

Challenging Some Universal Success Criteria in Management Consulting: When Practice Meets Prescription

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ABSTRACT

A number of publications in the field of consulting have attempted to define universal criteria for a consultant's success. Based on a qualitative analysis drawing upon experts' assessments, and highlighting the relational and processual dimensions of consulting, significant nuances are made on this universal dimension of successful consulting. More specifically, the article attempts to show the importance of considering the organizational context and the specificities of professional bureaucracies, so common in the public health and social services sector, in which the consultant is intervening. Our analysis is based on two actual case studies of consultant intervention, presenting similar characteristics in terms of the type of consultant, the organizational environment and the larger context in which managers' request for consulting services arose. We conclude with the comments of students planning careers as consultants to illustrate the rich insights that may be drawn from a qualitative analysis and experts' opinions.

INTRODUCTION

This article is based on an analysis of two real cases of consultant intervention, the first which seems a priori to be a failure since it ends rather badly for the consultant, the second seeming to be more of a success due to its more positive outcome. These two cases are used for pedagogical purposes with MBA students, and are intended to contribute to discussions and reflection on the work of a consultant in an organization. The two cases may be compared to a certain extent since each involves an independent consultant, with some experience, invited to submit a proposal due to personal contacts with the director-general, intervening in a professional bureaucracy in the public health and social services network, as part of a context of governmental reform involving organizational mergers.

The analysis of these case studies is grounded in a qualitative interpretive methodology where the accent is on relational (the dynamic amongst actors) and processual dimensions (Langley, 1999) through identification of critical incidents (Flanagan, 1954). To further the analysis of these two cases, we called upon three experts experienced in the health and social services network. We met each individually for an interview of approximately an hour and a half. We then invited all three to a seminar with some MBA students. Our

analysis of these cases leads to a questioning of conventional wisdom in terms of the consulting services on offer.

Indeed, a substantial part of this literature attempts to define standards of practice with an assumption of universal factors leading to success (Fullerton & West, 1996; Gable, 1996; Jang & Lee, 1998; McKinney Kellogg, 1984; McLachlin, 1999; Schaffer, 2002; and Stumpf & Longman, 2000), and the conviction that adhering to these norms would suffice to ensure perpetual consulting mandates. Amongst the principal common factors for success in consulting mandates, we generally find the following elements:

1. the consultant's integrity and honesty;
2. the client's commitment to accomplish the mandate;
3. the definition of a clear mandate;
4. the client's maintenance of control in the fulfilment of the mandate;
5. the consultant's skills; and
6. harmony in the client–consultant relationship.

This literature is “seductive” for students aspiring to become consultants to the extent that it suggests that remembering these few straightforward and easy principles will ensure that a consultant's mandate proceeds smoothly.

Nonetheless, published research ignores the inherent difficulties associated with the insertion of a third party, usually presumed to be neutral (Huczso & Sheahan, 1999), into an organization (Saxton, 1995), and tends to obscure the issue of the impact of internal political games on the consultant's work (Cobb, 1986). Furthermore, this literature presents the client unifacted and fails to situate the consultant in a wider client-system perspective (Schein, 1997; and Schwarz, 1994). There is a similar problem with the notion of consultant, with no distinction made between the independent worker, the senior consultant associated with a large firm, and the young consultant under the mentorship of a more experienced consultant. Finally, this literature tends to place all types of organizations on the same footing, whether public or private, large or small.

The presentation of the two case studies in this article reveals that matters are not so simple and that, while certain basic principles may guide consultants' practice, they must be squarely placed in context.

Therefore, the article is structured as follows. First, we present each of these cases, and then we analyse the data as a function of the criteria for success identified in the literature and of the observations of the three experts in consulting and of three MBA students registered in a course on consulting in organizations. We conclude with a discussion of notions of success and failure in the provision of consulting services.

CASE #1: STE. CAMILLE SOCIAL SERVICES FOR YOUTH CENTRE

At the beginning of the 1990s, the Department of Health and Social Services undertook a major reform, redefining a number of aspects of the *Loi sur les services de santé and les services sociaux* (Law on Health and Social Services). Amongst the changes wrought, redefining the missions of a number of establishments is noteworthy, as is the legislative incentive to combine certain categories of establishments which had previously been autonomous. One of the reform's objectives was to harmonize services and improve accessibility. It was also hoped that this would counter the fragmented approach that tended to characterize independent establishments, presenting an obstacle to collaboration and the direct provision of services to children and youth in difficulty. In integrating psychosocial services for children and youth, and rehabilitation services offered by educators and psycho-educators in a single establishment, the ministry hoped to resolve the thorny issue of waiting lists.

Therefore, it was in the wake of this reform that the Ste-Camille Social Services for Youth Centre, a product of the administrative merger of eight rehabilitation centres for youth in difficulty, and the Regional Centre for the Protection of Children and Youth were created. The new administrative structure included approximately forty mid-level managers and six senior managers, the latter based in the establishment's administrative offices. There are twenty locations where services are offered, covering a fairly extensive geographical territory. The senior managers in the administrative offices are all located in the head office. As the need arises, they travel to one or the other of the service centres. In each of the service centres, internal management on a day-to-day basis is provided by one of the mid-level managers.

Before the merger, the ministry of the day had placed the Regional Centre for the Protection of Children and Youth under trusteeship, given the significant problems of administrative governance that prevailed within this centre. It designated Mr. Picard, with experience in the field of child and youth protection, as trustee. This trustee was an experienced, tough manager who had held a number of managerial positions in other centres, as well as within the department. This period of trusteeship lasted a year. During this time, there were a number of changes: the former director general, blamed for administrative inadequacies and dubious practices, was dismissed; most upper management was replaced; certain members of the personnel were suspended; and the organizational structure and the designation of new upper and middle managers was revised. The person in charge during the period of trusteeship was finally named director general in June 2000. All the former upper management, with one exception, were replaced, the exception being the director of human resources; the latter thus survived successive waves of change.

The new general director, Mr. Picard, undertook a number of changes within the new organization. Amongst the orientations pursued, we note the development of a solid new management team, aiming at an operational style integrating social workers and specialists in rehabilitation to a greater extent; in the past, they worked in separate structures and did not share the same philosophy of intervention. Thus, the general director hoped to harmonize the services offered and, consequently, improve the service provided to the clientele. To help in attaining his objectives, Mr. Picard decided to call upon a management consultant, Ms. Bédard, a professional consultant who had been working independently for seven years, primarily in the national health and social services system. Ms. Bédard was part of Mr. Picard's network of professional contacts. Indeed, Mr. Picard and Ms. Bédard had already collaborated closely when they held other functions in the health and social services sector. They had met informally over the years. During these casual meetings, the general director told the consultant of his desire to eventually call upon her services. He was attracted by a flyer describing training workshops that Ms. Bédard offered to managers in the health and social services sector.

In September 2000, the general director's secretary contacted Ms. Bédard and set up a breakfast meeting. During this first formal contact, Mr. Picard outlined the situation of his

establishment with a brief history of the organization, the situation of trusteeship, the turnaround that had been required, and the strategic orientations that remained to be consolidated. Having become aware of the services offered by Ms. Bédard, Mr. Picard told her of his intention to establish a training program for his new managers with a view to strategic revitalisation. His goal was to adequately train them for their new management functions and, ultimately, to induce them to adopt the objectives of updating the new operational structures and clinical practices, a number of which, according to him, were outdated and not appropriate for the new context of social services reform.

At this stage of the discussion, Ms. Bédard proposed that the training project emerge from individual coaching sessions and that the management committee closely monitor two aspects of this; first, an evaluation of the training with respect to the acquisition of vital new management skills; and, secondly, an evaluation (or diagnosis) of the degree to which these new managers adopted the new operational styles based on cooperation and the mobilization of personnel. Indeed, from experience, Ms. Bédard believed that training alone would not be enough to attain the general director's objectives. He agreed and was very satisfied with the proposal. Then, Mr. Picard asked Ms. Bédard to establish contact with the human resources director, Mr. Thibault, given that the training fell under his area of jurisdiction and that the latter had not been informed of the process initiated with the consultant. Ms. Bédard took down his contact information and, as agreed, contacted him. According to Ms. Bédard's field notes, the contact with Mr. Thibault proved difficult from the outset. He seemed reluctant to collaborate in a project that, clearly, he did not initiate. During subsequent conversations with Ms. Bédard, Mr. Thibault seemed to give little credit to the general director for human resource management. Moreover, it seemed clear that Mr. Thibault had his own contacts with other consultants with whom he would, doubtless, have preferred to collaborate.

Then, a first formal contact took place in Mr. Thibault's office. He was obviously in control of the situation and gave directions with respect to certain themes that he wanted integrated into the management training project. In terms of process, it was agreed that Ms. Bédard would develop a proposal which would be first submitted to Mr. Picard and Mr. Thibault, and then deposited with the management committee.

The initial offer of service elicited a rather spirited reaction from Mr. Thibault. He considered the cost of the project too high and asked for a reduction in price. Ms. Bédard explained the details of the costs, but Mr. Thibault was intransigent. Finally Mr. Picard had to settle the dispute, with a reference to the limited financial resources at the disposal of his organization and their need to see the price of the submission brought down. Ms. Bédard then explained that the reduction in costs requested would have an effect on the activities organized, and could hinder the attainment of the strategic objectives as initially formulated. Mr. Picard said that he was aware of these limitations and insisted, regardless, that Ms. Bédard reduce the cost. Ms. Bédard was very disappointed to see Mr. Picard apparently align himself with his director of human resources, at least as regards the financial aspects of the project. While very upset, Ms. Bédard agreed to this request and then submitted a more limited plan; in fact, certain elements of the “personalized” content were sacrificed to meet the establishment’s financial constraints. This second offer seemed to correspond better to the expectations of Mr. Picard and Mr. Thibault. The second stage of this initial phase was to submit this proposal to the management committee. From this point on, there was a certain shift in responsibility for the project from Mr. Picard to Mr. Thibault who then began to exercise tighter control over the project. After the presentation to the management committee that seemed, all in all, to be more of a formality, Mr. Picard appeared to “divest” himself of the project, and the contact person for the project then became Mr. Thibault. Ms. Bédard found this behaviour rather surprising, considering the strategic objectives described at the outset by Mr. Picard, that is, a commitment to a new more integrated management style amongst various elements of the organization. Clearly, there is no question but that the “training” element was at the heart of these strategic objectives of Mr. Picard. Yet Ms. Bédard had understood that there was more involved than simply training managers for their tasks; at least, the intention at the outset during the first formal contact between Mr. Picard and Ms. Bédard was broader than that, in her opinion. She told herself that she would clarify this point with Mr. Picard at the appropriate time.

The third and last stage of the initial phase consisted of presenting the project to managers who were to be offered this professional support. Ten managers were identified as participants in the project, a rather small group considering that there were approximately

forty intermediate level managers in this establishment. According to the information provided to Ms. Bédard, the project was solely for those with a year or less of experience as intermediate level managers. All these individuals had already been professionals in the organization before becoming managers. Only one person had not; this was a more experienced manager who was rumoured to be having problems with his new team and who was, thus, in need of support. Ms. Bédard was surprised that this manager, facing very different challenges, was included in the group. But Mr. Thibault seemed to think that this would have no impact on the rest of the group and decided to keep this individual as a participant in the training project. The ten managers encountered expressed great satisfaction and were very happy to receive such support from their organization; they seemed very motivated to participate. In general, they agreed with the training themes, and the principle of individualized coaching during the process.

Ms. Bédard's mandate extended over six months. Five days were devoted to training on such matters as: conflict management, professional support, running meetings, etc. Ten days were spent on individual coaching sessions of an hour and a half each. The implementation of the project went very smoothly and all the managers seemed very happy with the content, the personalized encounters and Ms. Bédard's work. There were meetings with Mr. Thibault at various stages of the process to keep him informed of the progress being made. These meetings were usually quite brief and Ms. Bédard felt uncomfortable each time she had to meet Mr. Thibault, although he seemed satisfied with this training process.

In the course of the mandate, there was a formal evaluation of the project by the managers who received the training. The results were extremely positive. Ms. Bédard's final report containing various observations made throughout the process, as well as follow-up recommendations, was submitted to Mr. Picard and Mr. Thibault. Ms. Bédard was anxious to discuss the fruit of her observations with the director-general, whom she had not seen for a number of months. In particular, Ms. Bédard believed that the mediation of social workers' and rehabilitation educators' viewpoints was far from accomplished, and she was not at all certain that the training of ten new managers would suffice to change old practices.

The final meeting took place with Mr. Thibault alone. No follow-up with Mr. Picard or the management committee took place although this had been planned from the outset. It

was clear that, for Mr. Thibault, future training activities would be redirected to more clinical aspects for which he himself had identified other resource-people. During this meeting, there was no reference to the observations contained in Ms. Bédard's final report. She asked for explanations but Mr. Thibault remained rather vague, indeed uninterested in this section of Ms. Bédard's report. This encounter was polite but cold, and Mr. Thibault was a bit condescending, letting it be understood that he could put in a word for her with regional authorities who found the project very interesting and innovative. For Ms. Bédard, it was not clear whether the management committee and the director-general would ratify the "clinical" reorientation of the management training file or whether this had been dictated by the human resources director. Shortly after this final meeting, Ms. Bédard tried to contact Mr. Picard to determine his view of the content of the final report and the follow-up to the project which, it will be recalled, was accomplished to the very great satisfaction of participants. It was not possible for Ms. Bédard to discuss this with Mr. Picard, since he did not return her calls. Ms. Bédard was never contacted again, either by the director of human resources or the general director.

CASE #2: HIRONDELLES HEALTH CENTRE

In 1998, the Hirondelles Health Centre was created as a result of the merger of the St-Benoît Health Centre and the St-Amable Health Centre. In 1999, a new general director was officially named. The chair of the board of directors announced that Mr. Langlais would henceforth act as general director of the Hirondelles Health Centre. Shortly after his nomination, Mr. Langlais, himself the former general director of the St-Benoît Health Centre, informed the board of directors of his intention to proceed to rapidly develop a new strategic plan and his desire to use the services of a consultant to assist him in this task. Considering the probable stakes in redefining the organizational architecture, Mr. Langlais considered that it would be useful to be able to rely on a neutral, competent expert. Therefore, he submitted this proposal to his board of directors who agreed that a proposal for such an offer of services be deposited at the next board meeting.

During the month of September 1999, Mr. Langlais directly telephoned Mr. Sinclair of the firm *Consult'action* to discuss a mandate with respect to changing the establishment's

organizational structure, as a consequence of the merger. Mr. Langlais had been a manager for more than ten years in the health and social services sector, and had been an independent management consultant for five years. This telephone contact allowed Mr. Langlais to very briefly inform Mr. Sinclair of his needs and to arrange a meeting.

The first meeting took place over a dinner during which Mr. Langlais thoroughly explained the issues underlying the functional restructuring of the new organization. Thus, the general director explained that, before the merger, the two establishments had very different management philosophies and operational styles. Consequently, while the St-Amable Health Centre had a decentralized structure in a number of small municipalities in its territory and offered, at each of these service locations, a relatively complete array of the services under its jurisdiction, the St-Benoît Health Centre was organized in terms of programs and target population (youth programs, seniors' programs, mental health programs, etc). Contrary to the St-Amable Health Centre, the St-Benoît Health Centre offered its services in a single physical location. Moreover, within the various administrative units, personnel could be assigned according to territory; this was the case especially for home care services for senior citizens or for persons with reduced mobility.

From the time the merger took place, that is about a year previously, the two establishments had, more or less, conserved their respective characteristics; the personnel of the old administrative units were still under the responsibility of their supervisors; the cohabitation of two managers at the head of similar services took place, in certain cases in a spirit of collegiality, and in others in the most complete indifference. Upper management from the two former establishments were waiting to see their roles and responsibilities confirmed. They were well aware that some amongst them could lose their current positions and acquire other functions since there could not be two people in charge of the same work unit. One of the managers from the St-Amable Health Centre, Ms. Laliberté, harboured the ambition of eventually becoming general director, and was in almost open conflict with the new Mr. Langlais. Like other more discreet managers, Ms. Laliberté did not appreciate Mr. Langlais's controlling management style. Mr. Langlais preferred an organizational structure based on client programs whereas Ms. Laliberté favoured a geographically decentralized structure. There were two warring visions of the new organization and the personnel were themselves

divided. Therefore, the challenges of creating a unified organisation were very great and the director-general was perfectly aware of this.

At the same time, Mr. Langlais did not wish to unduly prolong this transitional situation, and cherished the idea of seeing the entire establishment function on common ground as quickly as possible. He had a very clear conception of the type of structure that he wished to establish. He knew that all the employees, including the managers, were waiting to hear about the new organizational structure. He also wished to commence a process under the auspices of a committee composed of employee representatives, managers and various authoritative bodies, such as unions, councils of professionals present in the establishment, the board of directors, etc. and a representative committee of members previously belonging to one or the other of the merged establishments. Mr. Langlais hoped that, in the context of this mandate during which he would serve as a resource person, Mr. Sinclair would formalize the whole of this process. Mr. Langlais then envisioned submitting everything to the next board of directors' meeting. Both parties deemed the four to six month timeline for accomplishing the mandate reasonable, especially in this context where the process was jointly led by the director-general and the consultant. As the two individuals had collaborated effectively in the past on other mandates, they were both confident of being able to work synergistically, in as much as Mr. Sinclair supported Mr. Langlais' vision of an organizational structure by programs and agreed with his decisions. Therefore, it was agreed that Mr. Sinclair would prepare a plan to be submitted to the director general the following week, and this was done.

Mr. Langlais expressed great satisfaction with the document prepared by Mr. Sinclair which specified the activities in which the consultant would engage, as well as the costs associated with the accomplishment of the mandate. In fact, Mr. Langlais only suggested minor changes. Everything was submitted to and ratified by the board of directors, as planned. The process of developing a new organizational plan for the establishment could then begin. The various bodies represented in the establishment could proceed to the nomination of their representatives within the consultative committee, the committee reforming the organization.

Between September and December 1999, this committee met five times. During the first meeting of the committee, a timetable, as well as a planned table of contents for the report, was deposited with the committee. The members of the committee expressed great satisfaction and were pleased to be able to already have an idea of the relevant dates and the precise issues to be considered. This would allow them to plan their own consultations. Between meetings of the committee, Mr. Langlais and Mr. Sinclair discussed steps to be taken for the following meeting and they jointly prepared each meeting. Thus, the two parties collaborated closely throughout the process, and had quite open discussions about issues associated with the development of the organizational plan. In addition, at the same time, the various representatives on the committee could test the pulse of their respective bodies and return to the committee with their comments. It was clear from talk in the corridors that members of the former St-Amable Health Centre felt mistreated because they were smaller and had less influence on Mr. Langlais, who had been the former director general of the St-Benoît Health Centre. Nonetheless, in their professional interaction, employees maintained open, friendly relationships.

Throughout the process, Mr. Sinclair had the responsibility of putting in writing the orientations adopted by the committee and producing a coherent document to be submitted eventually to the board of directors. Thus, to some extent, Mr. Sinclair played the role of executive secretary of this committee. However, it was the general director himself, never Mr. Sinclair, who met with members of the board of directors. Therefore, he participated in the process of developing the organizational structure but not in its implementation.

Although, according to the *Loi sur les services de santé and les services sociaux* (Law of Health and Social Services), the development of the organizational plan of the establishment was the prerogative of the general director, Mr. Langlais was careful to listen to the various points of view raised by different representatives on the committee. Only Ms. Laliberté expressed disagreement with the orientation of the organigram. Ms. Laliberté was one of the managers of the former St-Amable Health Centre and favoured an organigram based on the principle of geographic decentralization, somewhat similar to the way her former establishment functioned. Ms. Laliberté had every opportunity to explain the advantages of such an organigram to other members of the committee. Now, the orientation favoured by Mr.

Langlais, as well as a majority of committee members, was that of an organigram by program, similar to the way the former St-Benoît Health Centre had worked, with a few adjustments to take account of the continued existence of the surviving service centres. The disagreement with Ms. Laliberté was such that she decided to resign from her role as representative of the managers on the committee. As the committee's work was practically complete, she was not replaced.

Having been previously informed by Mr. Langlais of Ms. Laliberté's ambitions, Mr. Sinclair had advised Mr. Langlais to allow Ms. Laliberté to explain her point of view quite openly and to carefully present the committee members with the advantages and disadvantages of various options. Aside from advising Mr. Langlais on this approach, Mr. Sinclair had no other specific role to play in the management of these differences. On the other hand, he was energetically courted by certain managers who sometimes confided in him about internal tensions underlying discussions on the future organizational structure.

All the committee members felt very well informed on the various possible options and Ms. Laliberté, while frustrated by the rejection of her option, harboured no resentment towards Mr. Sinclair. The disagreement was directly handled by the parties concerned and was settled by the departure of Ms. Laliberté, who obtained a post in another organization in the health network.

In the course of his work, Mr. Sinclair was congratulated by all members of the committee. The latter particularly appreciated the comments, advice and lessons provided throughout the process. The members said they valued the consultant's ability to listen and to communicate. Thus, Mr. Langlais was very pleased with the work accomplished and thanked the consultant for his contribution.

A few months later, Mr. Langlais again sought out the consultant's services. Two mandates stemmed from the initial process of developing an organizational plan for the establishment. These mandates aimed to go further in the organisation of services in the two main departments newly added to the organigram. In the eyes of the director general, Mr. Sinclair's participation in this second stage guaranteed respect for the orientations adopted by the board of directors and thus prevented any possible risk of drifting from the original

intentions in configuring these two new departments. Mr. Langlais had full confidence in Mr. Sinclair's ability to accomplish these mandates and knew that he would be loyal.

ANALYSIS OF THESE TWO CASES

- From the perspective of universal success factors

In this section, we analyse the case study data as a function of what certain authors deem common factors for success. This exercise allows us to create the following table.

Table 1

Success criteria	Case #1	Case #2
1. Consultant integrity	Yes, but not neutral	Yes, but not necessarily neutral
2. Client involvement	Yes, moderately involved	Yes, highly involved
3. Clear agreement	Ambiguity at the departure point, followed by a shift to a narrower assignment	Yes
4. Client control	Yes, in the definition of the assignment but not in the delivery of services	Yes, completely in control.
5. Consultant competence	Yes	Yes
6. Interpersonal fit	No, the Human Resources Director dislikes the consultant	Yes

Upon reading this table, we would be tempted to claim that case #2 was almost a total success while case #1 was fraught with difficulty due to ambiguity from the outset in defining an agreement, interpersonal difficulties with a key member of management, and the control exercised over the process of the consultant's intervention. The experts' observations that we collected and that we present in a subsequent section tend to bring important nuances to this general interpretation. Indeed, integrated consultants are not necessarily the same as "neutral" consultants, since they may be led to offer opinions and take sides on controversial questions dividing the members of an organization; a client strongly committed to a mandate may take control to the point of relegating the consultant to the role of one who simply carries out orders (case #2), thus, not taking full advantage of the consultant's skills (case #1 and #2); previous mutual acquaintance with the DG is not an automatic indicator of success over the course of the mandate, and the entire client system context must be taken into account

(case #1 and #2); and the consultant must be permitted a degree of autonomy in the execution of the mandate, particularly when hired as an expert-trainer. Moreover, despite difficult relationships between the consultant and the DHR in case #1, managers who participated in the training workshops and coaching encounters said that they were extremely satisfied with the consultant's services.

- ***From a perspective of analysis of critical incidents***

A different way of analysing the two cases is to identify critical incidents in the process. We are inspired by Flanagan (1954)¹ who describes the critical incident technique as a collection of observations on human behaviour oriented towards the resolution of practical problems that arise in modern life. The technique consists of listing certain facts in a given situation that prove determinant for the future unfolding of participants' activities. As the technique is grounded in observations, the quality of analysis is largely based on observers' competence and the extent of their knowledge of the current situation.² Secondly, the identification of critical incidents allows for the formulation of a certain number of inferences that could serve to improve the future course of an action, given that it is difficult, indeed, impossible to determine one sole and ideal way to resolve a problem or practical dilemma. The two case studies that we have presented here with the assistance of the critical incident technique allow us to highlight precise moments in the consultation process when the consultants had to make choices in pursuing their mandates, and the points at which the course of their actions could have been deflected if they had chosen different avenues. Table 2 below summarizes the principal critical incidents identified in each of our two cases.

At each of these stages, the consultant is able to determine whether there is sufficient information to proceed to the next stage. Thus, in the initial phase, consultants may choose to base themselves solely on information provided by the first interlocutor, in this case, the director general, or they may decide that information is missing and, thus, continue the discussion in posing more questions, asking to meet other people within the organization before submitting a proposal (following stage), etc. Table 2 allows us to see that, in case #1, the consultant had a number of occasions to clarify the request; first, with the director general,

¹ We have no more recent reference on this notion of a critical incident that we consider particularly in consultation when we examine the process and the development of a mission more closely.

² This gives rise to the idea of calling upon experts to analyse the two cases presented in this article.

then with the director of human resources, the management committee, the principals concerned, and the managers affected by the project.

Table 2

Critical incidents	Case #1	Case #2
Initial phase	First contact with the General Director	First contact with the DG
	First contact with the Human Resources Director	–
	Development of the proposal	Development of the proposal
	Meeting with the management committee	–
	Discussion of the proposal with managers affected by the project	–
Implementation phase	Periodic meetings with the Human Resources Director	Meetings with the committee established by the General Director
	Managers' evaluation of the consultant's intervention	Regular meetings of the consultant and the General Director
Final phase	Final meeting with the Human Resources Director	Final meeting with the General Director
	Attempts to recontact the General Director received no response	Follow-up for subsequent mandates

In case #2, a single meeting was sufficient for the consultant to formulate a proposal. As the experts we called upon to analyse the two cases will mention, initial contacts are especially important in consulting; these allow the consultants to clearly define the request and the general director's level of commitment and motivations and then to eventually identify the key individuals or groups affected by the consultant's intervention. It is also during these initial contacts that consultants may see the role they may play or would like to play in the implementation of this new policy: will the consultant simply carry out the requests of the interlocutors or will the consultant have a more active and strategic role? Will the consultant's skills be employed for the benefit of the clients? This is another area of concern raised by our experts to which we will return later. Finally, the conclusion of a mission is also an important

stage, both for the consultant's future reputation and also for the development of client loyalty (for example, the same clients or organizations giving the consultant additional mandates). Let us now see what our experts say about the various aspects of these two cases.

EXPERTS' COMMENTS

Five major themes emerge from our discussions with three experts about the case studies: the importance of initial contacts, the identification of the client- system, the general director's commitment and motivations, the dynamic within the management team (political games) and the utilisation of the consultant's skills. Certain of these themes intersect. Thus, our experts agree in saying that initial contacts are important, not only for the nature and extent of the mandate but also for identifying all the individuals who will be affected directly by the consultant's intervention. Now, in professional bureaucracies such as those in the health and social services sector, the formal authority structure is, of course important, but the informal dynamic of relations between members of the management team is equally important. In this sense, our experts believe that the concept of the client needs to be further defined; the paying client is not necessarily the client who will benefit the most directly from the consultant's intervention nor the client with whom the consultant will be most in contact. Knowing those in authority like the general director is helpful but not sufficient to adequately accomplish the consulting mission. In this sense, a previous positive acquaintance (or reputation) vis-à-vis the general director, as in these two cases, is not a guarantee of a harmonious consulting process. Indeed, this previous mutual acquaintance might even contribute to the loss of objectivity of the consultant, who might be perceived as the general director's right hand. Furthermore, merger contexts tend to lead to the emergence of more intense political games. The arrival of a third party, according to our experts, could be greeted with distrust and a certain scepticism. To avoid becoming alienated from members of the management team, the general director can have a tendency towards avoidance or failing to act on certain issues. The consultant called upon to intervene in these contexts must absolutely develop a close reading of the power games amongst the various actors. Our experts believe that the consultant's so-called "neutrality" will be rapidly put to the test. The consultant could even be relegated to a more technical and less strategic role to avoid openly

stirring up latent conflicts. Here are several comments collected during our discussions on the two cases presented.

-The importance of first contacts

“I believe that Ms. Bédard (case #1) did not commit any serious errors. How could she have known that the Human Resources Director would be so hostile? Of course, the General Director could have notified his Human Resources Director of his intention to hire a consultant whom he knew well to train the managers. But, between us, what would that have changed? No, I believe that Ms. Bédard paid the price for a more or less latent conflict between the two directors. Happily, the managers who were trained were very satisfied and will possibly in the future represent Ms. Bédard’s best hope in terms of future mandates.” (*Expert A*)

“Mr. Picard put Ms. Bédard, who was apparently a friend or at least someone he knew quite well, in an embarrassing position. He should have known that he was treading on the territory of the Human Resources Director. Furthermore, his method of trying to wriggle out of it is highly debatable on moral grounds.” (*Expert B*)

“Perhaps, during her very first contact with the General Director, Ms. Bédard too readily agreed to the idea of discussing the means (the training) before agreeing on the goals and conclusion of the mandate. I have trouble seeing how training only ten managers out of forty could be seen as a mandate with strategic scope. This is the whole aspect that needed to be scrutinized and analysed to obtain a better idea of the commitment to the General Director’s new strategic orientations. But perhaps during the first meeting with Ms. Bédard, the General Director only explained the general context and the establishment’s evolution. In that case, Ms. Bédard would have misinterpreted his remarks. Indeed, he hoped for a limited, inexpensive intervention and, from the point when Ms. Bédard was in contact with the Human Resources Director, he no longer saw the need to be involved.” (*Expert C*).

“In the initial phase, during the first contacts, you have to be careful to precisely determine not so much the formal structure of authority, but the informal dynamic of the management team. This is important to be sure from the outset of being in contact with the right people and subsequently obtaining their cooperation. Now, this might seem curious to say but the right people are not always the DGs.” (*Expert B*)

“Certainly, at the outset, you have to clarify why they would call upon a consultant if they wanted to avoid confusion, ambiguity and misunderstandings. But, even with one’s best efforts, there will always be grey areas and that is what, as consultants, we will be led to discover during the process.” (*Expert B*)

- *The identification of the client system*

“Personally, before committing to a mandate, I like to have a clear picture of the various types of people who will be affected by a consultant’s eventual intervention. Now, in both cases, the consultant tended to quite quickly adopt the director general’s perspective. In case #1, Ms. Bédard promptly chose a method—training workshops for new managers—without knowing who these managers were and why only ten managers and not all forty. In case #2, Mr. Sinclair could have taken the trouble to first obtain the two former organigrams and collect data on who the managers of various units were. This would have allowed him to see the advantages and disadvantages of the model recommended by both parties—Mr. Langlais and Ms. Laliberté—and perhaps even to propose a third option that would be more likely to be greeted with enthusiasm.” (*Expert A*)

“In professional bureaucracies, it is not uncommon for leadership to be shared and for managers of the main units to be the principal clients and not the intermediary clients. In case #1, Ms. Bédard believed that the director-general was the principal client when he played the role of an intermediary between the consultant and his Human Resources Director.” (*Expert C*)

“Certainly, it is simpler to be in a relationship of equals with the director-general. But you have to adjust to reality. The General Director of an establishment in health and social services interacts with a multitude of independent actors with significant power and fairly significant discretionary authority in carrying out their work. Consequently, the notion of client system becomes important for the consultant.” (*Expert B*)

- *The director general’s commitment and motivations*

“We can definitely not cast doubt on the commitment of the director general to this project (case #2). After all, defining the architecture of his organization is not only a prerogative based in law but also constitutes an eminently strategic task. Nonetheless, the consultant should be attentive to the effects of the General Director’s omnipresence in as

much as he appears to be seen as having a particularly controlling style. The consultant readily agreed with the General Director but adopting the orientation by program that the General Director recommended from the outset was at the price of the consultant's objectivity." (*Expert B*)

"It is a shame that the General Director (case #1) lets things go like that and does not take advantage of his relation with Ms. Bédard to go further in his reflections on his organization's strategic orientations. I know from experience how complex mergers are and that it is difficult to "marry" the various cultures that are present. The perspective of a consultant, especially one who is trustworthy, can allow participants to see various facets of an issue. I believe that in relegating Ms. Bédard to the role of a technical expert, Mr. Picard deprived himself of valuable advice." (*Expert A*)

"I had a mandate where I almost never saw the General Director. It was his assistant who put me in contact with the various interveners to meet in the course of my mandate. My colleague and I had to insist on meeting the General Director at certain critical points that required his decisions. It was a mandate where the managers did not agree amongst themselves and the General Director had trouble deciding and imposing his view. We quickly noted that, in fact, he hoped that we would take the decision in his place." (*Expert C*)

- *The management team's dynamic*

"Perhaps Ms. Bédard did not do a sufficiently detailed, careful study of this organization's political map. A Human Resources Director who is the sole survivor of an organization under trusteeship and who is contending with a turbulent environment surely emerges with enhanced power. He becomes the "living memory" of this organization! In addition, this Human Resources Director saw himself "rescued" by the current General Director since he was the one acting as trustee. So, of necessity, there has to be a relationship of complementarity, indeed a bond of sorts between these two individuals. Between a consultant who is an acquaintance and his Human Resources Director, I believe that the General Director's choice will be clear and that it will favour his Human Resources Director." (*Expert C*)

"Mr. Langlais wasn't very proactive in case #2. Although all the people with whom he was in contact expressed great satisfaction with his work, he kept to Mr. Langlais's choice

and did not try to discover whether the opposition between the latter and Ms. Laliberté did not translate into an even broader malaise within the organization, especially given that Mr. Langlais was reputed to be quite controlling.” (*Expert B*)

“You have to be comfortable with what I call “the ambiguity of power” when you intervene as a consultant in a health and social services establishment. Indeed, you may share the General Director’s vision but this will not be enough to bring about the changes management wishes. Furthermore, a close and favoured relationship may be poorly perceived by other members of the organization who will be inclined to question our objectivity.” (*Expert A*)

- ***Utilisation of the consultant’s skills***

“The skills of each consultant, Ms. Bédard in case #1 and Mr. Sinclair in case #2, seem to me to have been utilised, if we go by the great satisfaction expressed by the members in contact with them. The problem is that case #1 did not give rise to additional mandates for the consultant, due to the Human Resources Director’s attitude and the General Director’s indifference, which is a real shame. Unfortunately, to a certain point, this is one of the risks of the trade.” (*Expert B*)

STUDENTS’ COMMENTS

Three main themes emerged from discussions with the students: the client-consultant relationship dynamic, the consultant’s objectivity and the lessons to be learned from these case studies.

- ***The client-consultant relationship dynamic***

When we present these two cases to the students, they are generally astonished by the behaviour of the General Director and the Human Resources Director in case #1, while they are thrilled with the behaviour of the General Director in case #2.

“It’s really not fair! Ms. Bédard is doing her best and is appreciated by everyone; she doesn’t deserve such treatment, i.e. to be dropped by the General Director and have to submit to the Human Resources Director’s paternalism. As a future consultant, I admit I don’t know whether I would be able to stand such behaviour!” (*Student A*)

“According to what I have read, the factors associated with success often refer to the mandate being clear and matching the consultant’s skills. In case #1, the consultant listened carefully to the General Director, and suggested some activities in which she would plainly be competent and, despite this, the General Director never called her again and the Human Resources Director, for his part, was rather haughty in his approach. I pity the employees who have to work with this kind of management that seems to say one thing but do another. I hope I will not come across too many individuals like that when I am a consultant myself.” (*Student B*)

“I really like Mr. Langlais’s way of doing things (case #2). He clearly presents his needs; he carefully reads the consultant’s proposal and gets it ratified by the board of directors. Then, he gets all members of the organization to define a new organizational structure. I believe that this form of commitment from the director general and his participatory management style bode well for the consultant.” (*Student C*)

“I find there is a nice complementarity in case #2 between Mr. Sinclair and Mr. Langlais while there is rather a certain animosity in case #1 between Ms. Bédard and Mr. Thibault and even Mr. Picard since the latter never returns his calls. A situation like case #1 must be especially difficult for the consultant. I wonder whether, faced with the attitude of the Human Resources Director, it might not have been better to decline the offer. But I don’t really know if that’s something a consultant does.” (*Student A*)

- *The consultant’s objectivity*

The issue of the consultant’s objectivity is also raised in discussions with the students.

“I have always believed that objectivity was an important aspect of the consultant’s work. After all, aren’t consultants called upon because it is believed that their judgment is not biased and more neutral?” (*Student A*)

“It’s true that the fact that it is management that hires the consultant may tie the hands of the consultant. Nonetheless, I believe that it is up to consultants to preserve their objectivity or at least be rigorous in their analysis of organizational situations. They must sensitize managers to this dimension of their work and perhaps also make this a condition for accepting the mandate.” (*Student B*)

“In case #2, I didn’t see the notion of objectivity as compromised. But in examining this more closely, with the experts’ insight, it is true that the consultant could have done more to preserve a certain objectivity.” *(Student C)*

- ***Lessons learned from the case studies***

The students appreciated a more qualitative reading in the sense of observations of an experiential nature of the two cases presented and thought that this was very enlightening.

“When I hear the experts’ comments, I realize that the consultant’s work is more complex than what is presented to us in books. Experience on the ground allows us to become aware of dimensions that, a priori, I would not have seen.” *(Student A)*

“Analysis of the two cases allows us to see the importance of a consultant’s interpersonal skills. I already thought this but I see it even more when, as students, we discuss this with consultants themselves.” *(Student B)*

“Each of the two cases entails successful elements: in case #1, the managers who received the training and the coaching were very satisfied with the consultant’s services; in case #2, the director general, as well as the members of the committee with whom the consultant worked, claimed to be satisfied. It must be very gratifying for a consultant to receive only such positive comments. But I imagine that each case is different and that what worked well in one place will not automatically function the same way elsewhere. As a consultant, you have to constantly make adjustments and this must be very demanding.” *(Student C)*.

“The experts made us aware of the importance of initial contacts and accurately identifying those directly affected by the consultant’s intervention. This gives us much food for thought, and I imagine that these are reflexes or abilities that we can acquire only through experience. Maybe for us, students hoping to become consultants, we would be better off starting our careers working with some sort of mentor, a more experienced consultant who could initiate us into the art of exercising this craft.” *(Student A)*

CONCLUSION

This article uses qualitative methodology to present two real case studies in consulting. The goal was to show that it is difficult to define a consultant’s intervention solely as a function

of universal criteria for success and that the analysis of consultant's interventions must be contextualized to grasp the dynamic underlying requests for consulting. Thus, a criterion of success often highlighted in the literature is the importance of the client's commitment throughout the process of consultation. However, when this commitment takes the form of control of the consultant's activity, we might wonder about consultants' objectivity, margin of manoeuvre and ability to make full use of their expertise. Now, a number of scholars also consider objectivity as a criterion for success. In addition, the literature often refers to the fact of serving a single client. We have seen the importance of considering the entire client system if the consultant does not want to pay the price for political games. This seems especially relevant in contexts where the model of the professional bureaucracy emerges from the inverse pyramid of authority (Mintzberg, 1983), where various actors have significant discretion in the accomplishment of their work. Furthermore, this type of organizational milieu poses particular challenges in terms of leadership and the exercise of authority (Anderson & McDaniel, 2000); the manager tends to develop a more collective approach to management issues (Denis & al., 2001). Consultants called upon by managers to intervene in this type of milieu must consequently be advised of this collective dynamic and consider it in their interventions.

Sometimes consultants list factors contributing to success where it is impossible for an outsider to know about the contexts to which they apply. Thus, in an indeterminate fashion for research and educational purposes, they tend to infer generic factors related to success from particular cases. Real case studies of consultants' intervention allow us to relativize the universal character of these success factors. Not only are all these criteria rarely found together in actual situations, but some of these criteria could well be mutually contradictory. For a teacher, it seems that the nuances raised by a qualitative analysis, based on relational and processual dimensions of consulting practices could be rich in lessons for students hoping for a career in consulting. This approach could prevent their interventions becoming problems rather than solutions (Shapiro & al., 1993).

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