Tim Kedzia
Prof. Dr. phil. Bettina Schreyögg
Yves Michaelis
Prof. Dr. med. Felix Hoffmann LLM

Organisational floristics and happiness management in the healthcare sector

Evaluation of a new role concept

Organizational Floristics and Happiness Management in Healthcare – Evaluation of a New Role Concept

This study evaluated the role of "organizational floristics" or "happiness management." The focus was particularly on the activities and tasks associated with this role, as well as its influence on a company and its employees. For this study, organizational florists or happiness managers (hereafter referred to as OF&HM) were interviewed, along with an individual who implemented this role. The interviews were transcribed verbatim and subjected to qualitative content analysis using the Mayring method. The OF&HM had diverse backgrounds and qualifications. Through their work, they create better conditions for employees, while also facilitating individual development and promoting the advancement and professionalization of the company's work culture. Given the demographic change and the precarious state of the healthcare system in the face of ongoing challenges, a structured analysis and adaptation of working conditions appears to be crucial. OF&HM can serve as a starting point to provide employees with attractive frameworks that foster a positive work environment, promote a culture of appreciation, and facilitate collaborative development.

Keywords

Organizational floristics, self-organization, purpose, personnel development, organizational culture

An important factor for the intrinsic motivation of employees is the purpose of their own work. For example, if a company primarily aims to create added value for society and this purpose coincides with the personal purpose of the employees, then this has a positive influence on work motivation. However, if the company pursues a purpose that is not aligned with the purpose of the employees, for example if the company is intended to serve the wealth accumulation of the owners and the service is only a means to an end, then this has a dampening effect on motivation. (Dinos et al., 2016; Teichmann & Hüning, 2018) A purpose-driven company is a company that aligns all decisions and activities with the achievement of its purpose. The private interests of the owners are secondary to the achievement of the purpose, which is so firmly anchored in the articles of association that it can no longer be changed by the owners alone. (Hoffmann, 2024; Hoffmann & Schumacher, 2023; Rey, Velasco & Almandoz, 2019).

>> In view of the profound changes in the world of work, innovative organisational models are increasingly finding their way into the care sector, particularly those based on the principles of New Work and which promote the self-organisation of care staff. If all employees are aware of the purpose, they can independently and autonomously align all activities with it and thus influence the organisation's structures and processes. Three prerequisites must be met for this: Knowledge, motivation and the ability to act. The degree of success depends not least on the degree to which the agile way of working is established. (Meyer et al., 2025; Rey, Bastons & Sotok, 2019).

Change processes in organisations lead to orientation and uncertainty at the same time. The transformation to a purpose-driven organisation may have a number of consequences. Conflicts can arise within the team as a result of personnel development. These conflicts need to be resolved and then have the potential to create better team cohesion. The management of conflicts in the company is a learning process that is accompanied by personnel development and should be actively shaped. (Starker, 2023) It has been shown that self-organised care teams in the Born healthcare network are able to make decisions independently, shape processes and continuously develop themselves further. The key factors for success include suitable structural framework conditions, including appropriate conflict management options, a high degree of personal responsibility on the part of employees and a pronounced agile attitude. (Meyer et al., 2025) The term 'organisational floristics' was coined by the Born healthcare network while it was in a restructuring phase. The term makes a metaphorical reference to traditional floristry, as organisational floristry has the task of bringing the employees and the company to their full potential. The tasks and role of organisational florists (OF) are similar to those of happiness managers (HM), in the understanding that happiness management in an organisation should contribute to the well-being and growth of all those involved. For this reason, both terms are used synonymously in this paper. Although there are individual studies on happiness management, the data available in the healthcare sector is sparse and is largely limited to the factors influencing job satisfaction, but not happiness management per se. (Elías Zambrano et al., 2021; Gray et al., 2019; Ravina-Ripoll et al., 2021; Ripoll et al., 2021) There are no studies on the topic of happiness management in German-speaking countries. The term organisational floristics does not appear in previous Medline-listed publications (as of July 2025).

The role model of organisational floristry was evaluated as part of this study. The company evaluated is an outpatient nursing service that provides outpatient intensive care and has implemented organisational floristry as a new role in recent years as part of a comprehensive restructuring process. This role description resulted from the transformation process and is intended to take account of the employees' need for development and self-organised teamwork. In addition, two other people were included in the study who work as happiness managers in the healthcare sector.

The aim of this survey is to identify which tasks fall within the remit of the OF&HM, which issues employees turn to the OF&HM

with and which options are available to the OF&HM to enable the further development of the company and its employees. In addition, the aim is to evaluate how the three companies analysed interpret the role and implement it in their operations. In addition to examining the aspects of employee development, this study will also look at the impact of the OF&HM on the company itself.

Methodology

As part of this study, individuals who work as OF&HMs in the healthcare sector or who have had a significant influence on the implementation of this role were included and interviewed in a qualitative interview. The interviews were transcribed verbatim and subjected to a qualitative content analysis according to Mayring.

Creation of the interview guide

An interview guideline was drawn up as an orientation for the interview, which best reflects the research questions. The interview guide serves to structure the interview, although it can be deviated from if necessary. The various aspects from career entry, including previous experience and qualifications, to everyday working life and the results were mapped. The following questions were used:

- How did the interviewee come to the relevant role?
- What previous training and qualifications did they have?
- What does everyday working life look like, if it can be mapped?
- How is the OF&HM offer accepted in the company?
- What tools and strategies are used?
- What are the results of the OF&HM's work?

Inclusion criteria for the interview partners

The study included people who work as OF&HMs in the healthcare sector or were significantly involved in the implementation of this role in the company. The persons consented to the interview, the subsequent content analysis and its publication.

Conducting the interviews

The interviews were conducted as a video conference (Zoom or Microsoft Teams). After the welcome and introductory words, the video recording was started. Following the interview, it was transcribed verbatim using the online software sonix.ai (https://sonix.ai). After the transcription, a manual check was carried out to ensure correct transcription, and minor transcription errors were corrected in some places.

Analysing the interviews

The analysis is based on six full-length interviews, which were conducted in November 2022 and then transcribed in full. The sound quality was good in five cases and of moderate quality in one case. This interview had to be cancelled and continued as an email questionnaire. The transcripts and the answers to the e-mail questionnaire were subjected to a qualitative content analysis according to Mayring; inductive categorisation was used. (Mayring, 2022).

Results

A total of six interviews were conducted and analysed. Four of the interviewees were female and two were male. The interviewees were between 31 and 46 years old and all work in companies in the healthcare sector. Three of the interviewees work as OF&HMs in an outpatient care service, another person works for a medical device manufacturer and another person works in a maximum care hospital. In addition, the managing director of a nursing service was interviewed, who helped to develop the role model there.

Job description

The role of the OF&HM is not a fixed construct and is distanced from being a personnel manager. The role is seen more as a personnel developer and creates framework conditions under which employees can perform optimally. OF&HMs promote communication within the team and act as the first point of contact for questions of all kinds.

OF&HM are agile project leaders, have basic knowledge of collegial leadership and are members of both the flourishing and transformation circles. In one of the companies surveyed, the flourishing circle serves as an organisational instrument for the upcoming activities of the OF in the context of personnel development. The transformation circle, on the other hand, deals with the ongoing development of the company. The OF&HM concept is being created from scratch and in some cases completely new tools are being developed for it.

Teams are supported in improving work organisation and managers in optimising their business areas. Depending on the interviewee, individual coaching sessions are rare or the order of the day, which can be attributed to the different specialisations and previous qualifications. In addition, an attempt is made to identify the strengths of employees and consideration is given to how good framework conditions can be created for colleagues.

Another task of the OF&HM is to represent the staff vis-à-vis the management with regard to conflict management and demanding the necessary personnel development. In contrast to the activities of a works council, the focus here is not on compliance with legal requirements, but on the individual promotion and development of employees. The function of caring is defined as a large part of the OF&HM role. In some companies, OF&HMs are also present at the first interview with applicants and represent the company, as well as taking on some HR tasks (e.g. supporting onboarding, but also contract management).

OF&HM work with systemic methods, especially in the personnel development of work teams. Structures and processes are developed in workshops. Employees also have the opportunity to point out challenges from their point of view and formulate change requests. All interviewees attached great importance to the workshops. Feedback meetings were established as an early warning system. These are intended to determine the mood within the staff and identify opportunities for improvement and development potential. At the end of the year, a reflection on the past year is often carried out and the measures that can be offered are agreed with superiors.

When describing their work as OF&HMs, all interview participants clearly emphasised that there is never the same working day. Everyday work in the OF&HM is characterised by meetings both with each other and with other people from the company (e.g. employees, management, HR department) and the further deve-

lopment of the organisation and staff. In addition, many enquiries received by email are processed, a lot is organised and presence is shown in the company. Previous experience and networking help to manage the tasks. OF&HM ensure that change takes place by identifying and taking account of needs.

Challenges and solution strategies

It was necessary to develop new formats for personnel development for the work as OF&HM in order to meet the requirements of the changing world of work. In addition to personnel development, the challenges were often of an organisational nature in order to simplify day-to-day operations for employees. Another major challenge for OF&HM is to deal with conflicts arising from the new way of working. These challenges arose directly from the work of OF&HM; previously, these problems could not manifest themselves in all their diversity due to the usual hierarchical structure.

The tools and strategies used are orientated towards the current needs of the colleagues. Rosenstiel's model of the motivational foundations of behaviour in organisations (Rosenstiel, 1975) is given high priority. The organisational challenges, which range from providing a fruit basket and organising venues for meetings to adapting structures and processes, can often be achieved through good networking. Further training in systemic coaching for OF&HM was mentioned as a solution strategy in personnel and conflict management. A coaching and systemic attitude could become a new way of leading. There are also plans to introduce active stress management.

Perception within the company

It was particularly emphasised that employees both approach the OF&HM and the OF&HM approaches the employees. In some companies, the OF&HM is assigned to the HR department and is involved in personnel requirements planning and recruitment. One of the companies surveyed started with two organisational florists in May 2020, but they do not take part in job interviews.

There is rarely negative feedback on the work of OF&HM, colleagues react very openly to the offer of OF&HM. It was stated that they had received concrete, positive feedback on the work as OF&HM. It was also stated that there are too few OF&HMs. Colleagues who have already had contact with OF&HMs recognise the benefits.

The OF&HM role attracts applicants, but has not been able to bring about any noticeable changes in employee turnover in individual companies, which in one example could be due to the 'start-up' type of company.

The OF&HMs stated that they had seen results from their work and that conflicts had become more visible since the introduction of the OF&HM. The introduction of OF&HM had also led to employees leaving the company because the conflicts that had been disclosed either could not or did not want to be resolved conclusively.

Qualifications and previous professional experience

The qualifications and previous professional experience of all interviewees varied. Previous training and qualifications in the fields of industrial engineering, people and culture, education, health and nursing, systemic counselling training, work in management consulting, cultural engineering and educational science were stated. The organisational florists come to this role with a wide range of previous experience. The highest qualification is a Master's degree.

The interviewees also stated that they had undergone further training in the areas of coaching, leadership, transformational coaching and systemic counselling, in some cases on a part-time basis.

Other personal experiences and skills had been helpful, such as 'thinking like an engineer', autodidactics, team-building tasks from an association as well as organisational talent, structure and flexibility were highlighted.

The interviewees stated that they had either developed as OF&HMs within their organisation or had been recruited through job advertisements.

Discussion

The healthcare sector is facing major challenges. The transformation of the healthcare system does not only relate to the digitalisation of existing care processes, but also includes fundamental changes to care processes and the associated management structures and staff qualifications.

The decision-making structures in the healthcare sector are often hierarchical and decisions are influenced to a large extent by regulatory requirements. Both hierarchies and excessive regulation can slow down the transformation process.

Agile structures, on the other hand, have the potential to have a positive impact on the transformation of the healthcare sector, as the self-organisation of teams enables faster decision-making processes. However, the agile way of working may favour the emergence of conflicts that need to be resolved so that they do not have an inhibiting effect on change processes and thus counteract the advantages of the agile way of working. (Wiens, 2021)

This is precisely where OF&HM comes in and aims to resolve conflicts within a team and promote teamwork and an open communication culture, which also acts as conflict prevention. Other tasks may include promoting the personal development of individual team members and team development itself, which can boost team performance.

In the coming years, the baby boomers will reach retirement age. (Sange & Wulffen, 2022) This will mean that there will be fewer healthcare staff available, but the number of people requiring care will increase. This will lead to a further shortage of skilled workers, who will base their job search on the quality of the working environment, among other things. This will also require strategies for increasing efficiency in the healthcare sector in a personnel-neutral manner.

In times of high staff turnover, high sickness rates and the increasing importance of work-life balance in the healthcare sector, there seems to be an urgent need to take measures to retain employees. According to the Hospital Report 2021, one in six employees is changing or planning to change jobs. (Klauber et al., 2021) In view of demographic change and the associated shortage of skilled workers, the development and implementation of an employee-centred work culture appears to be essential.

The statements made in this study are limited, as only a rela-

tively small number of people were surveyed (six respondents). Many of the findings are based on experience and could lead to different results in subsequent studies. However, the role model is quite new and hardly widespread, so there are currently only a few OF&HMs in the healthcare sector who could also have been included in the survey.

Further research and continuous development of this role model is required in order to develop it into an independent occupational profile. Structured qualification programmes and training curricula should be established

Conclusion

1 OF&HM can help to make work subjectively more pleasant, as employees can be made to feel valued and, depending on how OF&HM is organised, it can also have an objectively relieving effect on employees through improved cooperation.

2 Through open communication, established formats and the structuring of team communication, OF&HM can ensure that conflicts are disclosed and worked through, thereby improving cohesion within the team and creating a better working atmosphere.

3 Thanks to its highly variable design, OF&HM can be implemented in almost any company and ensure greater motivation and employee satisfaction.

4 Structured qualification paths should be created for this role or job profile. <<

Literature

Dinos, E., Lash, R. & Feldman, J. (2016). People on a mission. Korn Ferry Institute.
Elías Zambrano, R., Jiménez-Marín, G., Galiano-Coronil, A. & Ravina-Ripoll, R. (2021). Children, Media and Food. A New Paradigm in Food Advertising, Social Marketing and Happiness Management. International journal of environmental research and public health, 18(7). https://doi.org/10.3390/ijerph18073588
Gray, P., Senabe, S., Naicker, N., Kgalamono, S., Yassi, A. & Spiegel, J. M. (2019). Workplace-Based Organizational Interventions Promoting Mental Health and Happiness among Healthcare Workers: A Realist Review. International journal of environmental research and public health, 16(22). https://doi.org/10.3390/ijerph16224396
Hoffmann, F. (2024). Purpose als Grundlage für eine werteorientierte Unternehmenskultur in der Intensiv- und Notfallmedizin. In S. Kluge, M. Sander, F. Walcher & S. Schwab (Hrsg.), DIVI Jahrbuch: Bd. 14. DIVI Jahrbuch 2024/2025: Schwerpunkt: New Work Hot Topic: KI (1. Auflage, S. 42–47). MWV Medizinisch Wissenschaftliche Verlagsgesellschaft.
Hoffmann, F. & Schumacher, H. (2023). Purpose Economy im Gesundheitswesen: Begriffsdefinition und Rechtliche Gestaltungsmöglichkeiten. In F. Hoffmann, C. Dittmer & N. Löber (Hrsg.), Purpose! Praxishandbuch für die werteorientierte Transformation des Gesundheitswesens (1. Auflage). MWV Medizinisch Wissenschaftliche Verlagsgesellschaft.
Klauber, J., Wasem, J., Beivers, A. & Mostert, C. (Hrsg.). (2021). Krankenhaus-Report 2021: Versorgungsketten – Der Patient im Mittelpunkt. Springer Nature.
Mayring, P. (2022). Qualitative Inhaltsanalyse: Grundlagen und Techniken (13. Neuausgabe). Julius Beltz GmbH & Co. KG.
Meyer, A., Schreyögg, B. & Hoffmann, F. R. (2025). Selbstorganisierte Teams in der Pflege – Eine empirische Untersuchung am Beispiel des Born-Gesundheitsnetzwerks. Gesundheitsökonomie & Qualitätsmanagement, 30(03), 137–142. https://doi.org/10.1055/a-2538-2014
Ravina-Ripoll, R., Nunez-Barriopedro, E., Almorza-Gomar, D. & Tobar-Pesantez, L.-B. (2021). Happiness Management: A Culture to Explore From Brand Orientation as a Sign of Responsible and Sustainable Production. Frontiers in psychology, 12, 727845. https://doi.org/10.3389/fpsyg.2021.727845
Rey, C., Bastons, M. & Sotok, P. (Hrsg.). (2019). Purpose-driven Organizations. Springer International Publishing. https://doi.org/10.1007/978-3-030-17674-7
Rey, C., Velasco, J. S. C. & Almandoz, J. (2019). The New Logic of Purpose Within the Organization. In C. Rey, M. Bastons & P. Sotok (Hrsg.), Purpose-driven Organizations (S. 3–15). Springer International Publishing. https://doi.org/10.1007/978-3-030-17674-7_1
Ripoll, R. R., Rodríguez, M. J. F. & Sánchez, J. A. L. (2021). Certification Happiness Management: an integral instrument for human resources management in post-COVID-19 era. International Journal of Business Environment, 12(3), 287. https://doi.org/10.1504/IJBE.2021.116606
Rosenstiel, L. v. (1975). Die motivationalen Grundlagen des Verhaltens in Organisationen: Leistung und Zufriedenheit. Wirtschaftspsychologische Schriften der Universitäten München und Augsburg: Bd. 2. Duncker & Humblot.
Sange, R. & Wulffen, K. von. (2022). Die Generation der Babyboomer in Deutschland. In R. Sange & K. von Wulffen (Hrsg.), Senior Social Entrepreneurship (S. 1–9). Springer Fachmedien Wiesbaden. https://doi.org/10.1007/978-3-658-34512-9_1
Teichmann, S. & Hüning, C. (2018). Digital Leadership – Führung neu gedacht: Was bleibt, was geht? In F. Keuper, M. Schomann, L. I. Sikora & R. Wassef (Hrsg.), Disruption und Transformation Management (S. 23–42). Springer Fachmedien Wiesbaden. https://doi.org/10.1007/978-3-658-19131-3_2
Wiens, M. (2021). Selbstorganisation in der Pflege: Das Born-Gesundheitsnetzwerk. Neue Narrative(12), 36–45.

Authors' declaration

The authors declare that there are no conflicts of interest.

Citation

Kedzia et al.: „Organisational floristics and happiness management in healthcare - evaluation of a new role concept“, in: „Monitor Versorgungsforschung“ (05/25), pp. 81–85. http://doi.org/10.24945/MVF.05.25.1866-0533.2757

Tim Kedzia ORCID: 0009-0000-5676-7022
ist Assistenzarzt für Anästhesiologie an den Knappschaft Kliniken Universitätsklinikum Bochum mit vorheriger Ausbildung zum Gesundheits- und Krankenpfleger.
Kontakt: Tim.Kedzia@rub.de



Prof. Dr. phil. Bettina Schreyögg ORCID: 0009-0008-8175-1346
ist Professorin für Human Resources und Coaching an der APOLLON Hochschule der Gesundheitswirtschaft in Bremen sowie Inhaberin von Dr. Schreyögg Coaching in Hamburg. Sie studierte Psychologie sowie Erziehungswissenschaften an der TU Berlin, der Humboldt-Universität zu Berlin und der Stanford University in Palo Alto. Sie ist Mitherausgeberin der Zeitschrift für Personal- und Organisationsentwicklung in Einrichtungen der Lehre und Forschung. Kontakt: Bettina.Schreyoegg@apollon-hochschule.de



Yves Michaelis ORCID: 0009-0009-8617-2885
ist systemischer Organisationsentwickler mit Schwerpunkt auf traumainformierter Transformation. Er begleitet Führungskräfte und Organisationen beim Aufbau resilienter Strukturen und emotional intelligenter Arbeitsumfelder mit Fokus auf nachhaltigem Wandel.
Kontakt: Y.Michaelis@me.com



Prof. Dr. med. Felix Hoffmann LLM ORCID: 0000-0002-5728-672X
ist Facharzt für Orthopädie und Unfallchirurgie sowie Professor für Digital Health an der APOLLON Hochschule der Gesundheitswirtschaft in Bremen. Ein Schwerpunkt seiner Forschung ist die Gesundheitssystemgestaltung und insbesondere die Purpose-Economy. Er ist Vorsitzender des Netzwerks Purpose:Health e. V. Kontakt: Felix.Hoffmann@uni-duesseldorf.de

