

Call for papers

Innovating in the healthcare sector: renewing organizations, public policies and entrepreneurial capacities

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Multiple and complex changes within health care

The Healthcare field means dealing with multiple, complex challenges: increase in chronic disease, aging population, implementing policies and programmes that deal with new issues, such as health promotion, aging, and social isolation, growing social and territorial inequalities in health access, cost increases in some medical treatments, new expectations for personalized services... and finally growing financial constraints that weigh on the healthcare ecosystem.

Innovative responses to these challenges are numerous and include technological innovations of products and services, organisational and managerial innovations (Damanpour & Aravind, 2012), innovations in Business Models, R&D processes, governance, evaluation techniques, public regulations, and embracing new forms of mobilizing stakeholders.

The field of healthcare is reputed as strongly institutionalized (Friedland & Alford, 1991) pluralistic (Denis et al., 2001), and highly compartmentalized. These characteristic intricate decision-making processes where interests are rarely aligned. It makes it difficult to address complex issues in a collaborative and participatory manner (Grenier & Denis, 2018).

These issues lead to the following question: How can innovations emerge and be disseminated so as to transform the healthcare field in a sustainable manner?

We invite the authors to respond to this question by offering various methodological approaches and combining different disciplines on one of the following three themes.

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Theme 1 - Organisational forms and capacities to support innovation and its diffusion

Healthcare organisations (hospitals, specialized establishments, public agencies, etc.) are reputed to be less favourable to innovation because of their strong structural, professional and institutional silos. Innovation requires changes that support the emergence of ideas and new practices and their dissemination. We propose three approaches to these challenges:

- A first look sheds light on renewed forms of organisation inspired by new approaches, such as communities and creative collectives (Wenger, 2010, Simon, 2009), experimental platforms (Cartel et al., 2018), relational spaces (Kellogg, 2009), and third places (Oldenburg, 1989) that allow for new arrangements between stakeholders that go beyond their structural and institutional silos. Here, the authors should focus on the specific characteristics of these organised and partial arrangements (Ahrne & Brunsson, 2011), offering new regards in terms of organizationality (Dobusch & Schoeneborn, 2015), and calling for investigating how their structural weaknesses could be overcomed through original ways in organising collective action and supporting innovation (Grenier & Denis, 2018);
- A second look questions the capacity of organisations to absorb (Berta et al., 2010, Cohen & Levinthal, 1990; Harvey et al., 2015) or combine external resources and knowledge through approaches such as design thinking (Brown, 2008) or institutional bricolage (Garud & Karnoe, 2003);
- A third look questions the arrangements and practices favourable to dissemination, which is never replication (Sahlin & Wedlin, 2008) but rather a complex process of translation (Grinsven et al., 2016) or arrangements such as networks of practices (Agterberg et al., 2010).

These three views examine the necessary changes in and between organisations, professional practices, and managerial and relational innovations that provide actors with new abilities to move away from routines and institutionalized frames (Grenier & Denis, 2018; Pauget & Dammak, 2018).

We suggest the following questions (not limited):

- How do such more or less fluid organized arrangements emerge that aim to support innovation?
- What are the new business models able to renew innovations processes?
- How do these arrangements provide new capacities (Aggeri & Labatut, 2010) and renewed ways to promote resources combination (Garud & Kanoe, 2003)? Do they have the potential to transform the healthcare field?
- What are the forms and mechanisms of governance and leadership that can support these original arrangements?
- Are we identifying new approaches of experimentations that could better favor the sustainability and the diffusion of innovations?

Theme 2 - The renewal of the public-action models

We observe a growing renewal in agenda setting for public issues, public policies elaboration and implementation, according to new approaches and principles such as democratization in health, more collaborative regulations and new models of public intervention (*management for*

value, population-based approach, patient experience, empowerment...) or according to new paradigms of public action (Jobert & Muller, 1987; Sabatier & Schlager, 2000).

The new forms of interactive and participatory public governance are supposed to be conducive to the resolution of complex problems and to innovation; however, they coexist with neomanagerial forms of governance strongly entrenched (Torfing & Triantafillou, 2013). Some perceive these guidelines and organisational arrangements as being interventions that reinforce governance through instruments that increasingly constrain stakeholders while holding them to account (Degrave & Nyssens, 2012).

We question the new approaches to political design (Knoepel & Nahrath, 2005) with respect to how problems are defined (often wickedly defined, Weber & Khademian, 2008)). We also question the use of models of intervention that associate public and private stakeholders and the search for political and symbolic margins that could be some elements of change in terms of regulatory arrangements (coordination, integration, planning, etc.).

We suggest the following questions (not limited):

- How is public policy constructed in light of the multiplicity of stakeholders with issues and interests that are often conflicting or poorly formulated?
- How do various forms of citizenship involvement (users, patients) and the expression of their, claims fuel and guide these public policies?
- What should be a "good public governance" between support for innovation and economic regulation?
- To what extent these new approaches in public policies question managerial and entrepreneurial skills of organisations and professional actors, as well as public actors and agencies themselves?

Theme 3 - Innovation through the prism of new modalities of entrepreneurial skills

The traditional vision of one heroic entrepreneur, «alone in the world» is challenging by approaches that investigate the "collective" of entrepreneurial behaviours, such as institutional (and collective) entrepreneurship (Battilana et al., 2009), institutional bricolage (Baker & Nelson, 2005, Garud & Karnoe, 2003) or effectuation (Sarasvathy, 2008). This collective as level of analysis is also raised when we question the environments (entrepreneurial ecosystems, Isenberg, 2011), ecologies (Dougherty & Dunne, 2010) or specific organized settings such as "third-places" (Oldenburg, 1989) which constitute a potential reservoir of resources (relational, physical, material, cognitive, etc.) for those entrepreneurs that are hosted there.

We suggest the following questions (not limited):

- What specific entrepreneurial skills can transcend the compartmentalization and complexity that characterize healthcare ecosystem (transformational leadership, collective institutional entrepreneurship, etc.)?
- Are there any specific types of capital (technical, human, etc.) conducive to the emergence of innovations?
- How do these abilities emerge among some stakeholders (users, patients, public actors, etc.) who are renewing their roles?

- What new types of entrepreneurship (social, institutional, collective, etc.) favour the creation and institutionalisation of new transformative capacities?

Submission Instructions and key Dates

This call for papers is also published in *Innovations*, *Revue d'Economie et de Management de l'Innovation*.

The selection process is carried out in two steps:

1st stage: selection on the basis of one abstract

This first step seeks to foreshadow a few topics, among those listed in these two calls for papers, which will constitute the thematic issue of the one and the other reviews.

Instructions

- An abstract of about 3000 words presenting: Title; Name of the author (s); Objectives of the contribution; Theoretical framework and research questions; Methodology and field; Major results; key references.
- To be sent to Corinne Grenier (corinne.grenier@kedgebs.com) before May 1, 2018
- Feedback to authors: May 30, 2018

The outcome of this step is:

- o Rejection of the abstract
- o Acceptance of the abstract to be evaluated by the *Innovations* review (see 2nd step). The entry into the 2nd stage will be dependent on the acceptance of the author(s) to write their contribution in French.
- Acceptance of the abstract to be evaluated by the *Journal of Innovation Economics & Management*. The entry into the 2nd stage will be dependent on the acceptance of the author (s) to write their contribution in English.

2nd step: proposal evaluation process

Deadline for the submission of proposals is: September 30, 2018
Deposit of complete manuscript through online paper
http://www.editorialmanager.com/innovations/default.aspx

It is imperative to respect Recommendations to authors: http://innovations.cairn.info/instructions-aux-auteurs/

- Feedback from reviewers: November 15, 2018
- For the proposals selected for the second round of evaluation: return of the second version: January 20, 2019
- Return defines and possible last modifications: for the 1st of March 2019

The publication of the thematic issue is expected during 2019 (Upon their acceptance, articles are pre-published on Cairn).

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