Public health leadership in the face of complexity

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Leadership in complexity

‘Rather than fulfilling the expectation that they will provide answers, leaders have to ask tough questions. Rather than protecting people from outside threats, leaders should allow them to feel the pinch of reality in order to stimulate them to adapt… Instead of maintaining norms, leaders have to challenge “the way we do business” and help others distinguish immutable values from historical practices that must go.’

For a complex agenda such as reducing health inequalities, NHS Health Scotland has found that taking a leadership approach such as the one outlined above and below works to enable more confident leadership and influence.

Seven principles for leading adaptive change

1. Get on the balcony
   • A place from which to observe the patterns in the wider environment as well as what is over the horizon (prerequisite for the following six principles)

2. Identify the adaptive challenge
   • A challenge for which there is no ready-made technical answer
   • A challenge that requires the gap between values, beliefs, attitudes and behaviours to be addressed

3. Create the holding environment
   • May be a physical space in which adaptive work can be done
   • The relationship or wider social space in which adaptive work can be accomplished

4. Cook the conflict
   • Create the heat
   • Sequence and pace the work
   • Regulate the distress

5. Maintain disciplined attention
   • Work avoidance
   • Use conflict positively
   • Keep people focused
   • Resume responsibility
   • Use their knowledge
   • Support their efforts

6. Give back the work

7. Protect the voices of leadership from below
   • Ensuring everyone’s voice is heard is essential for willingness to experiment and learn
   • Leaders have to provide cover for staff who point to the internal contradictions of the organisation

A catalyst for change

It is important to create a compelling case for organisational and practice change, along with enough discomfort for that change to emerge. To move from the ‘cosy club’, which may result in us repeating the same behaviours and actions, there needs to be a degree of discomfort in order to create the catalyst for change.

Our approach

Over the period of our last five-year corporate strategy, A Fairer Healthier Scotland, NHS Health Scotland has been supporting leaders to attend national leadership training and other leadership development opportunities. These programmes have an adaptive leadership approach at their heart.

We defined leaders as grade 7 and above. Some 28% of leaders who remain in employment with NHS Health Scotland have participated in one of the national leadership programmes. Through this investment in leadership development, we anticipated that our leaders would demonstrate increased buy-in and involvement in implementation, particularly in complex work; increased levels of trust; improved influencing and advocacy results in line with A Fairer Healthier Scotland; and increased personal accountability.

Understanding impact: Preparing for our future focus

To understand the impact of the national adaptive leadership development investment over the past five years, an external leadership consultant and coach conducted a review. This was based on 360-degree leadership feedback (pre and post programmes) and one-to-one coaching conversations. The coaching conversations were offered to 18 of the 37 people who had participated in the national leadership programmes over the last five years. This approach enabled individuals to reflect on and provide feedback about their leadership journey. The review also included an online questionnaire to understand views about corporate leadership approaches and the success of internal leadership forums, as well as analysis of other data generated from Maturity and our EFQM assessment, both of which identify strengths and possible areas for improvement.

Findings

The leadership impact review found that the leadership development investment by NHS Health Scotland has helped leaders to develop confidence and skills to:

• make better sense of complex context
• be ‘open’ to differing ideas and views
• take a flexible leadership style and approach (blend of leadership approaches)
• reflect and take personal accountability
• work collaboratively, developing effective relationships and trust
• adopt an ‘and/both’ approach. This is the kind of leadership that includes both an approach that recognises the complexity of much of NHS Health Scotland’s cross-system challenges and a clear, authoritative approach to governing and managing the performance of the organisation
• be comfortable with any ambivalence this may create in yourself and others.

Call to action

As public health moves into a period of reform within a complex and often uncertain context, taking a whole-system approach provides strong leadership, influencing and advocacy is essential. This form of leadership works when something different from the status quo is required. When the leader is genuinely ‘open’ to new and differing ideas and views and wants to collaborate to make the sum of the parts stronger using ‘and/both’ approaches. This form of leadership is important to embed as a central component of public health reform; the new public health organisation; and the wider system.

References