed that an individual recipient, such as a manager, would have an ability to use data and influence events. This ability would be associated with the individual's facility to understand the data, its context, its usefulness, the possibilities of using it, its timeliness and the type of data (Purdy, 1993a).

The creation and validation of UK Frameworks

Following these insights, one approach of Purdy, to an individual level of activity with accounting, has been to analyse any activity in which he was interested into a series of notions. This means that his way of approaching an area or an issue is through developing ideas or Frameworks about how individuals think. This journal has published such a Framework in relation to the UK’s Statement of Principles (Purdy, 1998).

Of more obvious relevance to the current paper and more directly illustrative of this approach is a Framework of eight individual and organisational issues which Purdy anticipated might exist in relation to accounting and accounting systems with the Ward Unit Managers in a UK teaching hospital. These Ward Unit Managers received accounting data to conduct their job (Purdy, 1993a).

Purdy developed the Framework of Eight Issues. The approach suggested that the position of the manager and the ability of the manager to influence affairs would be associated with the personal and organisational circumstances of the manager. Of course, he anticipated that there would be individual differences between the managers, but he also anticipated that there would be some commonality amongst the issues in the Framework for the managers (Purdy, 1993a). The Framework is Purdy’s anticipations about commonality amongst the managers.

Purdy’s Framework was both a means of anticipating the constructions of public sector managers about accounting data and accounting systems, and a description of the state of affairs which he considered might exist. He undertook a longitudinal study, but before the study had no knowledge about the hospital, its staff or any of its systems. During the normal course of his life in the UK, he had visited other NHS hospitals in non-professional roles. The Framework was constructed using his previous experiences and intuition. The Framework largely was validated after he analysed the results of conversations held with the managers. Five other matters, including remuneration, performance and success, arose during these conversations, and he suggested these could be incorporated in any further work or future revisions of the framework (Purdy, 1993a).

The creation and validation of a Spanish Framework

Purdy has revised the Original Framework of Eight UK Issues by taking into consideration all of his findings and also simplifying and re-ordering the Issues to a Revised Framework of 17 UK Issues. This has been revised further into a Framework of 19 Spanish Issues and again the Framework was largely validated from the findings of conversations held with Business School Managers. The research conversations in Spain were held at a time when the Spanish researchers’ had no knowledge of
the Original Framework. So the coverage of these Issues by the Spanish Managers was an independent corroboration of the useful and sensitive nature of the Original Framework and of the research methods used in the Original Framework (Purdy & Gago, 2002).

The findings from the Spanish study demonstrated that the number and type of Issues in the Original Framework were sufficient for it to become a general research instrument for the examination of the handling of accounting data by recipients. The Spanish study also confirmed that such Frameworks are dynamic. This means an Issue can be raised, it can be given an anticipated direction and then these form the basis of the analysis of any interactions of people and accounting data. The approach makes it possible to examine any changes in the Framework with the individuals concerned and their associated systems (Purdy & Gago, 2002).

**The methodologies used and to be used**

Of course, the other part of successful research is the more rewarding and generally far more difficult job of collecting empirical material to analyse and compare with the Frameworks. The forgoing subsections have indicated the ways some previous Frameworks have been created for some of the work that has been successfully undertaken using various types of approaches. They also have mentioned the methodologies employed and the ways of collecting empirical material from individuals who are in work situations.

This subsection indicates the methods used with each of the studies mentioned before. These are deliberately brief because full details can be found in each publication. The study with managers in the Regional Health Authority used conversations and personal construct grids in relation to the accounting data received and used (Purdy, 1991a). The study with Ward Unit Managers was with open conversations about the accounting data received and used (Purdy, 1993a). The study with Spanish Managers used open interviews about the role of both the financial management information provided and the accounting systems that related to the manager’s activities. The interviewer was supported by a list of questions covering eight areas (Purdy & Gago, 2002).

In each case the resulting material was compared with any anticipations. Irrespective of the form in which the anticipations were specified, the findings from the empirical work were clarified, analysed with the anticipations, discussed and then conclusions were drawn. Any studies conducted about the anticipations from this paper will use these types of methodologies. So the authors are used to this type of work and the matters that they deal with here.

**Notions of Information and Influence**

**Background**

Purdy has been involved with the matters of employees and information provision for a long time (Purdy, 1981). A major tool that the authors use in constructing
their ideas and anticipations here is the combination of notions of information and influence (Purdy, 1987). It will be used later when considering our empirical findings.

Purdy was interested in the ways in which people handled data in their organisational contexts. The literature did not offer an easy way into dealing with these notions so he created his own Framework which considers that information and influence have to be construed simultaneously for either to be of sensible use. Purdy defined different aspects of influence and information and considered these as an Information–Influence Matrix. There is a recent paper about the Matrix and some of its context (Purdy, 2003), and an earlier one has indicated its use (Purdy, 1993b).

The Information–Influence Matrix was outlined in a paper which dealt with employee information provision and employee participation in the UK. Notions about accounting information and employee influence were placed into a Matrix to show some of the possible relative positions of these issues. Evidence about what had occurred came from the annual reports of six UK companies, whose shares had commenced trading on the London Stock Exchange in the 1980s (Purdy, 1993b).

The annual reports outlined the general types of information employees received and the types of involvement structures that the employees worked with. The material in these reports was aggregated and not always very clear, but there were different practices between companies and even in the same company. The smaller companies provided less information to employees and less opportunity for them to influence affairs than the larger companies (Purdy, 1993b). The Matrix provided a means by which the practices of most of the larger companies could be positioned on a Matrix for each company and compared.

The notions behind Purdy’s constructs of influence and information are discussed before they are brought together in the Matrix. It is recognised that what is presented here is only a part of what happens when two people interact and that for some people they are not interested in such interactions. The notions here are for use with people who are prepared to operate in the ways indicated by the notions. The Framework is built upon the idea of an employee who could work in a variety of situations in an organisation. This means that an employee and a manager have to be active people and that for meaningful outcomes of a participative nature, this will require them to have interaction, information and influence.

For simplicity the notions of influence and information are considered separately. The employee starts in a subordinate influence position to a manager. The employee’s subordinate influence position continues through several areas of organisational arrangements. Eventually, the employee is considered to be an influence position which is equal with the manager. A similar situation exists in relation to information. The terms employer and manager are used throughout the conceptualisation. Of course, it is possible that the employee may have one assessment of the situation and the manager a different one. Both can be recorded as valid and used in their respective ways.

The influence construct

The approach recognises a construct of influence, which exists for everyone in relationships with others. Clearly influence cannot be separated from information but
initially we will ignore information. Influence is related to the construct of power, and on some occasions these are very close, and on other occasions these are less close. The construct of influence is a matter of exercising influence over another person, or with that other person, to bring about change in a situation.

The possible ends of the influence construct for any individual are anticipated to be a position of “No Influence Over” to “Total Influence Over”. This latter position may be a situation of power for the individual to take the decision without any obvious influence from others. Also, the “No Influence Over” position may be where the individual perceives no obvious influence in the situation. Although such points are likely to exist at various times in life, for this Matrix these absolutes appear to be unlikely. The similar notions about influence can exist for organisational arrangements where the range for an individual can be from “No Influence Over” through other states of influence to “Total Influence Over”. In his Matrix Purdy chose not to use “Total Influence Over”.

Purdy identified four areas and markers that can be used with the influence construct for an individual with an organisation. Although each of these areas relating to influence has a definition, these definitions are to help identify influence rather than provide a marker which is complete and not capable of challenge. Of course, personal construction always includes the possibility that another individual will construe an event in an alternative manner. The markers of influence from the least to the most are No Influence, Communication, Consultation and Participation (Purdy, 1987).

No Influence is the position where the employee is not allowed to exercise any influence in the organisation in the formal sense. It is also the situation where an employee perceives no obvious influence in the situation. It indicates that there are no organisational arrangements through which the employee can influence organisational events. This means that an employee could influence matters by leaving the organisation for example.

Communication is a position where the manager tells the employee about a decision already taken, for example, by the manager, and with or without the opportunity for the employee to formally express an opinion about the decision. The employee cannot directly influence the situation because a decision has been taken. The employee can exercise influence only outside of the organisational context. For example, the employee could simply provide an opinion to the manager after the information has been received, or could carry out any other action, such as leaving the organisation.

Consultation is the position where the manager provides information to the employee about a situation and the employee has an opportunity to express an opinion about matters under consideration to the manager before the manager takes the decision. In this position the employee has the possibility of affecting the manager’s decision due to the discussion which is expected to occur. If the employee considers there is no discussion or no influence is exercised, then the situation seems similar to Communication.

Participation is the position where the employee receives information about a situation and discusses this with the manager before they jointly take a decision, or in some manner which they jointly agreed previously. In this position the employee has the most opportunity to influence a situation. For Participation to occur there is
the need for interaction between the two managers, for them to be involved with the matters at hand, and, for there to be information which has the possibility of arising from either the employee or the manager.

For Participation to occur requires the employee to be an effective and active person capable of learning, as well as providing ideas and information. Information, influence and interaction all appear to be necessary for Participation to be in a state to occur (Purdy, 1993b).

It was with their concept of participation, that Wall and Lischeron (1977) devised and tested their notion of decision distance. They found that employees in a participative situation had notions about the relative distance from them that decision-making took place. The closest distance decisions were “Local”, such as decisions concerning the employee’s immediate job. The next decisions were considered to be at a “Medium” distance from the employee, and could perhaps relate to a department. The decisions taken at the furthest distance from the employee were called “Distant”, and might relate to decisions about the whole organisation.

The information construct

Purdy adapted Wall and Lischeron’s (1977) typology about decisions into notions of information used with the decisions at the different distances (Purdy, 1993b). Individuals will have their own notions about this, so it could be different for each person. The information construct has four markers for each area. Again the definitions which follow are to help assess a situation, rather than provide something unchallengeable.

Purdy considered that information could be perceived in the range from “No Information” to “All Information”. It seems unlikely that either of these conditions is likely to exist for most individuals. It is known that individuals say they have no information, so the four markers on the construct are No Information, Local Information, Medium Information and Distant Information.

No Information is the position where the employee perceives that no information is received or provided.

Local Information is that information which exists for the current and immediate job at hand, for a local decision. It is likely to be the smallest quantity of information in relation to the employee.

Medium Information is information for decisions further than the immediate job or the initial work activity. It is information which relates to decisions that are taken at a medium distance from the employee. Such information is likely to be more complex than that used in local decisions.

Distant Information, is any information used for decisions beyond medium decisions. It is information, which relates to decisions that are taken at the furthest distance from the employee. It is likely to be the most complex of information for the employee and could come from any part of the organisation (Purdy, 1993b).

The Information–Influence Matrix

The constructs of influence and information, Purdy considered, were used at the same time, when an employee made decisions. Each had four areas and four
To conceptualise what he considered happened he put these into an Information–Influence Matrix. This meant that it was possible for an employee, or a researcher, to determine the position of an employee on the Matrix by knowing the employee’s arrangements for Influence and Information. The Matrix should be able to deal with any situation.

The four markers of information form the vertical and the four markers of influence form the horizontal, as in Fig. 1. By drawing lines from each marker, it is possible to form boxes. Fig. 1 is an Information–Influence Matrix. It is a representation and this is not meant to imply anything other than that.

The Matrix has been drawn so that each box is the same size, but there is no significance in the sizes, as the Matrix is a representational device. In each box

<table>
<thead>
<tr>
<th>Information constructs</th>
<th>Constructs of employee influence</th>
<th>No influence</th>
<th>Communication</th>
<th>Consultation</th>
<th>Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Distant</strong></td>
<td></td>
<td>Unique employee’s reaction is outside the formal structure</td>
<td>Unique employee expresses an opinion about the policy</td>
<td>Unique employee and manager discuss before manager makes policy</td>
<td>Unique employee and manager formulate policy</td>
</tr>
<tr>
<td><strong>Medium</strong></td>
<td></td>
<td>Unique employee’s reaction is outside the formal structure</td>
<td>Unique employee expresses an opinion about the policy</td>
<td>Unique employee and manager discuss before manager makes policy</td>
<td>Unique employee and manager formulate policy</td>
</tr>
<tr>
<td><strong>Local</strong></td>
<td></td>
<td>Unique employee’s reaction is outside the formal structure</td>
<td>Unique employee expresses an opinion about the policy</td>
<td>Unique employee and manager discuss before manager makes policy</td>
<td>Unique employee and manager formulate policy</td>
</tr>
<tr>
<td><strong>No information</strong></td>
<td>Unique employee’s reaction is outside the formal structure and is without formal company information</td>
<td>← Situations cannot exist →</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
is the general statement about the way each employee is anticipated to react under the particular influence arrangements and information provision. Although the wording is the same with each of the four influence areas, where the three areas of information are provided, it has to be remembered that each individual will react in a different way, so that each box is unique to each individual’s situation. Since one of the information areas is *No Information* then three of the *Influence* states cannot exist.

A brief explanation of the Matrix will be useful. Starting in the bottom left of the Matrix, when there is formally *No Information* and *No Influence* with the organisation, then the employee’s reaction is outside of the formal structure of the organisation.

When the three Information areas *Local Information*, *Medium Information* and *Distant Information* are related to *No Influence*, because of the absence of Influence the employee’s reaction is outside of the organisation’s arrangements.

When the three Information areas are related to *Communication*, the employee will provide an opinion about the decision to the manager, but cannot expect anything further to occur within the organisation’s formal arrangements.

When the three Information areas are related to *Consultation*, the employee and the manager will discuss the situation before the manager takes the decision.

When the three Information areas are related to *Participation*, the employee and the manager will discuss the situation before they take a joint decision.

It is now possible to use the Matrix with an employee by ascertaining the employee’s constructs about Information and Influence and the relative place marked on the Matrix. Over time, it is possible to re-consider the employee’s position on the Matrix. If the position alters, it is possible to ascertain what has happened to change Information and Influence for the employee. Of course, the order of this use could be reversed.

**Creating Dynamic Frameworks**

It can be seen that the approaches set out in the previous sections have led to the creation of frameworks, which are dynamic, capable of changing and have versatile applications.

**Brief Background to Galician Primary Healthcare Legal Situation**

Since 1981, the Spanish Government has decentralised a wide range of healthcare matters to its 17 autonomous regions, 2 departmental communities and 2 autonomous cities. The Galician Government has the right to determine many aspects of healthcare, can organise and administer its own healthcare as well as legislate for these (*Ley Orgánica*, 1/1981). It cannot legislate for the financing of health as funds come from the Spanish State.

The Galician Health Service was created in 1989 to improve and achieve a higher level of health amongst Galicians. Primary healthcare is the first level, and is based upon the traditional trust between doctor and patient. Healthcare, the prevention of illness, individual and group health education, social work in the health area, and
any other community groups concerned with health matters will generally be based upon a Health Centre.

In July 1993, a modernising Decree (Decreto 200/1993) was issued to achieve primary healthcare, and included the following features, which are abbreviated.

The aim is for high quality care and easy access to a Health Centre. Unity will be promoted among the different healthcare professionals. All of the healthcare will be promoted within a system of participative management, which uses objectives, and is evaluated by the attainment of results. The 1993 Decree does not mention definite outcomes or key performance indicators. It makes a declaration of intentions about healthcare. The reforms will require people to invest an important amount of time and to have economic support. Both were not available in 1993.

The Health Centre will be staffed by, medical, nursing, non-healthcare and general service people. The Health Centre will be provided with suitable people to help to develop healthcare and the Health Centre’s objectives. It will also be provided with resources to run the system.

A Health Centre Manager will be responsible for its functioning and organisation, and report to an Upper Manager of the healthcare service. The Health Centre Manager’s functions include the allocation of tasks and responsibilities, along with the planning and operation of a smooth-running service. The remuneration of those employed in Primary Healthcare is regulated by the National Law (Real Decreto-Ley 3/1987).

The Framework for Research

Anticipating legal and personal changes

There are important matters for our work here. The Galician primary health system, based on a number of Health Centres, is changing. Also, a Health Centre Manager will be appointed and will work with an Upper Manager (our words) in the context of participative management. The legislation suggests that there will be change. It will be from a system where control of a Health Centre is direct by an Upper Manager, to one where a Health Centre is controlled by a Health Centre Manager. The authors have access to an Upper Manager who has confirmed this view and that the Health Centre Manager will have accounting data which will include budgets. Any changes in systems and measurement systems will be dealt with in our conversations.

This is the situation before we have conducted any individual and organisational studies. These formalities indicate that an Upper Manager is expected to create a more participative situation with any particular Health Centre Manager, and also to provide financial management data to that Health Centre Manager.

The authors’ consider that a range of situations is likely to occur with these Upper Managers. Following Kelly (1955), we accept that each person is different, so that, Upper Managers with the same job title, are unlikely to act in exactly the same way as each other. Also, any one Upper Manager will have to deal with a different individual manager at each Health Centre, so that each of these individual interactions will be different. This is because the personal construct system of each individual is different.
The authors now consider their anticipations about the realities of management with individual managers. Of course, the realities of management are open to a variety of interpretations, due to the potential diversity of each individual. We are interested in both the individual diversity, as well as the commonalities, which exist between the Upper Managers and the Health Centre Managers.

When we hold a conversation with any individual manager, of either type, we will aim to be open to all aspects of the developing situation. This is to appreciate as much as we can about the issues which have allowed or impeded the development of influence towards participation and the types of accounting information provision.

The intention here is to consider what could occur in the relationship between two people—the Upper Manager and the Health Centre Manager. At the start the Upper Manager has information and influence which is used to run the Health Centre. The law expects change and the Health Centre Manager to do this. We state our anticipations about the change in the perceptions of a Health Centre Manager using a personal construct framework and using the Information–Influence Matrix. We also do the same for the Upper Manager. We know that managers can vary in the styles of providing accounting data with a subordinate (Purdy, 1996). When we collect the views of such managers, we will be able to locate them on their own Information–Influence Matrix. An example of this is discussed in the next subsection.

The anticipated changes in the Health Centre Manager

The Health Centre Manager is considered to be in a position similar to that of the employee outlined with the Information–Influence Matrix. It is assumed, before the changes, that all relevant decisions about the Health Centre are taken by the Upper Manager, so the Health Centre Manager does nothing and has No Information and No Influence. The Health Centre Manager starts on the Health Centre Manager’s Matrix in the bottom left hand box as in Fig. 2. Fig. 2 is an Information–Influence Matrix with a line representation of an anticipated change in the situation of a Health Centre Manager in relation to Information and Influence.

Each Health Centre Manager’s notions about Influence, Information and the distance of the particular decision are likely to be unique and will depend upon how the manager perceives these. It could also depend upon the approach of the Upper Manager. For illustration here, we assume that the use of dressings and the decisions would be local. Therefore, information about these would be Local Information, such as the quantities involved and money used.

In a similar way, the amount of staff and money used to hire staff could be a decision at a medium distance, being Medium Information, whilst decisions about the Health Centre building are considered distant and require Distant Information. It is not known what matters, or the order of the matters that the Health Centre Manager will deal with. In the absence of knowledge, the analysis is kept to whatever the Health Centre Manager would consider Local Information.

As the Health Centre Manager and the Upper Manager start to interact, so it is anticipated that the situation of the Health Centre Manager will alter, perhaps
Figure 2. Anticipations of the ways in which a Health Centre Manager’s position might change, in relation to information and influence, is represented by an interrupted line on the Information–Influence Matrix.

Initially some Local Information with No Influence. In Fig. 2, a line represents this movement.

Then, this interaction will continue so that there is a situation of Local Information and Communication. This is indicated by the line moving right across into the Communication box in Fig. 2.

Over an unspecified period the Upper Manager will allow the Health Centre Manager access to an increased range of both influence and information as they move towards a situation of more information and more influence with participation. The Health Centre Manager will be successively in situations of Local Information and
Consultation, and then Local Information and Sole Participation. These changes are represented by a movement to the right of the line into the Consultation and Participation boxes in Fig. 2. This does not mean that the changes are continuous. The Fig. 3 indicates the dynamics of Influence if the Health Centre Manager works with Influence as anticipated.

It should be noted that we have introduced the notion of Sole Participation here. This is to be consistent with our existing terminology, yet to indicate that essentially the anticipation is that the Health Centre Manager is taking the decisions about local matters. We also use this term in the next subsection, as the situation from which the Upper Manager’s changes start.

The anticipated changes in the Upper Manager

It is assumed here that the Upper Manager, who has a Boss, works with and is the immediate superior of the Health Centre Manager. The Upper Manager has had complete influence over affairs at the Health Centre, but the legal changes require more participation by the Health Centre Manager. We had no knowledge of what was likely to occur, and to keep this consistent with the analysis of the Health Centre Manager this deals only with Local Information. Of course other information and decisions could be involved.

Here the Upper Manager is anticipated to move the situation from all types of Local Information towards No Information, or a different type of information. Also, in relation to local decisions, the manager is anticipated to move from Sole Participation influence to a situation of Communication, being told by the Health Centre Manager what has happened locally.

Of course the Upper Manager’s position could start elsewhere and could end elsewhere if control over information and influence is not passed to the Health Centre Manager.
For example, if the Upper Manager does not comply with the spirit of the law, the Health Centre Manager may never reach the preliminary stages of Participation, and will remain at one of the intervening positions. This is in order to retain more influence than either, the law or the stage of transition reached would suggest.

As the Upper Manager allows the Health Centre Manager to take control it is anticipated that the Upper Manager will pass through situations of Local Information and Sole Participation, Local Information and Consultation, then to Local Information and Communication, and No Information and Communication. The dynamics of influence for the Upper Manager are shown in Fig. 3.

For the Health Centre Manager to reach Sole Participation the two managers must interact about the matters of common concern. There are likely to be many types of Participation. When the Health Centre Manager is in control it is likely that the Upper Manager will receive a different type of information, information from the Health Centre Manager about the Health Centre.

The position of No Influence is unlikely to be achieved in practice. There are at least two reasons for this. Firstly, the Upper Manager will continue to interact with the Health Centre Manager and so is likely to exercise influence. Also, it is likely that the Upper Manager will continue to act as a co-ordinator of the Health Centre, have an interaction with the Boss and in some less direct way have some influence in local matters.

The Framework of Issues

The Health Centre Manager on the Personal Matrix

1. Starts in the No Information–No Influence box.

2. After a short period of time will interact with the Upper Manager and so will then be located in the Local Information—Communication box.

3. After a further period of interaction will be located in the Local Information—Consultation box.

4. After a further period of interaction will be located in the Local Information—Sole Participation box.

The Upper Manager on the Personal Matrix

1. Starts in the Local Information—Sole Participation box.

2. After a short period of time will interact with the Health Centre Manager and so will then be located in the Local Information—Consultation box.

3. After a further period of interaction will be located in the Local Information—Communication box.

4. After a further period of interaction will be located in the Local Information—different information box.
Summary and Conclusions

The paper has provided background to the authors’ approaches and methods of conducting their type of research, which is concerned with constructing frameworks of personal constructs and then conducting empirical work to validate or amend these. In this way, the authors consider that they have dynamic frameworks which are capable of validation and amendment.

The authors were aware that the law in Galicia had indicated changes in the provision of primary healthcare there. An Upper Manager who was responsible for a Health Centre will be expected to work with a newly appointed Health Centre Manager and will be responsible for involving that Health Centre Manager in more participative organisational practices, along with the use of accounting data, to administer the Centre. The assumed objective in this paper has been taken to be the transfer of control of local matters to the Health Centre Manager.

The paper has discussed one possible approach to examining what happens in practice, by setting out the stages of a framework for research. We have access to one Upper Manager, and the associated Health Centre Managers, in order to study the development of the Upper Manager and the Health Centre Managers. The framework here will enable the study to follow the positions of each Health Centre Manager and the Upper Manager on their own matrix of information and influence.

The current paper has been conceptualised and written in English. There could be notions, which are culturally related to the English language and institutions, and which are the basis of evidence for the personal constructions here, but which do not have the same validity in Spanish contexts.

We have set out the thoroughly referenced framework for future empirical work. Thus, this paper has set out our anticipations about the possible changes in the form of a framework that can be used to evaluate our field-work. This will be a longitudinal study of unknown duration because the authors do not know how things will alter.

Acknowledgments

Earlier versions of this paper have been given at the Interdisciplinary Perspectives on Accounting Conference, University of Manchester, July 2000, the Fifth Management Control Systems Conference, Management Control Association, Royal Holloway, University of London, July 2001, the Critical Perspectives on Accounting Conference, City University of New York, April 2002 and the Raymond Kanopka Management Control Group Meeting, University of Burgos, May 2002. The authors would like to thank the participants at these events for their interesting and supportive comments. We would like to thank in particular, the referees for their very supportive and very helpful comments on an earlier paper. Tony Lowe is thanked for his very supportive and helpful comments on a draft of this paper. The paper is solely the responsibility of the authors.
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