



NO MORE HEROES

Dr Darren Leech, a Director at NHS Elect, considers whether the NHS needs leaders who can coach and delegate, not just issue direction and advice.

Hero leaders save the day: these are the people who step in to offer advice, guidance or do things for others when they are asked for help. Clear instruction and advice can be useful in time-pressured or urgent situations. In the early stages of a new job, this support is often appreciated and seen as helpful.

Working in the British National Health Service (NHS), you will find no shortage of direction and advice-giving, be that the result of a top-down system or the consequence of a pervading 'medical mindset'¹ in which people are listened to, diagnosed and prescribed actions or treatment. Leaders who have direction and advice-giving as their 'default' personal style of operating can often find that their 'help' starts to wear thin over time. As staff become familiar and competent at routine tasks, the continued receipt of direction and advice begins to grate and offend – heroes can soon turn into villains.

There are usually two potential outcomes in these circumstances: either staff will submit and become dependent on direction and advice, resulting in reduced initiative, less resilience and lower levels of resourcefulness when it comes to problem solving; or, some people will 'dig-in', rebelling against what they see as a controlling and restrictive approach to

leadership. This often appears as conflict between a leader and members of their team.

Given that the NHS employs a large number of highly qualified professional people, it's unlikely that continued direction and advice as a method of leading and managing will work for all. Once orientated and familiar with their role and the tasks required, other approaches to leading people become necessary if interest and positive engagement in their work is to remain. Primarily, the other options are coaching and ultimately delegating. Whilst this 'situational approach' to leadership has been around for a while², in the NHS coaching skills are frequently overlooked or confused with mentoring.³ In practice, the number of people with responsibility for leading and managing others who are unclear about what mentoring and coaching are – let alone when each is best deployed or avoided – can be surprising.

Mentoring, of course, involves an expert with experience in the field providing insight, guidance and often technical advice to someone more junior. There can be a 'pass/fail' element to this relationship, where there can be a sense that success is purely dependent on the transfer of knowledge from mentor to mentee and the implementation of this knowledge into action.

Coaching, unlike mentoring, moves away from advice or suggestions. A coaching relationship is less dependent on hierarchy: it is more a relationship of equals, focused on helping the coachee to work through and resolve a problem for themselves. The coach will ask open and challenging questions to prompt creative thinking, reflection and options for action. This conversation ultimately enables the coachee to determine a clear course of action for themselves. This is particularly useful in facilitating development in relationships where a top-down form of leadership has produced tension or aggravation, as discussed above.

Coaching conversations demand commitment and engagement from all parties, so recipients for this type of intervention need to be selected carefully. Those who are competent in their field, motivated, resourceful and keen to improve or solve problems usually respond best to coaching. Research has shown that organisations that choose to invest in developing coaching skills as part of their leadership development programmes have higher levels of engagement, commitment and innovation from their teams.⁴ In turn, this reduces the burden on leaders who previously might have wondered why their teams had become so dependent, unable to resolve problems or generate options for problem solving themselves. Given that the new NHS plan states clearly that the performance of any healthcare system ultimately depends on its people⁵, perhaps the NHS needs fewer heroes and more leaders with coaching skills.

ABOUT THE AUTHOR



Dr Darren Leech is a Director at NHS Elect. A qualified and experienced coach, he works predominantly in the healthcare sector. Darren's professional background is in pharmacy, although his career diversified into operational management across the acute hospital sector. Prior to joining NHS Elect, Darren worked as chief operating officer in a number of hospitals, and he maintains an active interest in research – particularly in leadership development.

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5. *The NHS Long Term Plan*, January 2019, Department of Health.

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