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# Supporting Employee Wellbeing with Management Practices

Self-managing Expert Employees in Health Care  
Organization

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## Abstract

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Employee well-being is essential to the performance and sustainability of healthcare organizations, particularly in high-demand environments where autonomy and decentralized work structures are common. This thesis explores how managerial practices influence the well-being of physiotherapists in Helsinki City's Home Rehabilitation Physiotherapy unit, with a focus on leadership behaviours that foster psychological safety, trust, and engagement.

A qualitative study was conducted using semi-structured interviews with nine physiotherapists. Thematic analysis, guided by Braun and Clarke's six-step framework, revealed six central themes: trust in leadership, workload and flexibility, participation in decision-making, communication and feedback, appreciation and human connection, and the role of managerial support. These findings are interpreted through the lenses of Strategic Wellness Management, the Job Demands–Resources (JD-R) model, Psychosocial Safety Climate, and theories of self-management and participatory leadership.

Results highlight the importance of trust-based and participatory leadership in sustaining employee well-being. Supportive managerial practices—such as transparent communication, emotional presence, and shared decision-making—were identified as protective factors, while excessive control and lack of feedback were experienced as stressors.

This study contributes to the understanding of leadership's role in shaping employee well-being in self-managing healthcare contexts. Drawing on both empirical findings and theoretical frameworks, it outlines evidence-based recommendations that respond to identified challenges and translate insights into actionable strategies. These proposals aim to bridge the gap between understanding and implementation—supporting healthcare leaders and decision-makers in building more resilient, engaged, and empowered workforces.

Keywords: Employee well-being, managerial practices, leadership, autonomy, strategic wellness management, self-management

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Työntekijöiden hyvinvointi on keskeinen tekijä terveydenhuollon organisaatioiden toimivuudessa ja kestävyudessa, erityisesti korkean kuormituksen työympäristöissä, joissa työ on itsenäistä ja hajautettua. Tämä opinnäytetyö tarkastelee esihenkilötyön vaikutuksia fysioterapeuttien hyvinvointiin Helsingin kaupungin kotikuntoutusfysioterapian yksikössä. Erityishuomio kohdistuu johtamiskäytäntöihin, jotka tukevat psykologista turvallisuutta, luottamusta ja työntekijöiden osallisuutta.

Tutkimus toteutettiin laadullisena haastattelututkimuksena, jossa haastateltiin yhdeksää fysioterapeuttia. Aineisto analysoitiin teemaattisella sisällönanalyysillä Braunin ja Clarken kuusivaiheisen mallin mukaisesti. Analyysin tuloksena nousi esiin kuusi keskeistä teemaa: luottamus johtoon, kuormitus ja joustavuus, osallistuminen päätöksentekoon, vuorovaikutus ja palaute, arvostus ja inhimilliset kohtaamiset sekä esihenkilötyön tuki. Tuloksia tarkastellaan strategisen hyvinvoinnin johtamisen (Strategic Wellness Management), työn vaatimusten ja voimavarojen mallin (JD-R), psykologisesti turvallisen ilmapiirin sekä itseohjautuvuuden ja osallistavan johtamisen teorioiden valossa.

Tutkimus osoittaa, että luottamukseen perustuva ja osallistava johtaminen on keskeistä työntekijöiden hyvinvoinnin tukemisessa. Läpinäkyvä viestintä, tunnepohjainen läsnäolo ja mahdollisuus vaikuttaa omaan työhön koettiin hyvinvointia edistäviksi tekijöiksi, kun taas liiallinen kontrolli ja palautteen puute lisäsivät kuormitusta.

Tämä tutkimus syventää ymmärrystä johtamisen merkityksestä työntekijöiden hyvinvoinnin muovaajana itseohjautuvissa terveydenhuollon toimintaympäristöissä. Empiirisiin havaintoihin ja teoreettisiin viitekehyksiin pohjautuen tutkimus esittää näyttöön perustuvia suosituksia, jotka vastaavat tunnistettuihin haasteisiin ja muuntavat oivallukset käytännön toimenpiteiksi. Suositusten tavoitteena on kuroa umpeen ymmärryksen ja toteutuksen välinen kuilu – tukien terveydenhuollon johtajia ja päätöksentekijöitä resilienssin, sitoutumisen ja työntekijöiden voimaantumisen vahvistamisessa.

Avainsanat: Työhyvinvointi, johtaminen, esihenkilötyö, autonomia, sosiaali- ja terveydenhuolto, strateginen hyvinvoinnin johtaminen, itseohjautuvuus

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# 1 Introduction

Employee well-being has become a strategic focus in healthcare organizations, where professionals routinely face high physical and emotional demands. (Gaspar et al., 2024) As service delivery models shift toward decentralized and autonomous structures, leadership practices play an increasingly important role in shaping supportive work environments. (Tourangeau et al., 2010) This study investigates how managerial behaviour influences the well-being of physiotherapists in the Helsinki City Home Rehabilitation unit, with the aim of identifying leadership approaches that foster trust, psychological safety, and sustainable work practices.

Workplace well-being is recognized as a key driver of both individual health and organizational performance. The United Nations Sustainable Development Goals (SDGs) reflect a global commitment to improving human well-being and creating fair and sustainable working conditions. Among these, SDG 3 (Good Health and Well-being) and SDG 8 (Decent Work and Economic Growth) are particularly relevant to this study. SDG 3 emphasizes the importance of promoting mental and physical health throughout the life course, which includes safeguarding the well-being of healthcare workers whose roles are often physically demanding and emotionally intense. SDG 8 focuses on fostering inclusive and sustainable economic growth by ensuring access to decent, meaningful work environments that support personal development and protect workers' rights. These goals are especially pertinent in healthcare settings, where staff well-being directly influences the quality of care and organizational resilience. (United Nations, 2019)

In Finland, these global targets are reflected in national strategies aimed at developing ethical, inclusive, and supportive working life practices, particularly within the public sector. Initiatives such as Kunta10 (Työelämätieto, 2024) and the City of Helsinki's Wellbeing Plan (Helsingin hyvinvointisuunnitelma 2022–2025) reinforce the importance of investing in leadership and organizational structures that promote employee health, motivation, and sustainability. From this perspective, the study contributes not only to the academic understanding of managerial influence on employee well-being but also to broader societal goals by identifying leadership practices that align with both international commitments and local policy frameworks.

This thesis is grounded in research that conceptualizes employee well-being as multidimensional—encompassing psychological, physical, social, financial, and career-related aspects (Grant, 2007; Wei, 2024; Coetzee, 2021; TTL, 2025). These dimensions are particularly relevant in home rehabilitation settings, where the independent nature of work can pose challenges in accessing peer or managerial support.

A central concept in the study is self-management, viewed not as complete independence but as autonomy supported through participatory structures and trust-based leadership (Martela et al., 2021). Physiotherapists in this unit exercise considerable discretion in planning care, making decisions, and managing their time. However, without leadership practices that promote psychological safety, transparent communication, and recognition, this autonomy may become a source of stress or professional isolation (Martela & Jarenko, 2017; Gagné & Bhave, 2011).

The theoretical framework includes models such as Strategic Wellness Management (Aura et al., 2016), which integrates well-being into strategic leadership practices; the Job Demands–Resources (JD-R) model (Bakker & Demerouti, 2007), which emphasizes the balance between demands and support; and Psychosocial Safety Climate (Idris et al., 2015), which focuses on employees' perceptions of psychological support in the workplace. These frameworks provide the analytical lens through which leadership practices are explored.

The relevance of this research is further underscored by recent organizational changes within the unit, including new performance targets, centralized scheduling policies, and other restructuring initiatives that have impacted employees' autonomy and workload. Additionally, the lingering effects of the COVID-19 pandemic have intensified attention to workforce well-being across the health sector.

The structure of this thesis is designed to build a comprehensive understanding of how managerial practices influence employee well-being in a decentralized healthcare setting. Following this introduction, Chapter 2 defines the research purpose, questions, and significance of the study. Chapters 3 to 6 form the theoretical framework, progressing from a general to a more focused perspective: Chapter 3 introduces the multidimensional concept of employee well-being; Chapter 4 presents the Strategic Wellness Management model, offering a structured, leadership-oriented approach to embedding well-being in organizational strategy; Chapter 5 explores self-management as a key

characteristic of the studied unit, and Chapter 6 examines leadership practices and their psychological impact in demanding healthcare environments. This order was chosen to reflect the increasing specificity of the concepts, moving from broad organizational themes to targeted leadership behaviours. Chapter 7 then describes the research setting, followed by Chapter 8, which outlines the methodology, including data collection and analysis. Chapter 9 presents the key findings, while Chapter 10 discusses the conclusions, practical recommendations, and opportunities for future research.

## **2 Research purpose and significance**

Building on the background presented in the previous chapter, this section defines the study's purpose, scope, and relevance. The research focuses on leadership and employee well-being in the City of Helsinki's Home Rehabilitation Physiotherapy unit—a highly autonomous but structurally complex healthcare setting.

The primary aim of this study is to investigate how physiotherapists experience and interpret managerial practices in relation to their well-being. Specifically, the study seeks to identify which leadership practices are perceived as supportive or detrimental in a decentralized, self-managed work environment. By combining empirical data from qualitative interviews with established theoretical frameworks—including leadership theory, Strategic Wellness Management, self-management models, and multidimensional perspectives on employee well-being—the research builds a comprehensive understanding of the dynamics between leadership and well-being in practice.

In addition to exploring these experiences, the study also aims to generate evidence-based, actionable recommendations for strengthening leadership practices. These proposals are intended to bridge the gap between understanding and implementation by translating research insights into strategic development tools. The ultimate goal is to support healthcare leaders and organizations in cultivating more sustainable, trust-based, and empowering workplace cultures that align with both operational needs and employee well-being.

### **Research questions:**

- What aspects of managerial practices positively impact employee well-being?

- What aspects of management practices negatively impact employee well-being?
- What improvements do employees suggest to strengthen leadership and support in their daily work?

**Thesis statement:**

Positive and trust-based managerial behaviour plays a pivotal role in improving the well-being of healthcare professionals and can support the development of healthier, more sustainable work environments.

**The significance of this research lies in four key areas:**

- **Social relevance:** Employee well-being in healthcare is directly linked to the quality and continuity of patient care. Poor well-being is associated with absenteeism, burnout, and staff turnover, all of which jeopardize service delivery (Adams, 2019; Zaghini et al., 2020).
- **Organizational development:** Existing monitoring tools such as Kunta10 and Fiilari offer valuable quantitative data but often lack the qualitative depth needed to understand how managerial practices are experienced. This study adds a new perspective by capturing lived experiences and identifying concrete areas for improvement (Wilson, 2014; Horton et al., 2004).
- **Professional insight:** The findings are relevant for the broader healthcare management field. In decentralized environments like home rehabilitation, it is critical that leadership structures reinforce autonomy while maintaining connection and guidance (Martela & Jarenko, 2017).
- **Regional applicability:** The unit's challenges reflect broader national trends in Finland, including an aging population and rising demand for home-based care. These findings can inform regional workforce planning and well-being strategies (Aura et al., 2016).

Aligned with the United Nations Sustainable Development Goals and Finland's public sector well-being objectives, this study positions employee well-being as both a moral

imperative and a strategic necessity. It highlights how leadership, when grounded in trust, dialogue, and participation, can serve as a powerful lever for building workplaces where healthcare professionals are empowered to thrive.

### 3 Employee well-being

The concept of health has traditionally been defined by the World Health Organization (WHO) as “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity” (World Health Organization, 1946). Over time, researchers have refined the notion of well-being, leading to a widely accepted three-dimensional framework encompassing physical, psychological, and social well-being (Sen, 1993). However, recent studies have expanded this model by recognizing two additional dimensions: financial well-being (Wei, 2024) and career well-being (Coetzee, 2021). These five dimensions collectively contribute to an individual’s overall well-being and significantly influence workplace satisfaction, productivity, and long-term health. (TTL, 2025)

In this chapter, the focus is placed specifically on **employee well-being**—a multidimensional concept that reflects how individuals experience and cope with the demands of their working life. By exploring each of the five dimensions in the context of the workplace, this chapter highlights how well-being is shaped not only by personal circumstances but also by organizational culture, leadership, and job design. Understanding these dimensions is essential for identifying the factors that influence well-being among healthcare professionals and for developing targeted strategies to support them effectively.

#### 3.1 Five dimensions of employee well-being

##### 3.1.1 Psychological well-being

Psychological well-being in the workplace refers to an employee’s mental and emotional state – their moods, stress levels, resilience, and sense of purpose on the job. It is commonly divided into hedonic well-being (experiencing positive emotions, pleasure, and satisfaction at work) and eudaimonic well-being (finding meaning, fulfilment, and personal growth through work). In practice, this dimension reflects whether employees

feel content, motivated, and mentally healthy at their work. High psychological well-being is characterized by positive mood, enthusiasm, and the ability to cope with work stress, whereas low psychological well-being may manifest as chronic stress, anxiety, or burnout. (Grant, 2007)

### 3.1.2 Physical well-being

Physical well-being refers to the health and bodily condition of employees, including factors like illness, energy levels, fitness, and ergonomics at work. It addresses how work impacts an individual's physical health and how capable they feel of meeting job demands from a physical standpoint. High physical well-being means an employee feels healthy, safe, and energized at work – for example, they do not suffer frequent work-related injuries or excessive fatigue, and the workplace supports their health (through ergonomics, reasonable hours, wellness programs, etc.). On the other hand, poor physical well-being could involve health issues such as chronic pain (perhaps from poor ergonomics), high levels of fatigue or burnout, or exposure to unsafe working conditions. (Grant, 2007)

### 3.1.3 Social well-being

Social well-being relates to the quality of relationships and social interactions an employee has in the workplace. Since work environments are inherently social, positive workplace connections—with colleagues, teams, and managers— are a major part of well-being. Social well-being at work includes having supportive relationships, a sense of belonging, and effective collaboration with others. It can be thought of as the level of social support an employee feels and the degree of positive social climate in the organization. High social well-being is evident when employees trust their coworkers and supervisors, communicate openly, and feel respected and included. (Grant, 2007)

### 3.1.4 Financial well-being

Financial well-being refers to the degree of economic security and freedom from financial stress that an employee experiences. This dimension recognizes that an individual's financial situation – salary, benefits, debt, savings – can greatly impact their stress and performance at work. An employee with good financial well-being feels economically stable and confident about meeting personal or family needs, whereas one

with poor financial well-being may be distracted or anxious about money matters on the job. Recent research highlights that financial concerns are a leading source of stress among employees, with nearly 72% of adults reporting financial stress as a significant concern. (Wei, 2024)

### 3.1.5 Career well-being

Career well-being captures how employees feel about the work they do, their opportunities for growth, and their sense of purpose or accomplishment in their job. It answers questions like: Do I like what I do each day? Do I see progress in my career? Am I engaged and proud of my work? High career well-being means an employee derives enjoyment and fulfillment from their daily work and perceives their job as aligned with their goals or values. This involves having opportunities to use one's strengths, to learn and advance, and to feel that one's work is meaningful. Employees with strong career well-being typically report high job satisfaction and engagement, and they are often internally motivated. In contrast, poor career well-being might involve feeling stuck in a dead-end role, disengaged, or lacking a sense of purpose. Such employees might be physically present but psychologically withdrawn. (Coetzee, 2021)

A useful theoretical framework that helps explain how these five dimensions interact with workplace conditions is the Job Demands–Resources (JD-R) model (Bakker & Demerouti, 2007). According to this model, all job characteristics can be categorized as either demands—aspects that require effort and may cause strain—or resources—elements that help achieve goals, reduce demands, or promote personal growth. For example, time pressure, emotional labour, and unpredictable work schedules are common job demands in healthcare, while autonomy, supportive leadership, and feedback function as job resources. The JD-R model suggests that resources are essential not only for mitigating the negative effects of high demands but also for fostering engagement and well-being. This study applies the JD-R lens to better understand how leadership practices either buffer or intensify these demands in the Home Rehabilitation Physiotherapy unit (Bakker & Demerouti, 2007; Xanthopoulou et al., 2006).

Together, the five dimensions of well-being offer a comprehensive understanding of what it means to support employees holistically. However, recognizing these dimensions is only the first step. To effectively promote well-being in practice, organizations must adopt structured approaches that integrate well-being into their daily operations

and long-term strategies. The following chapter introduces Strategic Wellness Management (SWM) as a practical framework for embedding well-being into organizational planning and leadership.

## 4 Strategic Wellness Management

### 4.1 The strategic relevance of workplace well-being

Workplace well-being plays a critical role in enhancing both employee satisfaction and overall organizational performance. All five dimensions of well-being —physical, psychological, social, financial, and career well-being contribute to employees' ability to perform their duties effectively while maintaining motivation. (Lăzăroiu, 2015; Työterveyslaitos, 2025) Organizations that prioritize well-being benefit from higher employee engagement, improved productivity, and long-term sustainability. (Anand et al., 2024; Arevin et al., 2024; Putra, 2023; Jacobs et al., 2018)

To systematically enhance these dimensions of well-being within the Finnish healthcare sector, a tailored model known as Strategic Wellness Management (*strateginen hyvinvoinnin johtaminen, SWM*) has been developed. It is a structured approach to workplace well-being that directly impacts organizational performance and productivity. (Aura et al., 2016)

Primary objective of SWM is to enhance employee motivation, competencies, and work capacity in alignment with business demands, ensuring that employees can perform at their best while contributing to business growth, innovation, and long-term success (Aura et al., 2016). When fully integrated into strategic planning and leadership practices, SWM enables organizations to maximize employee potential, fostering a work environment that supports both individual and organizational development. Beyond productivity, it also serves as a cornerstone for ethical and sustainable competitiveness, allowing businesses to maintain profitability while prioritizing employee well-being. (Anand et al., 2024; Arevin et al., 2024; Putra, 2023)

As a business-aligned approach, Strategic Wellness Management bridges the relationship between workforce well-being, employee engagement, and leadership practices, ultimately driving both employee satisfaction and corporate success. (Lăzăroiu, 2015; Aura et al., 2016) By implementing effective leadership strategies, establishing clear

objectives, and continuously measuring the impact of well-being initiatives, organizations can create a sustainable, high-performing, and resilient workplace (Anand et al., 2024; Arevin et al., 2024; Putra, 2023; Aura et al., 2016).

By integrating Strategic Wellness Management (SWM) into organizational culture, healthcare organizations can strengthen employee satisfaction, enhance retention, and foster resilient, empowered workforces. When strategically implemented, SWM promotes long-term productivity and innovation, positioning organizations as employers of choice in an increasingly competitive labour market (Aura et al., 2016; Lăzăroiu, 2015).

## 4.2 Principles of Strategic Wellness Management

The successful implementation of Strategic Wellness Management (SWM) depends on embedding its core principles into daily leadership practices and organizational culture. Rather than functioning as a separate program, SWM is a comprehensive, long-term approach to integrating employee well-being into strategic decision-making. The following sections outline the foundational principles of SWM—ranging from safe working environments to leadership engagement and self-management. Each principle represents a building block for creating workplaces where employees can thrive physically, psychologically, and professionally. These principles offer a structured framework for aligning employee support with broader organizational goals, contributing to sustainable performance, resilience, and innovation.

### 4.2.1 Safe and supportive work environments

A healthy work environment is essential for both physical and psychological well-being. Employers play a crucial role in creating and maintaining conditions that support employee health and productivity. Ensuring safe and ergonomic working conditions helps prevent injuries and minimizes physical strain, allowing employees to perform their tasks efficiently and comfortably. Addressing psychosocial risks, such as workplace stress and conflicts, is equally important in fostering a positive and balanced work atmosphere. In addition, promoting a culture of trust and inclusion where employees feel valued enhances workplace morale and strengthens team dynamics. A supportive work environment not only contributes to employee well-being but also reduces absenteeism, increases retention, and encourages collaboration, ultimately leading to a more engaged and productive workforce. (Faez et al., 2023; Työterveyslaitos, 2025)

#### 4.2.2 Data-driven workplace well-being management

A strategic approach to workplace well-being must be data-driven, ensuring that decisions are informed by real insights rather than assumptions. Organizations can enhance their well-being initiatives by regularly assessing employee well-being through surveys and feedback mechanisms, allowing them to gauge satisfaction levels and identify potential concerns. HR analytics play a crucial role in this process by tracking key metrics such as absenteeism, turnover rates, and engagement trends, providing valuable information on workforce stability and overall job satisfaction. Additionally, evaluating the effectiveness of well-being programs enables organizations to make informed adjustments, ensuring that their strategies remain relevant and impactful. By systematically analysing workplace well-being data, organizations can detect challenges early, implement targeted interventions, and create a healthier, more engaged workforce that contributes to long-term business success. (Anand et al., 2024; Työterveyslaitos, 2025)

#### 4.2.3 Employee development and support

Employees need continuous support throughout their careers, from onboarding to professional growth opportunities. SWM plays a vital role in ensuring that employees have access to training and skill development programs that enhance their expertise and career prospects. It also provides opportunities for career advancement that align with their professional aspirations, fostering motivation and job satisfaction. (Johnson & Long, 2022; Pawar & Kunte, 2022) Additionally, when employees feel supported in achieving work-life balance, they are better able to manage stress and remain engaged in their roles. (Eisenberger & Stinglhamber, 2011) A well-managed workplace that fosters career satisfaction leads to higher employee retention and organizational commitment. (Lăzăroiu, 2015; Työterveyslaitos, 2025)

#### 4.2.4 Leadership and organizational support

Leadership plays a crucial role in fostering a workplace culture that prioritizes well-being. Effective well-being leadership is characterized by transparent communication about well-being initiatives and organizational goals, ensuring that employees are well-informed and feel included in the broader vision. (Eisenberger & Stinglhamber, 2011) Encouraging employee participation in decision-making further strengthens this culture,

as it empowers individuals to have a voice in shaping their work environment. (Jain et al., 2021) Additionally, providing both emotional and professional support through leadership training and mentorship programs helps employees feel valued and supported in their career development. (Lăzăroiu, 2015) When leaders actively engage in well-being initiatives, employees are more likely to feel motivated, engaged, and committed to contributing to the organization's overall success. (Johnson & Long, 2022; Pawar & Kunte, 2022; Työterveyslaitos, 2025)

#### 4.2.5 Job design and self-management

Job design plays a critical role in workplace well-being. Employees are most engaged when they find their work meaningful and well-structured. Organizations can enhance job satisfaction by allowing employees a degree of autonomy in managing their tasks, giving them a sense of control over their work. (Onimole, 2015) Ensuring that workloads are distributed fairly helps prevent excessive stress and supports a healthier work environment. Recognizing and rewarding employee contributions reinforces motivation and fosters a culture of appreciation. (Kumari et al., 2015) Additionally, encouraging job crafting, where employees can shape aspects of their roles to better align with their strengths and interests, significantly enhances well-being by making individuals feel more invested in their work. (Zareen et al., 2013; Työterveyslaitos, 2025)

Strategic Wellness Management provides a valuable framework for aligning organizational practices with employee well-being. However, the success of such strategies depends heavily on how much autonomy, trust, and responsibility employees are given in their day-to-day work. Empowering employees to manage their own tasks and participate in decision-making processes is a key aspect of well-being in practice. The next chapter explores the concept of self-management in more detail, including different implementation models and their impact on employee engagement and satisfaction.

## 5 Self-management

A recent research project conducted in Finland demonstrates that a stronger sense of self-management (itseohjautuvuus) among employees is significantly linked to increased work engagement and a reduced risk of burnout. (Martela et al, 2021) Employees who experience greater autonomy in their work are more likely to feel motivated, invested in their tasks, and resilient in the face of workplace challenges. (Mierlo et al.,

2006) This relationship highlights the importance of self-management as a key factor in promoting employee well-being and sustaining long-term job satisfaction. (Gagné & Bhave, 2011)

## 5.1 What is self-management?

Self-management has become a prevalent term in contemporary work environments, yet its meaning varies significantly depending on the context in which it is used. For some, self-management represents a radical shift toward entirely leaderless organizations, where traditional hierarchies are dismantled, middle management is eliminated, and decision-making power is distributed among employees. For others, it refers to a coaching-based leadership approach that operates within existing hierarchical structures, fostering greater employee autonomy while maintaining managerial oversight. (Martela et al, 2021)

A key distinction in discussions of self-management is whether it applies to individual employees or the organization as a whole. Is self-management primarily about an employee's ability to work independently, or does it describe a broader structural change in how organizations are governed? The term is often used in both ways. In some cases, self-management describes organizations that have significantly reduced hierarchical control, allowing employees to make decisions collectively without direct supervision. (Martela et al, 2021) However, not all companies pursuing self-management aim for such radical transformation. Many business leaders focus instead on enhancing employees' capacity to take initiative, exercise autonomy, and assume greater responsibility within existing managerial frameworks. In this context, self-management is not about removing leadership but about redefining the role of leadership to support autonomy. It involves enabling employees to contribute actively, make day-to-day decisions with confidence, and feel accountable for the outcomes of their work. (Ghal et al., 2018; Mierlo et al., 2006)

While individual self-management is often discussed in contrast to top-down leadership, it is rarely about working in complete isolation. Instead, self-management is almost always community-driven, meaning that independent decision-making is balanced by collaboration and shared coordination (Mierlo et al., 2006; Gamrasni, 2021). For this reason, it is crucial to differentiate self-management (individual autonomy) from community-based management (team-level autonomy). (Martela et al, 2021)

**At the individual level, self-management** refers to an employee's capacity to work autonomously, making decisions and executing tasks without the need for constant oversight. (Martela & Jarenko, 2017, p.12) A self-managing employee can independently contribute to shared organizational goals, exercising sound judgment without continuously seeking approval from a supervisor. (Gutierrez et al., 2019) In contrast, a top-down management approach places strict control over employees, with managers dictating every aspect of their work. Such environments tend to foster passivity, where employees become reliant on direct supervision. Conversely, self-managing employees demonstrate initiative, proactively engage in their responsibilities, and play an active role in advancing organizational objectives. (Gbarale, 2022)

**Community-based management** refers to the collective organization of work within a team, particularly in the absence of a direct supervisor. Rather than decision-making authority being transferred to individual employees, responsibility is distributed across the team as a whole. (Salovaara, 2020) This means that instead of relying on managerial oversight, the team collaboratively determines how tasks are allocated, which work processes are implemented, and how responsibilities are shared. (Becker, 2012) For self-managed teams to operate effectively, a strong culture of accountability is essential, ensuring that employees take ownership of shared objectives and proactively address challenges as they arise. In practice, organizations without traditional managerial structures often rely on autonomous teams, where coordinated collaboration enables work to be executed efficiently and effectively. (Becker, 2012)

**Self-managing organization** represents a structural approach to workplace management that aims to significantly reduce hierarchical control by eliminating traditional layers of management or substantially limiting their authority. In highly self-managing organizations, middle management is often absent, and employees work autonomously without direct supervision, relying instead on decentralized decision-making and collaborative coordination. (Lee & Edmondson, 2017; Martela et al, 2021) Self-managing companies adopt a peer-based coordination model, in which employees work collaboratively to manage responsibilities, address challenges, and make strategic decisions without relying on a formal managerial structure (Martela, 2019). Rather than seeking approval from a supervisor, decision-making in these organizations follows a consultative approach, where employees engage with those directly impacted by the decision to gather insights and ensure informed, collective choices (Vuori & Martela, 2020).

**In conventional hierarchical organizations**, coordination, task allocation, and decision-making are structured through a top-down command system, where authority flows from management to employees.

## 5.2 Self-management within traditional hierarchies

While self-managing organization represents a fundamental restructuring of how work is coordinated, self-management at the individual level can exist within a wide range of organizational models. (Mierlo et al., 2006) Even in highly hierarchical structures, employees or teams may be granted considerable autonomy in determining how they accomplish their goals. The presence of managerial layers does not inherently hinder self-management; rather, its effectiveness depends on the degree of independence and decision-making authority that leaders are willing to delegate. Consequently, self-management does not necessarily require an organization to be fully self-organized but can function within traditional frameworks, provided that employees are entrusted with meaningful responsibility and autonomy. (Martela, 2019; Lopdrup-Hjorth et al., 2011; Mierlo et al., 2006)

Self-management and self-organization should not be viewed as binary concepts; rather, they exist along a spectrum. No employee operates with absolute autonomy, nor is any worker entirely dependent on hierarchical control. Instead, employees make independent decisions in some aspects of their work while relying on managerial guidance in others. As self-management increases, employees gain greater discretion in their roles, reducing the need for direct supervision. Similarly, as teams develop greater community-based coordination, they assume more responsibility for their collective tasks without requiring constant managerial oversight. (de Leede et al., 1999; Mierlo et al., 2006)

Organizations, too, fall along this continuum, with varying levels of decentralized and centralized decision-making. Even in the most self-organized companies, certain strategic decisions remain within the domain of executive leadership. Conversely, in rigidly hierarchical organizations, employees still retain some level of independence in how they perform their tasks. Most organizations operate somewhere between these two extremes, balancing distributed decision-making with structured oversight. (Martela et al, 2021)

Ultimately, self-managing organization entails a significant reallocation of decision-making authority, often dismantling traditional management hierarchies. However, self-management at the individual level can thrive even within hierarchical organizations, provided that leadership fosters a culture of trust, autonomy, and accountability. The key to successful self-management is not necessarily the removal of hierarchy but the creation of an environment in which employees feel empowered to take initiative, exercise judgment, and contribute meaningfully to organizational objectives. (Gbarale, 2022)

### 5.3 Empowering employees: dimensions of self-management

Self-management in the workplace is not solely an individual trait; rather, it depends on the extent to which an organization grants employees the autonomy to take control of their work. (Mierlo et al., 2006) The ability of individuals and teams to self-manage is fundamentally linked to organizational structures that either encourage or restrict decision-making authority. When employees and teams are trusted and given the necessary freedom, they are more likely to take responsibility for their tasks, make proactive decisions, and contribute meaningfully to organizational goals. Conversely, excessive control can stifle initiative and limit employees' ability to work autonomously (Deci et al., 2017; Lopdrup-Hjorth et al., 2011; Mierlo et al., 2006)

Self-management is best understood through the rights and decision-making power employees perceive themselves to have in the workplace. The study by Martela et al. (2021) categorizes self-management into three key dimensions: (1) autonomy over task execution, (2) influence on work-related goals, and (3) participation in organizational development.

**The first dimension**, *autonomy over task execution*, refers to an employee's ability to independently decide how they perform their work. This includes the flexibility to adjust work methods, prioritize tasks, and optimize workflows without requiring constant approval from a supervisor. (Martela et al, 2021) When employees have control over how they achieve their objectives, they are more likely to be engaged, efficient, and innovative in their approach. (Dasgupta et al., 2024)

**The second dimension**, *influence on work-related goals*, concerns employees' ability to participate in setting the objectives they are expected to achieve. Some organizations impose top-down goals with little room for employee input, while others allow employees to shape their work objectives based on their expertise and understanding of organizational needs. Additionally, this dimension extends to performance evaluation—who determines the criteria for success and recognition? Employees who have a say in their goals and performance measures tend to feel more motivated and aligned with the organization's broader mission. (Martela et al, 2021; Wijayanto & Riani, 2021)

**The third dimension**, *participation in organizational development*, involves employees' ability to influence workplace structures and decision-making processes. It reflects whether employees believe their ideas and contributions can lead to meaningful change or if decision-making remains the sole responsibility of senior management. This includes shaping policies related to scheduling, communication, remote work, and overall work culture. In some organizations, employee input is actively sought and integrated, while in others, decision-making remains rigidly hierarchical. A workplace that values employee contributions fosters a culture of innovation and continuous improvement. (Martela et al, 2021; Jain et al., 2021)

In conclusion, organizations that cultivate an environment supportive of self-management are better positioned to foster employee motivation, engagement, and sustained job satisfaction (Gagné & Bhave, 2011). Rather than being an isolated individual trait, self-management emerges from the degree of autonomy, trust, and participatory culture embedded in the workplace. When these conditions are present, employees are more likely to take initiative and thrive—benefiting both themselves and the organization as a whole (Martela et al., 2021).

While self-management fosters autonomy, engagement, and accountability among employees, it does not operate in isolation. Its effectiveness is shaped by the broader leadership environment. Without appropriate managerial support, autonomy can lead to uncertainty or stress. Thus, it is essential to understand how leadership practices either support or hinder the well-being of employees in complex, high-pressure environments such as healthcare. The following chapter explores these leadership dynamics and their role in promoting or compromising employee well-being.

## 6 Leadership practices influencing well-being

In healthcare organizations, leadership plays a central role in shaping the conditions under which employees work—and ultimately thrive. Beyond simply enabling self-management, effective leadership can reduce stress, foster motivation, and create a culture of psychological safety. This chapter examines how different leadership approaches influence employee well-being, particularly in demanding and emotionally intensive healthcare environments.

### 6.1 Managerial challenges in high-demand healthcare settings

Healthcare work environments are often characterized by high emotional demands, time pressure, and constantly changing conditions. In such settings, the way work is managed becomes especially critical. A recent study conducted in the Finnish healthcare sector found that many of the primary stressors experienced by employees—such as inadequate staffing, excessive workloads, unclear instructions, and disruptive work conditions—were not the result of individual performance, but rather stemmed from managerial decisions and organizational practices (Lahti & Kalakoski, 2024). These findings align with earlier research indicating that leadership and management structures are among the most influential factors in shaping employee well-being in high-demand sectors (Zaghini et al., 2020; Shirey, 2017).

Managerial misconduct—such as unrealistic performance demands, assigning excessive responsibilities, rigid work schedules, and excessive monitoring—was identified as a contributing factor to a toxic work culture, increasing stress and diminishing well-being (Lahti & Kalakoski, 2024). International research supports these findings. A large-scale study on nursing staff in Canada found that chronic staffing shortages, mandatory overtime, toxic work environments, and even workplace violence were major concerns. As a result, four out of five nurses reported some level of burnout, and over half considered leaving their positions due to poor work-life balance and a lack of autonomy (Ben Ahmed & Bourgeault, 2022).

Indeed, studies confirm that the work environment directly impacts employees' psychological health. Supportive management, reasonable job demands, and access to stress

management resources contribute to better psychological well-being at work (Zaghini et al., 2020; Adams, 2019).

While managerial structures shape the working environment, leadership style plays an equally critical role in determining how employees experience their work. The next section explores how different leadership approaches influence employee satisfaction, engagement, and overall well-being.

## 6.2 Leadership styles and their effects on well-being

Research has consistently demonstrated a strong link between leadership style and employee well-being (Shirey, 2017; van Dierendonck et al., 2004). Poor leadership—particularly destructive or disengaged behaviours—can lead to decreased job satisfaction, increased stress, and ultimately higher turnover (Sonnentag et al., 2023; Page & Vella-Brodrick, 2009).

Conversely, leadership approaches that prioritize support, inclusion, and development have been shown to enhance both individual and organizational outcomes. Transformational, empowering, task-oriented, and relationship-oriented leadership styles are especially effective in reducing burnout and fostering motivation (Sonnentag et al., 2023; Shirey, 2017). Leaders who invest in strong, trust-based relationships with their employees foster an environment in which staff feel valued, supported, and engaged. Importantly, positive leadership behaviours have lasting effects, influencing not only employees' day-to-day well-being but also their long-term professional satisfaction. (Sonnentag et al., 2023)

In addition to leadership style, employees' perception of fairness in leadership behaviours plays a significant role in shaping well-being. Organizational justice theory posits that when employees feel that decision-making processes are fair, transparent, and respectful, they are more likely to show increased engagement, commitment, and trust in leadership. Perceptions of injustice—such as when decisions are made without explanation or employee input—can lead to frustration, decreased morale, and resistance to change, particularly in high-pressure environments like healthcare. (Colquitt et al., 2001)

Beyond conventional leadership styles, emerging research suggests that qualities such as mindfulness, authenticity, and creativity are increasingly relevant in promoting psychological safety and motivation. These traits enhance traditional leadership by fostering deeper human connection and adaptability.

### 6.3 Beyond traditional leadership: mindfulness, authenticity, and creativity

Recent research suggests that expanding beyond traditional leadership models can further strengthen employee well-being. Mindful and authentic leadership practices have been shown to create more empathetic, respectful, and motivating work environments (Raykov, 2014). A study by Elsamani et al. (2023) found that leaders who engage in genuine, mindful interactions with their teams contribute to a more cohesive and dynamic work culture. These leaders are more attuned to the needs of their staff and help foster a sense of belonging and motivation.

In addition, humour—when used appropriately—can humanize leaders, strengthen interpersonal relationships, and create psychologically safer environments. Humour in leadership has been linked to enhanced creativity, resilience, and openness to new ideas (Elsamani et al., 2023). These attributes are particularly valuable in healthcare, where adaptability and psychological safety are vital to both employee satisfaction and patient outcomes.

One of the most impactful ways leaders can support well-being is by cultivating a workplace climate where employees feel psychologically safe. The final section of this chapter examines the concept of Psychosocial Safety Climate and its growing importance in healthcare settings.

### 6.4 The role of managers in creating a Psychosocially Safe Climate

A critical aspect of leadership in healthcare is the ability to foster a **Psychosocial Safety Climate (PSC)**. PSC refers to employees' shared perception that their psychological safety is valued and protected within the organization (Idris et al., 2015). In such climates, staff feel free to speak up, share ideas, ask questions, admit mistakes, and seek help without fear of judgment or consequences (Idris et al., 2015; TTL, 2021).

The growing body of research on PSC highlights its role as a strong predictor of various well-being and performance outcomes. High PSC is associated with lower psychological distress (Mirza et al., 2022), reduced emotional exhaustion (Mansour & Tremblay, 2019), and fewer symptoms of depression (Zadow et al., 2021). It also correlates with lower rates of burnout, reduced absenteeism and presenteeism, and improved organizational commitment (Becher & Dollard, 2016; Geisler et al., 2019; Huyghebaert et al., 2018).

By cultivating PSC, managers not only protect individual well-being but also contribute to organizational stability, resilience, and sustained performance. This makes psychological safety not just a moral obligation, but a strategic leadership priority in modern healthcare settings.

In summary, leadership plays a pivotal role in shaping the well-being of employees in high-demand healthcare environments. While external pressures such as staffing shortages and workload intensity are prevalent, it is the quality of managerial practices that often determines whether these challenges become overwhelming or manageable. Positive leadership—characterized by trust, support, and authenticity—has been shown to enhance employee satisfaction, resilience, and long-term engagement. Furthermore, leadership that embraces mindfulness, encourages innovation, and fosters a psychosocially safe climate contributes not only to individual flourishing but also to organizational sustainability. As healthcare systems continue to face increasing demands, investing in leadership development and well-being-oriented management is not only beneficial but essential for maintaining a healthy, motivated, and high-performing workforce.

## **7 Research setting**

The study was done in Helsinki City's Home Rehabilitation Physiotherapy unit (Helsingin kaupungin kotikuntoutusfysioterapia). The unit is part of Helsinki City's public Health and Social Services, and it works under Helsinki Hospital (Helsingin sairaala).

Home physiotherapy visits have been done in Helsinki since 1950s'. Until the year 2017 these visits were done by physiotherapists from outpatient care as single visits. Resource allocation was 10 therapists for the whole city divided to multiple different employees.

In 2017, seventeen physiotherapist positions were transferred from outpatient care to form Home Rehabilitation Physiotherapy Unit. During 2018 and 2019, an additional seventeen positions were added. In 2019 Helsinki City established the Rehabilitative Assessment unit, and three physiotherapist positions from home rehabilitation physiotherapy were reallocated there. Notably, the physiotherapy services of the Rehabilitative Assessment continue to operate under the Home Rehabilitation Physiotherapy. Today, the Home Rehabilitation Physiotherapy unit employs a total of 47 physiotherapists. Managerial responsibilities are carried out by one head nurse of Home Rehabilitation Physiotherapy, supported by two assistant head nurses who serve as line managers for Home Rehabilitation Physiotherapy, along with an additional assistant head nurse who is the line manager for the Rehabilitative Assessment unit's Physiotherapy.

The nature of the work in Home Rehabilitation Physiotherapy differs significantly from the typical healthcare work environment. Home Rehabilitation Physiotherapy is a so-called satellite unit, which means that each physiotherapist works in their assigned area and manages all the clients from that area. They do all their work independently from contacting the clients to planning the physiotherapy interventions and working with different stakeholder and collaboration groups. They work multidisciplinary with the area's assigned Home Care units to support the rehabilitation and physical activity of the Home Care clients, as well as assist Home Care nurses' work by providing support and training in ergonomics and kinaesthetics. This is why physiotherapists' office is usually located in the Home Care unit's facilities. Work happens multi-locationally either from their office or another agreed workplace. The work is done during office hours, but otherwise the employees have control over their schedules.

Due to the nature of the work, many of the physiotherapists do not have physical collegial or managerial support at hand. Home Rehabilitation Physiotherapy has five sub teams that are formed based on their work location (North, South, East and West Helsinki). One of the sub teams Rehabilitative Assessment Physiotherapy (Kuntoututtava arviointiyksikkö) takes care solely of the hospital discharge patients and works with the Rehabilitative Assessment unit instead of Home Care units. Sub teams aim to provide the needed collegial support as well as make implementation of new processes easier. Each sub team has its team leader to support communication between the team members and the managers.

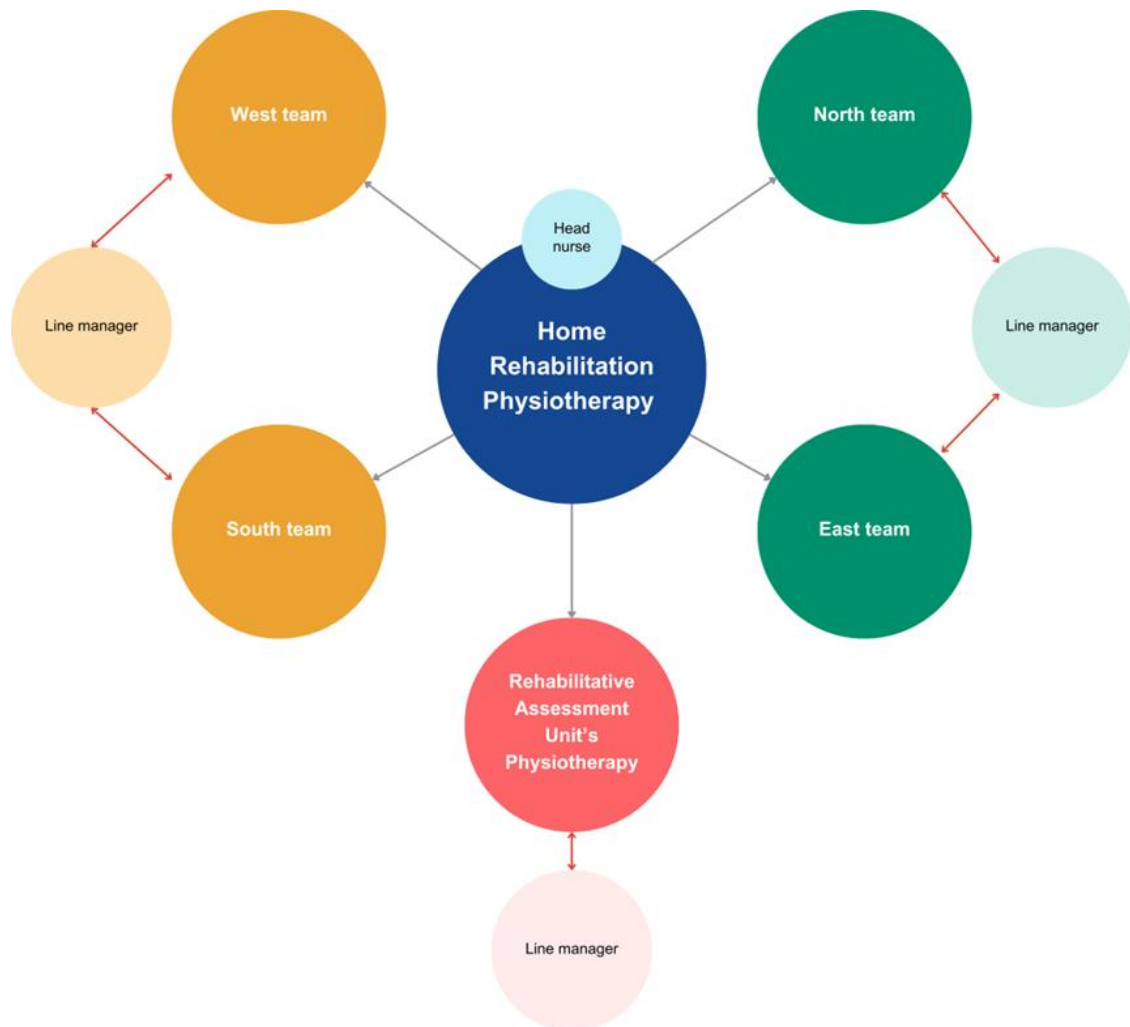


Figure 1. Satellite form of Home Rehabilitation unit

The Home Rehabilitation Physiotherapy unit has been under multiple changes during the past years. Not only has it grown significantly, but it has changed its operational model to work closely in partnership with Helsinki City's Home Care and Rehabilitative Assessment unit. The COVID-19 pandemic interrupted the development work in 2020-2022 and had a strong impact on the work models and the well-being of the employees. Over the past year, several changes have been implemented in the work arrangements for physiotherapists. One significant modification affecting work autonomy was the introduction of a general working time policy, which limited the opportunity to adjust work hours flexibly. Additionally, restrictions on holiday scheduling meant that fewer physiotherapists could be on leave simultaneously. Finally, the implementation of numerical performance targets for physiotherapy visits has further reshaped their work practices.

## 8 Research process

### 8.1 Timeline of the study

The research process for this study was structured into four distinct phases, each contributing to the systematic and rigorous execution of the project.

The **first phase**, initiated in May 2024, involved developing the thesis proposal and securing the necessary research approvals. This stage included formalizing thesis agreements, preparing a data safety notice, designing the participant consent form, and developing the interview template to ensure ethical and methodological integrity.

The **second phase**, conducted between September 2024 and January 2025, focused on engaging the Home Rehabilitation Physiotherapy unit and recruiting participants. This involved introductory meetings with managers, distributing an informative email to physiotherapists, and hosting two Teams meetings to provide further details about the study. Additionally, during this phase, the semi-structured interviews were conducted with participants, serving as the primary data collection process.

The **third phase**, taking place from January to February 2025, was dedicated to data analysis and the development of the theoretical framework. The transcribed interview data were systematically analysed, and relevant literature was synthesized to establish a strong theoretical foundation for the study.

The **final phase**, conducted between March and April 2025, involved writing the thesis report and presenting the key findings to the physiotherapy unit. This stage ensured that the results were effectively communicated to stakeholders, supporting the practical application of the research insights within the organization.

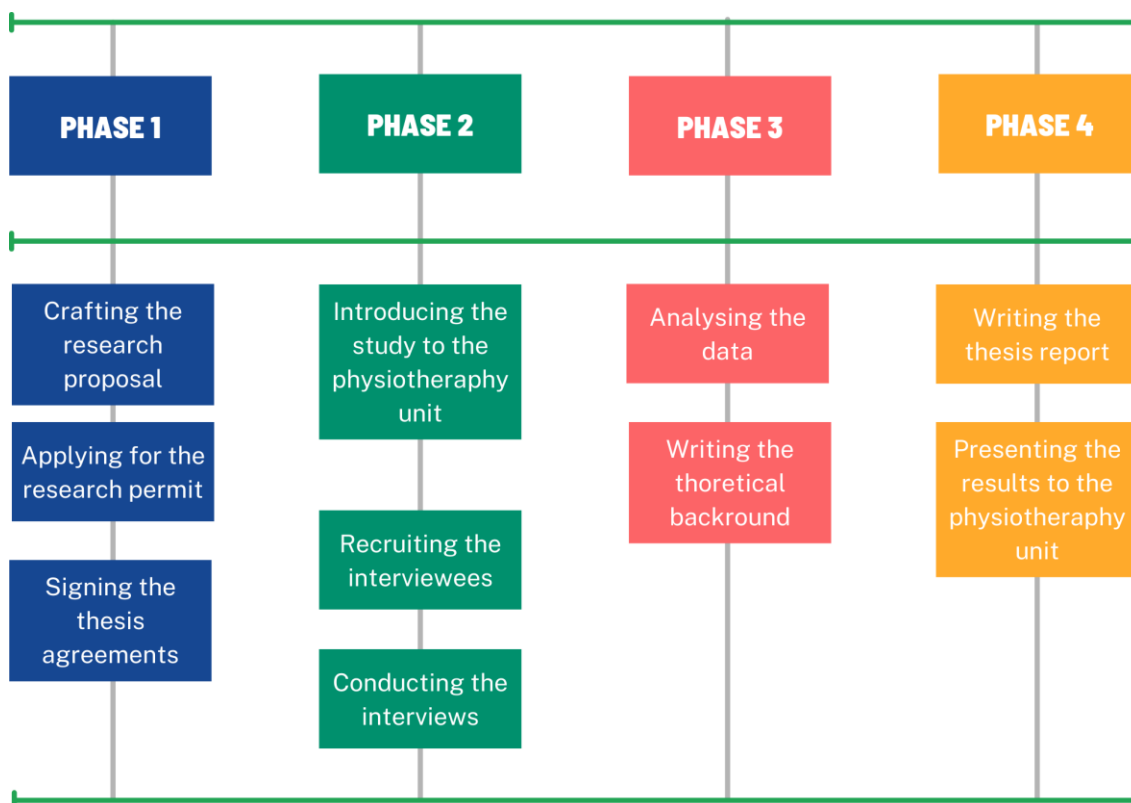


Figure 2. Research progress including different phases

## 8.2 Capturing lived experience through qualitative inquiry

Helsinki City regularly monitors employee well-being through various surveys, such as the Kunta10 and the Fiilari personnel surveys. While these instruments provide valuable insights into employee well-being and managerial competencies at the unit level, they do not capture the individualized and in-depth factors that influence employees' responses. To explore the intricate relationship between managerial practices and employee well-being, a qualitative approach was considered the most suitable method.

Unlike quantitative surveys, which primarily identify broad patterns and correlations, qualitative research delves into the underlying meanings, experiences, and perspectives of employees. This approach allows for a deeper understanding of *how and why* managerial practices impact well-being, rather than merely presenting numerical indicators. By focusing on employees' direct experiences and personal narratives, qualitative research provides rich, contextual insights that help explain the dynamics at play

within the organization. As Al-Busaidi (2008) emphasizes, qualitative methods are particularly effective for capturing lived experiences, making them well-suited for studies that seek to understand complex social and organizational interactions. Qualitative research is inherently flexible and exploratory, which aligns with the study's aim to investigate a under-explored area, the specific managerial practices in a Home Rehabilitation Physiotherapy setting. It allows patterns or unexpected themes to emerge inductively from the data, rather than forcing the phenomena into predefined categories. (Al-Busaidi, 2008.)

### 8.3 Ethical considerations and validation

Ensuring ethical integrity and methodological rigor is fundamental in qualitative research, particularly when exploring sensitive topics such as employee well-being and managerial practices. This study adheres to established ethical guidelines, including the principles of informed consent, confidentiality, voluntary participation, and data security, as outlined by research ethics frameworks (Bryman, 2016; Kvale & Brinkmann, 2015). Participants received detailed information about the study's purpose, data usage, and confidentiality measures before the interviews. Each participant voluntarily consented to participate, with the understanding that they could withdraw at any time without consequence.

Confidentiality and anonymity were strictly maintained throughout the research process. Interview data were anonymized by removing any identifying details, ensuring that individual responses could not be traced back to specific employees. Additionally, data security was upheld through encrypted storage and restricted access, following institutional data protection protocols. (Metropolia, 2025)

To enhance the validity and reliability of the study, several strategies were employed. Member validation was conducted in two stages: first, within individual interviews, where key themes were summarized at the end of each session to confirm participants' perspectives, and second, during the final presentation of findings to the entire staff of the unit. In this broader validation process, employees were invited to provide feedback on the results, ensuring that the themes accurately reflected their collective experiences. This participatory approach not only enhanced the credibility of the findings but also fostered organizational dialogue on improving managerial practices.

Furthermore, methodological triangulation was applied by comparing findings with existing research on workplace well-being and self-management, ensuring that the results align with broader theoretical frameworks (Lincoln & Guba, 1985). Reflexivity played a crucial role in minimizing researcher bias, with the researcher consciously reflecting on their assumptions and employing peer debriefing and external review to enhance objectivity. Thematic analysis, following Braun and Clarke's (2006) model, provided a structured and transparent approach to data analysis, ensuring consistency in the identification of key themes.

By integrating ethically sound practices and rigorous validation measures, this study ensures a responsible, transparent, and credible exploration of managerial practices and employee well-being.

## 8.4 Gathering the data

### 8.4.1 Recruiting the participants

Physiotherapists working in the Home Rehabilitation Physiotherapy unit were invited to participate in the study through an informative email and by introducing the research during two separate unit meetings. To ensure participants had sufficient professional experience, eligibility criteria required a minimum of one year of employment in the unit. Interested individuals voluntarily reached out to the researcher to schedule their interviews, allowing for an open and self-selected participation process.

### 8.4.2 Interview setting and process

Each interview was conducted individually in Finnish language and recorded, with durations ranging from 35 to 50 minutes. To ensure a comfortable and familiar setting for participants, all interviews were held in the physiotherapists' own offices.

### 8.4.3 Interview framework

A semi-structured interview approach was selected for this study to balance structure with the flexibility needed to explore the complex and context-dependent experiences of physiotherapists working in Home Rehabilitation Physiotherapy. This method was

especially well-suited to the research focus, which aimed to understand how managerial practices influence employee well-being in a specific and dynamic healthcare setting. Semi-structured interviews are ideal for gathering both factual and interpretive data when researchers possess some prior knowledge of the topic but seek to gain deeper insights into attitudes, opinions, and lived experiences (Wilson, 2014; Horton et al., 2004).

This format allowed the researcher to address key themes while also responding to new topics that emerged during the conversation, providing room for elaboration and clarification. As Horton et al. (2004) emphasize, semi-structured interviews are particularly valuable when exploring complex issues where the researcher must adapt to the nuances of participants' responses. Similarly, Wilson (2014) highlights their strength in uncovering previously unknown insights, particularly in settings where direct observation may not be feasible—such as in private, emotionally charged, or time-sensitive environments like healthcare.

Each interview was conducted in Finnish using a semi-structured interview guide (Appendix 1), developed based on Wessel et al.'s (2006) *Template for an Interview Guideline for Semi-structured Interviews*. The interview process followed a structured yet flexible approach, progressing through four key phases: warming up, exploration of present aspects, exploration of future aspects, and finishing.

In the **warming-up phase**, general and open-ended questions were used to build rapport, create a relaxed atmosphere, and allow participants to reflect on their work in a familiar context. This step was critical for establishing trust, which is particularly important in qualitative research, where the quality of data depends on the participant's willingness to share openly. (Wilson, 2014; Horton et al., 2004)

The **exploration of present aspects** focused on current managerial practices and their influence on well-being. Here, participants were encouraged to give concrete examples and reflect on how leadership, communication, and organizational structures affected their daily work. This phase allowed for depth and specificity, key strengths of the semi-structured format. (Wilson, 2014)

In the **exploration of future aspects**, participants shared their visions for positive change. They reflected on desired forms of support, leadership strategies, and organizational developments that could enhance well-being. This future-oriented approach was essential for capturing not just problems but participant-driven suggestions for improvement. (Wilson, 2014)

Finally, the **finishing phase** provided an opportunity to summarize key insights and offer participants a chance to reflect on any additional thoughts. To enhance the validity of the data, the researcher summarized emerging themes at the end of each interview. This step allowed participants to confirm or clarify their statements, ensuring that their views were accurately represented. This iterative process not only strengthened the reliability of the findings but also fostered a collaborative dialogue between the researcher and participants, enriching the depth and authenticity of the study's insights. (Corwin & Harper, 2024)

The semi-structured interview design also accounted for practical and ethical considerations, including interviewer preparation, participant comfort, and reflexivity. Wilson (2014) stresses the importance of interviewer in managing silences, probing with sensitivity, and creating a psychologically safe space for participants to express their views. These principles were embedded throughout the interview process.

Overall, the semi-structured interview approach proved essential for capturing the rich, context-specific, and nuanced realities of physiotherapists' experiences in a Home Rehabilitation Physiotherapy unit. Its ability to combine consistency across participants with flexibility for individual expression made it a particularly effective tool for exploring the multifaceted relationship between leadership practices and employee well-being.

#### 8.4.4 Transcription

Transcription was done from the audio recording of Google Pixel 8 by using online AI assisted online tool Clipto.AI. Total amount of transcribed material was 106 pages (48 861 words). The transcripts were checked back against the original audio recordings for accuracy and needed corrections made to the transcripts.

## 8.5 Thematic analysis

To analyse the qualitative data gathered from interviews, a thematic analysis was conducted using *Delve*, a qualitative coding software. Thematic analysis is a flexible and systematic method for identifying, organizing, and interpreting patterns or “themes” within qualitative data. It is especially effective for interview-based research, as it enables researchers to make sense of rich, narrative material by grouping related insights into coherent categories that reflect shared meanings and lived experiences.

This approach was particularly appropriate for the present study, which aimed to understand how managerial practices influence employee well-being from the perspective of physiotherapists working in Home Rehabilitation Physiotherapy. Thematic analysis made it possible to capture both the common patterns across participants and the nuanced individual experiences that are often critical in healthcare settings.

The model developed by Braun and Clarke (2006, 2008) was chosen for its clarity, accessibility, and theoretical flexibility. As one of the foundational methods in qualitative research, thematic analysis provides essential skills that benefit researchers across a wide range of disciplines and analytic traditions (Braun & Clarke, 2006). One of its key strengths is that it is not bound to any specific theoretical framework, making it applicable across paradigms—from essentialist to constructionist or contextualist approaches (Braun & Clarke, 2006). This flexibility in application was a distinct advantage in this study, which sought both to answer predefined research questions and to remain open to emergent insights from the data.

In addition, Braun and Clarke (2006) highlight that thematic analysis is particularly accessible to those new to qualitative research, as it does not require prior deep theoretical knowledge. This made it a suitable method for conducting transparent, rigorous analysis that aligns with the practical needs of applied health research. The method also provides clear, structured guidelines while still allowing space for researcher discretion and interpretation—a balance that was essential in analysing complex and sensitive interview material (Braun & Clarke, 2006).

Crucially, Braun and Clarke (2006) advocate for transparency in methodological choices, emphasizing that researchers must make their theoretical position and analytic procedures explicit to ensure credibility. These principles were closely followed in

the current study, as each step of the six-phase analytic process was carefully documented and guided by the study's research questions. At the same time, attention was given to potential pitfalls, such as failing to go beyond surface-level coding or relying too heavily on the interview questions themselves as thematic categories (Braun & Clarke, 2006). These considerations helped strengthen the analytic depth and validity of the findings.

In practice, the analysis followed the six-step model proposed by Braun and Clarke (2008), including:

1. Familiarization with the data
2. Generating initial codes
3. Searching for themes
4. Reviewing and refining themes
5. Defining and naming themes
6. Producing the report

#### 8.5.1 Familiarization with the data

The first phase of analysis involved an in-depth familiarization with the data. This process included carefully listening to the interview recordings and repeatedly reading through the transcripts to gain a comprehensive understanding of the content. Additionally, initial notes were taken to capture emerging patterns, key observations, and potential themes within the data.

#### 8.5.2 Creating initial codes

The second step in the analysis involved generating initial codes, which serve as key identifiers of meaningful patterns within the data. Codes can capture both explicit (semantic) content and underlying (latent) themes, providing structure to the analysis.

(Braun & Clarke, 2008) Each snippet of transcribed text was assigned a code that summarized its content or significance.

The initial coding process was guided by the study's research questions: What aspects of managerial practices positively impact employee well-being? What aspects of management practices negatively impact employee well-being? What improvements do employees suggest to strengthen leadership and support in their daily work? Furthermore, three distinct coding techniques were utilized to ensure a comprehensive and nuanced analysis of the data: Descriptive Coding (which summarized content into concise descriptions), In Vivo Coding (which used participants' exact words to retain their authentic perspectives), and Process Coding (which captured actions and processes reflected in the data). A total of 289 snippets were coded from the interview data.

### 8.5.3 Finding themes

After coding all interviews, the third phase involved grouping similar codes together and analysing them to identify overarching themes. This process allowed for the recognition of broader patterns within the data, ensuring that the findings reflected common experiences while capturing the complexity of employees' perspectives.

### 8.5.4 Refinement of themes

During the fourth phase, themes were refined to ensure they accurately represented the data. Some initial themes may be discarded if they lack sufficient supporting evidence or if the data within them are too varied. Conversely, themes that initially appeared distinct may be merged if they share overlapping concepts, while others may need to be divided into smaller, more specific themes to capture nuances in the data effectively.

### 8.5.5 Defining and naming themes.

In the fifth stage, the themes were further refined and clearly defined. This process involved articulating the core meaning of each theme and ensuring that it accurately reflected the underlying data. The final themes were carefully named to succinctly convey their essence, ensuring clarity and coherence in the presentation of findings. Ulti-

mately, the identified themes were systematically categorized into thirteen subcategories and further consolidated into six overarching themes, providing a structured and meaningful representation of the data.

#### 8.5.6 Producing the report

The final step involved integrating the findings into the research report. Thematic analysis aims to present a compelling and well-supported narrative that effectively conveys the richness of the data. In this study, thematic analysis allowed for a structured yet flexible approach to interpreting employee experiences while ensuring that their voices remained central to the findings.

By using thematic analysis, the study could effectively reduce and interpret the data without losing the voices of the participants. The end result of this process was a set of key themes that capture the essence of how managerial practices impact employee well-being in the unit. Each theme is supported by multiple pieces of evidence from different physiotherapists, underscoring its relevance. (appendix 2) This analytic approach not only highlights commonalities in employees' experiences but also respects the complexity of those experiences by allowing for sub-themes or nuances within each major theme. Overall, thematic analysis served as a bridge between individual stories and collective insights, yielding results that are both rich in detail and organized in a manner that can inform practical action.

With the foundation of rigorous data collection and analysis in place, the following chapter presents the key findings—offering a window into the everyday realities, challenges, and insights shared by employees through their own voices.

## 9 Results

The interviews revealed a sense of job satisfaction among employees, driven by the meaningfulness of their work. The ability to plan their own schedules and independent nature of work is highly valued. Additionally, the diversity of tasks and opportunities for professional growth positively influenced their engagement. The moving outside involved in home visits was seen as beneficial, offering a chance for recovery during the workday. Furthermore, working closely with clients was perceived as deeply rewarding, enhancing overall well-being. Some employees experience feelings of isolation due to

the lack of colleagues nearby and the infrequency of in-person team meetings. Many highlighted collegial support as a key factor in their overall well-being.

The interviews provided valuable insights into management practices that influence employee well-being. Six key themes emerged from the discussions:

- 1) The relationships of trust
- 2) Workload and flexibility challenges
- 3) Participating employees in decision making and change management
- 4) Open communication and receiving feedback
- 5) Human encounter and feeling of appreciation
- 6) Support provided by the managers.

The interviews were conducted in Finnish, and all direct quotes presented in this chapter have been translated by the researcher.

## 9.1 The relationship of trust

Trust between employees and management emerged as a critical factor influencing workplace well-being. While employees generally appreciate their line managers, they expressed concerns regarding a perceived lack of confidence in their autonomy. This issue manifests in enhanced supervision, reduced flexibility in work arrangements, and increased requirements for explaining work to management. Employees feel that these measures signal a lack of trust in their professional judgment and ability to self-manage effectively. As one participant noted:

“So, it gives you the feeling that you're being watched all the time. Even though you know you're doing the right thing. It really wears you down. And it affects your overall feeling.” P8

At the same time, trust issues are reciprocal, with employees also expressing uncertainty about whether management adequately advocates for their needs within the organization. Some feel that decisions regarding work arrangements are not sufficiently transparent or justified, leading to frustration and disengagement.

Another participant highlighted concerns about managerial advocacy, suggesting that employees perceive management as more aligned with higher organizational interests rather than actively supporting their teams:

“I think that maybe from there... maybe they won't rise to the barricades on our behalf. That everyone is bowing upwards, not in our direction. So, they don't necessarily stand up for us.” P9

These findings emphasize the importance of trust-based leadership, transparent decision-making, and employee involvement in workplace policies to foster a positive and supportive work environment.

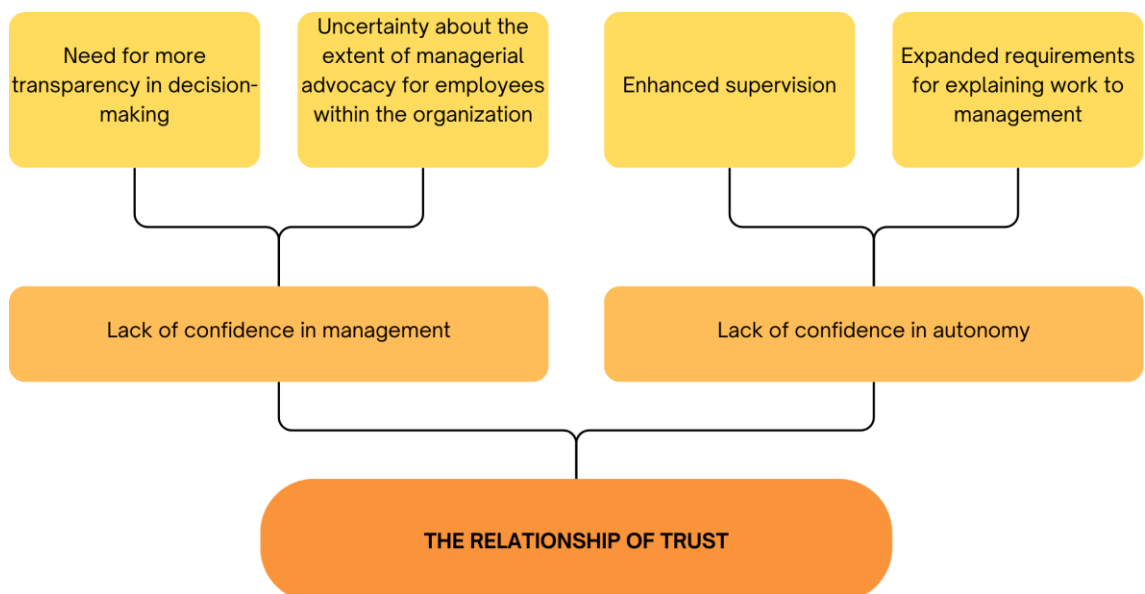


Figure 3. The relationship of trust

## 9.2 Workload and flexibility challenges

Workload and flexibility are key factors influencing employee well-being in the Home Rehabilitation Physiotherapy unit. Employees reported that limitations on flexible work

arrangements—such as rigid work schedules and an increased emphasis on tracking physiotherapy visit volumes—have led to heightened stress levels and a perceived decline in the quality of client care. The reduced ability to self-organize work has negatively affected employees' overall well-being, diminishing their sense of autonomy and professional satisfaction.

Additionally, employees expressed concerns about the managerial review of documentation. While oversight is necessary, excessive scrutiny of minor documentation details was seen as a source of increased pressure, sometimes overshadowing more critical aspects of patient care. These challenges highlight the need for a more balanced approach to workload management, ensuring that administrative tasks do not compromise the core purpose of physiotherapy services. A participant described these challenges:

“Well, in terms of my own well-being, I would definitely like to have more flexibility. That’s something that seems to have disappeared somehow, and I don’t really know where it went. Has it disappeared because line managers have been brought in, giving them more control? Is that the reason? Has this increased control actually taken away some of the freedom in how we operate? I mean, we still work independently when it comes to Home Care and tasks like that, but all the other aspects—has this control somewhat diminished our flexibility? In my opinion, it has, at least to some extent.

And it’s really unfortunate to say this because the people themselves are great. And I’m sure it wasn’t the intention. But that’s just the feeling that has emerged. Control can be a good thing at times, but sometimes it can be harmful—especially when it starts to feel more restrictive or even suffocating.” P8

These findings emphasize the importance of balancing structured management practices with the autonomy needed for employees to perform their work effectively. Implementing a more flexible work approach, where employees have greater input in scheduling and workload management, may enhance both well-being and service quality.

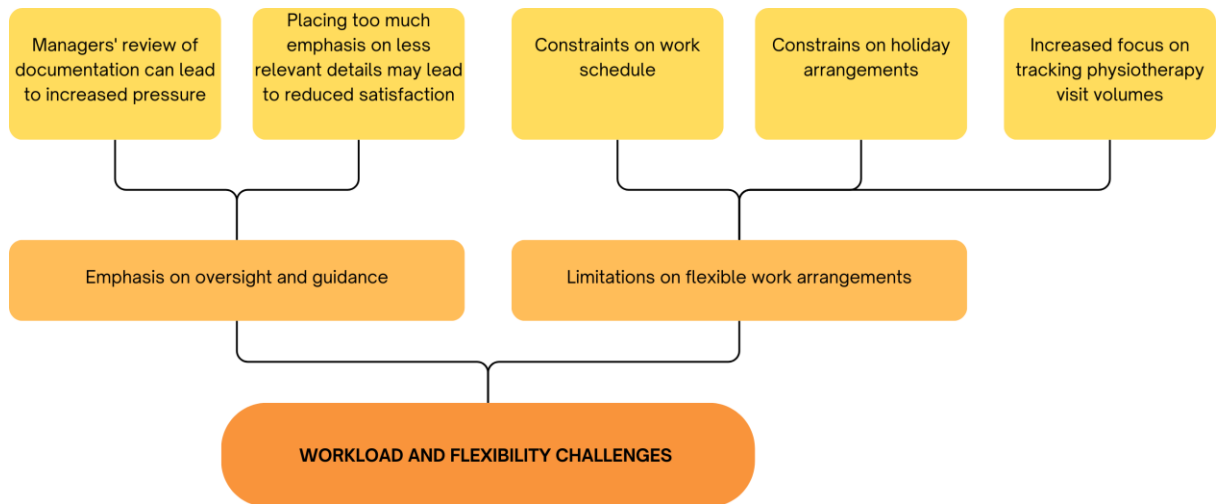


Figure 4. Workload and flexibility challenges

### 9.3 Participating employees in decision making and change management

Employees expressed a strong desire for greater involvement in workplace changes and reforms, emphasizing that their insights and experiences should play a more central role in decision-making. Currently, physiotherapists perceive that most work-related changes are communicated top-down by management, with limited opportunities for direct participation. Additionally, some employees feel that the guidelines and instructions provided by management are not always fully developed for practical implementation, which can lead to uncertainty and inefficiencies in their daily work.

A key concern raised in the interviews was the lack of transparency in decision-making processes. Employees noted that justifications for certain managerial decisions often feel rigid and unquestionable, making it difficult for staff to express their perspectives or propose alternative solutions. One participant highlighted this issue:

“The way certain decisions are justified feels somewhat political. For example, when a decision is framed as *ensuring patients have access to physiotherapy*, it creates a situation where the issue can no longer really be discussed. If someone questions it in a meeting, there is no further explanation or reasoning provided—it’s simply stated as a fact. *This is about ensuring timely physiotherapy for patients*, and that’s the end of the conversation. As a result, we feel like we have no real influence over these decisions.” P10

To foster a more inclusive and participatory approach, employees suggest that management should actively seek their input during the planning stages of new initiatives. Strengthening collaboration in decision-making processes can enhance workplace satisfaction, create a stronger sense of ownership among employees, and improve the practical implementation of policies.

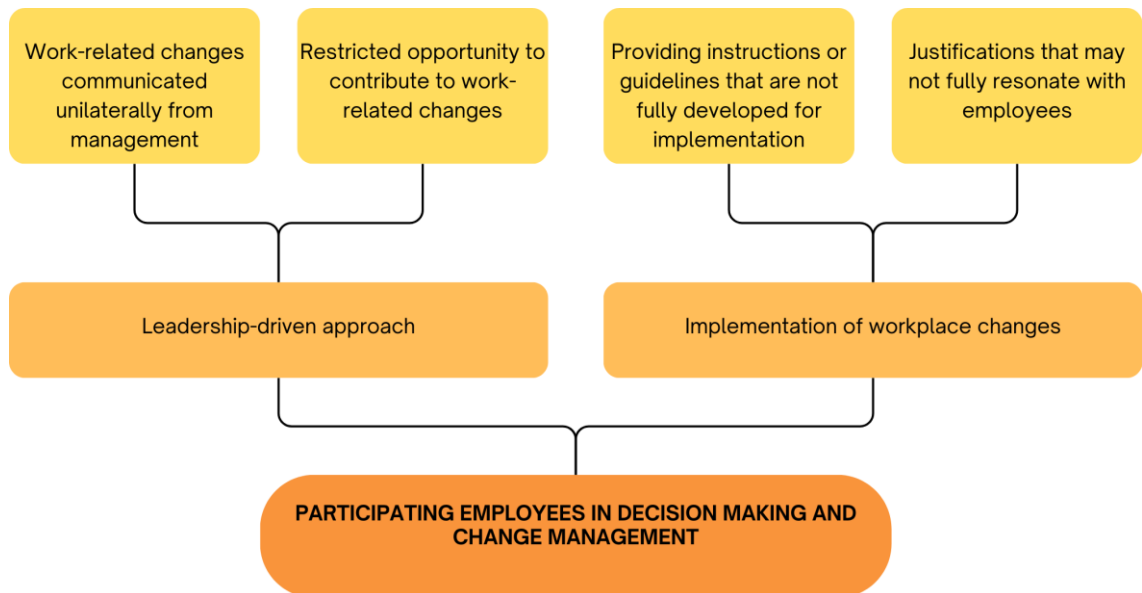


Figure 5. Participating employees in decision making and change management

## 9.4 Open communication and receiving feedback

Effective and transparent communication from management plays a crucial role in fostering a positive work environment, particularly when implementing changes to work processes. Employees highly value open dialogue, where they can ask questions, express their opinions, and feel heard. However, many feel that the current level of feedback is insufficient, with a strong desire for more personalized and positive reinforcement.

A key concern among employees is the predominance of negative feedback or a focus on areas needing improvement, which has been reported to generate negative emotions and reduce motivation. While constructive and respectful feedback fosters engagement, a demeaning or overly critical approach can have a direct adverse impact on employee well-being.

One participant described the impact of recognition:

“Well, I do feel that it is important. Because, generally speaking—and to put it bluntly—feedback is often given mainly about negative things. Maybe that's just how life is in general. The small positive things tend to go unnoticed, and people rarely remember to give feedback on them. But I think, or at least it feels like, this has improved recently, and even smaller things are getting recognized. Not the tiniest details, but still, even those smaller efforts are receiving feedback now. And that actually makes quite a big difference. If something goes well, that's great—but it's even better when someone acknowledges it and says, Hey, this has been going really well, keep up the good work! That kind of recognition really affects me—a lot, actually.” P7

To enhance workplace well-being and motivation, management should prioritize balanced and constructive feedback, ensuring that positive contributions are acknowledged alongside areas for improvement. Encouraging a culture of appreciation and recognition can significantly boost job satisfaction and engagement.

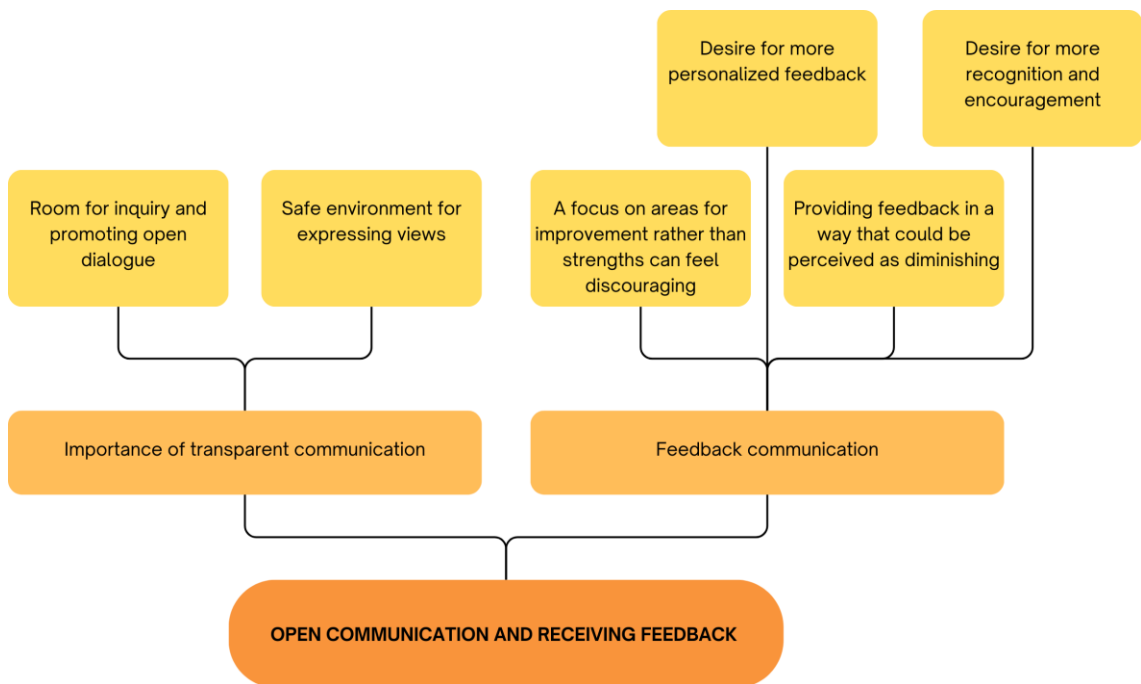


Figure 6. Open communication and receiving feedback

## 9.5 Human encounter and feeling of appreciation

Feeling valued is a key factor in employee motivation and job satisfaction. Employees express a strong desire for more human-centered interactions with their managers, emphasizing the importance of genuine engagement beyond task-related oversight. Simple gestures, such as inquiring about employees' well-being and workload, contribute significantly to fostering a positive work environment.

A supportive and appreciative communication culture helps employees feel acknowledged and heard, reinforcing their sense of belonging within the organization. Meaningful interactions with managers play a vital role in building trust and strengthening professional relationships. Employees value opportunities to connect on a personal level, as these interactions foster a deeper sense of recognition and mutual understanding.

One participant illustrated this sentiment:

“For example, when I attended a small team meeting yesterday, our manager asked me, *“Hey, how are you doing?”* I really appreciated that—it felt nice to be asked directly, one-on-one, how I was. I shared a bit about how things were going for me, and then I asked them the same question, and they also shared a little about themselves.

It was just a brief moment, but it felt like a genuine human-to-human interaction, where we connected on an equal level and exchanged simple, everyday experiences.” P5

Creating an environment where employees feel appreciated through small but meaningful interactions enhances workplace satisfaction and reinforces trust between employees and management.

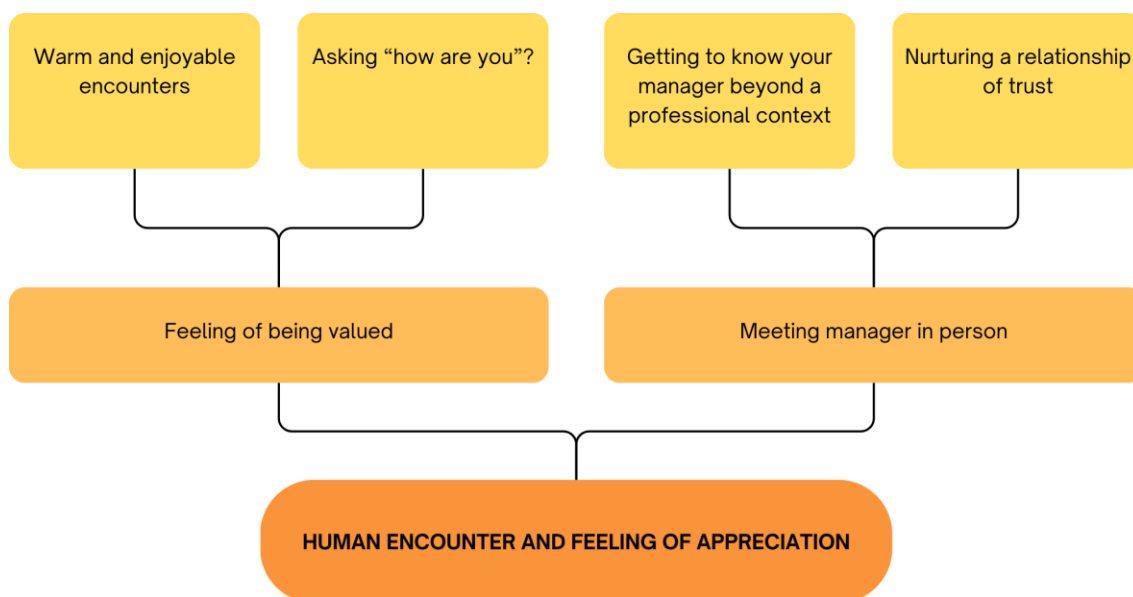


Figure 7. Human encounter and feeling of appreciation

## 9.6 Support provided by the managers

Managerial support plays a crucial role in fostering employee well-being. Employees value having access to their managers for guidance, particularly when balancing work with personal responsibilities such as family life or academic pursuits. The ability to adjust work arrangements based on individual needs, such as illness or aging, is seen as an important factor in supporting overall well-being.

A primary mode of communication between employees and managers is through Teams, which enables quick and efficient interactions. While this digital platform facilitates accessibility, it does not always allow for deeper, more meaningful engagement. At times, written communication can feel impersonal or even discouraging, highlighting the need for a balance between efficiency and personal connection.

Beyond administrative support, line managers play an essential role in providing professional guidance. Employees appreciate prompt responses to work-related questions and the availability of managerial assistance in complex client cases. A physiotherapist shared a meaningful experience of receiving immediate support from a line manager when handling a challenging client situation:

"I reached out to the line manager at the time and explained my situation, saying, *"Hey, I have this case with a client, and I don't know how to handle it. I'm not able to manage it on my own right now. This case needs more attention—either we go together, or you handle it alone."*

Their response was immediate: *"Okay, I can visit the client. Can you provide their details so I can get in touch and assess the situation?"* They then followed up with a visit and later explained their professional perspective, providing clear guidance on how to proceed. After that, the client accepted the decision, and although I've had to interact with them again due to our ongoing professional relationship, working with them has been much easier since then.

I feel like this experience helped build trust. The client came to see that the guidelines I follow are not just my personal decisions but the official policies of our organization. They could trust that I knew the correct procedures and that they were being treated fairly. Having that kind of concrete support when needed makes a real difference. It also contributes to overall well-being at work—just knowing that if I encounter a particularly challenging client, I can handle it, but if I ever need help, support is available. "P5

This example underscores the significance of timely managerial support—not only in enhancing employees' confidence in their work but also in reinforcing trust in the organization's procedures. By ensuring that employees feel supported in their professional responsibilities, managers contribute to a more engaged and resilient workforce.

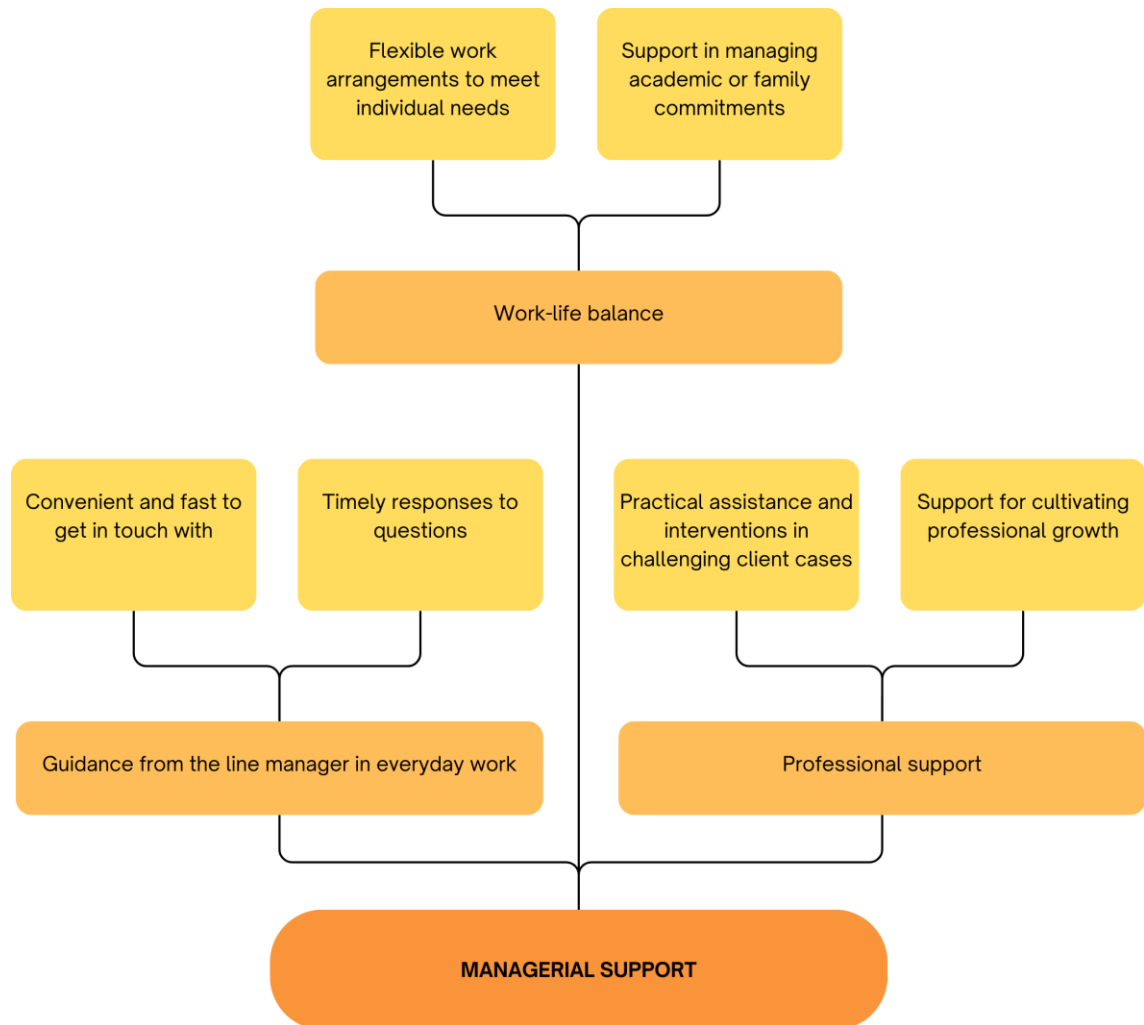


Figure 8. Managerial support

## 9.7 Validating the results

Following the completion of the thematic analysis, the preliminary findings were presented to all employees of the Home Rehabilitation Physiotherapy unit during an in-person meeting. Prior to this session, the managerial team received the results separately and had the opportunity to provide their reflections and feedback directly to the researcher. The primary purpose of the joint meeting was to validate the thematic results with the physiotherapists and assess how well the findings resonated with their personal experiences.

To facilitate this validation process, an anonymous survey was conducted using Menti-meter, which participants could access on their own digital devices via a QR code provided during the presentation. The survey consisted of both Likert-scale questions (1 = strongly disagree to 5 = strongly agree) and open-ended prompts. The researcher guided the participants during the presentation through each question to ensure thoughtful engagement and appropriate timing. In total, 33 employees responded to each of the scale-based questions, and a number of participants also contributed written comments to the open-ended items.

Below is a summary of the validation responses, including average scale ratings and selected participant comments that further illustrate the findings.

Table 1. Summary of Validation Responses from Employees

THEMATIC AREA	VALIDATION STATEMENT	AVERAGE SCALE VALUE	REPRESENTATIVE PARTICIPANT COMMENT
THE RELATIONSHIP OF TRUST	I found myself relating to the results about the importance of trust for employee well-being.	4.3	"Leaning on the power of self-management. With clear guidelines and less justification to supervisors. We have to justify ourselves, but we are allowed to do it independently."
WORKLOAD AND FLEXIBILITY CHALLENGES	I find myself relating to the findings about the importance of flexibility for employee well-being	4.3	"It definitely affects well-being when you have to give more of yourself at work but have less say over your working hours. Even though you understand that making major changes is difficult."
PARTICIPATING EMPLOYEES IN DECISION MAKING AND CHANGE MANAGEMENT	I can relate to the findings about the importance of participation in decision-making for employee well-being.	4.3	"Decisions are presented merely for information with minimal explanation. Openness always leads to less resistance."
OPEN COMMUNICATION AND RECEIVING FEEDBACK	I find myself relating to the results about the importance of communication and feedback for employee well-being.	4.2	"We work alone, so receiving personal feedback is extremely important, also for maintaining well-being."
HUMAN ENCOUNTER AND FEELING OF APPRECIATION	I find myself relating to the results regarding the importance of feeling valued for employee well-being.	3.8	"It's nice to be at work when it feels like the supervisors see me as a person, not just as a workforce."
SUPPORT PROVIDED BY THE MANAGERS	I can relate to the findings about the importance of managerial support for employee well-being.	4.3	"Yes, I feel I can get support quickly, at least through Teams."

The validation process confirmed that the themes identified through thematic analysis were strongly aligned with employees' lived experiences. The consistently high scale values across all six categories suggest that the findings reflect widely shared perceptions within the unit. Furthermore, the open-ended comments added rich context to the quantitative responses, underscoring the importance of trust, flexibility, communication, and recognition in supporting employee well-being. By integrating the voices of participants into both the analysis and the validation phase, the study ensured a collaborative and grounded approach to understanding the influence of managerial practices. This process not only strengthened the credibility of the findings but also highlighted the value of giving employees a meaningful role in interpreting and shaping insights that affect their daily work life.

## **10 Discussion**

### **10.1 Conclusions**

This study explored how managerial practices influence employee well-being in a decentralized Home Rehabilitation Physiotherapy unit in Helsinki. Through a qualitative thematic analysis of interviews with physiotherapists, six core themes emerged: (1) relationships of trust, (2) workload and flexibility challenges, (3) participation in decision-making and change management, (4) open communication and feedback, (5) human encounters and appreciation, and (6) managerial support. Together, these themes illustrate the complex and interdependent nature of leadership and well-being in highly autonomous healthcare settings. The following conclusions are discussed in relation to the study's research questions, which provide the guiding framework for interpreting the findings.

#### **What aspects of managerial practices positively impact employee well-being?**

Employees consistently emphasized the significance of trust-based leadership, particularly in an environment where autonomy is high. When managers demonstrated trust in employees' professional judgment and enabled flexible scheduling, well-being improved. This aligns with the self-management framework, where autonomy over task execution and influence over one's work environment are vital (Martela et al., 2021). However, autonomy was most beneficial when coupled with psychological safety and

supportive oversight—highlighting that autonomy alone is insufficient without an enabling leadership context.

Themes such as open communication, human appreciation, and timely feedback reveal the value of emotionally present leadership. Employees felt most engaged when managers not only listened but responded with empathy and recognition. These findings support transformational and relational leadership theories, which prioritize individualized consideration and emotional intelligence (Shirey, 2017; Sonnentag et al., 2023). From the lens of the JD-R model, trust and flexibility functioned as key job resources, buffering the effects of high emotional and administrative demands (Bakker & Demerouti, 2007). Strategic Wellness Management (SWM) highlights that such resources—including trust, communication, and recognition—are not incidental nor mere soft skills, but strategic levers that must be embedded into leadership practices to promote motivation, resilience, and sustainable well-being (Aura et al., 2016). A climate of trust also contributes to a stronger Psychosocial Safety Climate, where employees feel empowered to voice concerns without fear of reprisal (Idris et al., 2015). When leadership fosters dialogue and appreciation, it nurtures all five dimensions of employee well-being—psychological, social, physical, financial, and career (TTL, 2025; Grant, 2007; Coetzee, 2021). Especially in decentralized units, emotional presence and visibility of managers help bridge the gap created by physical distance.

### **What aspects of management practices negatively impact employee well-being?**

Conversely, managerial practices that restricted flexibility, emphasized control over support, or excluded employees from key decisions were described as harmful to well-being. Participants noted that strict performance metrics, lack of recognition, and insufficient feedback led to frustration, reduced motivation, and a sense of professional invisibility.

These experiences correspond with the JD-R model, where a mismatch between job demands and available resources contributes to emotional exhaustion and disengagement (Bakker & Demerouti, 2007). Practices such as top-down decision-making and inconsistent communication undermined trust and psychological safety—two critical foundations of a healthy workplace climate.

From the SWM perspective, these negative effects stem from a disconnect between strategic leadership and human-centred operational practices. In addition, the findings align with Organizational Justice Theory, which highlights the importance of fairness, voice, and transparent processes in maintaining employee morale (Colquitt et al., 2001). Employees who felt excluded or unheard reported lower levels of trust and commitment to the organization.

### **What improvements do employees suggest to strengthen leadership and support in their daily work?**

Participants expressed a strong desire for more participatory leadership, emphasizing involvement in planning and decision-making, especially during times of change. These suggestions reflect the third dimension of self-management—influencing organizational development (Martela et al., 2021). Employees also highlighted the importance of regular, two-way dialogue and leadership that acknowledges the emotional labour of their work.

From the SWM perspective, such participatory practices enhance alignment between individual motivation and organizational strategy. Involving employees in shaping their work environment fosters ownership, strengthens commitment, and supports a more resilient workplace culture (Aura et al., 2016). Additionally, suggestions to improve communication and foster human connection reinforce the value of psychosocial safety, where employees feel secure in expressing concerns or proposing new ideas (Idris et al., 2015).

Employees also emphasized the importance of leadership presence—not only as formal authority but as relational support. While digital communication tools were useful, they could not substitute for authentic, face-to-face engagement when dealing with emotional or complex work situations (Grant, 2007). This finding underscores the importance of leadership that is both visible and approachable, especially in decentralized or self-managed settings.

In sum, this study demonstrates that leadership practices—whether empowering or disempowering—have a profound impact on employee well-being in self-managing

healthcare environments. The six themes identified provide a grounded, nuanced understanding of how leadership is experienced in practice and how it intersects with broader frameworks of organizational behaviour and health.

Effective leadership in these settings is not defined by oversight, but by trust, empathy, and connection. By embracing values of inclusion, appreciation, and shared responsibility, healthcare organizations can build more sustainable, resilient, and human-centred workplaces. Employee well-being, when supported through thoughtful leadership, becomes not just a moral obligation but a strategic advantage for long-term success.

## 10.2 Translating findings into strategic actions

This chapter outlines a set of concrete, evidence-based recommendations aimed at strengthening leadership practices and supporting organizational development within home rehabilitation settings. Grounded in the study's empirical findings and theoretical framework, these recommendations respond to specific challenges identified in the interviews and translate them into actionable strategies. The goal is to bridge the gap between understanding and implementation—offering practical guidance for managers, decision-makers, and policy developers committed to fostering employee well-being.

Rather than isolated interventions, these recommendations form part of a broader shift toward sustainable, human-centred leadership. By embedding well-being into everyday managerial practices and strategic planning, healthcare organizations can enhance employee engagement, resilience, and service quality. As the home rehabilitation field continues to evolve, these measures offer a roadmap for cultivating a supportive and adaptive work culture. Their success, however, hinges on leadership's willingness to engage in reflective practice, maintain open dialogue, and commit to continuous improvement grounded in trust, participation, and psychological safety.

The following table presents seven key recommendations, each linked to a core managerial challenge identified in the study. For each recommendation, a concrete action is proposed alongside selected participant quotations that illustrate the lived experiences behind these insights.

Table 2. Recommendations for further actions

RECOMMENDATION	ACTION	RATIONALE	PARTICIPANT VOICE
<b>STRENGTHEN TRUST-BASED LEADERSHIP</b>	Provide leadership development programs focused on building psychological safety, mutual trust, and autonomy-supportive management.	Trust was a foundational theme in the study, directly linked to employees' psychological and career well-being. Lack of trust—both from and toward management—was associated with increased stress and decreased motivation. (Martela et al., 2021; Sonnentag et al., 2023; Grant, 2007)	"That I wouldn't have to constantly report and check in about every little thing. Maybe that would be the kind of 'support' I need. Or just the sense that there is trust in my ability to do this job independently, based on the existing guidelines." P10
<b>RETHINK WORKLOAD DISTRIBUTION AND FLEXIBILITY</b>	Reassess the implementation of numerical performance targets and explore more flexible scheduling options based on employee input.	Employees reported that rigid work monitoring and reduced autonomy over schedules were major stressors that decreased physical and psychological well-being. (Onimole, 2015; TTL, 2025; Martela et al., 2021)	"Then it feels really awful when they start imposing strict schedules. And that these kinds of targets must be met. It's just terrible when you're trying to do your work well — like in the old way — and it's not enough. Instead, it feels like they keep tightening things all the time." P9
<b>PROMOTE PARTICIPATORY DECISION-MAKING</b>	Involve physiotherapists more directly in planning, policy updates, and change initiatives affecting their daily work.	Employees felt disengaged when changes were made without consultation. Participatory processes enhance fairness and motivation. (Jain et al., 2021; Aura et al., 2016; Martela & Jarenko, 2017)	"So, this time, we were actually asked how we wanted the change to happen. [...] But then, another teammate brought it up, and it actually got approved. And I thought, wow, okay, we can make a difference. And when we talked about it afterward as a team, we all felt really good about it. It really felt like we had a say in the process." P5
<b>CULTIVATE A CONSTRUCTIVE FEEDBACK CULTURE</b>	Implement structured feedback systems that emphasize both strengths and development areas, using regular, two-way dialogue.	One-sided or critical feedback undermined motivation. Employees responded positively to balanced, affirming communication. (Sonnentag et al., 2023; TTL, 2025; Johnson & Long, 2022)	"But personal positive feedback is really rare. [...] That's something I would definitely appreciate more. Personally, I would really like that." P6
<b>REINFORCE APPRECIATION AND HUMAN CONNECTION</b>	Encourage managers to engage in personal check-ins, recognition of effort, and non-task-related dialogue to enhance emotional connection.	Employees reported that small moments of recognition significantly increased their sense of belonging and career well-being. (Shirey, 2017; Grant, 2007; Coetzee, 2021; Lăzăroi, 2015)	"I wish for more one-on-one time with my line manager to build a stronger relationship of trust." P2
<b>DEVELOP HYBRID LEADERSHIP COMMUNICATION PRACTICES</b>	Balance the use of digital tools with intentional in-person or phone-based interactions to ensure relational support is not lost.	Tools like Teams were seen as efficient but not emotionally fulfilling. Employees needed interpersonal presence for deeper support. (TTL, 2025; Eisenberger & Stinglhamber, 2011)	"That really it's about being met as a human being and having that support there." P5
<b>INTEGRATE WELL-BEING GOALS INTO STRATEGIC PLANNING</b>	Apply SWM principles to embed well-being into organizational strategy, with measurable objectives and leadership accountability.	Sustainable improvements in well-being require long-term strategic commitment beyond isolated interventions. (Arevin et al., 2024; Putra, 2023; Jacobs et al., 2018)	

### 10.3 Suggestions for further studies

This study has highlighted the critical role of leadership in supporting the well-being of physiotherapists working in a self-managing home rehabilitation context. However, as workplace environments and care models continue to evolve, additional research is needed to deepen understanding of how specific managerial practices influence the multidimensional aspects of employee well-being over time and in different organizational settings.

Future studies could explore the longitudinal effects of leadership interventions designed to promote trust, autonomy, and psychological safety. While this thesis identifies key areas where improvements are needed, examining the outcomes of such interventions over extended periods would provide valuable insight into their sustainability and long-term impact.

Further research could also investigate the interplay between digital communication and relational leadership in hybrid work environments. As participants in this study noted, digital tools such as Teams support efficiency but can fall short in meeting emotional or relational needs. Mixed-method studies could assess how leaders balance digital and face-to-face engagement and how this affects perceived support, team cohesion, and social well-being.

Additionally, this study invites deeper examination of self-management practices across different healthcare contexts. Comparative studies between units with varying levels of managerial oversight could help clarify the optimal balance between autonomy and guidance, especially in emotionally demanding fields such as rehabilitation. Understanding how self-management influences different dimensions of well-being—including psychological, social, and career well-being—could refine leadership development programs and organizational structures.

Moreover, given the organizational emphasis on data-driven development, future studies might also focus on how well-being monitoring systems (e.g., Kunta10 and Fiilis) can be better integrated with qualitative, participatory methods. Investigating how structured dialogue and employee voice mechanisms complement quantitative metrics would offer practical insight for more holistic well-being strategies.

Finally, future research should seek to include diverse staff perspectives across roles and demographics, including those in different municipalities or health systems. This would help assess how leadership practices are perceived in varied organizational cultures and ensure that strategies to enhance well-being are both inclusive and adaptable.

By expanding on these themes, future studies can build a more comprehensive understanding of how leadership and self-management interact to influence the health, motivation, and performance of healthcare professionals—ultimately contributing to more resilient and human-centred health systems.

#### 10.4 Final reflections

Conducting this study has been both a rewarding and eye-opening experience. As someone interested in the intersection of leadership and employee well-being in healthcare, I entered the research process with a strong sense of purpose. However, what unfolded during the interviews and subsequent analysis far exceeded my initial expectations—both in terms of the richness of the data and the complexity of the themes that emerged.

From the beginning, my aim was to understand how leadership practices influence employee well-being in the Home Rehabilitation Physiotherapy unit. I anticipated that leadership would play an important role, but I was surprised by how deeply emotional and relational aspects of leadership—such as trust, communication, and appreciation—resonated with participants. What stood out most was not just the impact of leadership on work satisfaction or performance, but on fundamental feelings of being seen, heard, and respected. It became clear that these human elements were at the heart of employee well-being, particularly in a highly autonomous work environment.

One of the most surprising findings in this study was the contrast between the practical support employees felt they received from their managers and the underlying sense of mistrust that still came through strongly in the interviews. Many participants acknowledged that help was available when needed, especially in day-to-day tasks and challenging situations. However, at a deeper level, there was a recurring feeling that their professional judgement was not fully trusted. This was reflected in the way performance targets were monitored or how decisions were made without sufficient staff involvement. It was striking to see how these subtle signals of mistrust could coexist with otherwise

supportive managerial behaviour. This discovery challenged my expectations and made me reflect more critically on how trust functions—not just as a practical element of leadership, but as an emotional undercurrent that shapes the entire work atmosphere.

The research process itself was not without challenges. One of the most complex aspects of the research process was navigating my dual role as both a researcher and an employee of the physiotherapy unit. Being part of the work community I was studying required a heightened level of self-awareness and reflection, particularly in ensuring that I approached the interviews and analysis with neutrality and openness, rather than through the lens of my own experiences or assumptions. Ensuring neutrality and openness in the interviews was a learning process, and I became more confident in this role as the research progressed.

Another challenge was the process of thematic analysis. Initially, I was overwhelmed by the volume of rich, qualitative data. Each interview provided valuable insights, but synthesizing those into clear themes required multiple rounds of coding, revisiting the transcripts, and reflecting on the connections between concepts. In hindsight, I might have benefited from more peer discussion or feedback during the early stages of the analysis, to validate my interpretations and ensure I was not overlooking alternative perspectives.

If I were to conduct this study again, I would consider including a broader range of participants, such as frontline managers or other allied professionals who collaborate closely with physiotherapists. Their perspectives could have added valuable depth and triangulation to the findings. This option was carefully considered during the planning phase, but ultimately set aside due to the practical limitations of a Master's level study, particularly in terms of time, scope, and feasibility. Within those constraints, the decision to focus specifically on employees' perspectives allowed for a more in-depth exploration of their lived experiences, which I believe strengthens the study's contribution to understanding leadership and well-being in this context.

Despite these reflections, I feel proud of the clarity and integrity of the study. The interviews felt meaningful, and I was moved by the honesty and thoughtfulness of the participants. I found the conversations personally inspiring—they often felt like open, solution-oriented discussions rather than formal data collection. The participants spoke with a genuine interest in improving their work environment, and their reflections offered deep insights into a wide range of meaningful topics and behavioural dynamics. Their willing-

ness to share both positive and critical perspectives made this study what it is. The findings feel grounded, practical, and relevant—not only for researchers but for managers and organizational leaders seeking to create healthier work environments.

In conclusion, this thesis has been both a personal and professional learning journey. It has deepened my appreciation for the complexity of leadership in healthcare and reinforced my belief that employee well-being is not a peripheral concern, but a core driver of quality, sustainability, and dignity in the workplace. I hope that this research will contribute in some small way to improving leadership practices and strengthening the support systems that healthcare professionals so greatly deserve.

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## Appendix 1: Participant information form in Finnish

**TIEDOTE TUTKIMUKSESTA**

**Supporting Employee Wellbeing with Management Behaviours: Self-managing Expert Employees in Health Care Organization** (Työntekijöiden hyvinvoinnin tukeminen johtamiskäyttäytymisellä: Itseohjautuvat asiantuntijatyöntekijät terveysalan organisaatiossa)

**Pyyntö osallistua tutkimukseen**

Haluaisimme kutsua teidät osallistumaan tutkimukseemme, jossa pyrimme ymmärtämään, miten esimiestoiminta vaikuttaa työntekijöiden hyvinvointiin. Osallistumismahdollisuus tarjotaan kaikille fysioterapeuteille, jotka ovat työskennelleet yli vuoden ja työskentelevät tällä hetkellä Helsingin kaupungin Kotikuntoutusfysioterapiassa. Tutkija haastattelee osallistujia saadakseen näkemyksen heidän kokemuksistaan yksikön esimiestoiminnasta.

Tämä tiedote kuvaa tutkimusta ja teidän osuuttanne siinä. Pehdyttyänne tähän tiedotteeseen teille järjestetään mahdollisuus esittää kysymyksiä tutkimuksesta, jonka jälkeen teiltä pyydetään suostumus tutkimukseen osallistumisesta.

**Vapaaehtoisuus**

Tutkimukseen osallistuminen on täysin vapaaehtoista. Kieltäytyminen ei vaikuta oikeuksiinne tai kohteluunne Kotikuntoutusfysioterapian työntekijänä. Voitte myös keskeyttää tutkimuksen koska tahansa syytä ilmoittamatta. Mikäli keskeytätte tutkimuksen, teistä keskeyttämiseen mennessä kerättyjä tietoja ja näytteitä voidaan käyttää osana tutkimusaineistoa. Mikäli peruutatte suostumuksen, teistä jo kerättyjä henkilötietoja, näytteitä ja muita tietoja ei voida käsitellä enää osana tutkimusta, vaan ne hävitetään, mikäli niiden poistaminen aineistosta on edelleen mahdollista.

**Tutkimuksen tarkoitus**

Tämän tutkimuksen tavoitteena on hyödyntää Helsingin kaupungin Kotikuntoutusfysioterapian työntekijöiden kokemuksia kehittämään malli, joka tukee yksikön fysioterapeuttien työhyvinvointia. Tarkoituksena on tarjota esimiehille tietoa siitä, miten työntekijät kokevat esimiesten tuen ja millaista tukea he kokevat hyödyttävän työntekoaan ja hyvinvointiaan. Näitä tuloksia voidaan käyttää pohjana yksikön hyvinvointia koskevissa jatkokeskusteluissa sekä toimenpiteissä työntekijöiden hyvinvoinnin parantamiseksi. Kokonaistavoitteena on auttaa luomaan yksikköön työkuluttuuri, joka tukee työntekijöiden hyvinvointia ja mahdollistaa parhaan keskittymisen työhön parantamalla viestintää, vähentämällä stressiä ja alentamalla henkilöstön vaihtuvuutta.

**Tutkimuksen toteuttajat**

Tutkimus toteutetaan Helsingin kaupungin terveys- ja sosiaalitoimialalle Metropolia ammattikorkeakoulun toimesta. Tutkimuksen suorittaa Kotikuntoutusfysioterapiassa fysioterapeuttina työskentelevä Anja Cervera, terveydenhuollon maisteriopiskelija, osana hänen maisterintutkielmaansa Metropolian Health Business Management -koulutusohjelmassa. Tälle tutkimukselle ei ole myönnetty rahoitusta.

**Tutkimusmenetelmät ja toimenpiteet**

Osallistuminen tarkoittaa osallistumista yhteen haastatteluun, joka järjestetään teidän toimistollanne tai muussa teille sopivassa paikassa. Tämä sovitaan tutkijan kanssa sähköpostitse tai puhelimitse. Haastattelu järjestetään yksilöllisesti ja kasvotusten. Se kestää noin 45-60 minuuttia ja se nauhoitetaan.

**Tutkimuksen mahdolliset hyödyt**

Osallistumisesta tutkimukseen voi koitua epäsuoria hyötyjä, kuten viestinnän ja työyhteisön kulttuurin parantuminen yksikössä. Lisäksi osallistuminen voi edistää hyvinvointia parantuneen esimiestoiminnan ja työntekijöiden hyvinvointia tukevien mallien kautta.

**Tutkimuksesta mahdollisesti seuraavat haitat ja epämukavuudet**

On mahdollista, että avoin keskustelu kokemistanne vaikeista käyttäytymismalleista voi aiheuttaa epämukavuutta.

**Kustannukset ja niiden korvaaminen**

Tutkimukseen osallistuminen ei maksa teille mitään. Osallistumisesta ei myöskään makseta erillistä korvausta.

**Tutkimustuloksista tiedottaminen**

Tulokset tiedotetaan ja esitetään Kotikuntoutusfysioterapian työntekijöille ja esimiehille tutkijan toimesta. Osallistujavalidointia käytetään tulosten tiedottamisessa, ja palautetta sekä keskustelua otetaan lämpimästi vastaan. Osallistujia ei voida tunnistaa tutkimuksen julkaisuista tai esityksistä. Kysymyksessä on opinnäytetyö, joka julkaistaan avoimesti Theseus-tietokannassa.

**Tutkimuksen päättyminen**

Myös tutkimuksen suorittaja voi keskeyttää tutkimuksen.

**Tutkimuksen aineistojen hävittäminen**

Tutkimusaineisto poistetaan kokonaisuudessaan tutkimuksen päätyttyä, opinnäytetyön hyväksymisen ja julkiasun jälkeen.

**Lisätiedot**

Pyydämme teitä tarvittaessa esittämään tutkimukseen liittyviä kysymyksiä tutkijalle/tutkimuksesta vastaavalle henkilölle.

**Tutkijoiden yhteystiedot**

Tutkija / opinnäytetyötekijä  
Nimi: Anja Cervera  
Sähköposti: anja.cervera@metropolia.fi

Tutkimuksesta vastaa / opinnäytetyön ohjaaja  
Titteli: Sivutoiminen opettaja, Kuntoutus ja tutkiminen  
Nimi: Johanna Listola  
Metropolia ammattikorkeakoulu  
Sähköposti: johanna.listola@metropolia.fi

## Tutkimuksen tietosuojaseloste: Henkilötietojen käsittely tutkimuksessa

Tässä tutkimuksessa käsitellään teitä koskevia henkilötietoja voimassa olevan tietosuojalainsäädännön (EU:n yleinen tietosuoja-astus, 679/2016, ja voimassa oleva kansallinen lainsäädäntö) mukaisesti. Seuraavassa kuvataan henkilötietojen käsittelyyn liittyvät asiat.

### Tutkimuksen rekisterinpitäjä

Rekisterinpitäjällä tarkoitetaan tahoja, joka yksin tai yhdessä toisten kanssa määrittelee henkilötietojen käsittelyn tarkoitukset ja keinot. Rekisterinpitäjä voi olla korkeakoulu, toimeksiantaja, muu yhteistyötaho, opinnäytetyöntekijä tai jotkut edellä mainituista yhdessä (esim. korkeakoulu ja opinnäytetyöntekijä yhdessä).

Tässä tutkimuksessa henkilötietojen rekisterinpitäjä on:

Korkeakoulu	<input checked="" type="checkbox"/>
Toimeksiantaja	<input type="checkbox"/>
Muu yhteistyötaho	<input type="checkbox"/>
Opinnäytetyöntekijä	<input type="checkbox"/>

### **Voitte kysyä lisätietoja henkilötietojenne käsittelystä rekisterinpitäjän yhteyshenkilöltä**

Rekisterinpitäjän yhteyshenkilön nimi: Anja Cervera  
Organisaatio: Metropolia ammattikorkeakoulu  
Sähköposti: anja.cervera@metropolia.fi

### **Tutkimuksessa teistä kerätään seuraavia henkilötietoja**

Henkilötietojen käsittely on oikeutettua ainoastaan silloin, kun se on tutkimukselle välttämätöntä. Kerättävät henkilötiedot on minimoitava, niitä ei saa kerätä tarpeettomasti tai varmuuden vuoksi.

Kerättävät henkilötiedot: Nimi, todellisen nimen sisältävä sähköpostiosoite, äänitiedot, puhelinnumero ja perinteinen allekirjoitus.

Teillä ei ole sopimukseen tai lakisääteiseen tehtävään perustuvaa velvollisuutta toimittaa henkilötietojanne vaan osallistuminen on täysin vapaaehtoista.

### **Tutkimuksessa kerätään henkilötietojanne myös seuraavista lähteistä**

Tutkimuksessa ei kerätä henkilötietojanne muista lähteistä.

**Henkilötietojenne suojausperiaatteet**

Äänitys ja transkriptio Google Recorder -sovelluksella. Äänitystä ei varmuuskopioida pilvipalveluihin tietoturvan säilyttämiseksi. Excel -ohjelma datan analysointia varten. Äänitteet ja data säilytetään tutkijan henkilökohtaisella tietokoneella paikallisesti, tietoja ei varmuuskopioida pilvipalveluihin.

Tietojärjestelmissä käsiteltävät tiedot on suojattu seuraavilla tavoilla:

käyttäjätunnus  salasana  käyttäjärekisteröinti  pääsynvalvonta (fyysinen sijainti)

**Henkilötietojenne käsittelyn tarkoitus**

Henkilötietojenne käsittelyn tarkoitus on hyödyntää Helsingin kaupungin kotikuntoutuksen fysioterapian työntekijöiden kokemuksia kehittämään malli, joka tukee yksikön fysioterapeuttien työhyvinvointia. Tarkoituksena on tarjota esimiehille tietoa siitä, miten työntekijät kokevat esimiesten tuen ja millaista tukea he kokevat hyödyttävän työntekoaan ja hyvinvointiaan.

**Henkilötietojenne käsittelyperuste**

Tutkittavan suostumus. Teillä (rekisteröitynä) on oikeus peruuttaa suostumuksenne milloin tahansa tässä tietosuojailmoituksessa kuvatulla tavalla.

**Tutkimuksen kesto-aika (henkilötietojenne käsittelyaika)**

Kesäkuu 2024 – Kesäkuu 2028

**Mitä henkilötiedoillenne tapahtuu tutkimuksen päätyttyä?**

Kaikki henkilötietoja sisältävät tutkimusmateriaalit hävitetään.

**Tietojen luovuttaminen tutkimusrekisteristä**

Tietoja ei luovuteta tutkimusryhmän ulkopuolelle.

**Henkilötietojenne mahdollinen siirto EU:n tai ETA-alueen ulkopuolelle**

Tietojanne ei siirretä EU:n tai ETA-alueen ulkopuolelle.

**Rekisteröitynä teillä on oikeus**

Koska henkilötietojanne käsitellään tässä tutkimuksessa, niin olette rekisteröity tutkimuksen aikana muodostuvassa henkilörekisterissä. Rekisteröitynä teillä on oikeus:

- saada informaatiota henkilötietojen käsittelystä
- tarkastaa itseänne koskevat tiedot
- oikaista tietojanne
- poistaa tietonne (esim. jos peruutatte antamanne suostumuksen)
- peruuttaa antamanne henkilötietojen käsittelyä koskeva suostumus
- rajoittaa tietojenne käsittelyä
- rekisterinpitäjän ilmoitusvelvollisuus henkilötietojen oikaisusta, poistosta tai käsittelyn rajoittamisesta
- siirtää tietonne järjestelmästä toiseen
- sallia automaattinen päätöksenteko nimenomaisella suostumuksellanne

- tehdä valitus tietosuojavaltuutetun toimistoon, jos katsotte, että henkilötietojanne on käsitelty tietosuojalainsäädännön vastaisesti

Jos henkilötietojen käsittely tutkimuksessa ei edellytä rekisteröidyn tunnistamista ilman lisätietoja eikä rekisterinpitäjä pysty tunnistamaan rekisteröityä, niin oikeutta tietojen tarkastamiseen, oikaisuun, poistoon, käsittelyn rajoittamiseen, ilmoitusvelvollisuuteen ja siirtämiseen ei sovelleta.

Voitte käyttää oikeuksianne ottamalla yhteyttä rekisterinpitäjään.

### **Tutkimuksessa kerättyjä henkilötietoja ei käytetä profilointiin tai automaattiseen päätöksentekoon**

#### **Henkilötietojen käsittely aineistoa analysoitaessa ja tutkimuksen tuloksia raportoitaessa**

Teistä kerättyä tietoa ja tutkimusaineistoa käsitellään luottamuksellisesti lainsäädännön edellyttämällä tavalla. Yksittäisille tutkittavalle annetaan tunnuskoodi ja häntä koskevat tiedot säilytetään koodattuina tutkimusaineistossa. Aineisto analysoidaan koodattuna ja tulokset raportoidaan ryhmätasolla, jolloin yksittäinen henkilö ei ole tunnistettavissa ilman koodiavainta. Koodiavainta, jonka avulla yksittäisen tutkittavan tiedot ja tulokset voidaan tunnistaa, säilyttää Anja Cervera tutkimuksen päätymiseen asti eikä tietoja anneta tutkimuksen ulkopuolisille henkilöille. Lopulliset tutkimustulokset raportoidaan ryhmätasolla eikä yksittäisten tutkittavien tunnistaminen ole mahdollista.

Tutkimusaineistoa ja tutkimuksen yhteydessä kerättyjä näytteitä säilytetään tutkijan tietokoneella 3 vuotta, jonka jälkeen ne hävitetään poistamalla tiedostot.

Tutkimuksessa kerättyjä tietoja ei käytetä myöhemmin.

## Appendix 2: Interview guide in Finnish

Ajanjakso	Näkökohdat
<b>Esittely</b> <b>(5 min)</b>	<p>Tavoite: Toivota haastateltava tervetulleksi, selitä haastattelun tarkoitus ja luo hyvä ilmapiiri.</p> <ul style="list-style-type: none"> <li>• Tervetuloa ja kiitos, että osallistut tähän haastatteluun.</li> <li>• Tämä haastattelu on osa tutkimusprojektia, jossa tutkitaan, miten esihenkilön käyttäytyminen vaikuttaa itseohjautuvasti työskentelevien fysioterapeuttien hyvinvointiin.</li> <li>• Ei ole oikeita tai vääriä vastauksia. Olen kiinnostunut kuulemaan rehelliset kokemuksesi ja ajatuksesi.</li> <li>• Haastattelu kestää noin 60 minuuttia. Onko sinulla kysymyksiä ennen kuin aloitamme?</li> <li>• Voinko nauhoittaa tämän haastattelun luvallasi? Onko tämä sinulle ok?</li> </ul>
<b>Lämmittely</b> <b>(5 min)</b>	<p>Organisaatio (visio, tavoite, rakenne)</p> <ul style="list-style-type: none"> <li>• Kerro minulle organisaatiosta ja yksiköstä, jossa työskentelet.</li> </ul> <p>Haastateltava (ammattillinen tausta, tehtävät, työ)</p> <ul style="list-style-type: none"> <li>• Kerro lyhyesti sinun roolistasi fysioterapeuttina.</li> <li>• Kerro minulle historiastasi tässä yksikössä? Milloin ja miksi aloitit työskentelyn täällä? Miten olet kokenut työskentelyn tähän asti?</li> </ul>
<b>Nykytilanteen tarkastelu</b> <b>(25 min)</b>	<p>Työhyvinvointi</p> <ul style="list-style-type: none"> <li>• Minkälaiset asiat työssäsi mielestäsi vaikuttavat hyvinvointiisi?</li> <li>• Mitkä työsi osa-alueet edistävät hyvinvointiasi positiivisesti?</li> <li>• Mitkä työsi osa-alueet vaikuttavat negatiivisesti hyvinvointiisi?</li> <li>• Miten koet palautumisen työpäivän aikana? Mikä auttaa sinua palautumaan? Mikä häiritsee palautumistasi?</li> </ul>

	<p>Työ- ja vapaa-ajan tasapaino</p> <ul style="list-style-type: none"><li>• Miten esihenkilösi auttaa sinua ylläpitämään terveellistä työ- ja vapaa-ajan tasapainoa?</li><li>• Onko ollut esihenkilötoimia, jotka ovat joko auttaneet tai haitanneet tätä tasapainoa?</li></ul> <p>Positiivinen johtaminen</p> <ul style="list-style-type: none"><li>• Miten koet yksikön johtamisen?</li><li>• Miten koet saavasi tukea esihenkilöltäsi?</li><li>• Millaista tukea pidät olennaisena hyvinvointisi kannalta?</li><li>• Miten kuvailisit viestintää sinun ja esihenkilösi välillä? Miten esihenkilösi viestintätyyli vaikuttaa hyvinvointiisi?</li><li>• Voitko kertoa tilanteesta, jolloin esihenkilön viestintä sai sinut tuntemaan joko tuetuksi tai stressaantuneeksi?</li><li>• Kuinka usein saat palautetta esihenkilöltäsi ja missä muodossa? Miten tämä vaikuttaa hyvinvointiisi?</li><li>• Voitko ajatella tiettyjä esihenkilösi käytöksiä, jotka ovat vaikuttaneet positiivisesti hyvinvointiisi? Voitko antaa esimerkin?</li><li>• Miten nämä käytökset ovat vaikuttaneet työtyytyväisyyteen, stressiin ja motivaatioon?</li><li>• Onko ollut esihenkilötoimia, jotka ovat vaikuttaneet negatiivisesti hyvinvointiisi? Voitko kuvailla tilanteen?</li><li>• Miten nämä käytökset vaikuttavat henkiseen ja fyysiseen terveyteesi, työ- ja vapaa-ajan tasapainoon sekä työtehoosi?</li></ul> <p>Itseohjautuvuus ja sateelliittiyksikkö</p> <ul style="list-style-type: none"><li>• Miten koet itsenäisen työn ja itseohjautuvuuden vaikuttavan hyvinvointiisi?</li><li>• Millaista tukea saat tiimiltäsi?</li><li>• Miten koet työskentelyn satelliittiyksikössä?</li></ul>
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<b>Tulevaisuuden näkymien tarkastelu (20 min)</b>	Odotukset ja tarpeet <ul style="list-style-type: none"><li>• Millaista tukea toivoisit esihenkilöltäsi?</li><li>• Minkälainen työkuultuuri ja ympäristö mielestäsi edistäisi työhyvinvointia?</li><li>• Kun mietit kokemustasi itseohjautuvasti työskentelevänä fysioterapeuttina, millaiset esihenkilötoimet ovat mielestäsi tärkeimpiä työhyvinvoinnin edistämiseksi?</li><li>• Jos voisit ehdottaa muutoksia esihenkilöiden toimintaan hyvinvointisi parantamiseksi, mitä ne olisivat?</li><li>• Onko jotain muuta, mitä haluaisit lisätä kokemuksistasi esimiestyöstä ja sen vaikutuksista hyvinvointiisi?</li></ul>
<b>Lopetus (5 min)</b>	Yhteenveto  Palaute kattavuudesta  Kiitos haastateltavalle ajasta ja näkemyksistä. <ul style="list-style-type: none"><li>• Kiitos paljon, että jaotit kokemuksesi tänään. Panoksesi on arvokasta, jotta ymmärrämme, miten esihenkilöiden käyttäytymisellä voidaan vaikuttaa itseohjautuvasti työskentelevien fysioterapeuttien työhyvinvointiin.</li><li>• Jos sinulla herää kysymyksiä tämän haastattelun jälkeen, voit vapaasti olla yhteydessä minuun.</li></ul>
<b>Tämä opas on suunniteltu joustavaksi, mahdollistaen jatkokysymykset ja syvällisemmän keskustelun haastateltavan vastausten perusteella.</b>	

Appendix 3: Thematic analysis process

