Medical Leadership and the unspoken Culture: Lessons Post Francis.

Vijaya Nath
Assistant Director
Leadership
The King’s Fund
You are hiring A Clinical Leader (Post Francis)

- Discuss as a small group/made up team what the qualities are of a great ‘Clinical Leader’
Leadership is hard and Clinical leadership has more challenges than first appears

• What are the Leadership challenges for us as Clinical Leaders across the system in today’s NHS
Post Mid Staffs Robert Francis QC reminds us that

“most healthcare in this country is delivered in places like Stafford which are bypassed by motorways taking people to where they think are more important places - which are lived in by ‘ordinary people’ which is what the service is there for “
Lessons from Mid Staffordshire NHST

Mid Staffordshire NHST

› Serves patient population of 276,500
› Figure of 400 to 1,200 patients died after suffering routine neglect by hospital staff between 2005 and 2009.
‘A Call to Arms’
VNath & J Clark

- Better Engagement & Driving Improvement
- Changing the culture/practice
- Engaging Teams towards common objective
- Professionalising Leadership/Management
- Custodians of Medical Care

Figure 1: The Cultural Web
In terms of personal hygiene Mrs C11 recalls that her husband was infrequently washed and given clean clothes despite frequently soiling himself. She recalls that her husband had sores on his bottom and on his heels. She states that her husband rang the bell for toileting assistance but by the time the nurses arrived it was too late. She reports that she used to ring the bell for 20 minutes before it was responded to. Mrs C11 states that the bed linen was not changed as frequently as it should
The following day Mrs D11’s mother visited to find Patient D11 slumped in a chair, unconscious with blood coming out of his mouth. She ran out into the ward to get assistance but there did not appear to be any staff around. Eventually staff appeared and activated the panic button and a crash team arrived and he was stabilised. The staff did not know how long Patient D11 had been in this hypoglycaemic state. The family
What stories do you hear about patient care in your domain?

Question 1:
Write briefly about an example of patient care in which you think clinicians could do better?
What stories do you hear about patient care in your domain?

Question 2: Write briefly about examples of great patient care, stories you feel proud of.
'Too many consultants at Mid Staffs kept their heads down instead of speaking out when things went wrong and failed to take a lead in promoting change, the report concluded.'
'many clinicians feel disengaged from management and are concerned that their clinical advice regarding best treatment for patients can be overruled by non-clinical managers'
Meeting Sphere

What would you prescribe to promote Clinical engagement in management and leadership?
‘Concerns from trainees must be heeded’
Dr Molyneux said: 'It is therefore more important than ever that trainees are supported when raising concerns, and that they are protected from the consequences, such as legitimate fears about their future careers.'
Lessons for the NHS and leaders in health

› Staffordshire patient deaths 'could be repeated' unless NHS changes
› (culture change)
Meeting Sphere

**Audience Discussion captured in session**

What in your opinion would bring about the culture change that is being called for?
‘Culture eats Strategy for breakfast’
Drucker

What do you want to create in NHS on your watch?
› What stories?
› What outcomes?
› What will the impact be on patient care after ‘your turn...’

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Ideas that change health care
On a scale of 1-10, (1 being low and 10 being high) please indicate your commitment developing leadership skills, knowledge and attributes within ‘Doctors’ in particular in your organisation:
Patient-Centred Leadership: Rediscovering our purpose.

**Actions**

» Boards and Clinical Leaders (across system) together create culture, needs alignment at all levels

**Culture**
Patient-Centred Leadership: Rediscovering our purpose.

**Actions**
Bohmer (2012) states: ‘Speaking clearly, inquiring respectfully, acting decisively, demonstrating humility and fallibility – these are the simple and essential elements of leadership in a clinical setting.’
Patient-Centred Leadership: Rediscovering our purpose.

**Actions**

- Revalidation offers a chance for medical leaders to renew workforce values and strengthen competence and professionalism. But they need support to make revalidation a priority and develop the nuanced skills needed to have difficult conversations with other doctors (Nath 2013).
Patient-Centred Leadership: Rediscovering our purpose.

**Actions**

› ‘moving away from generic leadership development provided through large programmes delivered off site to more focused and tailor-made support’

› ‘capitalise on the imaginative use of web and social media- technology’
Contact Details

Vijaya Nath
Assistant Director, The King’s Fund
Email: v.nath@kingsfund.org.uk
Website: www.kingsfund.org.uk
Twitter:@ VijayaNath1