

Leadership in the Emergency Services: Interoperability and Innovation

Ambulance Leadership Forum 2016 Leicester



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Structure of the Presentation

- ▶ Setting the scene-leadership challenges before the emergency services.
- ▶ Key issues impacting workforce development.
- ▶ Suitable leadership for empowering and motivating staff.
- ▶ Critical overview of the state of interoperability.
- ▶ Innovation in the era of uncertainty: Reform to Transform.

Service offer versus expectations

- ▶ Current evidence points to fundamental shift in the nature of the work and staff deployment done by the three blue light services:
 1. Ambulance- increasing demand but lesser proportion of life threatening calls (HSCIC, 2015). Performance and quality unsustainable with current levels of funding.
 2. Fire- 999 attendance on a long term downward trend along with fire related deaths and casualties (Knight Report, 2013)-focus on prevention and protection work.
 3. Police- lower crimes, increased request for mutual aid (College of Policing, 2015).

Supporting a diverse, modern and healthy workforce

- ▶ One of the key commitments in the NHS Five Year Five Year Forward View.
- ▶ Similar commitments in Police and Fire Services are evident.
- ▶ Very little evidence to suggest that enough is being done to support the workforce for new challenges and performance pressures.



Creating cultures of inclusion



The 2014 NHS Staff Survey included responses from **255,150** individuals across **284** organisations (including 157 acute trusts, 57 mental health/learning disability trusts, 40 clinical commissioning groups (CCGs), 19 community trusts and 11 ambulance trusts).

The data looked at **discrimination** within the NHS, between **managers and staff, between colleagues**, but also from patients and members of the public on grounds of **age, gender, religion, sexual orientation, disability, & ethnicity**.

Highest levels of overall discrimination reported by ambulance staff

	Overall (%)	Acute (%)	Community (%)	MH/LD (%)	Ambulance (%)	Other (%)
Any discrimination	11.9	11.7	8.9	12.9	19.7	5.3
Discrimination from...						
...patients/relatives/public	5.9	5.6	3.7	7.1	10.9	1.5
...manager/team leader/other colleagues	8.0	8.1	6.3	7.7	12.6	4.3
Discrimination on the basis of...						
...ethnic background	4.3	4.5	2.3	4.8	3.0	0.8
...gender	2.2	2.0	1.6	2.7	6.1	1.1
...religion	0.6	0.6	0.3	0.7	0.8	0.1
...sexual orientation	0.6	0.5	0.3	0.8	2.1	0.2
...disability	0.9	0.8	0.9	1.1	1.4	0.6
...age	2.2	2.1	1.5	2.5	5.4	1.2

Discrimination by occupational group

	Medical/ dental (%)	Nursing (registered) (%)	Nursing assistants (%)	Scientific and technical (%)	Ambulance (%)	Managers (%)	Central functions (%)	Social care (%)	Ancillary (%)	Other (%)
Any discrimination	13.5	14.0	17.3	10.4	22.1	8.2	8.1	10.7	9.7	10.9
From...										
...patients/relatives/public	8.0	8.5	11.8	4.4	13.0	1.7	2.0	5.7	3.2	3.8
...manager/team leader/ colleagues	7.9	8.3	9.1	7.3	13.6	7.2	6.9	6.6	8.3	8.4
On the basis of...										
...ethnic background	7.1	6.5	7.7	2.9	3.4	1.9	1.7	3.0	2.8	2.8
...gender	3.6	2.2	2.9	2.3	6.9	1.7	1.3	2.2	1.3	1.8
...religion	0.9	0.5	0.9	0.6	0.9	0.4	0.3	0.3	0.5	0.7
...sexual orientation	0.3	0.6	1.1	0.5	2.4	0.6	0.3	0.6	0.6	0.6
...disability	0.5	0.8	1.0	0.8	1.5	0.5	0.9	1.4	0.8	1.2
...age	1.8	2.3	3.0	2.2	6.1	1.7	1.7	1.7	1.8	2.3

Protect Staff from Bullying and Harassment



Care Quality Commission

London Ambulance Service NHS Trust

Quality Report

220 Waterloo Road
London
SE1 8SD
Tel: 020 7921 5100
Website: www.londonambulance.nhs.uk

Date of inspection visit: 1-5;17-18 June 2015. Unannounced visits on 12,17,19 June 2015
Date of publication: 27/11/2015

This report describes our judgement of the quality of care at this trust. It is based on a combination of what we found when we inspected, information from our 'Intelligent Monitoring' system, and information given to us from patients, the public and other organisations.

Ratings

Overall rating for this trust		Inadequate	●
Are services at this trust safe?	Inadequate	●	
Are services at this trust effective?	Requires improvement	●	
Are services at this trust caring?	Good	●	
Are services at this trust responsive?	Requires improvement	●	
Are services at this trust well-led?	Inadequate	●	

Headline findings

- ▶ **Bullying and harassment** was a major concern for the organisation.
- ▶ Several frontline ambulance staff perceived that they were **bullied** by managers.
- ▶ A large number of frontline staff to be **demoralised**.
- ▶ **Culture of fear** amongst frontline staff.
- ▶ Most ambulance crews told that the organisation was a good place to work in the past, but now they felt **unsupported** by the service.
- ▶ Forced to work with a new rota system which was very **demanding** with little or no rest between shifts.
- ▶ Independent, external review into bullying and harassment in the organisation found that the problem was **widespread**.

Reduce high sickness absence rates

Annual Sickness Absence Rates by Organisation Type in the NHS

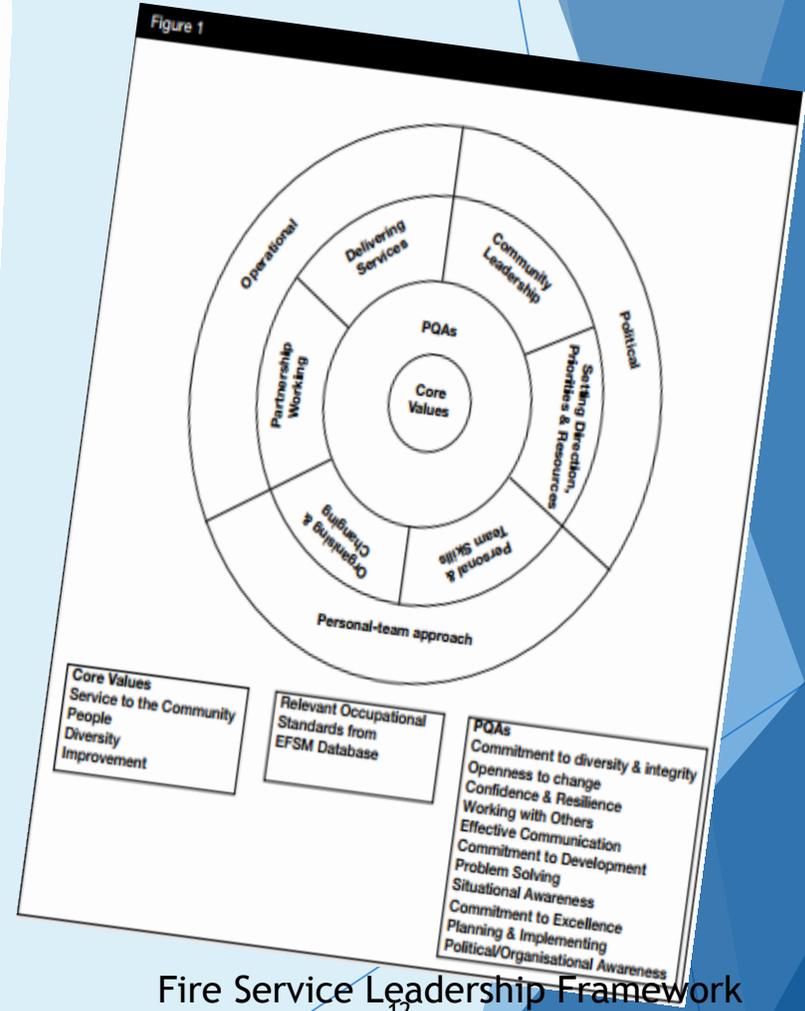
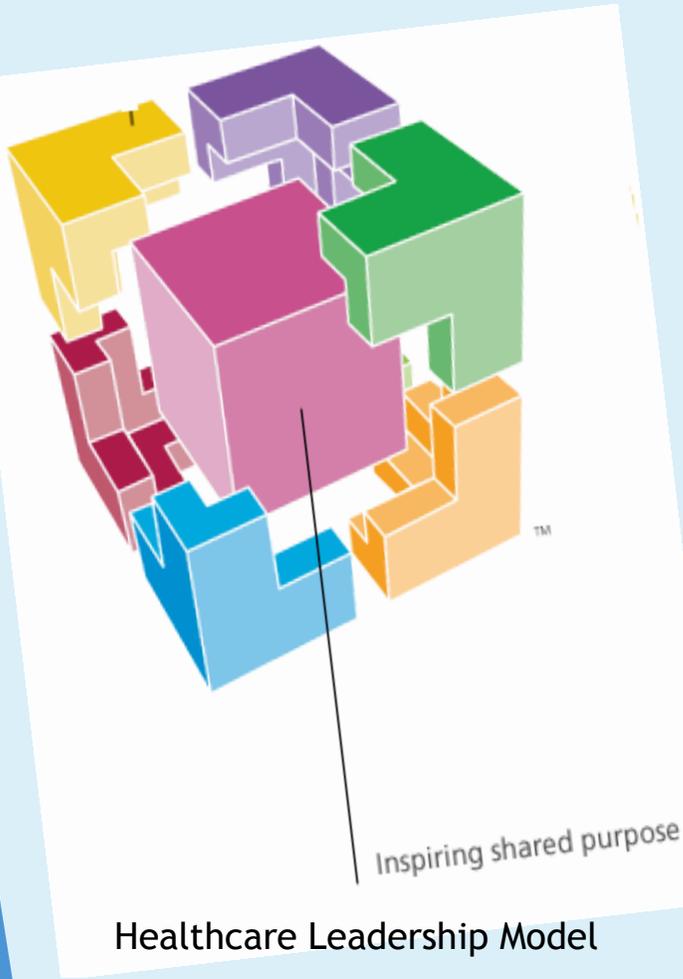
	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15
England	4.40%	4.16%	4.12%	4.24%	4.06%	4.25%
Acute trusts	4.18%	3.91%	3.89%	4.01%	3.84%	4.03%
Ambulance trusts	5.73%	5.67%	5.76%	6.05%	5.82%	6.27%
Clinical Commissioning Groups	-	-	-	2.07%	2.20%	2.60%
Commissioning Support Groups	-	-	-	-	2.69%	3.05%
Community Provider Trusts	4.07%	4.64%	4.60%	4.65%	4.47%	4.65%
Mental Health	5.23%	4.95%	4.89%	4.94%	4.74%	4.88%
PCT	4.42%	4.20%	3.93%	3.09%	3.26%	2.15%
Special Health Authority	3.93%	3.69%	3.47%	3.56%	3.30%	3.47%
SHA	2.22%	2.31%	2.13%	2.55%	-	10

Source: Adapted from NHS Sickness Absence Rates, Annual Summary Tables, 2009-10 to 2014-15, Health and Social Care Information Centre. July 2015 (Table 2)

Professionalisation: evidence based approach

- ▶ Use of knowledge and building an evidence base in setting standards and making key decisions.
- ▶ Clear system of skills accreditation , CPD framework and qualifications.
- ▶ Important role for College of Paramedics to prepare practitioners for the future.
- ▶ Co-production of knowledge with HEI.
- ▶ Clear gap in developing strategic leadership skills and preparing future leaders.

Right Leadership behaviour(s)



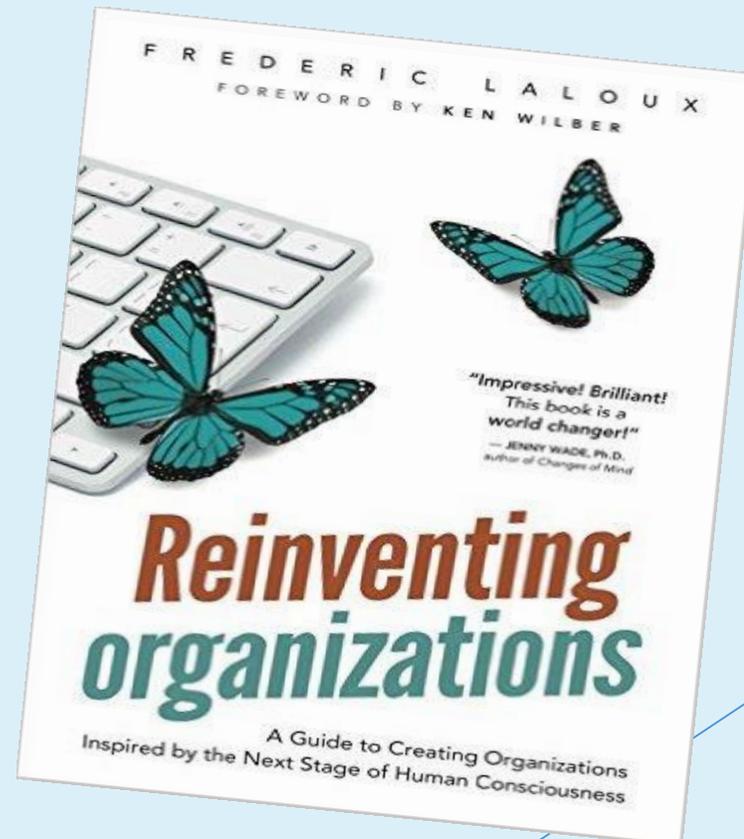
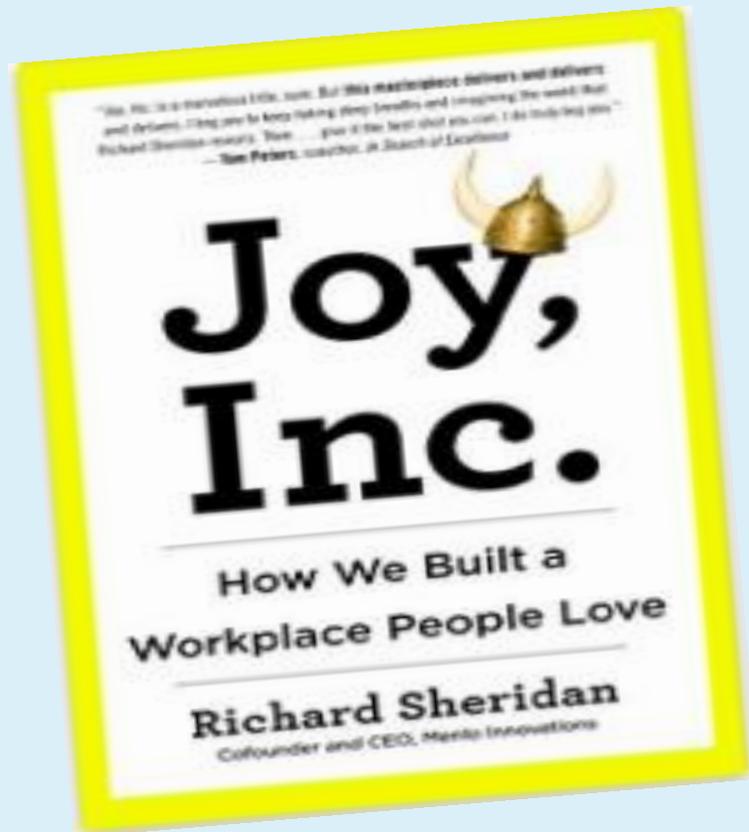
Fire Service Leadership Framework

How does this fit with literature?

- ▶ Academic literature in sync with professional models.
- ▶ Need for moving beyond traditional heroic or leader-centric frameworks to a much broader shared, connected leadership capacity (Day and Harrison, 2003; Kahane, 2004).
- ▶ Recent debates have argued a case for a multi-level framework , a strong focus on collective (Dionne et al. 2014; Day et al. 2014).
- ▶ The notion of ‘pluralised ‘ leadership as a network of relations is gaining popularity (White et al. 2016).

The Agile Leader

- ▶ Leadership skills to manage systems or networks of care rather than just organisations (Five Year Forward View, p. 16)



Latest dose of Interoperability

Government intends to legislate to:

- ▶ Introduce a new statutory duty on the three emergency services to collaborate with one another to improve efficiency and effectiveness;
- ▶ Enable Police and Crime Commissioners to take on the duties and responsibilities of fire and rescue authorities, where a local case is made;
- ▶ Where a PCC takes on the responsibilities of their local FRA, further enabling him or her to create a single employer for police and fire personnel;
- ▶ In areas where a PCC has not become responsible for fire and rescue services, enabling them to have representation on their local FRA with voting rights, where the local FRA agrees.



HM Government

Enabling Closer Working Between the Emergency Services

Summary of consultation responses and next steps

26 January 2016

A missed opportunity?

- ▶ Will it ensure efficiencies?
- ▶ Model untested and untried.
- ▶ Where does it leave ambulance services?
- ▶ Highlights the importance of operational procedures and compatible technology.
- ▶ Very little on the drivers and enablers of interoperability including the people, processes and integration of diverse professional cultures.

Reform to Transform....

- ▶ Find innovation where least expected (McCaffrey and Pearson, 2015).
- ▶ Avoid functional fixedness (Duncker, 1942).
- ▶ Pluralistic leadership style rather than a heroic model to support workforce in an uncertain landscape.
- ▶ Speed rather than size will be important to face future challenges.
- ▶ Build systems that embrace and enhance differences.
- ▶ Professionalisation will need time and cost money.

Closing thought!!

CEO to Finance Director: What if we invest in our people and they left us?

Finance Director to CEO: What if we didn't and they stayed??