Leadership & Talent Management in NHS Scotland
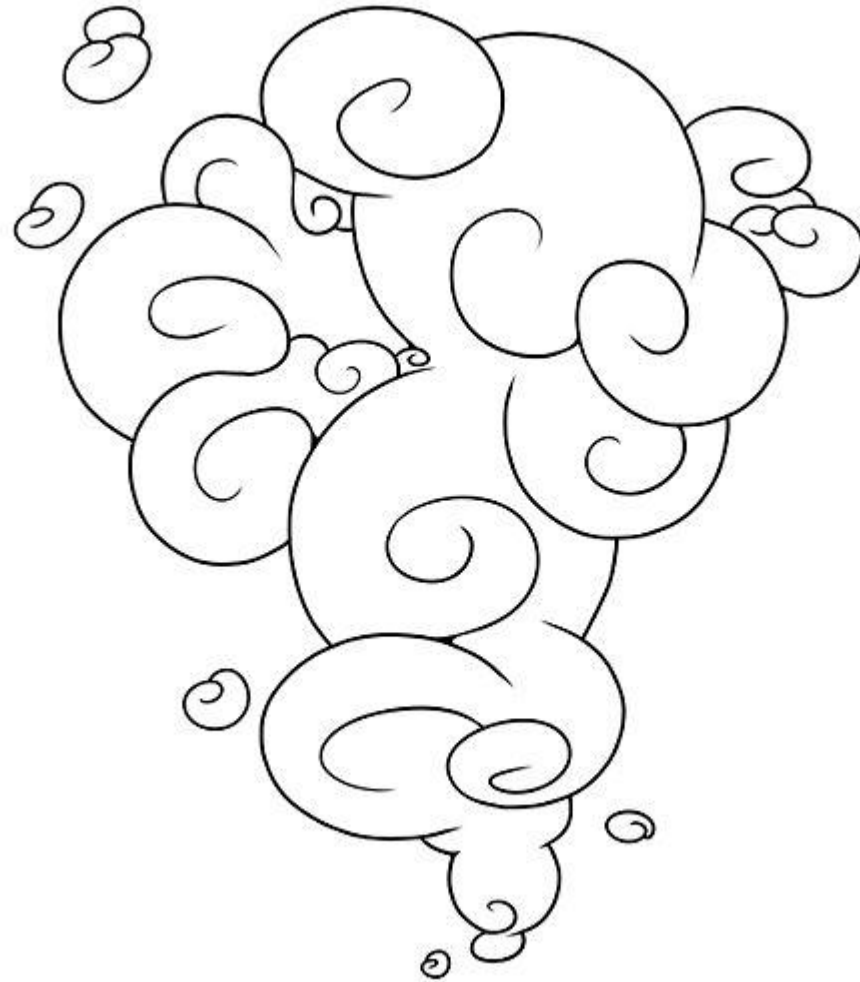
Dave Caesar
National Clinical Advisor to CMO
Chair of project lift team, NHS Scotland
Senior Fellow FMLM

project lift

Is it a "thing"?

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Defined by our context?

- First era: **Physical**

- Second era: **Intelligence**

- Third era: **Competency**
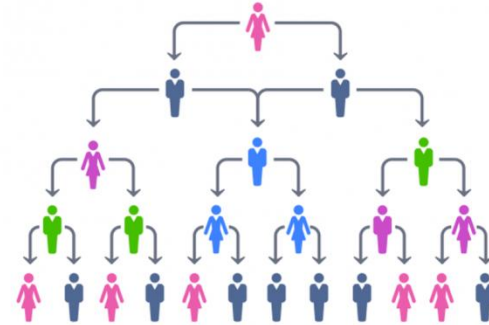
- Fourth era: *Potential*

Why different now?

- Changing expectations
- Information exchange
- Hierarchy erosion
- Dispersal of ownership
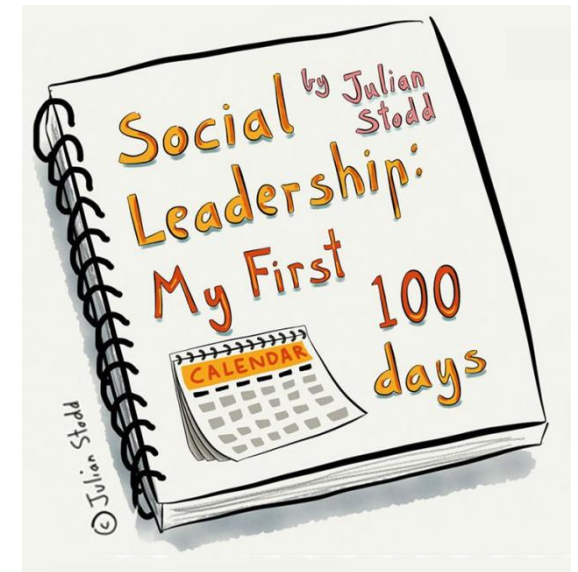- Globalisation
- Dissonance of compact?

project lift
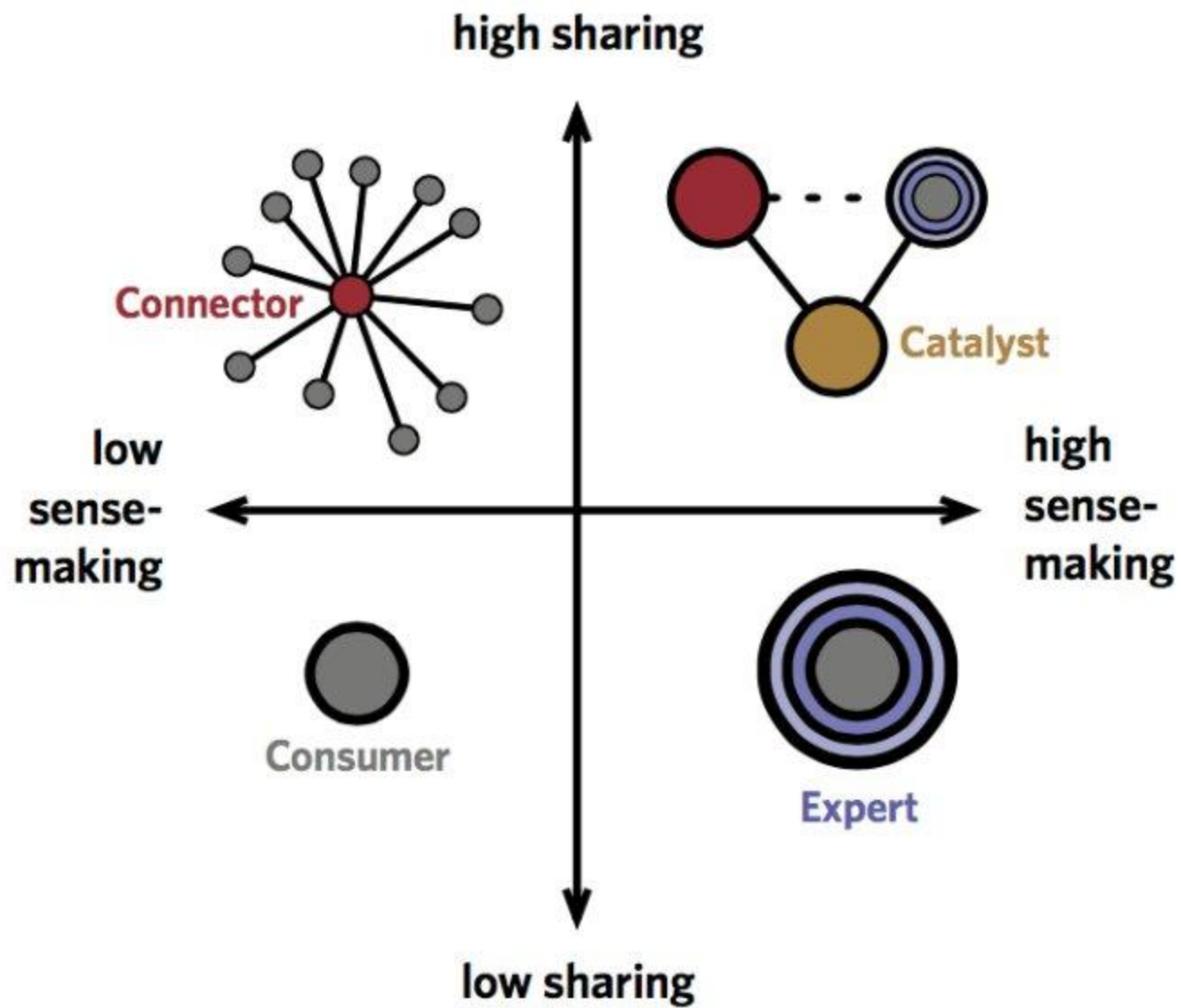
Are we looking for the right stuff?

- Formal authority
  - Positional influence
  - Hierarchal

- Social authority
  - Connectivity
  - Engagement
  - Networks
  - Sense-making

HIERARCHICAL ORGANIZATIONS

© Jacob Morgan (thefutureorganization.com)

Social by Julian Stodd
Leadership:
My First 100 days
CALENDAR
© Julian Stodd

high sharing

Connector

Catalyst

low sense-making

high sense-making

Consumer

Expert

low sharing

The skills for 2030

Judgment and decision making: Considering the relative costs and benefits of potential actions to choose the most appropriate one.

Fluency of ideas: The ability to come up with a number of ideas about a topic (the number of ideas is important, not their quality, correctness, or creativity).

Originality: The ability to come up with unusual or clever ideas about a given topic or situation, or to develop creative ways to solve a problem
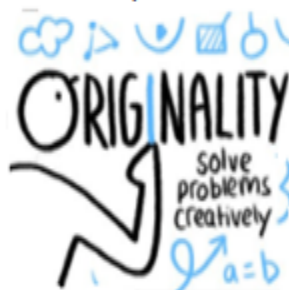
Learning strategies: Understanding the implications of new information for both current and future problem-solving and decision-making.

Active learning: Learning strategies—selecting and using training/instructional methods and procedures appropriate for the situation when learning or teaching new things.

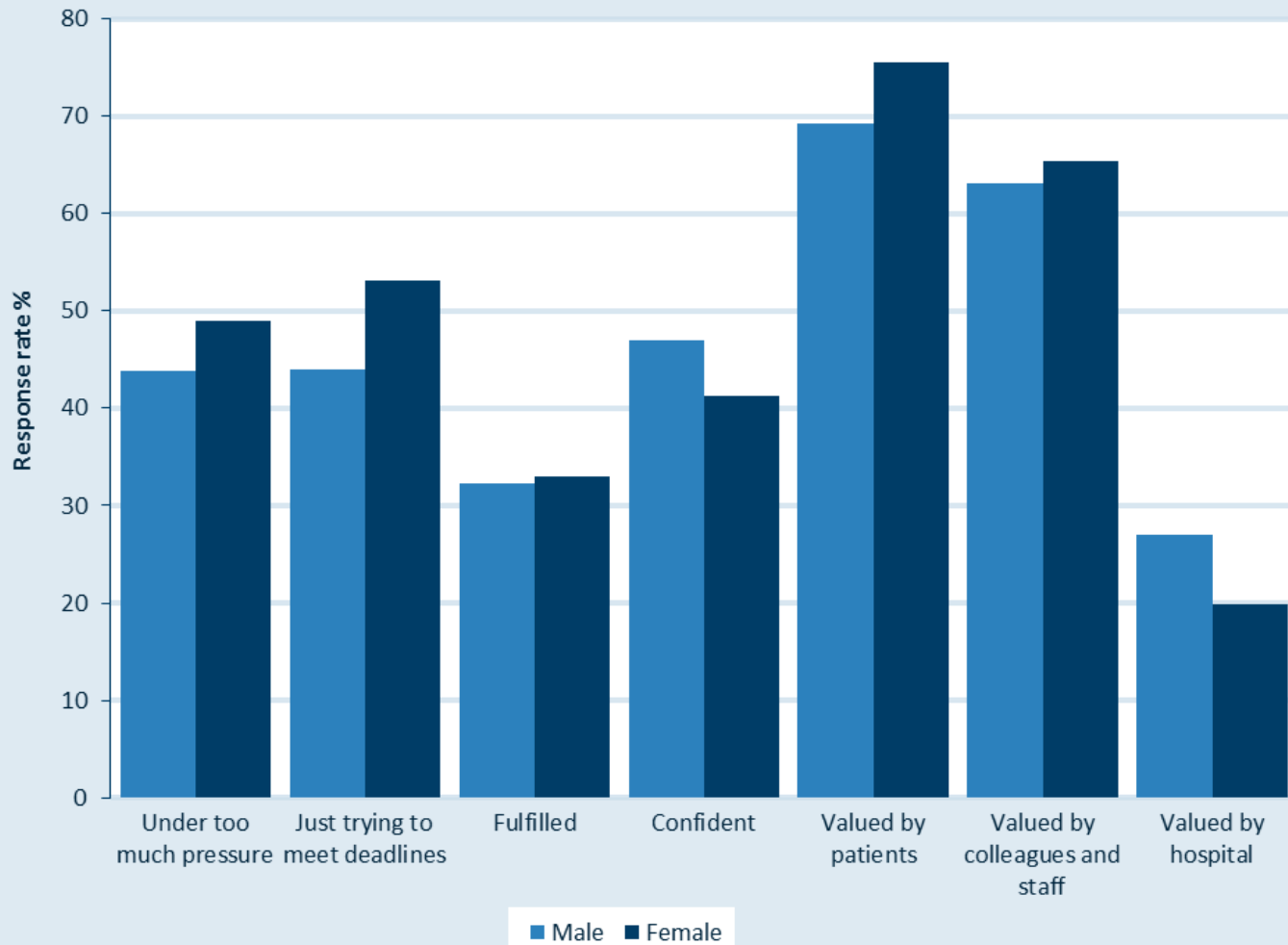Nesta, Pearson and the Martin Oxford School: The future of skills: employment in 2030

#S4CA @Sch4Change

Graphics by @scriberian

Why does this matter?

In work do you feel, >50% of the time any of the following…
Focus on physicians: Wellbeing Survey

NHS cultures for high quality care

1. An inspirational vision of high quality care

2. Clear aligned goals at every level with helpful feedback

3. Good people management and employee engagement

4. Continuous learning and quality improvement

5. Enthusiastic team-working, cooperation and integration

West, Baker, Dawson, Dixon Woods, et al. (2013) "Quality and safety in the NHS." *Lancaster, University of Lancaster.*

Direction, Alignment and Commitment (DAC)

How is DAC created in different cultures?

Center for
Creative
Leadership

	Direction	Alignment	Commitment
	How do we achieve agreement on direction?	How do we coordinate our work so that all fits together?	How do we maintain commitment to the collective?
Interdependent	Agreement on direction is the result of **shared exploration** and the **emergence** of new perspectives.	Alignment results from **ongoing mutual adjustment** among **system-responsible** people.	Commitment results from **engagement in a developing community.**
Independent	Agreement on direction is the result of **discussion, mutual influence,** and **compromise.**	Alignment results from **negotiation** among **self-responsible** people.	Commitment results from **evaluation of the benefits for self** while benefiting the larger community.
Dependent	Agreement on direction is the result of willing **compliance** with an authority.	Alignment results from **fitting into** the expectations of the **larger system.**	Commitment results from **loyalty** to the source of authority or to the community itself.

People management and engagement

- Staff views of leaders → patients' views of care quality
- Staff satisfaction → patient satisfaction
- High work pressure → less compassion, privacy, respect.
- Poor staff well-being → poorer CQC performance (and £)
- Good HRM practices → lower patient mortality

http://www.dh.gov.uk/health/2011/08/nhs-staff-management/

Employee Engagement in the NHS

Leadership
Supervisors' Support
Team Working
Work Pressure
Feeling valued by colleagues

→

Overall Engagement

- **Advocacy**
- **Intrinsic Engagement**
- **Involvement**

→

Employee Reactions
Health and Well-being
Stress

Hospital Performance
Quality of Services
Financial Performance
Absenteeism
Patient Mortality
Patient Satisfaction
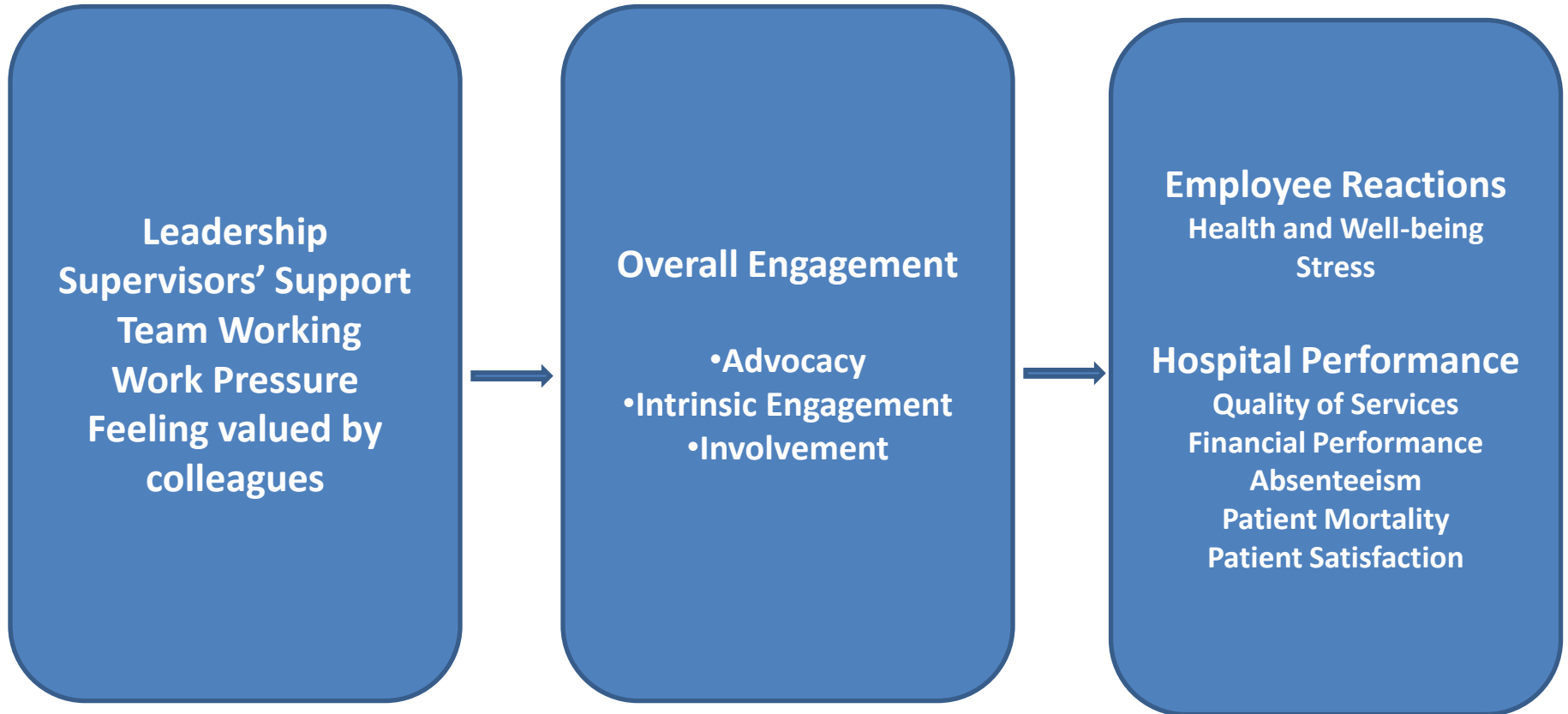
Positive emotion and culture

- Leader positivity – optimism, humour, compassion
- Caring for staff e.g., Schwartz Rounds
- Dealing with aggression and poor performance?

The
Point of Care
Foundation

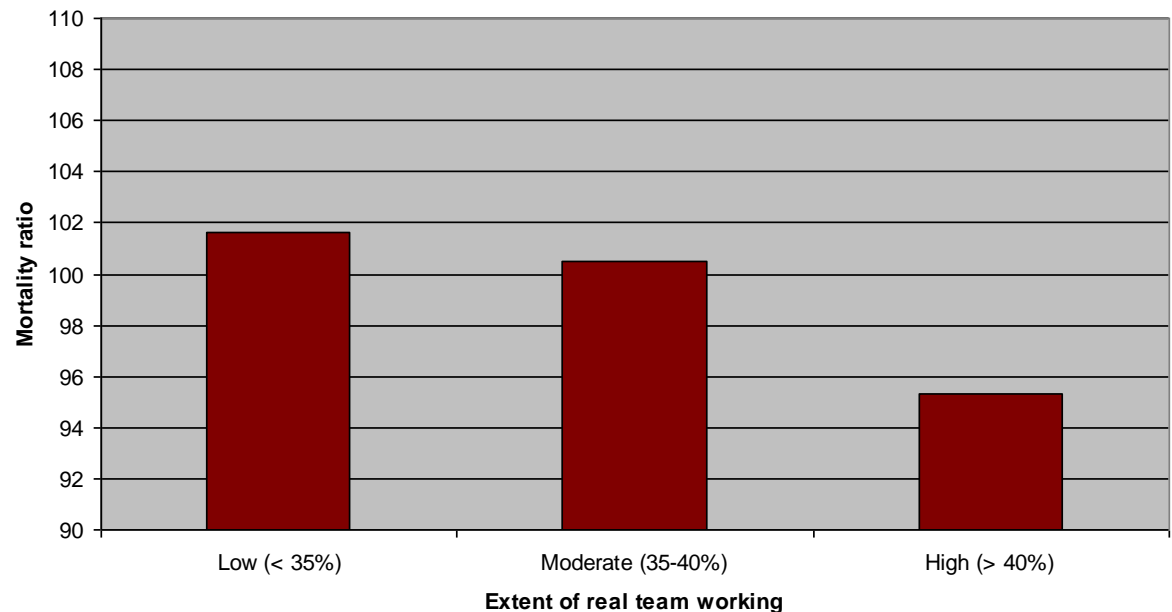the schwartz center
FOR COMPASSIONATE HEALTHCARE

Team Working

'I define a team as an enthusiastic set of competent people who have clearly defined roles, associated in a common activity, working cohesively in trusting relationships, and exercising personal discipline and making individual sacrifices for the good of the team'.

**Bob Quinn, Center for Positive Organizations, University of Michigan**

Patient mortality

- 5% more staff working in real teams associated with 3.3% drop in mortality rate (*p* = .006)

- For an "average" acute hospital, this represents around 40 deaths per year

Lyubovnikova, J., West, M. A., Dawson, J. F., & Carter, M. R. (2015) 24-Karat or fool's gold? Consequences of real team and co-acting group membership in healthcare organizations, European Journal of Work and Organizational Psychology, 24:6, 929-950

Key elements for effective team working

- Clear, agreed vision and challenging objectives

- Role clarity

- Positivity, optimism, cohesion, compassion

- Effective communication and constructive debate

- Enthusiastic and supportive inter-team and cross-boundary working
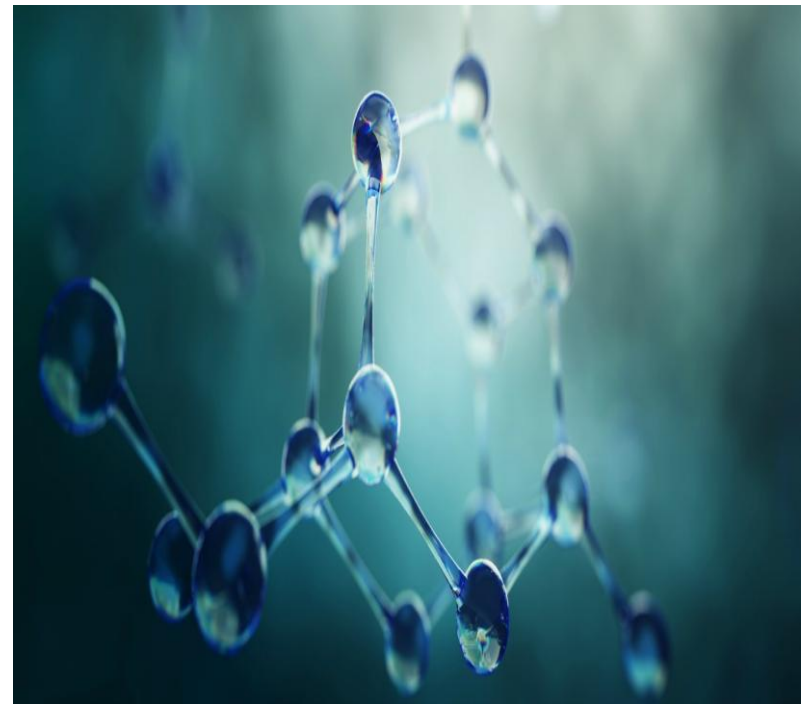
Team Mindfulness and Conflict

- Awareness and attention to present events
- Experiential non-judgemental processing of team experiences, events, interactions *leads to …*
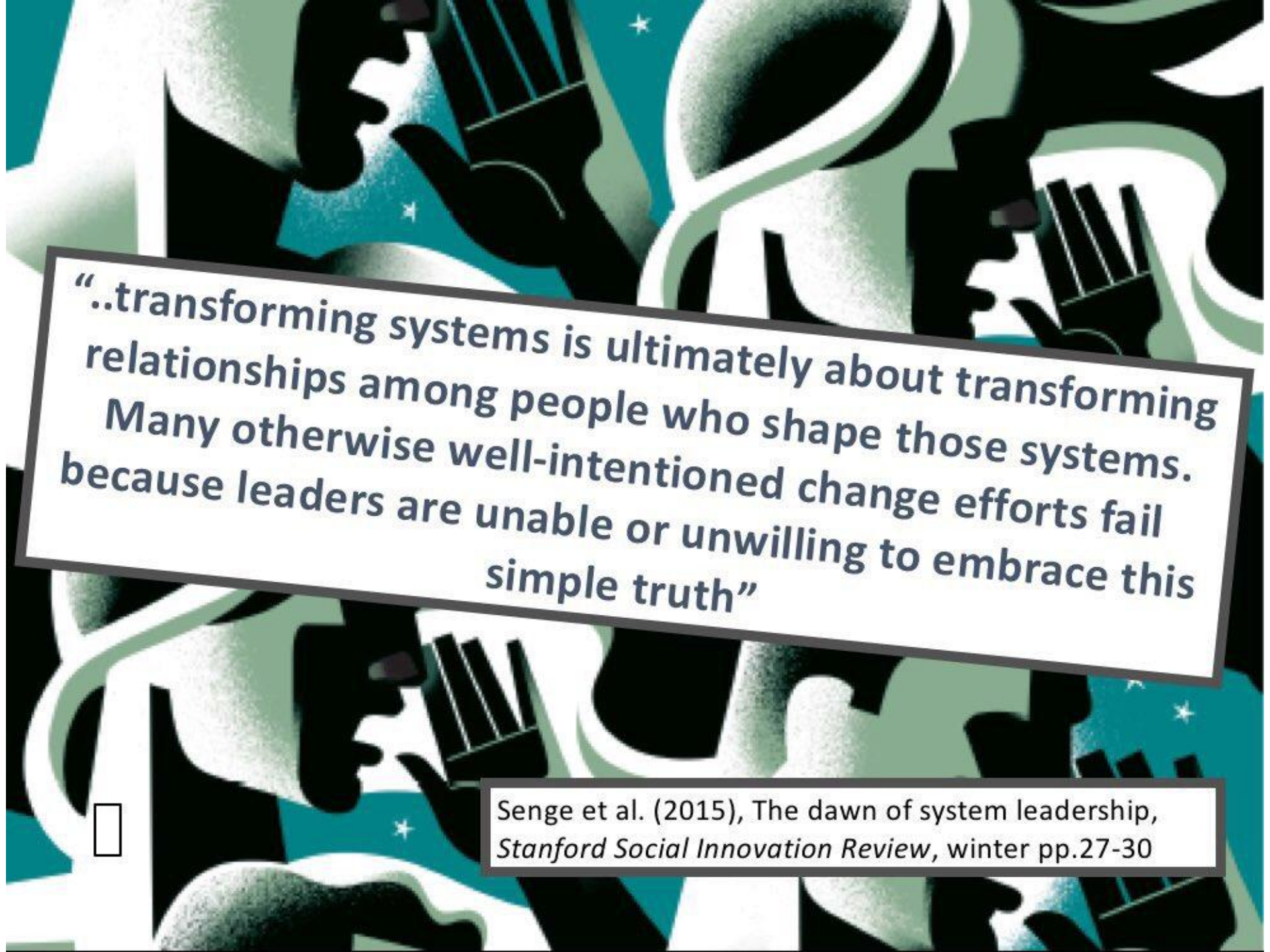- … less relationship conflict, spill-over from task conflict and undermining

Yu, L., & Zellmer-Bruhn, M. (2017). Introducing team mindfulness and considering its safeguard role against conflict transformation and social undermining. *Academy of Management Journal*, amj-2016.

'Compassionate leadership for compassionate health services'

- *Attending:* paying attention to staff – 'listening with fascination'
- *Understanding:* shared understanding of what they face
- *Empathising*
- *Helping:* taking intelligent action to serve or help

"..transforming systems is ultimately about transforming relationships among people who shape those systems. Many otherwise well-intentioned change efforts fail because leaders are unable or unwilling to embrace this simple truth"

Senge et al. (2015), The dawn of system leadership, *Stanford Social Innovation Review*, winter pp.27-30

| Transformational Approach	Transactional Approach
Designed for: **Non-routine, complex and adaptive challenges** ➤ Focus on people, possibilities and the future ➤ Based on commitment and accountability ➤ Strategic, multidimensional and opens new pathways of thought and action	**Designed for:** **Technical and routine challenges** ➤ Focus on systems, process and structure ➤ Based on priorities and problem solving ➤ Tactical, linear and return to full action
RESULT: Exceptional Performance	RESULT: Improvement

5 Disciplines of a Multiplier

1. Attract and optimise talent. (*Talent Magnet*, rather than an *Empire Builder*)

2. Create intensity that requires the best thinking. (*Liberator* vs. *Tyrant*)

3. Extend challenges and ensure direction gets set, rather than set direction themselves. (*Challenger* vs. *Know-it-all*)

4. Debate decisions and issues up front, and ensure they don't leave their organisation in the dark. (Debate Maker vs. Decision Maker)

5. Delegate ownership and accountability. (*Investor* vs. *Micromanager*)
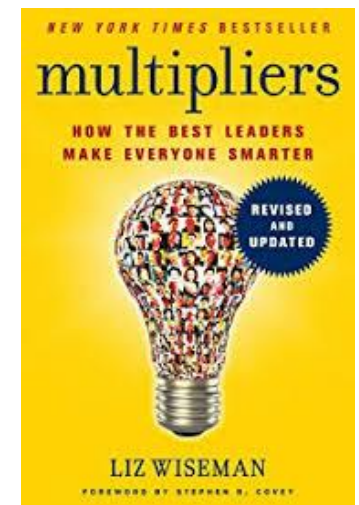
Diminishers

People won't figure it out without me

Empire Builder
Hoard & underutilize talent

Tyrant
Create stress that stops thinking

Know-It-All
Tell people what to do

Decision Maker
Decide (then debate)

Micromanager
Manage every detail

Multipliers

People are smart and will figure it out

Talent Magnet
Attract and optimize talent

Liberator
Create space for best thinking

Challenger
Extend stretch challenges

Debate Maker
Debate (then decide)

Investor
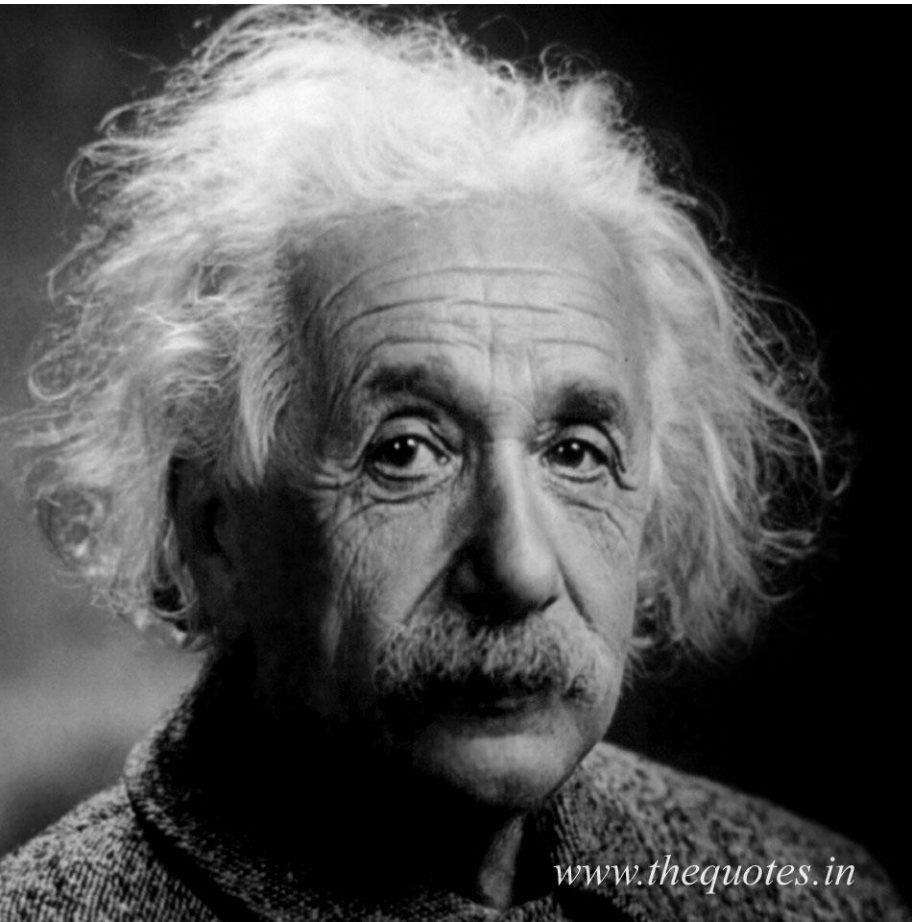*Instill ownership & accountability*

100%   100%

95%

48%

So what does this mean for us?

- High potential vs established hierarchy?

- What makes a great leader?

- How do we spot those with the greatest potential?

- Where can we learn from?

Insanity: doing the same thing over and over again and expecting different results.

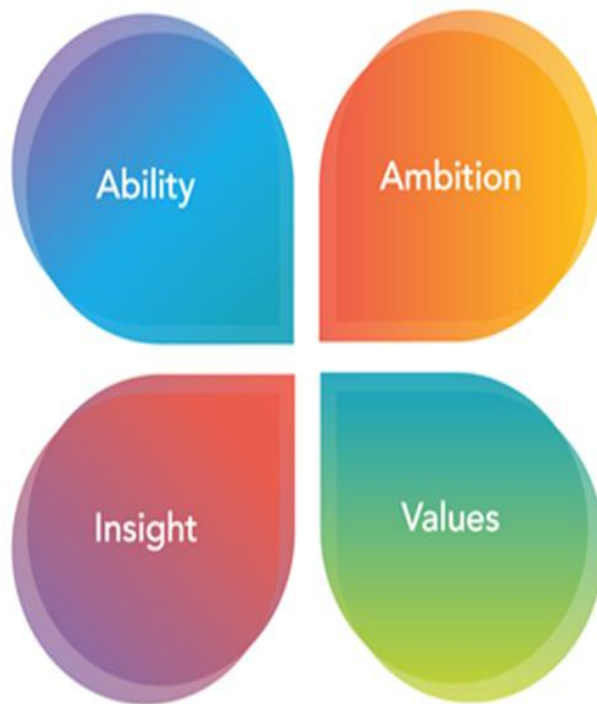*Albert Einstein*

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live your potential

- Do you inspire others?
- Can you maintain a positive outlook?
- Do you demonstrate exemplary teamwork?
- Can you engage people from all backgrounds?

- What motivates you?
- How do you respond to difficulties?
- How do you seek out the unknown?
- How do you see your future, and that of your team, your organisation, and of Scotland?

Ability

Ambition

Insight

Values

- Do you know what others think about you?
- How do you respond to those views?
- Do you understand the wider system?
- Can you demonstrate empathy?

- How do you feel about your place in the system?
- What is your purpose & potential?
- What makes you do what you do?
- Are you willing to learn?

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Leadership Development

Performance Appraisal

Talent Management

Values Based Recruitment

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leadership³

system

Collaborative leadership project

Learning in real time ("heat experience")

team

Undertake "team journey" (supported by team coach)

Group learning events

Take learning into own team / live work

self

Personal resilience, health & well-being

Team work on collaborative leadership project.

Personal leadership profile & PDP

Reflective practice on learning in real time

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@projectliftscot

projectlift@gov.scot

"If serving is below you, leadership is beyond you."

– Anon

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