Love to Lead Staff Engagement Event Event write up

Thursday the 14th of Feb 2019









TOWER HAMLETS

TOGETHER

Delivering better health through partnership







 To lead with confidence and understand how to remove the obstacles that get in the way

 The event has been designed to equip you with the skills you need to lead service and pathway integration across THT





108 participants expected to attend 83 registered



Leading to Make a Difference







Loving to Lead, 1980-2019













What Are We Leading?

Our Vision and strategy: :

- Sets out our mission improving services for patients, carers and communities
- Creates a shared purpose
- Secures system commitment
- Creates collective leadership
- Engages with stakeholders, communities and staff

CHAPTER 4 The Royal London Hospital and Associated Community Services NHS Trust.

In 1989 the NHS was again in the throes of another major reform to establish the internal market in health care by creating self-governing hospitals to provide services to health authorities on the basis of contracts. The Royal London applied for selfgoverning status in the first wave of applications to become what is known as a National Health Service Trust. The Royal London Hospital and Associated Community Services NHS Trust (established by statutory instrument 1990 No.2438) came into effect on 21 st .December 1990 and specified an operational date of April 1st. 1991. From that date the Trust took full management responsibility for the hospital and community health services previously held by the Tower Hamlets District Health Authority.

The strategy for the future was set out in a mission statement, and in the Annual report. The new Trust aimed to be the main providers of integrated health care in East London; to provide a high quality service responsive to all those using the facilities; to support research and development and to provide facilities for the training of medical and dental students at the London Hospital Medical College and Dental School and for the training of other health care professionals. The Trust Board consisted of a chairman, a chief executive, 4 executive members, and 5 non executive members. A quality assurance team led by the director of nursing and quality assurance, was appointed with the remit to monitor and implement change throughout the Trust on a multidisciplinary basis.

During the year to March 31st, 1993 the first stage of the site strategy was achieved by consolidating acute services at

The Royal London Hospital, Whitechapel. opening the day stay surgical unit on January 29th. 1993, and the enlarged Accident and Emergency department on February 24th, 1993. The 144 bed Bancroft Unit at Mile End offering both acute and continuing care and rehabilitation for the elderly was provided, and in January 1993 new wards dedicated to mental health services for the elderly moved from St. Clements to Mile End to integrate them fully with other continuing care services for the elderly. The second stage of the strategy, with help from the Special Trustees, and the Regional Health Authority, is in hand in 1993/94 to establish a rehabilitation unit, a rheumatology unit, a diabetic day care centre, facilities for general practitioners and community health teams at Mile End.



The Royal London Hospital N H S Trust, Chairman, Michael Haines, (Right) chief executive Michael Fairey, medical director, Michael Swash.





Improving Health and Well-being in Tower Hamlets

A Strategy for Primary and Community Care Services 2006 to 2016



Tower Hamlets NHS









Our vision













How Are We Leading?

- Guided by our values embedding a compassionate culture
- Creating an inclusive leadership approach
- Enabling staff led change
- Developing partnership with patients, carers and communities
- Great team working
- Recognising success



NHS 10 Year Plan



The NHS Long Term Plan





- Integrated care systems
- Prevention and tackling Health Inequalities
- A new service model for the 21st century
- Culture change



Tower Hamlets Together – Achievements

- THT Outcomes Framework
- New Community Health Service Model
- THT Local Incentive Scheme
- TH Linked Dataset Project
- Social Prescribing







- You have the vision
- You should be proud of what you have achieved
- You should be confident of what you can achieve in the future

You are all leaders!



Other People's Shoes Leadership and Management

Ken Jarrold CBE

Director

Other Peoples Shoes Ltd





- The three things that have influenced me
- What is leadership and what is management?
- Leadership in Health and Social Care
- Management in Health and Social Care
- Why are leadership and management important?
- Human nature and understanding yourself and others
- The values and behaviours needed for leadership





- The values and behaviour needed for management
- 3 principles for leadership and management in health and social care





- Christian values from my earliest days seeing my parents service to others and in particular my Father's humility and empathy
- My first boss Jack Newton who provided me with a role model as a servant leader and manger and would not let me have a new carpet!
- Robert Greenleaf and The Servant as Leader

What is leadership and what is management?



- Leadership is showing the way showing what to do next. Leadership
 is not dependent on role and seniority
- Management is the responsibility for the use of resources.
 Management is dependent on rola and seniority.





- Leadership in Health and Social Care can come from
- Service users, clients and carers
- Voluntary organisations and other agencies
- Professions and Trade Unions
- Managers at all levels including Chief Executives
- Chairs, Non Executives and Politicians



Management in Health and Social Care

- There are 4 levels of managers
- Team Managers
- Senior Managers
- Directors
- Chief Executives
- Team Managers are the most important level of management. Team Managers are at the interface between the management hierarchy and the front line staff

Why are leadership and management important?



- Because they are about getting the best out of people
- Real change comes from three things making process as effective and efficient as possible, redeploying resources, and developing people to their maximum capability and capacity
- Real change rarely comes from vision statements or organisational change

Why are leadership and management important?



- There are 6 key ingredients in performance management. Clarity about the objectives, commitment to delivery – the will to do it, evidence of progress – good quality information, rigour – effective monitoring, resilience and staying power, and getting the best out of people
- 1996 Study on the mental health of workforce in NHS Trusts The mental health of NHS staff was worse than that of the employed population as a whole. 7 reasons identified many of them influenced by leadership and management

Why are leadership and management important?



- Research by Beverley Alimo Metcalfe and Michael West shows that a high quality of leadership and management is positively associated with positive staff attitudes to work, their well being at work and with the achievement of organisational goals
- Effective Teams deliver better patient satisfaction, performance and morale
- Good staff support and management are highly variable though they are fundamental to culture and directly related to patient experience, safety and quality of care



- Leadership and management are about getting the best out of people
- So we need to be realistic about human nature which is capable of everything from Hitler to Mother Theresa
- Vast majority of people are genuine, hardworking and trustworthy
- Health care attracts people of extraordinary intellect, expertise and self sacrifice



- Because health care is staffed by humans some of them are lazy, indifferent, cruel, jealous, untrustworthy, dishonest and selfish
- Look for the best and expect the worst
- If people argue that something is not is service users' interests do they mean it is not in their interest?
- Jealous managers limit the development of others to preserve their own position



- If something goes badly wrong some managers seek to distance themselves from the team and to avoid all blame
- Others stand with their team even while ensuring proper investigation and allocation of responsibility and consequences



- It is really important to understand yourself and others
- Know yourself and to be true to yourself
- Exercise empathy put yourself in other people's shoes
- Myers Briggs really helped me to understand myself and others

The values and behaviours needed for leadership



- Understanding what leadership is
- Having the courage to show the way if you know the way Greenleaf said that leadership takes backbone
- Explaining what needs to be done clearly and simply
- Persuading people to follow the way
- Enabling others to lead the way if you do not know the way

The values and behaviours needed for leadership



- Following the way as shown by others
- Persuading people to follow the way as shown by others



- Many of these values and behaviours are also relevant to leadership because what matters is how you manage and lead. What matters is what you say, what you do and how you behave
- People need 4 things from their managers
- 1 Support
- 2 Feedback including appraisal
- 3 Development and training
- 4 Clear job content



- Servant leadership and management is for me the most helpful way of thinking about the values and behaviours needed for management -The Servant Leader by Robert Greenleaf published in 1970
- Peter Senge, Kenneth Blanchard, Stephen Covey, Warren Bennis all pay tribute to Greenleaf's influence
- Ten characteristics of the servant leader and manager defined by Larry Spears
- 1 Listening RKG said listening is the premier skill and ran Listening courses at Harvard
- 2 Empathy putting yourself in other people's shoes to know and understand each worker
- 3 Healing people and organisations



- 4 Awareness constant scanning of the environment, searching questions about what to do
- 5 Persuasion convincement, difficult and time consuming
- 6 Conceptualisation perspective, goals, evaluate, analyse
- 7 Foresight the failure to foresee is an ethical failure
- 8 Stewardship looking after things
- 9 Commitment to the growth of people
- 10 Building Community



- The best test of servant leadership and management is do those we serve grow as people? – Robert Greenleaf
- The core idea of servant leadership is quite simple authentic, ethical leaders who we want to follow – are servants first – Robert Greenleaf



- The top 16 qualities needed are;
- 1. Passion/commitment for the work of the organisation
- 2. Empathy for the people served and the people doing the serving
- 3. Humility and the values of servant leadership
- 4. Integrity
- 5 Realism



- 6. Resilience and grit
- 7. Curiosity and the desire to learn from others Don Berwick "
 Improvement begins with curiosity "
- 8. Behaving consistently and building trust
- 9. Holding yourself and others accountable for performance and promises
- 10. Delegating important tasks to others



- 11 Developing yourself and other people
- 12. Communicating your vision, purpose, and values by what you do and how you behave
- 13. Sharing information, resources, praise and credit never taking credit for other people's work
- 14. Energising others
- 15. Consistently demonstrating respect for others
- 16. Really listening

3 principles for leadership and management in health and social care



- 1 Patients, clients and carers first, last and always
- 2 Staff second. Managers should serve staff not the other way around
- 3 Treat people as you would wish to be treated no bullying, no harassment, be just and fair

What you love about your leadership role in THT





What are your burning leadership challenges





Evaluation Tell Barry what you think of the Love to Lead Event

TOWER HAMLETS TOGETHER Delivering better health through partnership

What went well?

- Brilliant, inspirational. Will buy the book!! Good way to spend Valentine's Day. Loved the 'Love' theme
- Thank you for the knowledge and passion about leadership!
- Some practical examples of teams and services that have overcome barriers
- Transforming and implementing positive change with respect to patient centred care
- Love Ken
- Loved the speaker
- Great speakers on leadership. Applicable principles in practice
- Informative, inspiring, brilliant
- Ken is an inspiration
- Great to see disclosure modelled so well
- It has re-connected me with my love of working with staff
- Positive
- Extremely inspiring
- Great to meet Barts colleagues
- Really positive and inspiring. Thank you
- Ken was wonderful, wish all managers understand the industry
- Inspiring. Ken was great, encouraged reflection
- Insightful and so useful
- Ken was very inspirational
- Very inspiring and structured time to meet others
- Great to network
- Amazing Ken

Evaluation- Tell Barry what you think of the Love to Lead Event

TOWER HAMLETS TOGETHER Delivering better health through partnership

What could be improved?

- A formal evaluation form
- Barriers to change and leadership
- Good but:
 - Needs to keep to time
 - Needs better objectives a bit vague and wishy
 - Needs formal evaluation sheet
 - One key speech good and one frankly not inspiring
- First speaker spoke for too long. More time for interaction and learning
- Not sure what the objective was

Tell Barry what you think of the Love to Lead Event





Evaluation - The Barry-O-Meter



