40 Tips For Terribly Treacherous, Turbulent and Tricky Times *and some other stuff*

Managing for Survival

Roy Lilley and Ed Smith

Creators of the top download eBooks;

 Wellness and Two Hundred Questions for the NHS…

…call on their experience and look at managing in difficult times. They suggest tips, ideas, approaches and things you can do to survive and thrive!

WARNING!

T his is not a conventional book. It's not designed to be read from cover to cover (although it would be nice if you did), the idea is for you to treat it like a swimming pool on a hot summer's day… dip in and out.

There's stuff on change, relationships, getting things done, traps to avoid and more than a few ideas stolen and some of our own.

There is a pretty good contents page so you can browse by topic.

If you've got a hard copy; there are plenty of white spaces to make notes. If it's an electronic version; feel free to copy and paste for your reports, presentations and circulation. It would be nice if you gave us a mention.

If you can make sense of this book you can make sense of where you work, the world and the universe… or your money back.

200 Questions for the future of the NHS ... and the elephant in the room

Ed Smith
Roy Lilley
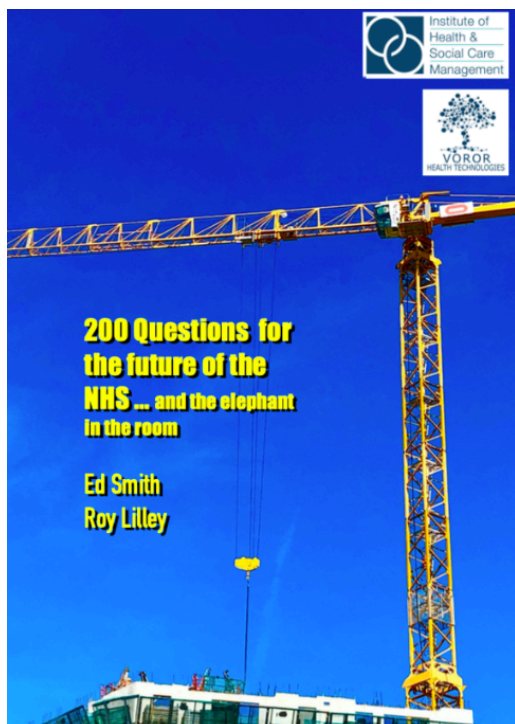
' *... a framework to encourage thinking about issues. Looking for solutions, practical thoughts and exploring pathways to implementation through conversation and dialogue with colleagues.'*

'... a collection of essays, ideas, questions and research from around the world, creating a debate to reshape the public's health into population wellness.'

WELLNESS

Why can't we stop people getting sick in the first place?

The Elephant in the Room

A collection of essays, ideas, questions and research from around the world, creating a debate to reshape the public's health into population wellness.
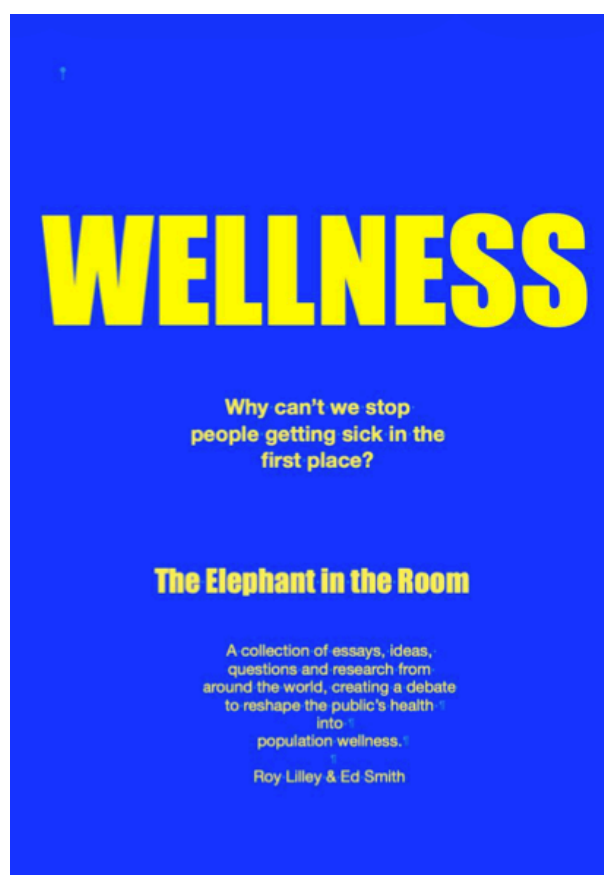
Roy Lilley & Ed Smith

This book is designed as an *e*Book and contains links to interesting

and useful places.

If you would like a FREE copy of the *e*Book, please

use the QR Code.

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Contents

Dedication

If you are the one that worries about getting it right. If you are the one that takes your laptop home and works late at night. If you are the one that fits family and work and a social life into the jigsaw called living…

… if you are the one that arrives early and stays late. If you are the one with the energy and commitment to do it all…

… this book is for you and it is for all the other people who, just like you cares about being better at what you do, learning from others and sharing your experiences.

If you work in the NHS you may not have a stethoscope and you may not stand at the bedside but you are part of the invisible army of people who keep the lights on, makes sure the place is clean and properly maintained.

This book is for you.

People who keep people fed at all hours of the day and night, no matter what their dietary requirements.

People who keep the carparks working, make the numbers add up and makes sure people have an appointment when they need one.

People who repair things, maintain things, record things, photograph things. Check we are safe and dispenses our prescriptions. Plaster us, exercises us and take our blood… all of you.

This book is for you.

If you struggle in meetings, making two pounds do the work of three. If your daily routine is all about getting more for less…

… this book is for you.

All of you… this book is for you, with our thanks…

… and listen carefully…

… 'it's OK to be proud of what you do!'

Introduction

There is nothing new in what you are about to read! Sorry. The ideas come from our collection of articles, notes and recollections about leadership management and managing through change, turbulence and the challenge of renewal.

There are some new thoughts, the up-sum of our discussions and working together on other books including 200 Questions for the Board and Wellness… all based on the common-sense that it takes to be a successful manager and a great leader.

There are ideas, thoughts, a couple of paragraphs here and there… and some… detailed and thought provoking. Some tips and advice come from the world of commerce and business and others are specific to the NHS.

Both of us have careers that straddle public and private sectors and we believe there is much to learn from each other.

We often use the language of 'business', 'customers' and 'organisations'… for although the NHS is a special organisation and is not a business, running it in a business-like way is an essential and thinking of patients as customers, taxpayers, who have paid for all this… is no bad thing.

Some managers, the really good ones, seem to be able to alter the weather, make time stand-still and create change like they were making a cup of coffee. There is a lot of skill but perhaps there is also a knack?

We know, they don't teach 'knack' on the MBA course, or on management training schemes. Perhaps knack isn't the right

word? Are they tricks-of-the-trade? Is it experience, natural talent, magic?   Who knows!

However, there is one thing we do know. There are some skills that a lot of the best managers have in common. Things we've seen that a lot of top-talent does, instinctively. These are things we can all do, to be a better manager.

If we have a central theme it is an intense focus on people… engagement and their emotions.

Organisations are ecosystems and if there is an understanding of what drives people's emotions and energises them and creates followership…

… that is the way to success at the person, organisation and system level.

So, with a nod to the past and the fact that is, probably there's nothing really new under the sun, here are our **40 Tips for Tricky Times and the other stuff.**

Taken collectively we hope they can help you make a big difference.

Roy Lilley

Ed Smith

December 2025

#1

The Power of a Hand-Written Note

Tom Peters was giving one of his inspirational lectures. **<u>Tom is a business guru</u>** and widely respected by the top echelons of American, indeed global, businesses. They open their Boardroom doors, invite him in and listen to what he says. It is through this rich vein of contact, trust and confidence that Tom is able to quote the inner-most thoughts of business leaders from around the world.   He says this is one of his favourites:

> *'The two most powerful things in existence: a kind word*
> *and a thoughtful gesture.' …. said by Ken Langone, VC*
> *and founder of Home Depot.*

Home Depot was founded in 1978, and became the world's largest home improvement specialty retailer and the second largest retailer in the United States with 2024 retail sales of $159.5 billion and earnings from continuing operations of $14.8 billion. The Home Depot has more than 2,337 retail stores in the United States and employs 509,300 staff. Think of it as a US big-brother to B&Q.

Communicating and keeping in touch with that many staff is not easy. There are newsletters, intra-web, texting, WhatsApp groups, video-casts but nothing beats personal contact.

One of the most powerful is the handwritten note. There is always a reason to say; '*well done*'. There is always a motive to say; '*thank you*'.   The temptation is to dash-off an e-mail or text. Don't do that.

Today, this lunch-time, buy a packet of 'Thank You' cards. The plain ones, blank inside. Keep them in the top drawer of your desk. When the time comes to say thank you; write a handwritten note.

> *'I just wanted to let you know I appreciate how hard you*
> *have worked on this project…..thank you'*

> *'It was important for me to tell you I know what you put*
> *in, to make this a success……thank you'*

There will always be a reason. Make sure you make a habit of saying thank you. It does not have to be a special project or a one-off event;

> *'The job you do for us is invaluable. I know this is a*
> *difficult and challenging and we can't always give you*
> *the support you should have, but….thank you'*

Where you work, right now, there is a back that needs patting – go and find it.

Handwritten notes of appreciation have reduced grown men to tears! It doesn't have to be public. Often the recipient will silently go about their work but more often the '*thank-you*' will go on public display.

The cost of the thank you is measured in pennies, its effect is priceless.

#2

Never make an important phone-call sitting down

Can it make a difference? Standing up? Sitting down?   Yes it can! From time to time you may hear Roy's dulcet tones on the airwaves. Broadcasting in the UK is still a pretty staid affair. You go into the studio, sit down, talk and go home.

These days, plug in the Laptop and speak to the world from the kitchen table.

Boy, did he get a surprise when he did his first broadcast in the US! It is an entirely different business.

Roy picks up the story;

*I arrived at the studio to find the presenter was standing-up… ….*prowling around the studio and occasionally settling on a bar-stool. The computer was a lap-top on a shelf. He motioned to me to put on a wireless headset with a microphone and that was that… off, into the bruising world of the US-Radio phone-in!

There is no doubt about it. Speaking, standing-up, adds energy to what you say. As your body posture changes, so does your voice, inflection, tone and pace.

Try an experiment. Ring your voicemail and leave a message. Do it sitting down, in the normal way. Do it again and this time, during the call, screw-up a piece of

notepaper and throw it into the waste-basket. Now, do it again and leave the same message – standing up.

Play the messages back. The first one will be dull and lifeless, the second one; you'll know when you threw the paper (and missed!). Finally, listen to the difference in the call when you were standing.

If you can, make your calls standing up. It adds energy, sincerity, enthusiasm and emphasis!

#3

Carry a Note-Book

In these electronic, web-enabled, *Smart*Phone, SoMe days does it seem strange to say; carry a notebook?

The notebook can be your best friend, a resource and an aide-memoir. A5 note books with the elastic around the cover.

They have a little pocket in the back for stuff, receipts and biz-cards.

Put a sticker on the front or buy one with a bright yellow cover. Make it stand out. Let people see you value what they say and you're paying attention... make a note.

During the course of the day; at a meeting, at a conference, just sitting on the train, you hear something, read something or have an idea about something and you'll forget it by the time you've arrived at the next meeting.

Ideas and thoughts are precious. Treat them like valuables. Keep them safe.

Write them down...

... and find the time to read through them, reflect, think and **don't let your bright ideas calcify.**

#4

You can't manage what you can't see

Roy recalls;

I had the good fortune to travel to the US on Virgin Upper-Class. Fortunately, someone else was paying!

However, it is possible to get tired of free champagne and chocolate. I stretched my legs by walking down the spiral stair case to see how the other-half lives......

Working the drinks trolley was Richard Branson. Apparently, in his day, he always did it... he likes to know what the punters think of the service.

A week or so later I was on one of his trains. He was doing the coffee and the newspapers. Later in the year I found him on the tills at the Virgin Mega Store in London.

He does it all the time... he is passionate about finding out what the punters think about the service.

When did you last spend a day at the sharp end? Turn up? Join in? Do a front-line job?

Tom Peters talks about 'management by walking about', it's in his book Passion for Excellence**.**

Try it; it's amazing what a difference you can make when you know what difference needs to be made!

#5

Diagnosing Before Prescribing:

Understanding What Needs to Change

"If you don't know what the real problem is, any solution will do… and most won't work."

In healthcare, the instinct to leap straight to solutions is strong. Under pressure from ministers, regulators, or the media, leaders often feel they must *do something* — fast. The trouble is, fast action without clear diagnosis often solves the wrong problem, creates new ones, and erodes trust.

This chapter explores why diagnosing before prescribing is the foundation of effective change — and how NHS managers can do it well.

The Temptation to Jump Straight to Solutions

Healthcare is a high-stakes, high-pressure environment. The moment a problem is spotted, a missed target, a budget overspend, a poor inspection report… leaders feel compelled to act immediately.

Common traps include:

- Copying a 'proven' scheme from another Trust without understanding the context.

- Buying a technology fix without knowing if it addresses the root cause.

- Restructuring teams before identifying if structure is the real issue.

💡 *Think about it…*

An ICB facing long A&E waits invested in new triage software, hoping to speed patient flow. The real bottleneck, however, was the lack of available step-down beds in community care a problem software couldn't solve. The fix didn't fail on tech — it failed on diagnosis.

There is never a solution without a root cause analysis as part of the diagnosis and that is the most important part of changing anything.

Change - we love it…

The Three Levels of Diagnosis

Effective diagnosis in healthcare change means examining problems from three interlinked perspectives:

1. **Psychological** – How do people *experience* the problem? Are morale, motivation, or communication at play?

2. **Organisational** – Are policies, processes, resources, or governance structures creating barriers?

3. **Systemic** – What external pressures or interdependencies are influencing the problem? Such as social care capacity, GP access or national targets.

Missing any one level risks treating symptoms instead of causes.

Think about it

The problem is rarely a problem but most often, the solutions are!

Asking the Right Questions

Good diagnosis is less about clever answers and more about better questions.

Ask:

- *What is really happening?* (Not what we think <u>should</u> be happening.)

- *Who is affected, and how?*

- *What has already been tried? With what results?*

- *Where are the bottlenecks — and who defines them?*

- *If nothing changed, what would happen in 6, 12, 18 months?*

Listening Before Acting

The best diagnostic tool in healthcare is still a conversation. Staff at every level, from cleaners to consultants, porters to people in the C-suite, all hold part of the truth.

Think about it

People closest to the work often see the problem most clearly, but their insights are rarely heard at the top.

Practical approaches:

- Walk the floor before writing the plan.

- Invest time in understanding, first hand. Don't rely on reading reports.

- Use *reverse town halls* where senior managers listen, not present.

- Involve patient representatives early, they often spot the gaps professionals miss.

Data… a friend and a trap

Data is essential, but it can also mislead. In healthcare, metrics often capture *what is easiest to count*, not *what matters most*.

Common pitfalls:

- Over-relying on national performance targets while ignoring local context.

- Confusing correlation with causation … high sickness absence is a symptom, not necessarily the root problem.

- Using averages that hide important variation between wards or services.

Think about it
If an outpatient department's DNA (Did Not Attend) rate spikes, the problem may not be 'patient behaviour' — it could be appointment letters sent too late, transport barriers, or appointment times that clash with caring responsibilities.

Diagnosing Culture

Processes are easy to map. Culture is harder but just as important.

Ask:

- Do staff feel safe to speak up?

- Is blame or learning the default after an incident?

- Are "unofficial" processes more trusted than official ones?

Without diagnosing cultural barriers, formal changes rarely stick.

The Power of Mapping the System

Visual tools like process mapping, patient journey mapping, or *rich pictures* can make invisible problems visible. When teams see the whole pathway, bottlenecks often become obvious.

Involve multiple professions in mapping sessions. The A&E nurse, the social worker and the IT admin will each have different but equally valid, views of the same problem.

Taking Time to Diagnose… without paralysis

Yes, NHS leaders face time pressure. But, diagnosis needn't mean delay. A rapid diagnostic-sprint a week or two, can surface 80% of the insights needed to target change effectively.

Think about it

*The biggest waste of time and money is to have to do things twice. It creates what's called **failure demand**. If you don't have time to get it right, you'll need to find time to do it again.*

In healthcare, the pressure to act can make leaders skip the most important step, diagnosis. But, in the NHS, where resources are tight and lives are on the line, *diagnosing before prescribing* isn't bureaucracy. It's leadership.

> *We cannot change what we do not understand.*
> *And we cannot understand without listening,*
> *looking, and learning first.*

🔧 Manager's Toolkit

Diagnosing Before Changing

- **Start with People, Not Processes** – Ask frontline staff how they see the problem.

- **Check Three Levels** – Psychological, organisational, systemic.

- **Validate with Data** – But challenge what the data *doesn't* show.

- **Look for Patterns** – Do problems cluster by time, team, or process step?

- **Test Your Diagnosis** – Share it with those affected: "Does this feel right to you?"

#6

Complaints – we love 'em

I t's trite... but you really should welcome complaints. Yes, they can be irritating, they can be time consuming and they can be very de-motivating but they are the lifeblood of a business, service or enterprise.

If someone has a complaint you need to know about it. Beware of organisations that have 'customer service departments'. That tells me they have a lot of complaints!

They are defensive. Defensive because some customers can be exploitative. Defensive because, most often, the company hasn't got its offering, delivery or service right. Consistent complaints are a red-flag that something is seriously wrong.

How should we handle complaints? Large organisations have complaints procedures.   The NHS has a labyrinthine system that seems to please no one. Complaints procedures that take forever do not wear the complainant down. They help the complaint to fester and turn it into seething resentment!

There are six simple steps to handing most complaints, dealing with them, learning and moving on.

1 Listen
2 Sympathise
3 Don't justify
4 Make notes
5 Agree a course of action
6 Follow-through.

Let's have a look at them:

Listen

It is important to show you are listening. Face-to-face; listen and make notes. Say; 'I want to make sure I don't forget anything so I'm going to jot a few notes down whilst you are telling me about this. Is that OK.' Say that and they'll know you're listening.

On the phone, tell the other person you are making notes.

Active listening creates an atmosphere that says; 'I'm interested in what you are saying to me'.

Sympathise

Saying 'I'm sorry to hear about this', is not an admission of liability. It's OK to say; 'From what you've told me, I'd be upset, too'.

Don't Justify

No one is interested if there were three members of staff off-sick, if the supplier didn't deliver, if a member of staff didn't respond to their bleep.   That's your problem.

Make notes

Let people see you are writing down what they tell you. Say; I want to be sure I remember everything you tell me. If you are on the phone say; I'm just making a note of what you tell me, I want to remember the facts clearly. This has two effects; the first is people will seldom exaggerate if you think you are making a note and second, it shows you really mean business and want to get the matter sorted.

Agree a course of action

'How shall we deal with this?' I need to find out more about what happened and I will call you back this afternoon, is that OK with you?

Follow through

Whatever you agree, do it. Bust a gut to do it or if you can't deliver, call the people and tell them why and agree another course of action.

If you don't do it – you're inviting more complaints.

#7

Always hire someone better than you

Recruiting is never easy. Right now, if you advertise a vacancy, you'll have a different problem. You'll have to nail-up the letter box and turn-off your in-box. You'll be inundated. If you used to expect a handful or a score of applications… stand-by for hundreds. If you used to get hundreds, you're going to get thousands. Such is the job market.

Nice position for a prospective employer to be in? Well, of course. However, you'll have to have some pretty good systems in place to make sure you sieve, sort and select the candidates. It is very easy to miss a good prospect.

Right now you're going to find some candidates with a fantastic qualifications, experience and background. Spooky! Some of them will look like your boss!

The temptation is not to hire someone who might be a risk to you. Wrong.

Here's something to remember.

'Always hire someone better than you, step back and take the credit. Do it the other way around; step forward and take the blame.'

Always go for talent and always hire someone with an imagination. Bill Gates says the most valuable asset that Microsoft has is the imagination of the people.

He's right. If you can imagine it, it can happen. Making things happen is the easy bit. The imagination bit is the hard bit.

Over at your place are you the '*imaginator* in residence'?

#8

Have you:……………….?

The only fifty things you need to know for the rest of your career…

1 Have you: in the last 10 days … visited a patient, a complete stranger. *Someone using your services, now and in real-time?*

2. Have you: phoned a discharged patient … *TODAY and asked them how was it for them?*

3. Have you: in the last 60–90 days … had a coffee with several patients and relatives, informally to let them gang-up on you?

4. Have you: thanked a frontline employee for a small act of helpfulness in the last three days?

5. Have you: thanked a frontline employee for a small act of helpfulness in the last three *hours?*

6. Have you: thanked a frontline employee for having a great *attitude* … today?

7. Have you: in the last week recognised, publicly, one of your staff for a small act of *cross-functional (Social Services?) cooperation?*

8. Have you: in the last week recognised, publicly, one of *them* for a small act of cross-functional cooperation?

9. Have you: invited in the last month a leader of *another function* to your weekly team priorities meeting, of Board?

10. Have you: personally in the last week-month telephoned or visited a patient or member of staff to *sort out, enquire, or apologise* for some little or big thing that went wrong?

11. Have you: in the last two days had a chat with someone (a couple of levels down?) about specific issues concerning a project, plan or idea?

12. Have you: in the last two days had a chat with someone (a couple of levels down?)
about specific deadlines concerning a project's next steps … and what specifically
you can do to remove a hurdle?

13. Have you: celebrated in the last week a small (or large!) *milestone* reached?

14. Have you: in the last week or month revised a decision you called wrongly and apologised for screwing it up?

15. Have you: installed a very comprehensive customer satisfaction scheme for all *internal* customers? HR, finance, IT all provide internal services to colleagues who really are customers?

16. Have you: in the last six months had a week-long, visible, very intensive *visit-tour* of your whole organisation?

17. Have you: In the last month moved the location of a meeting from the meeting-room, to another department and let the departmental people sit-in?

18. Have you: in the last week had a thorough discussion of a *cool design/idea thing* someone has come across, away from your Trust/Practice, that could be used where you work?

19. Have you: in the last two weeks, had an informal meeting, at least an hour long, with a frontline employee to discuss things we do right, things we do wrong, what it would take to meet your mid-to-long-term aspirations?

20. Have you: in the last 60 days had a general meeting to discuss *things we do wrong* … that we can fix in the next *fourteen days?*

21. Have you: had in the last year, a one-day, intense off-site with each (?) of your internal departments (Don't forget the Coders)… followed by a big celebration of *things gone right*?

22. Have you: in the last week, pushed someone to do some '*family thing*' that you fear might be overwhelmed by deadline pressure at work?

23. *Have you: learned the names of the children of everyone who reports to you?*

24. Have you: taken, in the last month, an interesting-weird outsider to lunch?

25. Have you: in the last month invited an interesting-weird outsider to sit in on an important meeting?

26. Have you: in the last three days discussed something interesting, beyond your department/specialty, which you ran across in a meeting, reading, SoMe etc?

27. Have you: read a in the last week, a trade magazine from outside healthcare?

 28. Have you: in the last two weeks asked someone to report on something, anything, that constitutes an act of brilliant

service rendered in a *trivial* situation; restaurant, car wash, etc? (And then discussed the relevance to your work.)

29. Have you: in the last 30 days examined in detail (hour by hour) your calendar to evaluate the degree 'time actually spent' mirrors your 'priorities'? (And repeated this exercise with everyone on the team.)

30. Have you: in the last two months had a presentation to the group by a *weird* outsider?

31. Have you: in the last two months had a presentation to the group by a patient, junior member of staff or supplier.

32. Have you: in the last two months had a presentation to the group of a cool, beyond-our-industry ideas by two of your folks maybe based on their hobbies or previous employment?

33. Have you: at every meeting today (and forevermore) re-directed the conversation to the practicalities of implementation concerning some issue before the group?

34. Have you: at every meeting today (and forevermore) had an end-of-meeting discussion on *action items to be dealt with in the next 4 or 48 hours?* (And then made this list public… and followed up in 48 hours.) And, made sure everyone has at least one such item.

35. Have you: had a discussion in the last six months about what it would take to get recognition in a local-national poll of *best places to work*?

36. Have you: in the last 3 months approved a *'whacky, different'* training course for one of your people?

37. Have you: in the last month spoken at new staff induction meetings?

38. Have you: in the last week discussed the idea of *Excellence*? (What it means, how to get there.)

39. Have you: in the last week discussed the idea of *Wow!* (What it means, how to inject it into an ongoing routine project.)

40. Have you: in the last 45 days assessed some major process in terms of the details of the *experience*, as well as results it provides to patients and internal departments?

41. Have you: in the last month had one of your staff attend a meeting you were supposed to go to that gives them unusual exposure to senior management?

42. Have you: in the last 60 (30?) days sat with a trusted friend or *coach* to discuss your management style… and its long-and-short-term impact on the group?

43. Have you: in the last three days considered a professional relationship that was a little rocky and made a call to the person involved to discuss issues and smooth the waters? (Taking the blame,'fully deserved or not', for letting the *thing-issue* fester.)

44. Have you: in the last … *two hours* … stopped by someone's (two-levels down) office-workspace for 5 minutes to ask 'What do you think?' about an issue that arose at a more or less just completed meeting? (And then stuck around for 10 or so minutes to listen and visibly taken notes.)

45. Have you: … in the last day … looked around you to assess whether the diversity in your organisation, more-or-less maps the diversity of the patients being served?

46. Have you: in the last day, at some meeting, gone out of your way to make sure that a normally reticent person was engaged in a conversation… and then thanked him or her, perhaps privately, for their contribution?

47. Have you: during your tenure instituted very public (visible) presentations of performance?

48. Have you: in the last four months had a session specifically aimed at checking on the *corporate culture* and the degree we are true to it… with all presentations by junior staff, including frontline people? (And, with a determined effort to keep the conversation restricted to real world, small cases… not theory.)

49. Have you: in the last six months talked about the *Internal Brand Promise*?

50. Have you: in the last year had a full-day off-site to talk about individual (and group) aspirations?

Make a list of what you're going to do today, this week, this month… and JGDI.

One more thought…

Try this quick quiz:

Who manages more than one thing at once**?**
Who puts more effort into their appearance**?**
Who usually takes care of the details**?**
Who finds it easier to meet new people**?**
Who asks more questions in a conversation**?**
Who is the better listener**?**
Who is more inclined to get involved**?**
Who encourages harmony and agreement**?**
Who has better intuition**?**
Who works with the longest 'to-do' list**?**
Who enjoys a re-cap on the day's events**?**
Who is better at keeping in-touch with others**?**

This is from **Joy & Susan Kane-Benson**

They say, the answer is 'women'!

#9

Ten colourful ways to recall enduring truths

With apologies to whoever had the great common-sense to write this in the first place (we've forgotten) … no matter where you work there will be a message here for you! The list is entirely transferable to where you are and what you do. I hope you like it as much as we do!

1) **The purpose of a business is to create and keep a customer.** — this is from Theodore Levitt's **fine book**,   THE MARKETING IMAGINATION, over 40 years ago. As the years go by, we realise how profoundly true it is. We'd only add one word to make this legendary statement truer yet. Add the word 'happy' after customer. For the NHS read Patient.

2) **People are most important of all. Then comes Profit. —** test the group, asking them what 6 letter word starting with P is the most important thing in business. They usually say 'Profit,' to which I must say, 'Close, but not right.' People are the most important thing in business. Everything happens because of people, including profit which is how we keep score in business. Business is a competitive game where the score is kept in money (profits) and if you 'win' you get to play again, and again, and again.

3) **Trees can't grow to the sky, but forests can grow to the horizon.** — people fail to grow past some point. Trees have limits to growth imposed by nature. Organisations do, too. Perhaps because the 'laws of nature' apply as more than just metaphors for business.

4) **Making a ranch bigger makes it harder to manage with more manure. That's why most mergers do not work**. — Many corporations figure a merger is a quick way to grow larger. It is, but what often happens is that the merger doesn't work well. Merging the DNA of two totally different organisations is hard. Which merger partner will win the tug-of-war to be

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in charge? Whose facilities and people will be found to be redundant? And so on, and so on. Experts at McKinsey have studied it and find the same thing. After the first year or two when the synergies of duplicate people, facilities, etc. are flushed out, the merged company falls back to a level that is less than the total of the two merger partners. A high percentage of mergers destroy shareholder value, not increase it. Prime examples: AOL-Time Warner, Lucent & Alcatel.

5) **Never double cross a partner. Partners are critically necessary.** In this increasingly complex global economy, no one, no organisation can be *good enough* at everything. That's why they need partners Not just *outsourcing suppliers*. True partners rely on trust, shared goals with reasonable risk and rewards for both partners, and open communications. Mutual dependence is a strong bonding agent for partnerships. Where both partners need something the other one has, somehow that works very well. When one partner tries to use power over the other, power is like poison and the partnership dies. Trust is built slowly and can be destroyed rapidly, so to be trusted, be trustworthy.

6) **How do you eat an elephant? One bite at a time.** You'll know the answer to this one and yet many people still run at the whole elephant with their mouth wide open. The result is ugly. Big problems, big tasks, big acquisitions, big projects etc., all need to be broken down into manageable size bites and each of those managed or they become indigestible. And by the way, if you decide to dance with an elephant (a huge customer or partner, think social care), the elephant will want to lead!

7) **Find the root cause; don't just treat symptoms.** If you have a headache because someone is hitting you over the head with a bat, taking aspirin will not cure your headache. Take the bat away. If you have customer service problems because your culture is bad or your processes are flawed, more inventory and expedited shipping won't solve the problem. Those things are just expensive Band-Aids. Inspectors don't make quality better; they just pick out some of the defects. The rest get through and get shipped. Track problems past the symptoms, all the way to the root causes and fix those.

Japanese root cause theory suggests you might have to ask 'Why' 6 or 7 times to get to the bottom of things.

8) **When you are hot, you're hot; when you're not, you're not. (When you are in a hole, stop digging!)** When *you're hot* almost anything is possible. You will never be more powerful (hot) than you are in the first three months of a new job. Make sure you have a plan and know how to execute it. Time flies!

9) **Nothing happens until you take action. (Making a decision is nothing; taking action on it is progress.)** — *'Three frogs are sitting on a log; one decides to jump off. How many frogs are on the log?'* If you said two--WRONG. Still three. There is a huge difference between decision and action. Nothing happens until you act on a decision, and follow it through to a successful outcome. Otherwise you're still just a 'frog on a log.'

   10) Time is the perishable of the three key resources; Time, Talent, and Money. The most difficult job in business, management (and in life) is setting priorities… and then allocating scarce resources to the best opportunities. In business there are really only three resources to allocate: Time, Talent (People) and Money. Spend those on nagging problems and the big opportunities go untapped. Worse yet, one of those resources, Time… is perishable. Once spent, it's gone. No way to get it back. Here's another riddle for you:

   You have to make a two-mile drive and you must average 60 mph for the two miles. You decide to be cautious and drive the first mile at 30 mph. How fast must ' you drive the second mile to average 60 mph?

If you said 90 mph or 120 mph - WRONG. This is a trick question. There is NO speed you can drive the second mile to average 60 mph because to do so, you'd have to make the trip in 2 minutes,

and you used up your 2 minutes going too slowly on the first mile.

Time lost can never be recovered, so it is critical to plan well, and take action swiftly… while you still have time.

#10

Sustaining Change – From Early Wins to Long-Term Transformation

"Winning the battle is not enough; we must win the war for lasting improvement."

M any healthcare change initiatives start with energy, resources, and excitement — only to fizzle out. Early wins are celebrated, but sustaining momentum over months and years is where most transformations fail. This chapter explores how NHS managers can move from short-term victories to enduring change that becomes embedded in culture and practice.

1. The Pitfall of Early Wins

Early success can be both a blessing and a trap:

- Staff may assume the problem is solved and revert to old habits

- Leadership may lose urgency, reducing support

- Systems may not be fully adapted, leaving vulnerabilities

2. Embedding Change into Routine Practice

- Sustainability comes when change is normalised, not exceptional:

- Integrate new practices into job descriptions, standard operating procedures, and policies

- Reinforce through training, supervision, and mentoring

- Use audits and feedback to ensure adherence

When new behaviours become part of "the way we do things," they endure.

3. The Role of Leadership in Sustaining Change

- Leadership must shift from driver to steward:

- Continue to model desired behaviours

- Keep change visible and relevant

- Allocate resources to maintain momentum

- Recognise and celebrate ongoing achievements

Consistency and presence from leaders signal that the change is a priority, not a passing initiative.

4. Building a Culture of Continuous Improvement

- Sustainable change is rarely a one-off project; it's a mindset:

- Encourage teams to identify incremental improvements

- Celebrate learning from setbacks as well as successes

Promote psychological safety so staff can raise concerns or suggest refinements

Think about
A ward introduced a falls prevention protocol and empowered staff to suggest minor tweaks weekly. These small, iterative improvements were monitored centrally, creating a living, evolving process rather than a static policy.

5. Measuring Impact Beyond Metrics

Long-term sustainability requires attention to outcomes, not just outputs:

- Track patient outcomes, quality measures, and safety indicators

- Include staff engagement and morale as part of success

- Review financial or operational efficiency over time

- Compare intended impact with actual results and adjust accordingly

Sustainable change is measured not only in numbers but in human experience.

6. Dealing with Drift and Regression

Even embedded change can drift:

- Staff turnover, policy shifts, or new leadership can erode gains

- Complacency can sneak in once early successes are achieved

- Strategies to prevent regression:

- Regular refresher training

- Ongoing audits and feedback

- Leadership check-ins and visibility

- Embedding accountability into performance frameworks

-

7. The Power of Networks and Communities of Practice

Sustainability is strengthened when change spreads beyond a single ward or department:

- Use cross-departmental communities to share best practice

- Encourage peer coaching and mentoring

- Leverage networks to troubleshoot emerging challenges

    💡 A *Trust scaled a successful sepsis response protocol from one ward to the entire hospital by creating a "sepsis champions network," where trained nurses coached colleagues, monitored adherence, and shared lessons across teams.*

8. Manager's Toolkit: Making Change Stick Long-Term

- **Normalise Practices** – Integrate change into SOPs, training, and job roles.

- **Sustain Leadership Attention** – Model behaviours, allocate resources, and maintain visibility.

- **Create Feedback Loops** – Use data and staff feedback to adjust continuously.

- **Celebrate Learning** – Recognise improvements, not just successes.

- **Strengthen Networks** – Use champions, peer-to-peer coaching, and communities of practice.

- **Monitor for Drift** – Regularly audit and reinforce adherence.

Change is not a project with a start and end date; it is a journey. In healthcare, where the stakes are human and complex, sustaining change is the true mark of effective leadership. Early wins matter, but the real victory comes when improvements become part of the organisation's DNA; improving patient care, supporting staff, and building resilient systems for years to come.

Success is not measured by the launch of an initiative, but by its lasting impact on care and culture…

… and how success becomes an enduring part of the organisation's DNA.

#11

Meetings – take them seriously

Meetings, bloody meeting! How often do you hear that?

Meetings are what you do so take them seriously. Make them fun, make them interesting and change the places the meetings take place. But, do take them seriously.

'*The meeting is over let's get back to work*'. Ever heard that? I bet you have and you might even have said it yourself. Meetings are work, let's get that straight. Here are five tips for more productive meetings:

1 Time is money – is the meeting necessary and is it too long?

Take a moment and calculate the cost of a meeting. Take a figure for everyone at a meeting; salaries, travel and all the rest, calculate an 'hourly-cost' rate. You'll be astounded! Write it across a large sheet of paper and Blue-Tac it to the wall. Remind everyone; '*This what the meeting is costing, so make it an investment!*'

Is the meeting necessary? Regular meetings and 'catch-ups' seldom are. Think about what can be done with a conference call. Circulate PowerPoint slides, spreadsheets and reports by e-mail and view them simultaneously during the conference call. The pressure is on to reduce the carbon footprint across the public sector. Get used to the idea that travelling to meetings is not a good idea. Teams and Zoom are in charge!

2 Get serious about agendas

Agendas are a road map. Don't take them lightly. Plan them properly and stick to them. It is easy to wander off

the topic. It depends on the quality of the chairmanship! Be prepared to say; '*I know that is interesting and is a topic we need to come back to. But, right now we have a lot to get through and we have to concentrate on this item.*' Beware of the agenda-benders! If the agenda is complicated and time is tight, be prepared to set a time scale for each of the items; fifteen minutes for this and twenty minutes for that. That way the items at the end of the agenda will receive a fair hearing.

3 Nothing happens after the meeting

Think of a meeting as producing a blue-print for activity. For what happens next. Be sure that action items are allocated and the people concerned know they are accountable and agree the task and the time scales. There is nothing worse than turning up at the next meeting to find things haven't been done. Don't be afraid to set interim benchmarks and call people to see how they are getting on.

4 Get all the information in place

Ensure all the numbers and reports are in place and sent out with the agenda. There is nothing worse than having to shelve decision on the grounds that all the information is not in place. It is a gift for the undecided and the malcontents; '*How can I be expected to make a decision without all the information at my finger tips*'. You don't want to hear that. Set a cut-off date for all agenda documents. If they are not there, make it clear to the sponsors they are out of luck until the next meeting. They'll soon get the hang of it! Avoid 'tabling' information on the day of the meeting. It is not professional, not reasonable to ask people to sign up to a decision and give wriggle room to opponents. You wouldn't dream of having a meeting without the chairs and table. Don't have a meeting without the data, information and supporting documents.

5 Meetings are real work

Make them feel like work, tell people you are looking for decisions, moving forward and changing things. Meetings are the places where the course of an organisation can be changed and the hopes and aspirations of staff and patients will be met or dashed. If meetings are not like that, why have a meeting? Think about management by huddle! Ad-hoc get-togethers on the phone, web-cam or car-park will often do just as well to resolve single issues.

#12

You can't be a technophobe.

Not these days. Twitter, Face book, Linked-in, TicTock, blogs, AI, webinars, video conferencing… do it all. There is no excuse not to have your own web-site.

You can download software to create one for free and you can find places to host it for free. PowerPoint, Excel, Outlook; all part of the repertoire of leadership. Leaders love technology. They realise technology is the landscape, the template, the architecture of change.

> *Alexander Graham Bell invented the telephone. He got nowhere with it in the UK and took his invention to the US.*
>
> *He demonstrated it to the Mayor of New York who was fascinated and invited Bell to demonstrate it at his young daughter's birthday party.*
>
> *Bell was very cross. 'Mr Mayor' he said, 'This is not a toy. It is an important business tool. One day you will be able to lift the receiver and talk to someone 20 miles away.'*
>
> *The Mayor thought for a moment and said, 'Mr Bell, I don't know anyone twenty miles away.'*

Today we may not see the relevance of a particular technology. Health was slow and still struggles to capitalise on the benefits of IT and data.

It was slow to recognise texting could remind people of appointments and reduce DNAs. Both technologies now make a huge contribution.

Our customers, the patients, the stake-holders in our *business* are using them now.

💡 What does that mean for us?

Who would have thought 'Texting' a toy for kids would cut DNA costs and remind people to take medication?

Who would have thought Web-based services support patients in real time?

Who would have thought last winter 13,000 people were supported in their own home, part of virtual wards.

The boss of your organisation can use simple technologies to keep every member of staff up-to-date on a daily basis. In challenging times, minute by minute, there's no excuse not to.

They could ask; what is happening today that we can use to make tomorrow better?

> One day, someone visiting your organisation will use a loo and see that it's filthy. They'll use the video facility on their iPhone and whizz it off to U-Tube, TikTok, X and you'll be famous for all the wrong reasons.

#13

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"Winning the battle is not enough; we must win the war for lasting improvement."

Many healthcare change initiatives start with energy, resources and excitement... only to fizzle out. Early wins are celebrated, but sustaining momentum over months and years is where most transformations fail.

This section explores how NHS managers can move from short-term victories to enduring change that becomes embedded in culture and practice.

1. The Pitfall of Early Wins

- Early success can be both a blessing and a trap:
- Staff may assume the problem is solved and revert to old habits
- Leadership may lose urgency, reducing support
- Systems may not be fully adapted, leaving vulnerabilities

> *Example from Practice*
> *A Trust implemented a new discharge protocol and reduced delays in the first quarter. However, after initial celebration, staff returned to informal shortcuts. Without continued oversight, delays crept back, demonstrating that early success does not guarantee sustainability.*

2. Embedding Change into Routine Practice

Sustainability comes when change is normalised, not exceptional:
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- Reinforce through training, supervision, and mentoring
- Use audits and feedback to ensure adherence

When new behaviours become part of *the way we do things,* they endure.

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💡 *Think about this*

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Long-term sustainability requires attention to outcomes, not just outputs:

- Track patient outcomes, quality measures, and safety indicators
- Include staff engagement and morale as part of success
- Review financial or operational efficiency over time
- Compare intended impact with actual results and adjust accordingly

Sustainable change is measured not only in numbers but in human experience. The way change becomes normalised and; 'the way we do things around here'.

6. Dealing with Drift and Regression

Even embedded change can drift:

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- Complacency can sneak in once early successes are achieved
- Strategies to prevent regression:
- Regular refresher training
- Ongoing audits and feedback
- Leadership check-ins and visibility
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7. The Power of Networks and Communities of Practice

Sustainability is strengthened when change spreads beyond a single ward or department:

- Use cross-departmental communities to share best practice
- Encourage peer coaching and mentoring
- Leverage networks to troubleshoot emerging challenges

> *Example from Practice*
> *A Trust scaled a successful sepsis response protocol from one ward to the entire hospital by creating a "sepsis champions network," where trained nurses coached colleagues, monitored adherence, and shared lessons across teams.*

💡 **Manager's Toolkit: Making Change Stick Long-Term**

- **Normalise Practices** – Integrate change into SOPs, training, and job roles.
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- **Monitor for Drif**t – Regularly audit and reinforce adherence.

Change is not a project with a start and end date; it is a journey.

In healthcare, where the stakes are human and complex, sustaining change is the true mark of effective leadership.

Early wins matter, but the real victory comes when improvements become part of the organisation's DNA.
Improving patient care, supporting staff, and building resilient systems for years to come.

Success is not measured by the launch of an initiative, but by its lasting impact on care and culture.

#14

The story of Hans Christian Anderson's Emperor's new clothes...

...is for the kids but it has a real message for anyone in management.

The tale is about an arrogant Emperor who wouldn't listen to anyone. He was conned into believing an invisible suit of clothes could only be seen by a wise man.

Self importance and conceit got in the way so he put on the 'invisible' suit and walked naked through the town.

All the flunkeys and toadies admired the Emperor's new clothes. Some were too frightened not to, except one little boy.

The lad burst out with what everyone else was thinking; '*Why is the Emperor Naked?*'

I'll leave you to research what happened next but I can tell you it all ended happily and the King learned the error of his ways!

Managers should be much more like the little lad than the Emperor.

Encourage your people to ask the stupid questions. After all someone asked; 'Why are all the computer commands on the key board?' Next, we got the first mouse.

The greatest question you can ask is; '*Why do we do it like this?*' It is disruptive, inquisitive, trouble making and upsetting.

So use it, often!

Here's a bonus thought.

‼️ *Ask the question 'WHY' at least five times and it will always bring you to the truth.............*

#15

Write like a leader.

Its all 2esy 4 U 2 txt lyk this.

And, to write emails without punctuation and paragraphs and all the rest

✅ **Leaders are different;** they have standards and stand out from the crowd.

Write impeccable e-mails and texts. Use punctuation, paragraphs and even; colons and semi-colons!

Leave the playground English in the school.

Leadership is about standards. Good writing matters and sets an example.

It says; we are not sloppy people.

#16

Leaders improvise.

The game keeps changing. Technology and customer expectations are driving business. Political interventions are driving the NHS.

There is an avalanche of change going on.

You can moan about it and you could wish it wasn't happening but it is and as a leader and a manager you'll have to deal with it.

You can't deal with it if you are not ready to adapt. Forget what you did yesterday, last week, last year. Get over it. It's different now. It is not the same this time.

Forget the past and move on. There are new structures and that means new relationships. Leaders recognise this and adapt, they are nimble and lithesome.

Leaders constantly have to reinvent themselves to leading in a new environment. There are more teams, greater inclusion and leaders are more exposed through technology and the transparency of the times than ever. Leaders are accountable and no one follows blindly.

Churchill, one of the greatest leaders of the modern era is remembered, in part, for his wartime radio broadcasts. Before the war and his entry into politics, he was a war correspondent in South Africa who used the technology of the times to 'wire' copy back to his editors in London. He used technology to reinvent himself as a wartime leader and made radio broadcasts, and he became 'accessible'. If he had been alive today would he Tweet? You bet. He would have reinvented himself around the times he lived in.

Be ready to reinvent yourself.

#17

Of course, the world is very different. Get over it.

Change is what we are about. If there was no change they would only need administrators to run the place. Change is what management is all about.

When someone invented the car the rest of the world thought they would run everybody over. Men who looked after horses saw the end of their jobs. People who made saddles and whips and horse blankets saw the car as their death-knell.

Then the trains came with all the noise and steam; farmers said the cows would be frightened to death and wouldn't produce any milk.

When the NHS came along, in 1948, the British Medical Association ran a campaign against it. They raised £1m (a lot of money in those days) to fight it. They said; 'doctors would become little more than common servants'.

Cars, trains, doctors; we look back and laugh. Next to everyone has a car, we all use the train and survey after survey puts the Doc's at the top of the most trusted list.

What are we frightened about today? AI, Stem-Cells, data, genetically modified crops, scientists making life in a test tube? There was once a campaign to stop heart transplants… *doctors playing God*, they said.

Today's moral and ethical dilemma is tomorrow's every day.

Pub quiz question; who said; *All we have to fear is fear itself*?

It was Franklin D Roosevelt!

#18

Communicating for Change Creating Clarity and Engagement

"The single biggest problem in communication is the illusion that it has taken place." — George Bernard Shaw

I n healthcare, communication is not just about passing on information. It's about creating understanding, trust and aligning messages, even in the midst of complexity.

Poor communication can derail even the most carefully designed change initiative; effective communication can build momentum, reduce anxiety, and keep teams engaged.

Let's explore the principles, strategies and pitfalls of communication in change management... why the way you say something often matters as much as what you say.

Why Communication Matters in Change

Change disrupts routines, assumptions, and comfort zones. People in the workforce naturally look for answers:

- Why are we doing this?
- How will it affect me?
- What's the timeline?
- Who can I turn to for support?

If those answers aren't provided, people will fill the vacuum with speculation, rumour, or resistance. Communication is the antidote to uncertainty.

The Core Principles of Effective Change Communication

Clarity over Complexity... strip away jargon, acronyms and management-speak. Us plain English. Remember that?

Consistency over Chaos… repeat the same core messages, across all channels. Say it. Say it again. Repeat it and then remind them what you've said.

Transparency over Spin… acknowledge risks and difficulties honestly. If there is a problem, spell out what it is and encourage discussion.

Dialogue over Broadcast… communication must be two-way, not top-down. The best place for people to see your message is in your eyes.

Emotion over Data Alone… remember, facts are necessary but mostly, people act on feelings.

The Channels of Communication

Different messages require different channels. Look for a blend of:

- **Face-to-face briefings**… best for sensitive or complex change. Talking to people one-to-one is time consuming… but so it dissent.
- **Team meetings and huddles**… create space for questions and dialogue. Give everyone a chance to ask.
- **Written updates**… create a reference point and ensure consistency. Email updates, QR codes in public places inviting people to 'click-n-find-out'.

Remember you are competing with crowded inboxes. Make sure the subject title grabs attention.

Digital platforms… reach large and dispersed teams quickly. WhatsApp groups are very effective. Make sure everyone is included.

Informal conversations… build trust and deal immediately with concerns as they arise. There is no better place to find out what people really think than the water cooler conversations.

The right channel builds credibility. The wrong channels breed confusion.

The Role of Leaders as Communicators

Leaders are the most trusted source of information during change. Staff want to hear from their immediate manager more than from distant executives.

Effective leaders:

- Are visible and available
- Tailor messages to their audience
- Avoid sugar-coating difficulties
- Actively listen to feedback
- Communicate why, not just what

Leadership communication is not about broadcasting confidence… it's about creating confidence through honesty and connection.

Overcoming Common Barriers

- **Information Overload** – Too many emails, too much noise. Use concise, prioritised messages.
- **Mistrust** – Past experiences of failed change can create cynicism.   Acknowledge history openly. Respect the past and take the best of it into the future.
- **Mixed Messages** – Different leaders saying different things erodes credibility. Align messaging early.
- **Silence** – No news is never neutral; it's always negative. Silence creates space for rumour. Gossip thrives in a vacuum.

Learn from mistakes.

In one Trust's digital transformation programme, delays in system readiness were not communicated. Staff found out only when the system failed to go live. The result: frustration, lost confidence, and increased resistance. Transparent, early communication could have preserved trust.

Engaging Hearts as Well as Minds

Data may explain why change is necessary, but stories connect emotionally.

Leaders can:

- Share stories that illustrate the need for change
- Highlight frontline staff successes in adapting

- Frame change as part of a bigger purpose (faster, better, quicker, safer)
- Change sticks when people don't just understand it… they believe in it.

The Power of Listening

Communication is as much about listening as it is about talking.

Effective change leaders:

- Create safe spaces for staff to voice concerns without fear
- Use pulse surveys, drop-in sessions, or Q&A forums
- Act visibly on feedback (and explain when action isn't possible)
- Listening demonstrates respect, builds trust, and surfaces practical problems that can derail change.

Manager's Toolkit Communicating for Change

- **Craft a Core Message**… no more than 2–3 simple, repeatable points.
- **Tailor to the Audience**… senior clinicians, admin staff, and patients will each need different language.
- **Choose the Right Channel**… match the message to the medium. Word count, style.
- **Communicate Early, Communicate Often**… silence creates a vacuum and sucks in all of the messages you won't want!
- **Balance Honesty and Optimism**… acknowledge difficulties, while keeping focus on purpose.
- **Listen Actively**… communication is two-way. Listen more than you speak.
- **Repeat, Repeat, Repeat**… reinforce the message until it becomes embedded.

Communication is the bloodstream of change.

Without it, the system falters, mistrust grows, and engagement wanes.

With it, even the most challenging transformation can gain momentum and commitment.

Healthcare managers must learn that communication is not an afterthought; it is the work of change. By creating clarity, building trust and engaging hearts and minds, leaders can transform uncertainty into a shared purpose…

… turn resistance into resilience.

55

#19

The Politics of Change, Navigating Power, Influence, and Resistance

"In healthcare, change isn't decided by strategy alone…
it's negotiated, bargained, and sometimes battled."

Even the most carefully diagnosed problems and well-designed solutions can falter if leaders ignore the political landscape.

Change in healthcare is rarely just technical, it is inherently social, relational, and political. Understanding the politics of change is essential for managers who want their initiatives to succeed.

Change Is Political Because People Have Power

Healthcare organisations are complex webs of power:

- Clinicians hold authority through expertise and professional legitimacy.
- Managers hold authority through budgets, reporting lines, and governance.
- Trade unions influence workforce behaviour and morale.
- Patients and the public influence reputational risk.

Every decision interacts with these power dynamics. Ignoring them is a guaranteed pathway to resistance.

💡 *Think about*

An ICB attempted to centralise stroke services to improve outcomes. The plan made clinical sense, but several senior consultants opposed it publicly, fearing loss of local influence. The board had not engaged them early and the change stalled for months.

Stakeholders: Friend, Foe, or Fence-Sitter?

Mapping stakeholders is critical. Not all opposition is hostile, and not all support is reliable.

Categories to consider:

- **Advocates** – Will champion the change publicly.
- **Resistors** – Will block or undermine unless engaged.
- **Fence-sitters** – Neutral but influential; could swing either way.
- **Hidden influencers** – Informal leaders whose opinion matters more than their title.

In healthcare, the unofficial network often outweighs the official hierarchy.

The Importance of Timing and Sequencing

Even the right idea can fail if introduced at the wrong time.

Politics in change is often about timing:

- Avoid launching new initiatives during high-pressure periods (e.g., winter bed crises).
- Use regulatory reviews or inspections as levers, not excuses.
- Sequence changes so early wins build credibility before tackling the hardest problems.

Language Matters. Framing the Change

Words can be as powerful as budgets. How you frame the change can turn resistance into engagement:

Threat framing; We must act or patients will suffer... creates urgency but can provoke fear.
Opportunity framing; Here's how this improves care and supports staff... encourages participation.
Shared purpose framing; Together we can make this work...builds alignment.

Handling Resistance Strategically

Resistance is inevitable. The trick is to manage it intelligently:

- Listen – Understand the reasons behind opposition.
- Engage – Involve resisters early in co-design.
- Negotiate – Be willing to compromise on less critical elements.
- Use allies – Amplify the voices of credible supporters.
- Accept some loss – Focus on what is strategically non-negotiable versus what can be flexible.

💡 *Think about*

A Trust wanted to merge two maternity units. Midwives were vocal in opposition. Leaders didn't ignore them; instead, they co-designed staffing rotas and patient flow plans with midwives, turning vocal opponents into supporters.

Political Skill. A Core Leadership Competency

Navigating the politics of change isn't manipulation, it's influence built on credibility and relationships.

Key skills include:

- **Emotional intelligence** – Understanding moods, motivations, and pressure points.
- **Negotiation** – Finding win-win solutions without compromising core objectives.
- **Storytelling** – Explaining why the change matters in terms that resonate.
- **Persistence** – Politics is rarely won in a single meeting.

Culture, Trust, and Politics Are Intertwined

Political skill is inseparable from trust and culture. In high-trust environments, people accept change even if it inconveniences them.

In low-trust environments, even minor changes provoke resistance.

Political savvy without trust can look like coercion. Trust without political awareness can lead to naïve optimism. Politics is the art of enabling change in the context of human behaviour and organisational culture.

Practical Tools for Political Navigation

- **Stakeholder Mapping** – Identify influence, motivation, and likely response.
- **Power Analysis** – Understand formal and informal sources of authority.
- **Engagement Plan** – Decide who to engage, when, and how.
- **Communication Framing** – Tailor messages to different audiences.
- **Monitoring Resistance** – Track signals and adapt tactics before problems escalate.

💡 *Think about*

Change without political awareness is change at risk. In healthcare, where multiple professions, organisations and patient voices intersect, politics is not a dirty word, it is the medium through which change happens. Skilled managers navigate this terrain not by bulldozing opposition, but by listening, engaging,and strategically influencing.

Change is not about avoiding conflict, it's about understanding it comes with the territory, negotiating it and managing it wisely.

◄ back

#20

If you have a passion for 'Try it', then you'll get failures.

The more you do the better you get at something – true, if you do the same thing. However, the more you do that is different, the more you'll make a mess of things, but the more you will gain in innovation and new ideas.

A man once ran a huge sales team. Keeping them motivated was a big problem. They were all high earners who had seen every motivational gimmick in the world.

The boss looked at the data and discovered there was a pattern. Twenty new prospects lead to 5 appointments. Five appointments led to one sale.

He discovered a simple truth; you have to get the 'no's' before you get the 'yes's'

He switched the emphasis from the yes to the no. He realised; the more *no's* his people got, the closer they were to the next *yes*. He rewarded them for the amount of *prospecting* they did. Getting the no's. His sales team's performance figures went up by a third.

That tells us; we have to get a lot of things wrong before we get to the really, really good bits.

If you don't 'try it', you'll never find it and you'll never do it.

#21

Creating a Burning Platform Without Starting a Fire

"Urgency is the fuel of change — but uncontrolled flames burn everything, including trust."

Healthcare leaders constantly face the challenge of making change urgent enough to act on, without provoking panic, cynicism, or burnout.

The concept of a *burning platform*, a situation so critical that inaction is untenable, is widely cited in change literature. In the NHS, however, it's a delicate balance: too little urgency and change stalls; too much, and staff morale collapses.

How to create real, motivating urgency while maintaining stability and trust?

1. Understanding the Burning Platform

A burning platform signals that current ways of working are unsustainable. Examples include:

- Unsafe staffing levels on wards
- Rising waiting lists beyond safe thresholds
- Failing inspection reports
- Financial deficits threatening services

Urgency is not a marketing slogan; it is rooted in facts and lived experience. Staff are far more likely to engage if the threat is real and visible.

Example from Practice
A Trust facing recurrent ED breaches mapped patient flow delays and showed staff that delays were linked to preventable admissions and compromised patient safety. The urgency was tangible, data-driven, and compelling. Staff mobilised to co-create solutions rather than feel blamed.

2. The Dangers of Overheating the Platform

• Too much pressure can backfire:
• Staff feel blamed or fearful
• Cynicism rises ("we've heard this before")
• Turnover increases
• Quality of care suffers
• Urgency must motivate, not terrify.

In the NHS, where staff are already operating at capacity, the difference between a motivating fire and a destructive blaze is subtle and critical.

3. Building Urgency Responsibly

🔑 **Key principles:**

• Ground urgency in evidence
• Use data, incidents, and patient stories to show why change matters.
• Avoid exaggeration; credibility is everything.
• Link urgency to outcomes
• Focus on what matters to staff and patients (safety, quality, equity).
• Explain why waiting to act will make problems worse.
• Balance urgency with support
• Provide resources, training, and guidance alongside the challenge.
• Show that leadership is not just raising the alarm, but clearing obstacles.

4. Engaging Hearts, Not Just Minds

Urgency works best when it appeals to both rational and emotional drivers:

Rational: Evidence shows our readmission rate is higher than comparable Trusts.
Emotional: This is about preventing avoidable harm to patients.

Healthcare is inherently relational; appeals to professional purpose resonate more than statistics alone.

5. Communicating the Burning Platform

How the message is communicated makes all the difference:

- **Transparency** – Share the facts openly. Don't sugarcoat.
- **Consistency** – Avoid mixed messages from different leaders.
- **Credibility** – Use trusted voices, not just executives.
- **Actionability** – Staff must see that they can contribute to change.

💡 *Consider This:*

When a mental health Trust faced rising delayed transfers, leadership framed urgency through patient stories and service data while pairing the message with new care coordinators and IT tools. Staff felt both the pressure and the support.

6. Avoiding *Burnout by Urgency*

Repeated cycles of crisis messaging can desensitise teams. NHS staff have experienced decades of successive *emergency initiatives,* leaving many sceptical.

Strategies to avoid burnout:

- Prioritise key change areas; avoid signalling that everything is urgent.
- Celebrate progress and small wins.
- Rotate leadership visibility to prevent listening fatigue.
- Allow reflection and debriefing as part of change processes.

7. Creating a Platform, Not a Panic

Think of urgency as a platform for action, not a fire to jump from.

✅ **A good platform, evidence rich:**

- Clarifies the stakes
- Inspires immediate attention
- Invites collaborative problem-solving
- Maintains trust and morale

❌ **A bad platform, evidence poor:**

- Blames people
- Exaggerates risk

- Ignores support
- Drives fear or cynicism

Creating Urgency Without Panic

- **Data and Storytelling** – Combine metrics with patient/staff narratives.
- **Clear Priorities** – Focus on the most critical change areas.
- **Visible Support** – Show staff that they are empowered, not abandoned.
- **Engage Trusted Voices** – Use clinical champions and informal leaders.
- **Feedback Loops** – Monitor morale and adjust messaging in real time.

In healthcare, urgency is the engine of change but unrestrained, it destroys both morale and quality. Effective leaders know how to create a burning platform that illuminates the path forward rather than sets the organisation aflame.

Real urgency motivates action. False urgency creates fear.

The difference is leadership.

#22

Leaders are servants

Lots of people try and analyse leadership and most of them come to the wrong conclusion. What is a leader? For us there is only one answer…

… *a leader is someone I can trust*.

Leadership is a sacred trust. Leaders tell the truth, set the right example and as a result are trusted. They don't have to have all the answers. In fact leaders gain more trust by saying, '*I don't know the answer, do you?*'

The chances are the nearer you are to the problem, the easier it will be for you to find the solution.

Leaders don't sit in offices and issue circulars, memos and billet-doux.

In every part of the organisation, no matter how senior a manager you are, if you have people you are responsible for, remember just that; you are responsible.

You become the servant of the people; creating the right environment for success.

Making sure the distractions are dealt with, the junk is swept side and the real-job is focussed on.

And, by the way:

> If the person to whom you delegated, does the job twice as well as you would have done, consider yourself a leader.

#23

Expect nothing to go to plan – however careful you have planned it!

No one plans to fail, they just fail to plan! Good little phrase that! Worth remembering. But, it only tells half the story.

Almost always, as the plan unfolds, something screws it up. As a manager we know that and when it happens; it is not the time for shouting and recrimination, it's just par-for-the-course.

Good managers are able to command resources, muster support, draw-in favours and make their own weather.

Managing under pressure **_is_** management. The rest is just administration.

Management is untidy. People are free to make mistakes and they do; they can do stupid things, and they do. Expect nothing less! That's why you are in charge and they are not. Get it? Never get cross, get grateful.

Who said:

> '*I would not say that the future is necessarily less predictable than the past. I think the past was not predictable when it started.*'

It was US secretary Donald Rumsfeld, who also said:

> '*…………..as we know, there are known knowns; there are things we know we know. We also know there are known unknowns; that is to say we know there are some things we do not know. But there*

are also unknown unknowns -- the ones we don't know we don't know.'

67

He got if from **Ibn Yamin**!

#24

Success and innovation are probably under the soles of you feet.

If anyone says; 'let's look outside the box',
you're with the wrong people.

Yes, we can learn from other organisations and should open up our minds to other ways of doing things. We know that.

You're right, OK?

This is something different. The solutions to the problems of your organisation are probably to be found in the organisation.

If you take the trouble to burrow, ferret, walk the corridors and get to the coal face, the problem you are trying to fix will have its solution in the hands, or mind of the person closest to the problem.

New and innovative ways of doing things will be apparent if you ask the person doing the job; '*how can we do this differently?*'

They will know. If they can't give you an immediate answer, work with them until the do.

Give them the confidence to think.

Facilitate change.

💡 **Bonus thought:** The management of change is easy, just remember this one thing…

… people love change if they think they are in charge.

Put them in charge or at least be sure to involve them.   Go out of your way to do it.

Bust a gut!

#25

Flattery WILL get you everywhere.

I f you feel angry, betrayed, cross, incandescent, tired, fed-up, at a loss, exasperated, infuriated, maddened, furious, wound up, worn out, exhausted, fuming, livid, irritated, disappointed, let down, disenchanted, crestfallen, embittered, cynical, resentful, offended and aggrieved......... forget it.

Get over it.

It's your job to be nice.

Go and do it.🙂

#26

In tricky times, headcount, counts. Who stays and who goes?

Stop being an employee. Employees are expendable. Become a trusted, reliable, most-wanted Brand.

B e distinctive, be a brand. Brands are remembered, trusted, sought after and paid for, at a premium.

Differentiate yourself from the rest.

What is it that you can do better than the rest?

What is it about you that shouts; *'Commitment', 'passion', 'excellence'*? What is it that makes you *distinctive*?

Responsible for people?

Turn them all into brands. We all like to shop in the store where there is choice, where there are brands we know and trust.

Fill your store full of brands.

How do you do that?

1. Stand for something. What do you really believe in? Don't be afraid to tell people.

2. Always deliver. Rather fail in the attempt than let someone down.

3. Be clear about what you want. Negotiating, planning and getting there.

4. Be a work in progress. A brand is never finished. It needs developing, refining and constantly tweaking. Don't neglect your own training, spend time 'just thinking', and figure out what you need to make you better at what you do. Fill the weak spots.

5. Don't be afraid to bloody a few noses. If you believe in what you are doing, stand up for it. Absorb criticism and take note of it and remember, if everyone agrees with you, you might not be saying anything worth thinking about!

6. Don't be afraid to break the conventions. Be creative, Tweet (X), blog, Linkedin, Facebook, TicTock, they are all tools of leadership and communication. Use them all.

> Try treating your work and your position in the organisation as a product and a 'brand' is a good way of staying focussed. Think of yourself as a 'product' that your employers 'buy' and your colleagues 'buy into'.

How do you create your brand and how do you know when you've got one…

Try this check list:

1. What drives you? **Do you have a goal, a life's experience, a 'go-button'?**

2. What are you passionate about? **What makes you excited, angry, or motivated to take action? How does that come through in you work?**

3. What are your strengths? **Everyone has specific skills or personality traits that they are especially good at.** What are yours?

4. What are your weaknesses? **Weaknesses are nothing to be ashamed of. It just means you're not as strong in those areas. You may need to work on them or they may not matter – you just need to know.**

5. What is your personality type? **Are you a 'type-a' personality? A 'pleaser?' Maybe you're an extrovert, sanguine or an ambitious choleric. Getting to know your own personality traits is an essential part of defining your brand.**

6. What is your story? **Everyone has a story. Yours might be a 'rags to riches' story or maybe an inspirational 'beating the odds' story. What is the 'narrative' of your life that defines you?**

7. What is your background? **Where did you come from? What are your training, your education, and your experience in your niche? Did you change careers when you got started in your current niche, or did you grow up doing what you do now? Where does your background fit within your brand?**

8. What are you most talented at? **What is the one thing you do better than anyone else you know? Is it part of what you're doing now? If not, why not? Can you integrate your special talent into your brand?**

9. What do you have the most experience doing? **Sometimes what we're talented at and what we have the most experience doing for a career are two different things. Does your experience match up with your talents? Where does your career experience fit in your overall brand?**

10. Why did you choose your career / niche / topic /job? **Why did you start doing what you do now? Was it by choice, or were you forced into it? Are you passionate enough about it to build a brand around it?**

11. What do you plan to offer? **You may be employed but you are selling your skills and talents. What is your flagship product or skill? How does it affect your branding?**

12. What makes you unique? **What elements of your personality, experience, skills and niche can you blend together to put a fresh spin on your brand? How can you build a brand around that uniqueness?**

13. What hobbies or interests do you have? **What interests and activities do you enjoy outside of your work? How can you integrate elements of those interests into your brand to help make it unique? Can you become the 'skateboarding CEO' or the 'mountain-climbing manager' to infuse some personality into your brand?**

14. What are your core beliefs? **Remaining true to your core values is an important part of making your brand authentic. How can your brand reflect what you believe and live by?**

15. What makes you uncomfortable? **Are you afraid of public speaking? Does confrontation make you squirm? Knowing what makes you uncomfortable will help you prepare your brand for dealing with those situations when they arise.**

16. If money was no object, and you could do anything you wanted for 'work,' would you still do what you're doing now? **Before you spend the time and effort building a brand around what you're doing, are you sure you want to be doing it?**

17. What is your design style? **Are you formal suit and tie smart, are you edgy fashion, colourful, smart casual. What's your look?**

18. What emotion(s) do people associate with you? **Do the people around you describe you as happy, impatient, angry, patient and thoughtful, a finisher, a master of detail or some other emotional trait? Does that emotion come through in your brand?**

19. What brands in other people make you jealous? **Don't try to copy the look or style of someone else's; however, looking at other people's brands may help spark some ideas for your own.**

20. How do you describe what you do? **If you had only one sentence to describe what you do, what would you say? Are you using the same words to your colleagues, staff, and bosses to describe what you do?**

21. What are your goals? **It's important to plan for the future when creating your brand so it will stand the test of time. What are your plans for the future, and how does your brand fit into that picture?**

22. What is your message? **When your colleagues see your brand, what is the primary message you want the brand to convey? Is there a specific emotion you want them to feel about you when they see you?**

23. What are you really selling? **Someone once said 'people don't buy drill bits, they buy holes.' Your employers are buying your time and talents. What are they really buying from you and how can you reinforce that with your brand?**

24. What is your level of commitment? **Is this 'just a job'. If it is that's fine. Not everyone has a white-hot career path all ready planned. Nevertheless, satisfaction in a job well done is valuable to you. Isn't it? Building, implementing, and maintaining a brand requires commitment. Will you still feel confident you made the right decisions about your brand and your work five years from now?**

25. What are your colleague's greatest fears? **Developing your brand around something that reduces or eliminates the fear your colleagues feel over a topic or situation is a powerful means of attracting them to you and your brand.**

26. What is their greatest frustration? **If your colleagues are frustrated over a problem, how can you build your brand around the solution?**

27. What are your colleague's greatest hopes or dreams? **Do they have a common hope or dream you can incorporate into your brand that they relate to?**

28. What event or need causes them to search for you as a problem solver? **Do you know what causes your colleagues to seek your help in the first place? What problem or event triggers their initial search? How can you position your brand as the solution to that problem?**

29. What do you have in common with your colleagues? **Sharing a common interest, problem, skill, or passion with your staff, colleagues or boss can give you a huge advantage when building your brand.**

30. Who is your competition? **In the workplace there will be people who are as qualified, experienced or possess a magnetic charm and winning smile (!) just like you. Everyone in every niche, role or job has a competitor. Even if you don't have someone in your workplace that offers the same, there's always someone you compete with at times of promotion or, in these tough times, reapplying for your own job.**

31. What makes them a competitor? **Are they offering the same things you are, are they competing with you for the opportunities, or are they a trusted friend and colleague? Beware, tough times toughens attitudes and behaviour.**

32. How do they describe what makes them unique? **What are they using to convey what they do? How does their description differ from yours? Do you need to adjust your branding to make you more?**

33. What do they offer? **What skills, experience, background, knowledge and qualifications do they offer? Do they offer anything you don't? How can you adjust your branding accordingly so what they offer seems outdated, inferior, or irrelevant?**

34. What are they better at than you? **Take an objective look at them, their work and their 'brand'. What do they do better than you? How will that affect your job prospects? Do you need to compensate for that weakness, or display it proudly?**

35. What are you better at than them? **Which of your strengths can you emphasise to give yourself a competitive advantage?**

36. How do they present their brand? **Pay attention to their style and presentation. Is it better, more suitable than you? Be honest.**

37. How active are they in promoting their brand? **How well known are they in the organisation? Can you position your brand as the leader where you work?**

38. Does your profession or job have a national or regional trade association? **Are you a member? Trade associations and professional groupings like the IHSCM are a good way to network, keep up-to-date and create opportunities for yourself.**

39. How much of a 'threat' are they as a competitor in your workplace? **Do you expect to be competing with them at some point in the future – for promotion or even at tough times, for your job. Are they close friends and colleagues? Do they pose no threat to you? Is there an opportunity for you to position your 'brand' as the leader in your niche?**

40. What is their value proposition? **Is the value they bring to their work obvious, or is it difficult to find? Can you do a better job of conveying value with your brand?**

41. What are they really selling? **Just like you, what they offer and what the employer wants may be two different things. Does it look like they understand this point, or is there an opportunity for your brand to outshine?**

42. What is their style? **Are they corporate or informal? Do they seem cold, distant and mechanical, or do they seem warm, approachable, and human? Do you see any obvious reason they chose that style? How does their style compare with the one you've planned for your brand?**

43. Is there anything they might have overlooked? **Is there something they've overlooked in their branding you can capitalise on to connect and make them irrelevant at the same time?**

44. How responsive are they? **Do they keep their colleagues waiting and wondering, or are do they have fabulous communication skills? How will you need to address responsiveness with your brand to be competitive?**

45. Be accessible. **Nothing frustrates colleagues and others more than not being able to reach. Make it easy for them to get in touch with you.**

46. Build goodwill. **Build word-of-mouth advertising for your brand, you need to foster goodwill with colleagues, staff and 'them upstairs'. This involves delivering positive experiences and being a good 'corporate citizen' with your brand.**

47. Create positive experiences. **You can't please everybody, but try anyway. Always do your part to give your colleagues the very best experience you can each time they interact with you. Give them the 'rockstar treatment' and make them feel special.**

48. Keep your word. **If you promise something to a colleague on a certain date, make sure you deliver on or before that date. Following through on your promises is important if you want a positive reputation for your brand.**

49. Deliver more value than they expect. **What can you do to surprise them with added value they weren't expecting? It doesn't have to be anything big. Making your colleagues smile is the goal.**

50. Be a good 'citizen'. **Don't be the type of brand that people only hear from when you're after something or want something from them. Contribute to the larger community by being a 'giver' as well.**

51. Be generous. **Don't be stingy with how you share your time or talents. Incorporate a little generosity into your branding and it will help you build trust and goodwill with your colleagues.**

52. Be gracious. **You will encounter people who are rude, irate, or misunderstand your intentions. Be gracious in how you respond. By taking the 'high road' you'll gain the respect of your colleagues and might even convert that rude naysayer into a true fan.**

53. Cultivate relationships. **Don't think of your brand as a facade or decoration to what you do. It's you. Do what it says on the tin. Build relationships with your colleagues if you want to foster brand loyalty.**

54. Seek feedback. **Let your colleagues know, in no uncertain terms, that you want their feedback so you can improve. And when you get feedback, don't be shy about letting your audience know you've acted on it. This is particularly important in how you deal with staff.**

55. Be honest. **Most people instinctively know not to lie outright, but many more are willing to conceal facts or bend the truth to suit their needs. Once your brand's reputation is damaged, it's time consuming, costly and often impossible to repair.**

56. Keep the big picture in mind. **Always consider your overall brand in everything you do. Make sure that what you provide your colleagues, work, advice, projects builds your brand and does not detract from it.**

57. Relax. **Do you presenting yourself in a stiff or formal way? Are your colleagues stiff and formal? You want your brand to seem human and approachable, not cold and aloof. So relax a little and let your colleagues, staff and bosses see your human side.**

58. Have fun. **Someone once said, 'a smile is the shortest distance between people.' The same is true for your brand. If you're having fun, your colleagues will sense it and start to have fun themselves.**

59. Connect with people who can promote you. **Blowing your own bugle will only get you so far. If you want to gain exposure, build authority, and get more people interested in your brand, take the time to connect and network with people who can promote you.**

60. Take the lead. **Your colleagues don't always know what they need from you, they just know they have a problem they need solved. Guide them. Help them understand how you can solve their problem or meet their need.**

61. Always give your best. **To help build positive experiences for the people you deal with, always make your best effort. Bring your 'A game' to everything you do.**

62. Be informative. **Help your colleagues see you as a resource by providing them with information that is useful to them. Keep them informed of your progress on their project. Help them understand your niche and what you do. Educate them about what you offer.**

63. Be accommodating. **Everyone's life is hectic these days. Sometimes the best way you can create a positive brand experience for a colleague is to just be accommodating to their situation. Maybe they can only meet after hours, or need a few extra minutes with you. Make it easy for them to do business with you, they'll remember it.**

64. Be consistent. **A key component to any successful brand is consistency. Always present yourself and your brand in the same manner. That means using the same imagery, tone, style, and message in print, in person, and at meetings.**

65. Let your 'freak flag' fly. **Don't be afraid to infuse your brand with your personality. Your individual personality is what will make your brand unique and interesting.**

66. Never settle for good enough. **Mediocrity is the cancer of branding. As soon as you start to settle for 'good enough' instead of your best, your brand will begin to decline. Always insist on excellence.**

67. Adapt. **Over time, your colleagues will grow and change. Make sure the brand you build will be able to grow with them if you want it to remain relevant.**

#27

Need to slash the budget, save money, cut back, skimp & save and sack people? Ouch…

You are not alone. Were there ever such tough times as this? Everyone has to cut back and rummage down the back of the organisation's sofa to find the last *shilling*.

It isn't easy and that is why you are a manager and not an administrator. These kinds of problems sort the doers from the bystanders.

Let's face it, if your organisation needs to save a shed-load, far better to be involved in the doing of it than become the victim as a bystander.

So first rule; when the organisation needs to cut back – step forward help with the solution.

Having got that out of the way, it is another truism; when organisations merge, cut back or retrench 18% of top people jump-ship…

… it's in the merger studies of top companies by **Michael Porter**. Porter is something of an under-profiled management guru and very academic. Even to the point of not allowing his books to be published in paper-back!

He's responsible for **Porter's Five Forces**.

In brief, Porter tells us in times of change top people say to themselves; *I'm too good for all this palaver, I'm off*.
They know they are good enough to get a job someplace else without going through the shemozzle of having to apply for their own job, see their department decimated, their ambitions thwarted and what-not.

Second rule; do everything you can to hang on to your talent.

Third rule; be as open as you can.

This is difficult and when times are tough there are often, very good reasons why you don't want to dent confidence in the organisation by admitting it is facing a problem. You have to juggle the external boundaries and the internal boundaries.

The truth is; the truth is probably your friend.   Right now everyone knows times are tough and they expect belts to be tightened and the pinch to be felt.

It's OK to say; '*We all know everyone is facing difficult times and we are no exception. We have to start looking very closely at what we are doing'.*

If you need to save operational cash the best place to find it is in the hands of the people doing the job.

If you can be really frank, you should be; '*We need to save 30% of our operating budget and I want to do it as fast and as clean as I can, where do you think we should start'*? Expect the smart-arse comments; 'sack the boss' and all the usual frustrations to be expressed. Encourage people to get beyond that. Explain the boundaries and ask them for their help. You'll be surprised what they come up with.

Number four; find out what you are really doing. Examine everything you do. Absolutely everything. Cost everything you do.

Once you've done that you'll have a better idea where your costs really are.

Fifth; don't forget the supply chain. How close can you get to your supplier? What I mean is; if a product costs £100 the temptation is to ask for a five or ten percent discount and think the job is done. It's not.

As an alternative ask the supplier what his margin is. Here's the reasoning; if the £100 product costs £85 and the rest is margin, say to the supplier let's do a deal that will always guarantee you £15 profit. But, together let's see what we can do to reduce the £85 cost. Reason? Wouldn't you rather have a big slice cut out of the costs? It's a win-win for both sides.

Can you offer to have the product in a different packaging, delivered less often, in a smaller range? The big supermarkets do this all the time. By working closely on the supplier's costs, everyone benefits.

Number 6; Try Zero Based Budgeting. (ZBB) It was first introduced into the public sector in 2007 comprehensive spending review but it has a strong track record in the wider world of business.

The traditional way of budgeting and costing is to look at past trends, add a bit and 'Bob's yer uncle'. ZBB works from the basis that no costs or activities should be factored in just because they were there before.

Step seven; all this may not be enough. Spending may be out of control, government or bank funding may be disappearing or there could be unusual events.

So, we have to determine; just what is the size of the cuts and over what period. Basic financial modelling will determine the size and time-scales.

Holding vacancies is a quick first option. In the long-run this has huge risks in the NHS. Nurses make up most of the staff and the churning (or turnover) is high, about 10%. The temptation is to hold vacancies, allow over-time or employ short-term, bank or agency cover. It might work in the short run, but in the long-run it will impact on care, quality and morale. It is not a long-term answer. Restructuring is.

Step eight; consider everything. What about across the board cuts? If you know you have to reduce by 10%, saying to every department, 'save 10%' might be a solution. Better still; phase the target to give managers a better chance to identify their plans.

However, this might have a counter effect on morale; 'this place is always cutting'. Across the board has a superficial fairness; 'we are all in this together', but they can be unjust as different departments have a varying ability to absorb cuts.

Do not confuse what is fair with what is just.

Targeted cuts? This requires a high level of leadership to pull off. Really good communications, transparency and sound business logic are the foundations of making this work.

The key to cuts is to make everyone feel part of the solution and not 'the problem'.

In the end the solutions may come down to closing, stop doing things and cut-backs.

These are the trickiest. Somehow management has to show the cuts are consistent with a philosophy or the organisation's core strategy.   It might be necessary to develop a strategy just to deal with the extremis the organisation finds itself in. Develop a simple narrative:

> *'Because of the impact of [external issues] we find ourselves in a situation that gives us no option but to consider everything we do, its cost and its value to the people we serve. We know we cannot come through this without there being, upset, disappointment and worry to everyone as well as ending some valued services, relationships and diminishing others. We promise to look at every option carefully and involve everyone we can, act swiftly and openly and leave uncertainty behind as soon as possible.'*

This is a time for leaders… be visible and to work with a door that is propped open. However tough it gets, don't hide and do talk to people.

Leaders are visible, have a vision and share it often. Be clear in your own mind:

Does the organisation have a strong sense of values, does it 'trust each other' and will they support each other? Can you expect dissent or outright opposition? What is your strategy to diffuse this?

Do you have to change the existing budget rules? If you do, make sure you tell people what and why.

What are the timescales – have you got to avoid an immediate deficit, balance the books in the current cycle, year, month or week?
What are the risk tolerances? Cutting a budget quickly can carry more risk. Restructuring is disruptive. What is the organisation's tolerance to risk?

What is the impact on external organisations? Suppliers, users, customers, patients, relatives, carers? What and how do you plan to tell them?

Is this cost cutting or cost shifting? Be honest.

What is the quality of the management that will carry out any sensitive changes that might take place? Are they experienced, what support will they need?

Is the leadership trusted? Does it have good connections within the organisation and can it call upon support from 'champions' and 'white knights'?

Communications and budget cuts

Do everything you can to maintain the communications budget… it is your friend, ally and partner.

Once the gossip gets going a budget review becomes, *'they're looking for savings'*. Looking for savings becomes *'there will redundancies'*. A message like that will become there will be sackings, closures and *'I'm going to lose my job'.*

Moral goes down the toilet and the situation become unmanageable.

There is a balance to be struck; involving everyone may create a sense of crisis and panic. This can be exaggerated and get out of hand. Truth, data and facts are the best allies.

If you have bad news don't send it by e-mail, memo or billet-doux. The only place for staff to read bad news is in your eyes.

Arrange a communications day; brief all staff on the same day. Do it personally. Catch the night shift as they come off work, the day staff during the day and the night shift as they come on shift.

Get them together, split them into groups if necessary and tell them all the same story, in the same way, with the same data on the same day. It's a long day for you but a short route to ending gossip.

Gossip works like a forest fire. Swedish organisation-dynamics expert Anders Vidners tells us;

> *…in a big organisation one person can have a 'meaningful dialogue'*
> *with 15 people during the course of the working day. That 15 will*
> *talk to another 15 and before you know it, everyone knows*
> *something. It may be right or it may be wrong.*

Your job is to kill the bad gossip, fuelled out of uncertainty and create some good gossip based on the facts.

Try and get good gossip working for you.   The tone and texture of your message is important:

> *'This is a situation where we have to rely on each other, roll up*
> *our sleeves and tackle some tricky problems. This is a mess,*
> *not of our making, but we have to dig ourselves out of it'.*

Everyone wants the answer to just one question; 'Will I lose my job?'

Everything you say will be measured, calibrated and benchmarked by this parameter. Staff will look for clues, hints innuendo and nuance. So, it is vital to keep the message clear.

Be open, be careful what you say and what you promise. Don't promise 'no sackings, lay-offs or redundancies' if you know it will end like that.

Be honest from the off. If you know you have to reduce head-count say; 'we are looking for 50 redundancies' and make it easy for people to come forward. You might be surprised how many people might like the idea of a new career, or just looking after the grand-kids.

If you are a big employer in the local community be sure to brief the press. If you have reason to know you can trust them start with early off-the-record briefing. If you can, speak with just the facts and speak early. Go to them before they come to you. It is impossible to over-communicate.

This is never easy. There is no silver bullet but there is silver buckshot. Mostly it is about being very open, right from the beginning. Don't fudge, dissemble, evade or beat about the bush.

Treat people in the way you would like to be treated.

In the end you have to go where the money is. The money is usually in the workforce budget. In the NHS 70% of the revenue goes in salaries. This is really difficult. If difficult decisions are not made it will impact on the remaining staff and the ability of the organisation to respond to the needs of its customers and users in the future. It is the decisions you make today that will protect and preserve the services for the future.

Understand this is not the 'budget thing', the 'money thing' it is a 'people thing'. Deal with it as a 'people thing'.

It's down to you. So, be ready to go the extra mile

Do what matters. Do not put things off because;

- I can't do that because they won't like it
- This kind of problem is always nasty to deal with
- I'm expected to be ultra-smart and I'm not
- I have to do it this way because that's how it's always done
- I have to be professional – yes and you have to be effective. It might mean unorthodox.

Make better connections by spending time at the coal –face and gain understanding and credibility

⚠️ **Be prepared to scare yourself – don't back-off if it gets tough. It's easy to do nothing.**

Be ready to say no. You cannot buy success with short term deception.

Be fixated on the goal. It doesn't mean; be rude, aggressive, dismissive or unsympathetic. Share the vision and message with everyone

Be ready to make the next decision, there will always be another thing to do

Six things to think about:

1 **Set priorities** – absolutes, stuff that just has to be done, make your approach 'what can I stop doing' not 'what can I keep doing'

2 **Go up-stream** – look at where your costs are, right across your supply-chain, wages, third-party and incidental costs. Examine everything

3 **Are you doing what you are doing, where it needs to be done** – think about changing the settings to cheaper, more convenient, merged and slimmed down locations? Is the place important? The future is about 'clicks-not-bricks'.

4 **Are you doing what you are doing in the best way you can?** Best practice is always your friend when you are looking to save money. The costs are in doing things twice, slowly and hesitantly.

5 **Money spent on back-office is dead money.** What can you do to merge, streamline, outsource or change the way you do it?

6 **Benchmark yourself with other organisations.** Where are you in the great scheme of things? More or less efficient than the rest – you need to know.

#28

Lack of resources, short of people, skills, stuff?

You are going to have to do more with less. You will have to work with what you've got.

A man was selling paintings. They were exquisite. Views, portraits, still life, he could do it all.

His 'canvasses' were sides of cardboard boxes and his paints were a mixture of emulsion, gloss, inks, whatever he could salvage and some he'd made himself by soaking material and remnants in water.

It's all he had. He was a genius and it made you think………

… when all you've got is all you've got – **make it a masterpiece.**

#29

Politics is at the heart of everything. Even elastic.

The factory that makes the elastic is in the far-east. The factory used to be here, in the UK. The factory, here, closed down as the economy slowed, wages went up and making things was cheaper overseas. Recognising the potential, the overseas country decided to create tax-breaks, encourage inward investment and construct a tax regime that was attractive to build an elastic factory.

The world now sources its elastic from there. The elastic is in socks, underwear. Anything that's stretchy, it's there... all as a result of political decisions.

Politics ebbs and flows.

Huge changes in public services (and as a result to the private sector companies that service and do business with them), are at the whim of politics.

Changes can be made without any evidence base, no research, just an ideology. A belief.

Advice... get across the politics. You cannot be above politics, outside politics or oblivious to politics. Politics is an elastic factory.

And there is another kind of politics.

Politics is life ... You will, simply, have to deal with people who ... don't want you to succeed ... people who feel their turf is being invaded, people who have a b-i-g stake in the status quo, people who are just plain afraid of change.

#30

Navigating Organisational Politics and Power Dynamics

"Every health service decision is political… whether it's made in Westminster, the boardroom, or on the ward."

Change in healthcare does not happen in a vacuum. It unfolds within a web of relationships, hierarchies, and interests. Understanding and managing organisational politics is not a distraction from 'real work'… it is the real work. Leaders who ignore power dynamics often find their plans quietly resisted, undermined, or delayed. Those who recognise and navigate them stand a better chance of making change stick.

1. Why Politics Matters in Healthcare Management

Healthcare is a politically charged environment for three reasons:
Multiple Stakeholders; patients, clinicians, managers, unions, regulators, politicians, and the media all hold influence.
High Stakes; decisions affect people's health, jobs, and community services.
Competing Interests; resources are finite, but demands are infinite.
The politics of the NHS are not about party politics alone… they're about everyday negotiations over who gets what, when, and how.

Example: The Lansley Reforms (2012)
The Health and Social Care Act was introduced with the promise of reducing bureaucracy and giving power to clinicians. In reality, it sparked one of the largest reorganisations in NHS history, diverting energy from patient care to structural wrangling. The lesson: political decisions at the top cascade into years of organisational politics below.

2. Mapping Power and Influence

To navigate politics, managers need to see beyond job titles and understand who really holds influence. Formal hierarchies don't always reflect actual power.

Formal Power:

Chief Executives, Medical Directors, Boards, Ministers.

Informal Power:

Senior nurses, union reps, trusted consultants, patient groups and don't forget the hospital porters who seem to know everything about everything, everywhere.

Hidden Power:

Gatekeepers of data, budget holders, or individuals with long institutional memory.

• Try drawing an "i**nfluence map**" of your organisation.
• Who are the formal decision-makers?
• Who shapes opinion behind the scenes?
• Who can quietly block or enable your initiative?

3. The Dark and Light Sides of Organisational Politics

Politics is not inherently negative… it's simply how people get things done in complex systems.

Positive Politics: Building coalitions, aligning interests, giving credit, negotiating compromises.
Negative Politics: Turf wars, withholding information, personal agendas, blocking change.

Example: Integrated Care Systems (ICSs)

ICSs were designed to foster collaboration. In practice, some became arenas of political tension: local authorities defending social care budgets, acute Trusts protecting income streams and community services lobbying for attention. Where leaders harnessed positive politics, integration flourished. Where negative politics dominated, collaboration stalled.

4. Common Political Traps in the NHS

Managers often stumble into predictable traps:

- Assuming Authority is Enough; formal position doesn't guarantee influence.
- Ignoring Clinician Power; doctors and nurses and clinical professionals hold enormous informal authority.
- Overlooking Frontline Voices; staff closest to patients can make or break a change.
- Underestimating External Players; media stories, MPs, or local campaign groups can derail plans overnight.

5. Strategies for Navigating Politics

- Build Relationships Before You Need Them… trust is capital; invest early.
- Listen as Much as You Speak… influence flows from understanding others' perspectives.
- Frame Change Around Shared Goals… patient safety, quality and efficiency unite otherwise competing groups.
- Be Transparent… openness reduces suspicion and builds credibility.
- Learn the Informal Networks… water fountain conversations often matter more than formal meetings.

> Case Example: Junior Doctors' Contract Dispute (2015–2016)
>
> The government framed new contracts as modernisation. Doctors framed them as unsafe for patients and staff. The dispute revealed a misjudgment of where power lay: ministers held formal authority, but doctors' collective voice, amplified through social media and public sympathy, wielded informal power that reshaped the debate.

6. Politics Beyond the Organisation

Change is shaped not only by internal politics but also by the wider system:

National Policy Mandates – Targets set in Whitehall often clash with local realities.

Regulators and Inspectors – Their judgements shape reputations and funding.

The Media – Headlines can drive policy faster than evidence.

> Example: A&E Closure Campaigns
>
> Attempts to rationalise emergency departments often run into fierce local resistance. Clinically sound arguments about safety and sustainability can be overturned by political pressure, media campaigns, and community activism. Leaders who ignore these wider dynamics do so at their peril.

Public Opinion – Patient groups can exert powerful influence on local services

🔧 **Manager's Toolkit: Political Navigation**

- **Map Stakeholders;** identify allies, neutrals, and opponents.
- **Build Coalitions;** don't fight alone; secure champions across groups.
- **Communicate Consistently**; avoid surprises; keep stakeholders informed.
- **Acknowledge Interests;** don't pretend conflicts don't exist; negotiate them openly.

- **Stay Grounded in Values;** anchor decisions in patient care and fairness to maintain credibility.

💡 **Think about...**

Organisational politics and power dynamics. They are not barriers to change. They are the environment in which change happens. Leaders who resent politics often find themselves isolated. Leaders who understand and engage with it can shape alliances, overcome resistance, and guide their organisations forward.

In healthcare, change is not just about systems and structures. It's about people, power and the ability to navigate both with skill and integrity.

#31

If you are thinking about writing a strategic plan – think again!

What's the point of strategy?

The world moves too quick for strategy. Globalisation has made strategy redundant. No one can seriously ask you to create a strategic plan for anything longer than a month. As it will take you a month to write, it will be out of date.

Forget strategy. We need something else. We need tactics and techniques… think purpose, process and people.

✅ **Ed's tip; try the Bartlett & Ghoshal Model, [more here](#).**

We need the tactics to see us through changing times and the techniques to cope with an ever moving environment.

Strategy belongs to the world of one suit for Sunday best, not Primark fashions, buy-wear-dump.   Strategies belong to *keep-it-for-best*, not the new world of disposable and throw away.

Petrol stations are florists, who had a strategy for that? Clothes sellers are retailers of foreign currencies (M&S), who saw that and had a strategy to deal with it?

The modern, globalised, electronic, linked-in, joined-up world is too nimble for strategy.

Strategic plans help shelf-sellers, no one else. Whatever plan you have now will be tinkered with, modified, jiggled and changed before 'it' happens. And, eventually; torn-up.

Forget strategy, it's for the Army and they don't do it anymore.

They do scenario planning and are very clear abut their purpose…

◄ back

#32

Execution: Making Change Stick

"A brilliant strategy is useless if it never leaves the boardroom."

I n healthcare, countless brilliant plans have faltered because execution was neglected. The NHS is full of strategies, initiatives and reform agendas… from local improvement programmes to national ten-year plans… yet too often these fail to translate into sustained change on the front line.

This chapter explores how leaders can bridge the gap between what we plan and what actually happens.

1. The G A P… strategy and planning vs execution:

Strategy sets the direction; execution turns ideas into reality. Many NHS organisations excel at strategy documents, but:

- Plans are often overly complex
- Implementation timelines are unrealistic
- Staff are under-informed or uninvolved
- Success metrics are misaligned with daily work

Example from Practice
A Trust developed a strategy to reduce cancelled elective operations by 20% in a year. The plan outlined new theatre schedules and digital dashboards but neglected staff input and resource constraints. Six months in, cancellations were unchanged, staff had reverted to informal workarounds.

2. Translating Vision into Action

Execution starts with clarity. Staff must understand:

- What is changing
- Why it matters
- Who is accountable
- How it will affect their day-to-day work

Without this, even the best ideas remain abstract. Clarity reduces anxiety and builds momentum.

3. Designing Implementation Around People

Healthcare is human work. Execution fails when strategies ignore people:

- **Involve staff early** – Co-design solutions to gain ownership
- **Consider workload** – Avoid adding tasks without support
- **Build capability** – Provide training, coaching, and tools

Example from Practice
When rolling out a new electronic patient record system, one Trust created "super-user" teams within wards. These staff became local champions, solving problems in real time and keeping momentum high. Adoption rates exceeded expectations.

4. Breaking Change Into Manageable Chunks

Large-scale change is often overwhelming. Breaking it into smaller, iterative steps helps:

- Pilot initiatives in one department before scaling
- Celebrate small wins to reinforce progress
- Use feedback to adapt before full rollout
- Iteration beats perfection every time.

5. Aligning Incentives and Accountability

Execution requires alignment across multiple levels:

- Leadership – Visible commitment, regular updates, resource allocation
- Middle Management – Translating strategy into operational plans
- Frontline Staff – Understanding their role and impact

Without aligned incentives, even the most logical strategy fails.

6. Monitoring Progress and Making Mid-Course Corrections

Execution isn't linear. In healthcare, unexpected events often derail plans; winter pressures, staffing shortages, or new policy mandates.

Key practices:

- Use meaningful metrics – Focus on outcomes, not just activity
- Regular checkpoints – Review progress and address barriers
- Flexible adaptation – Adjust plans based on learning, not politics

💡 **Consider This**

A Trust implementing a falls prevention programme tracked falls per 1,000 bed-days. Early results were disappointing. By reviewing ward-level practices and engaging frontline teams, leaders identified overlooked risk factors, adapted interventions and halved falls within six months.

7. Embedding Change into Culture

Sustainable change is not a project. It is part of the organisation's DNA:

- Reinforce new behaviours through policies, routines, and recognition
- Share success stories to normalise change
- Maintain dialogue with staff to identify and address relapses

Culture determines whether change sticks — execution alone is not enough.

🔧 **Manager's Toolkit: Making Change Stick**

- **Clarity First** – Communicate the what, why, who, and how.
- **Involve Early** – Co-create solutions with staff and patients.
- **Pilot and Iterate** – Break big changes into achievable steps.
- **Align Accountability** – Ensure leadership, middle management, and frontline responsibilities match.
- **Measure What Matters** – Use data to guide adaptation and celebrate progress.
- **Reinforce Through Culture** – Policies, routines, and recognition solidify new behaviours.

A strategy without execution is just a document. In the NHS, where resources are finite, pressures are high and stakes are human, bridging the gap between planning and doing is the true test of leadership.

Execution is not about force… it's about enabling, supporting and embedding change so that it lasts.

#33

The vision thing

Don't do the vision thing? Why not? Why wouldn't you share your; idea, image, shape, thought, picture, plan, scheme, suggestion for the future?

Vision is about ... wild, passionate, intemperate ... LOVE. If you don't love what you are doing – don't do it. Go and find something else that you can have a love affair with.

If you are trying to deliver great results, improve the performance of colleagues and staff, working with limited resources and working with short and long-term goal planning; why wouldn't you have the vision thing.

Imagine what the outcome, future, success looks like –that's the vision. Keep it simple.

Distil it into an elevator pitch.

Elevator pitch? It's an expression used by US venture funders.

They say if someone who wants to borrow money can't explain the business in the time it takes the elevator to get from the ground floor to the 8th floor, they haven't worked out what they are really doing and don't get a loan!

 Leaders are visible, have a vision and share it often.

#33

Ask:

What does this organisation do for its 'customers'?
What business are you in?

You are not in the 'replace the worn hip joint using the finest skills and resources available in the galaxy' business.

You are in the business of getting Harry back to the day centre in time for the Xmas knees-up.

You are not in the restaurant business.

You are in the romantic evening, business deal, fast, slow or luxury business – it's not just about food!.

What are the benefits you offer? One step shop? Appointments at convenient times?

What do you do for staff?

Flexible employment, fairness, development, the ability to be critical and encouragement to blow the whistle if things go wrong?

What do the share-holders want?

Shareholders? Yes, the taxpayers that make all this possible. What do they want? Clean, fast fixes and free.

What's your vision? Can you write it down?

#34

Whilst we are on the 'vision thing'

V isions rarely include numbers. Visions are pictures. Pictures can portray numbers. We respond better to pictures and stories.

50% of +65's prefer a short stay holiday.

Or...

Most older people prefer short stay holidays... and that's what we specialise in.

It's tough to do 'vision' in numbers. Trying to save 50% is not inspiring.

Trying to halve the waste is interesting... *eliminating duplication* sounds doable.

💡 **How does this apply to where you work and what you do?**

#35

Communication or Conversation? Engaging the Organisation

"People don't resist change. They resist being uninformed, unheard, or ignored."

In healthcare, change is constant — new policies, technologies, pathways, and structures. Yet too often, change fails not because it is poorly designed, but because communication is treated as a one-way broadcast rather than a two-way conversation. This chapter explores how to turn messaging into engagement, and engagement into commitment.

1. The Communication Trap

The absence of critical, actionable information

Middle managers – need clarity on implementation and reporting responsibilities
Clinicians – require evidence, professional rationale, and safety assuranceCommunication or Conversation? Engaging the Organisation

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Many leaders equate communication with sending emails, memos, or strategy documents. While necessary, this approach rarely changes behaviour:

• Information alone does not create understanding
• Announcements do not create ownership
• Reports do not create trust

Example from Practice
A Trust sent weekly newsletters about a new electronic prescribing system. Staff skimmed them, complained about lack of clarity and adoption lagged. Later, small group workshops and Q&A sessions with the project team drastically increased usage… demonstrating the difference between communication and conversation.

2. Conversations Build Commitment

True engagement comes from dialogue, not monologue:

- Listening is as important as talking
- Staff need to feel heard, validated, and involved
- Ideas co-created are more likely to be adopted
- People support what they help create.

3. Tailoring Messages to the Audience

Healthcare is not homogenous. Different groups experience change differently:

- Frontline staff – want practical straightforward communication, no frills.
- Patients and families – want transparency, empathy, and reassurance
- Communication must be adapted to each audience while maintaining consistency in the core message.

4. Storytelling: Making Change Real

Data and facts are necessary, but stories are memorable. In the NHS, narratives can:

- Illustrate the impact on patients
- Humanise abstract policies
- Inspire action by connecting change to professional purpose

💡 **Consider This**

When a Trust launched a falls reduction initiative, sharing a story of a patient who suffered a serious injury from a preventable fall engaged staff far more than charts

showing incident rates. The story prompted practical suggestions for improvement and frontline ownership.

5. Feedback Loops: Listening as Leadership
Conversations are two-way. Engagement requires structured feedback:

- Surveys and pulse checks
- Focus groups and roundtables
- "Reverse town halls" where leadership listens first
- Feedback is not a box to tick — it's a source of intelligence that shapes strategy and builds trust.

6. Using Champions and Networks
Change spreads through influence, not edicts. Identify:

- Formal champions – leaders and managers who support the initiative
- Informal influencers – respected staff members whose endorsement matters
- Peer-to-peer networks – leveraging everyday communication channels
- Trust travels faster through peers than through emails.

7. Consistency and Visibility Matter
Inconsistent messaging undermines credibility. Leaders must:

- Be visible in meetings, wards, and informal spaces
- Repeat core messages across channels
- Show alignment between words and actions
- Staff notice when leadership behaves differently from what is communicated. Trust erodes quickly when messages and actions diverge.

💡 Manager's Toolkit: Engaging Through Conversation

- **Map Your Audience** – Identify groups, needs, and preferred channels.
- Use Dialogue, Not Monologue – Prioritise workshops, Q&A, and small-group sessions.
- **Tell Stories, Show Impact** – Connect change to real patient outcomes and staff experiences.
- **Create Feedback Loops** – Monitor understanding, adoption, and concerns.

- **Leverage Influencers** – Use champions and informal networks to amplify engagement.
- **Model the Change** – Leaders' behaviour must match the message.

In healthcare, communication is more than messaging; it is conversation, collaboration, and credibility. The organisations that succeed in change are those that move beyond broadcasts to dialogue — engaging hearts, minds, and hands.

Change is not implemented; it is lived, and … people live it when they are part of it.

#36

Why can't the organisation's documents be elegant, even beautiful?

How many pieces of paper, memo's, reports, documents and billet-doux pass over your desk?

How many of them look sooooo dull and boring.

Software makes it possible to create documents that are interesting, vibrant and full of life.

If you have to read them, make them a work of art.

#37

Life is pretty simple:

You do some stuff. Most fails. Some works. You do more of what works. If it works big, others quickly copy it. Then you do something else. The trick is; the doing something else.

I f you have something going that is really good – reinvent it. Really? Reinvent it? Ouch!

The theory is; if you have something good then it will be copied and over time people will not see you as the innovator. They will see you as being just like the rest.

Before you become part of the herd, reinvent what you are doing and rebuild it, better, faster, slicker… better.

That way you stay ahead.

✅ **Crash it before someone else crashes into it.**

#38

If you want to be seriously good at innovation…

… you have to be seriously good at amnesia.

Innovation requires taking risks, cutting corners, trying something different, new, odd-ball and quirky.

Amongst all that is failure, getting it wrong and ouch!

If you hover over the past, keep going back and ruminating, you'll always do what you always do and that means you'll always get what you've got.

Learn from the past? Of course, but forget it when it goes wrong, move on. Never, never, never play the blame game.

Forget it and move on.

A good dose of organisational amnesia can sometimes be a good thing!

Going back over what you do and admitting it might not be right is difficult.

It needs courage to put your hands up and say something isn't right. You know that. Think how much courage and guts it takes for the people working for you to say it to you. There is a better way; Encourage everyone to use the word *'reframing'*.

Get it wrong and *reframe it.*

Reframe what you are doing into something that is stunning

#39

Do you really know what you are doing that is so special?

Have you ever stopped and asked yourself what you are doing? OK, so, you are running services. What does that mean?

What is special and unusual about the services you are offering?

Can you crystallise what is special, extraordinary, unique and unusual in what you are doing?

Can you sum-up why the people using the services you are managing should be impressed, delighted and over the moon?

If you can't do it in 25 words that impress **_you_**, you have a problem.

#40

The little things matter

Remember birthdays? How difficult is that with dozens of diary management programmes? Remember the names of wives, kids, holiday locations and hobbies. Show an interest in your people.

More difficult? Make an effort.

A communications study for a large hospital one showed 80 staff six pictures of middle-aged men and asked; 'Who is your chief executive?'

Three quarters of them chose The leader of the Liberal Democrats! It was a familiar face on the telly at the time. Almost no one knew who the boss was.

Don't let it happen to you. Fix it how this hospital boss did;

Every day the boss arrived at the hospital and parked his car in the usual place and walked to his office following the same route.

✅ **He changed it by;**

Parking his car and entering the building by a different entrance every day. Sometimes through A&E, sometimes through outpatients, sometimes through goods inwards and sometimes via the incineration plant.

On the way his task was to shake hands with five people, introduce himself and ask '*what do you think should be on my to-do list today*'. Then he went to his office and wrote down who he had met, created a hand written note acknowledging any issue they had bought up and thanked them for their time.

By the end of the week he had met 25 colleagues. By the end of the month he had met 100. That one hundred people told another hundred they had met the boss and he was a good guy.

It was a little thing – but it was a big thing for the 1,200 people he met, in a year, on the way into work.

✅ **That's the 40 ideas we promised you…**

… here's the extra stuff and it's FREE!

Perhaps there are a small number of things that you're really good at…

… focus on those. Sub-contract the rest.

There are two types of organisation. The Rhine-Land model and the West-Coast model.

The Rhine-Land model is a vertically integrated pile that; makes the steel, mines the coal, runs the blast furnace, (*all in premises they own*) to make the metal, that creates the teaspoons on production lines they own, run and staff, that are packaged in a factory, they own (*using design and marketing facilities that they own)*, all by staff on their payroll, distributed through their own warehouses and in lorries they own and sold by salesmen on their payroll.

The West–Coast model makes complex software in an office they rent, by staff that are contracted in, who sit on furniture that is hired, cleaned by contract cleaners, drinking coffee that is provided by a contract refreshment company. The software is sold on line, on a website that is rented, in a design that was commissioned.

The Rhine-Lane model employs thousands, with skills in FM, building, logistics, HR, accounts, procurement and management to get a teaspoon to your table.

The West-Cost company sells millions of pounds of software and employs next to no one.

Do what you are good at and get better at it. Subcontract the rest.

Can you make what you are doing now something…

… that is worth bragging about 5 years from now?

Can you turn your work into a masterpiece or a work of art! Probably not! But you can do your work in the context of what it will look like through the eyes and experience of people who might come after you.

Will they see insightful, elegant, visionary, thorough, accurate and complete?

Or will they see just a job done................

Can we be the history makers, the chronicler of our times …

…and a window on what we did?

Quality is:

…. knowing what you want, making sure things are in place to get it, all the time, every time, until you know you don't want it any more.

That's about all there is to know about quality. Quality is not expensive, chic, fashion, up-market, high class, smart or posh. Quality is reliable, dependable and consistent.

The local fish and chip shop does a fantastic cod & chips and mushy peas. It's about seven quid. It tastes the same all the time, every time.

The batter is crisp, the chips are golden, with a light dusting of salt and the mushy peas are just mushy enough without being a quagmire.

A masterpiece of culinary achievement.

You get it, every time you go into the shop – and it's open late!

That's high quality.

There is a famous Japanese business guru Dr. Yoji Akao who spent a great deal of time figuring out how to 'delight' customers.

He discovered things like quality and cleanliness did not 'delight' customers; they took them for granted. If you can't 'do' quality you shouldn't be in business.

The trick to all this is to be sure about what you are doing.

Make sure it is good enough and what you want. Then, put assurances in place to make sure you get it, every time, and all the time, until you want to do something else.

Quality is consistency. That's all.

The most valuable possession you have is your attitude.

Doncha just hate twee quotes that are supposed to *'motivate you'*.

There is only one person who can motivate you and you look at them, every morning, in the mirror.

.....but this little aphorism is very good;

Your attitude is yours to style, shape and mould.
It is then yours to exhibit and present to the world.

That said... what about this;

The deadliest of men is not he with a gun,
But the one who tells you 'It can't be done!'

Who wrote it,? Dunno, but they were right.

Here's another one...

To each is given a book of rules
And a bag of tools
And each must make
Er their time is done
A stumbling block
Or, a stepping stone...

Beware complexifiers and complicators

The message is; don't get bogged down.

The truly smart people simplify things and make it easy.

Do we have to write pages about this?

Nuff said.....................

Respect the past and take the best of it into the future

What does it tell us?   To me, it says; there ain't much new under the sun. Maybe not but do you do it all? Check this out.

The Principles of Management

Written by Henri Fayol, a French engineer and Director of Mines. Outside France, no one had ever heard of him until the late 40s when Constance Storrs published her translation of Fayol's 1916 'Administration Industrielle et Generale '.

Fayol's career began as a mining engineer. He then moved into research geology and in 1888 joined, Comambault as Director. The company was in difficulties but Fayol turned the operation round.

When he retired he published his work (a comprehensive theory of administration) which described and classified administrative management roles and processes, then as interest in management grew he became recognised and referenced by others. He is frequently seen as a key, early contributor to a classical or administrative management school of thought.

You have to view the advice through the prism of its time but the echoes for today are undeniable.

Perhaps, the Granddaddy of Management Thinking?

The Principles of Management   **Henri Fayol** (1841-1925)

1. Division of Work

The specialisation of the workforce according to the skills a person possesses, creating specific personal and professional development within the labour force and therefore increasing productivity; leads to specialisation which increases the efficiency of labour. By separating a small part of work, the workers speed and accuracy in its performance increases. This principle is applicable to both technical as well as managerial work.

2. Authority and Responsibility

The issue of commands, followed by responsibility for their consequences. Authority means the right of a superior to give order to his subordinates; responsibility means obligation for performance. This principle suggests that there must be parity between authority and responsibility.. They are co-existent and go together, and are two sides of the same coin.

3. Discipline

Discipline refers to obedience, proper conduct in relation to others, respect of authority, etc. It is essential for the smooth functioning of all organisations.

4. Unity of Command

This principle states that every subordinate should receive orders and be accountable to one and only one superior. If an employee receives orders from more than one superior, it is likely to create confusion and conflict.
Unity of Command also makes it easier to fix responsibility for mistakes.

5. Unity of Direction

All those working in the same line of activity must understand and pursue the same objectives. All related activities should be put under one group, there

should be one plan of action for them, and they should be under the control of one manager. It seeks to ensure unity of action, focusing of efforts and coordination of strength.

6. Subordination of Individual Interest

The management must put aside personal considerations and put company objectives first. Therefore the interests of goals of the organisation must prevail over the personal interests of individuals.

7. Remuneration

Workers must be paid sufficiently as this is a chief motivation of employees and therefore greatly influences productivity. The quantum and methods of remuneration payable should be fair, reasonable and rewarding of effort.

8. The Degree of Centralisation

The amount of power wielded with the central management depends on company size. Centralisation implies the concentration of decision making authority at the top management. Sharing of authority with lower levels is called decentralisation. The organisation should strive to achieve a proper balance.

9. Scalar Chain

Scalar Chain refers to the chain of superiors ranging from top management to the lowest rank. The principle suggests that there should be a clear line of authority from top to bottom linking all managers at all levels. It is considered a chain of command. It involves a concept called a 'gang plank' using which a subordinate may contact a superior or his superior in case of an emergency, defying the hierarchy of control. However the immediate superiors must be informed about the matter.

10. Order

Social order ensures the fluid operation of a company through authoritative procedure. Material order ensures safety and efficiency in the workplace.

11. Equity

Employees must be treated kindly and justice must be enacted to ensure a just workplace. Managers should be fair and impartial when dealing with employees.

12. Stability of Tenure of Personnel

The period of service should not be too short and employees should not be moved from positions frequently. An employee cannot render useful service if he is removed before he becomes accustomed to the work assigned to him.

13. Initiative

Using the initiative of employees can add strength and new ideas to an organisation. Initiative on the part of employees is a source of strength for the organisation because it provides new and better ideas. Employees are likely to take greater interest in the functioning of the organisation.

14. Esprit de Corps

This refers to the need of managers to ensure and develop morale in the workplace; individually and communally. Team spirit helps develop an atmosphere of mutual trust and understanding.

These can be used to initiate and aid the processes of change, organisation, decision making, skill management and the overall view of the management function.

Interesting, eh? Written all that time ago, when the first Great Exhibition was opened in 1851. This celebration of modern technology and industry, was held in London's Crystal Palace.

It was good advice then and if only we could do it now!

Quick list of jump-start ideas to get the basics right

Dump jargon, stamp it out and kill it dead. Jargon encourages cliques, stifles communication and makes people feel stupid if they don't know what you're talking about.

Normal people are your *customers (or patients)* and normal people talk normally.

Use the language of your *customers*.

And...

1. **Success is corrosive**. Success only lasts as long as the last year, the last quarter or the last week and for as long as you can be successful again. The desk, the car, the mobile, the lap-top are only yours for as long as you can perform the same trick for another year, month or week.

2. **Die, rather than be late.** The Ten-O'clock news doesn't get broadcast at five minutes past ten. If a meeting is scheduled for 10am, start it at ten, not ten-past. Punctuality is a metaphor for efficiency, a symbol of competence and a badge of proficiency and courtesy.

3. **Explain your vision,** your strategy, your aims and targets on a one side of a post-card. If you can't; they are too complicated and no own will ever be able to deliver them.

4. **Do your PowerPoint slides** need words? Try pictures instead. Pictures will be memorable for your audience and be an aide-memoir for you.

5. **How do you finish off** your e-mail signature? A long legal tirade about how you are not responsible for anything or other ways of contacting you, web-address, FaceBook,

Twitter, mobile, snail-mail address, advert and then the bit the legal department have sleepless night over. Really?

6. **If you see something** that could be done better, cleaner, tidier, simpler, shinier, easier, warmer, cooler, quieter, or clearer – fix it. Don't walk past a hitch. Leave it and it will fester into a trouble and a problem. You are what you will walk past.

7. **Are you excited** about what you do? Seriously, do you look forward to doing it? If not, find something else to do. Yes, it is a tricky time to think about changing jobs but an internal move might be on? But here's the truth; life is too short to be doing something that makes you miserable.

8. **Never stop** schooling people. Not training or educating or even instructing.   I'm talking schooling. Things like answering the phone, turning out a spreadsheet that works, in short time. Making PowerPoint to die for. Basic schooling never stops and it is motivating for people to learn something new. Don't over look the basics.

9. **Everyone sells something**. Think you are in a business that doesn't sell anything? You are wrong! You are selling the organisation's reputation, your own skills or the vision and impression your *customers* have of you. You never stop selling.

10. **Set out to be better.** Not a step change, not a seismic alteration in what you do. Just be better.

11. **The more you do** – the luckier you get.

12. **Finance and HR** are not departments at war. In fact no internal department should think of themselves as anything other than part of the management group. They provide an internal service – with the accent on the 'service'.

13. **Know where** to make changes. And, you won't know what needs changing, or how to change it, unless you have been

there and done it. The view from behind the desk is blindsided.

14. **Great performing groups** in the workplace are never the product of away-days, team-building exercises or making an aeroplane out of a cardboard box. It's about total loyalty. Never bad-mouth a member of the team.

15. **Make it easy** to complain. The harder you make it the worse the complaint will get.

16. **If you were going to start** from scratch – what would you do differently? Can you do it now?

17. **It's about clicks**, not brick. Technology can change, influence, wipe-out and speed-up just about everything you do. What are you doing now that you can dump and do easier with technology?

18. **Read something** from outside your professional area. Read a magazine for engineers, house builders, dressmakers. Read the trade magazines outside your box. There will be issues and problems that you have in common. See how they approach cost-cutting, skill-mix, modernisation, government policy, technology – you'll be surprised what you have in common.

19. **Be pragmatic** about relationships. You may hate 'em, but you might need 'em!

20. **It is tempting** to plan and do. Smart people plan, do and review.

21. **You can't lead** anyone. You might persuade them to follow you.

22. **It's not about metrics**, KPIs or targets. It's about giving your customers what they want. Find out, it might be easier to deliver than you think.

23. **Never have a meeting** without; an agenda. Minutes and a list of to-dos… and follow up.

24. **There is only one question** to keep asking; what else can we do?

25. **Why is Starbucks so great?** There is always a queue, there is usually only one kid on the coffee machine, there is never a place to sit and where there is, the table is piled high with the debris of the previous customer. The coffee is ludicrously over priced and everything they sell has a million calories. The reason, we are stupid enough to put up with it? We buy into the brand. What's your brand?

26. **What business are you in?** Do you know? Can you describe it? The restaurant isn't in the food business. A restaurant is in the meeting, romance, celebration or reunion business. The food is the last thing. What business are you in? NHS? Try 'peace of mind'.

27. **Does your waiting area** have last month's magazines and a notice board full of last year's messages? It says something about you.

28. **Do you dump or delegate?** Define the job, define the responsibility define the outcome. Agree by when.

29. **Where is the waste?** Spend money like it is your own money.

30. **Didn't have time;** means I didn't make time, didn't prioritise, didn't think it was important.

31. **What will you do** in a disaster? Practice before you have one.

32. **Does everyone** get to see the numbers? Why not? They all contribute to the costs, surpluses over-runs and profits.

33. **What do the *customers*** really think of you? Ask them.

34. **If an organisation** has to spend time asking itself about quality it has no business being in business. In this day and age

quality is a given. It is not an extra or an option. It is the business.

35.   **If you really believe** your most important asset is your staff; how do you prove it on a daily basis?

36.   **Keep a note** of how long you spend on the shop floor? It's not long enough. That is where the *business* is, where the problems are and that is where you'll find the solutions

37.   **Don't rush recruitment.** Hire an idiot, step forward and take the blame. Hire someone better than you, step back and take the credit.

38.   **Steal ideas** from everywhere; then make them better.

39.   **Don't say; 'in the real world'.** This is the real world, right here and now. There might be different places and different realities – but this is your real world.

40.   **Don't use e-mail;** for anything that involves emotion. Remember the power of the handwritten note. If it is really important, let them read it in your eyes, face to face.

41.   **In the good old days;** at IBM everyone had a screen saver that said, simply; 'Think'. How much thinking are you doing? Make time for uninterrupted thought.

42.   **Do the little things** drive you barmy? Well, what little things are you doing that drive your customers barmy?

43.   **First impressions** do count. Whether it is a building, a person or a service, first time around you have about a nanosecond to get everything right.

44.   **Reread the list!**

Adapted from **Brilliant at the Basics**, Nicholas Bates

◄ back

Leadership in the Midst of Change – Guiding Through Uncertainty

"In times of uncertainty, people don't just need direction — they need trust, clarity and a steady hand."

Healthcare is complex, fast-moving, and unpredictable. Leaders must navigate uncertainty while keeping teams engaged, patients safe, and change initiatives on track. This chapter explores the qualities, practices, and mindset required to lead effectively in the midst of continuous change.

1. Understanding the Nature of Uncertainty

Change in the NHS is rarely linear:

• New policies, targets, or funding arrangements emerge unexpectedly

• Workforce pressures fluctuate daily

• Patient demand can spike unpredictably

• Technology and infrastructure evolve rapidly

Uncertainty is not an exception — it is the default. Effective leaders embrace uncertainty as a reality, not a problem to eliminate.

2. Leadership Qualities That Matter Most

The following traits are particularly crucial:

• **Resilience** – Maintaining composure under pressure

• **Adaptability** – Responding to unexpected challenges without losing focus

- **Empathy** – Understanding staff and patient experiences

- **Decisiveness** – Making timely decisions with imperfect information

- **Integrity** – Acting consistently and transparently to build trust

3. Leading Through Ambiguity

Uncertainty often brings ambiguity: conflicting priorities, unclear responsibilities, or incomplete data. Leaders must:

- Communicate clearly what is known and unknown

- Make provisional decisions while remaining flexible

- Encourage staff to raise concerns and suggest solutions

- Accept that some risk is inevitable

Ambiguity does not equal inaction. Effective leaders act decisively while remaining open to learning.

4. Building Trust During Change

Trust is the foundation of leadership in uncertainty. Without it, even well-designed changes falter. Leaders build trust by:

- Being visible and approachable

- Acknowledging difficulties honestly

- Following through on promises

- Recognising and valuing staff contributions

💡 Think about this

A Trust introducing a new electronic patient record faced initial scepticism. Leaders held daily briefings, acknowledged glitches openly, and involved staff in resolving issues. Trust grew, alongside adoption, turning early resistance into engagement.

5. Supporting Teams Under Pressure

Staff wellbeing is both an ethical responsibility and a practical necessity. Leaders can support teams by:

- Providing clear priorities to prevent overload

- Offering psychological safety for questions, mistakes, and suggestions

- Recognising achievements publicly

- Ensuring access to resources and training

Leadership is not just about managing systems — it's about caring for the people who run them.

6. The Role of Reflection and Learning

Even in the midst of pressure, reflection is critical:

- Pause to review what is working and what is not

- Encourage teams to discuss lessons learned openly

- Adapt processes based on learning, not just policy mandates

Reflection turns uncertainty into insight and mistakes into improvement.

7. Leading by Example

- Staff take cues from leadership behaviour. In times of change, leaders must model:

- Calm under pressure

- Commitment to values and quality

- Willingness to listen and adapt

- Courage to make difficult decisions

Leadership is visible action, not just words.

Manager's Toolkit: Leading Through Uncertainty

Be Visible and Accessible – Staff need to see leadership in action.

Communicate Openly – Share what is known, unknown, and the plan.

Prioritise Wellbeing – Support staff physically, emotionally, and professionally.

Encourage Learning – Treat setbacks as opportunities to improve.

Model Behaviour – Demonstrate calm, clarity, and commitment consistently.

Adapt While Holding Direction – Be flexible in tactics, unwavering in purpose.

Change in healthcare is constant, unpredictable, and complex. Leaders who thrive in this environment are those who combine clarity with empathy, decisiveness with adaptability, and authority with humility. They recognise that their role is not to eliminate uncertainty, but to guide teams confidently through it, ensuring patient care remains safe, staff are supported, and change endures.

Leadership in the midst of change is about standing firm while moving forward, inspiring others to do the same.

You don't have time to be a team

Think of the best and most famous teams you know. What are they; football teams, rugby, dancing?

It doesn't matter; they will all have one thing in common. They will all spend more time practising what they do than doing what they do.

Footballers train Monday, Tuesday, Wednesday, Thursday, Friday, play on Saturday and have a day's rest on Sunday. Well, maybe the days will change – but you get the idea.

Top combat teams in the Army spend days, months even years in training. Fighter pilots, even actors rehearse…

..... and you think you are working in a team? I don't think so. Because you are a group of people working together doesn't make you a team. Neither does an afternoon in a muddy field with a pile of sticks and a length of rope.

Teams take years to build and you don't have the time.

Instead, try 'shared motivation'.

Ask the group, what each one of them needs to get out of being in the group. Some will say to save money, others will say to cut staff, others will say to create a better service and some will be there because they always come to meetings like this!

Try and get an agreement on what a shared motivation might be. The two or maybe three things that, if you can achieve it, it will be a result.

Remind everyone what it is, every time you meet.

✅ **Ed's tip: Measure your success!**

The up-sum!

How to finish our smorgasbord of thoughts, experiences, references to *gurus* and a large dose of do's, don'ts and what we think is... common sense?

It would be folly for us to think you have read every page and more than folly to expect you to agree with everything we have written. That's the nature of workplaces, organisations and systems... they depend entirely on people. Each one with their own opinion, their own view of the world and their own experiences.

Lose sight of that truism and failure will meet you, just around the corner.

Human beings are highly sentient. Overlook their feelings, forget to ask, join-in, play a part, include... and you'll be in trouble.
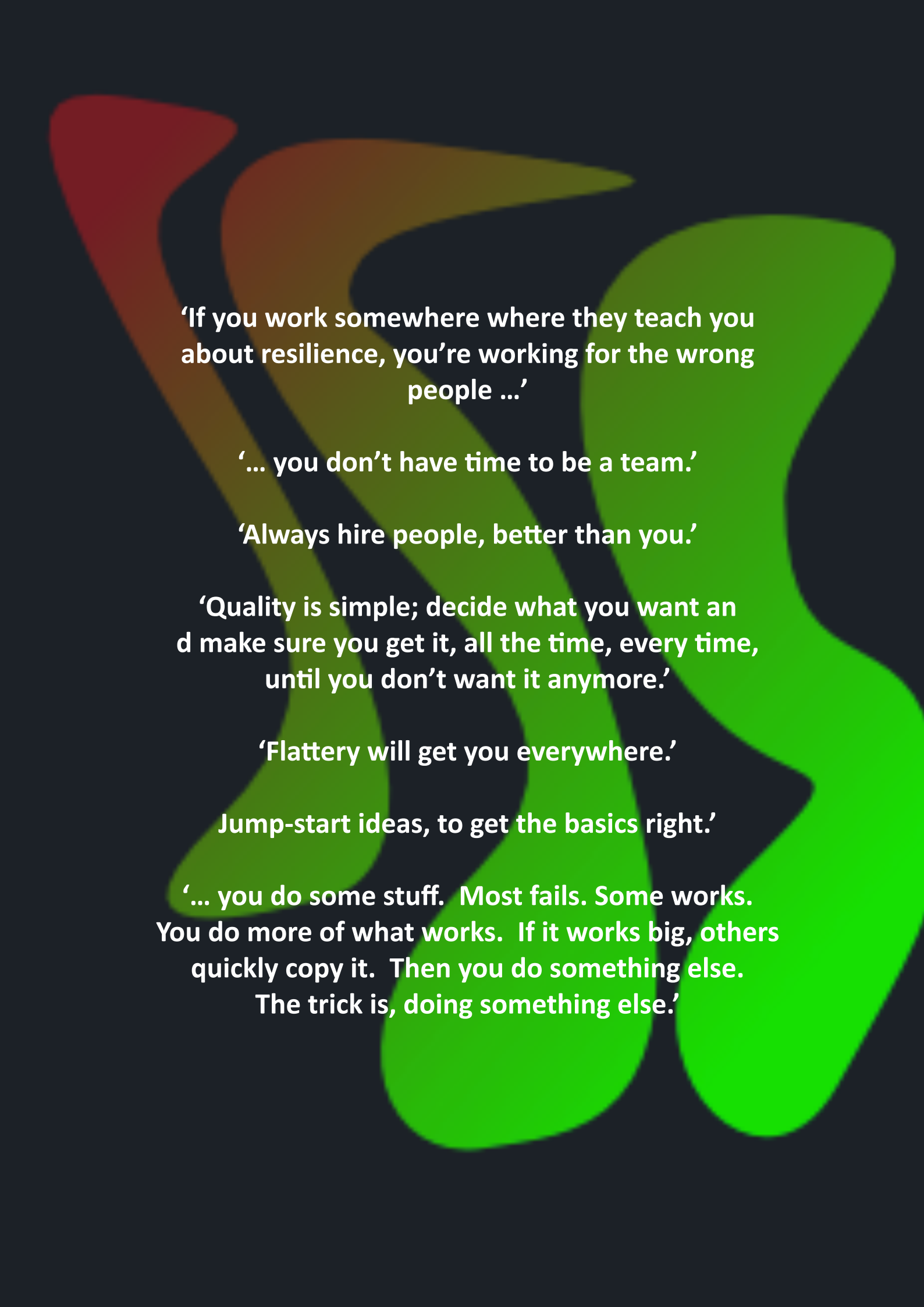
Places of work are complex human ecosystems. They are facilitated by, restricted by, run by and advanced or regressed by, those who have the jobs of leaders and managers. Understanding how people personally and collectively feel part of the purpose of their work, the contribution they make, the *ear* they have for their voices means leaders can multiply the energy levels of their organisation.

This is a well rehearsed universal truth-and confirmed in widespread literature and studies of work place culture and organisational dynamics.

In our-NHS, where, for the vast majority, are people who give their working lives to the care of others, it is a vocation as well as a job... where feelings and sentiment are often *the give* and are so often, *the take* in their daily work.

We hope some of the hints, tips and examples are relevant to you and helpful in helping you to encourage the energies and enthusiasm of those that care for us, our loved ones and our fellow citizens... at the time when they need us most and the time when we must be at our best.

All the best from Him and Me.

'If you work somewhere where they teach you about resilience, you're working for the wrong people …'

'… you don't have time to be a team.'

'Always hire people, better than you.'

'Quality is simple; decide what you want and make sure you get it, all the time, every time, until you don't want it anymore.'

'Flattery will get you everywhere.'

Jump-start ideas, to get the basics right.'

'… you do some stuff. Most fails. Some works. You do more of what works. If it works big, others quickly copy it. Then you do something else. The trick is, doing something else.'