

Managing Service Delivery in Health and Social Care

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When it comes to building an effective health and social care organization only good technology and know-how aren't enough. We certainly need three other components as well: people, who actually perform the work; good management that ensures things are running as smoothly as possible and good leadership that gives clear direction and guidance in times of change and uncertainty. In the last century, leadership and management were more like an art than a science. But today we, fortunately, don't have to rely just on luck. We have an abundance of theories that help us understand the nature of an organization as well as an enormous amount of tools and techniques that can help us take the right action. Some of these theories, tools, and techniques will be discussed below.

Management scholars argue about how can we accurately distinguish between management and leadership^{1 2}. Where does leadership end and management start? Is leadership part of management or management is just a responsibility of the leader? Such questions indicate the problematic nature of clearly defining these concepts.

Harvard Business School professor, Ronald Heifetz argues we only need leadership in times of challenge, change, and uncertainty³. When the world is stable and predictable, when every task is clearly defined, leaders have to step back from the edge and let people do the work. However, when there are no easy answers and there is a huge need to see a clear direction, to align and motivate people the presence of a strong leader is crucial. Professor Heifetz distinguishes two types of problems every organization is facing: technical problems and adaptive challenges⁴. Technical problems are clearly defined routine problems, we already have the know-how to solve them. However, adaptive challenges are innovative in nature, the uncertainty is huge, we don't know yet the solution to solve them. When we're dealing with technical problems in a repeated manner good management is key to assure the consistent delivery of quality solutions. Managers have to focus on tasks that sustain order, such as

planning, organizing day-to-day activities, problem-solving, budgeting, organizing and assessing work processes, and helping people to deal with day-to-day issues. By doing that managers can create and sustain a degree of predictability and order. However, when the uncertainty is huge the situation cries for a strong leader. The roles and responsibilities of a leader have particular importance in times of change and disruption⁵. Management expert Jim Collins argues, one of the most important roles of a leader is to establish a vision, a clear direction that tells us where are we going exactly⁶. Problems can arise inside and outside of the organization as well. In times of internal challenges, one of the most important things to do is creating alignment between the different levels of hierarchies. With straightforward communication and clear performance requirements, we can motivate and inspire people, produce change, and archive the desired outcome. In times of external threats and changes, the presence of a wise leader is also crucial⁷. Daniel Goleman, the pioneer of the concept of emotional intelligence argues the number one role of a leader is to produce results⁸. To do that leaders must have a broad perspective of the problem and the possible solutions. However, they also have to be familiar with the details and take real action. Focusing on the critical details while simultaneously keeping the big picture in mind is perhaps the most difficult job of a leader⁹. Therefore in challenging times the presence or lack of good leadership can make or break the organization.

In 1968 Edwin Locke, a psychology professor at the University of Maryland observed that certain types of goals drive a much better performance than others¹⁰. According to his theory, a goal has to be specific, it needs to be defined with clarity. It has to be measurable, so we can get clear feedback on our process and whether we succeeded or failed. It has to be agreed by everyone, so we can hold each other accountable. It has to be realistic, so people will not be discouraged by an unattainable goal. It has to be time-specific with a clear deadline^{11 12 13}.

Locke's goal-setting theory greatly influenced Andy Grove, who was the chairman, CEO, and president of Intel Corporation for more than 25 years¹⁴. He further developed Locke's theory and created the system of Objectives and Key Results (OKRs), which was the basis of Intel's corporate goal-setting system¹⁵. Using SMART goals and the OKRs goal-setting system we can achieve outstanding results in healthcare organizations, align employees and consistently deliver high quality of care.

The beauty of the OKRs and SMART goals is that they allow a degree of independence for participants while simultaneously holding everyone accountable for his or her performance. Allowing freedom and autonomy and still making sure people meet performance standards is

one of the great challenges of management¹⁶. It was considered more of an art than science until the 1950s, when contingency theorists, Robert Tannenbaum and Warren Schmidt developed their leadership model¹⁷.

The model identifies how much freedom, autonomy, and responsibility a leader gives to his or her subordinates. They distinguished 7 leadership styles as a continuum. Each leader can choose the appropriate style based on the particular situation.

Based on the theory of Tannenbaum and Schmidt we can build a learning environment that better supports individual and team learning in the healthcare setting. People learn best by doing (according to adult learning theorists Victoria Marsick and Karen Watkins)¹⁸. By going through the 7 steps of leadership styles we can allow even greater responsibility and freedom to act for people. This approach can be a catalyst for organizational learning. For example, in the case of a residential home care organization, we can apply this model for training new caregivers. First by giving them concrete tasks to perform on a daily basis, assessing them, and giving feedback in real-time. Then gradually increasing their freedom by changing our leadership style one by one.

Leaders need to have the necessary leadership skills required to effectively deal with people. However, it is not enough. Team members also have to have certain skills to get the job done. The skills of a team member can fall into 3 broad categories: technical skills, decision-making, and problem-solving skills, and interpersonal skills¹⁹.

Every healthcare organization has its standards and procedures when it comes to technical skills. There are certain standards carers have to meet such as health and safety, infection control, food hygiene, moving, and handling, etc. Certain organizations offer training for employees in interpersonal and decision-making skills, such as care communication and safeguarding policy. However, based on my personal experience the overwhelming majority of training programs are meant to strengthen the technical skills of an individual, and the other areas are somehow considered less important.

When it comes to interpersonal skills, Edgar Schein (organizational culture expert and former professor at the MIT Sloan School of Management) suggests determining the "degree of task interdependence" among team members²⁰. The higher the degree of interdependence the more crucial interpersonal skills are. He illustrates his point with a few examples. A low degree of interdependence means when "six people carrying a coffin can afford to have one or two unhelpful people. A committee deciding on a marketing strategy can get along with mostly

unhelpful members.” Examples of a high degree of interdependence: “Two people using a long saw to cut down a tree must help each other or the task does not get done.”

Decision-making and problem-solving skills also need to be trained and assessed²¹. However, what's even more important is to create an environment of freedom and responsibility that allows people to actually make decisions and solve problems. Especially in healthcare emergencies can happen very quickly. Organizations that have many layers of hierarchies and make their decisions in a cascading way risk rigidity, which can become inflexible and very slow to react to potentially life-threatening situations²².

We can conduct a training needs analysis by examining these three areas (task-related skills, decision making, and problem-solving skills, interpersonal skills) on three levels: organizational level, operational level, and individual level^{23 24 25}. A good way to start an organizational training analysis is to listen to external signals, such as changes in customer satisfaction, gathering feedback from external business partners. Another useful starting point could be to conduct a SWOT analysis and focus on weak points and potential business threats^{26 27}. Training needs on an operational level could be determined by listening to internal cues, such as employee turnover, inefficiencies, drop in productivity. A good starting point could be to consider Peter Senge's framework of a learning organization²⁸. Another useful approach could be to measure team effectiveness with Team Diagnostic Survey (TDS) (originally developed by J. Richard Hackman) to determine if we work together effectively as a team^{29 30}. The starting point of a training needs analysis on an individual level could be to establish an objective standard measurement. This way we can objectively select underperforming employees and give them advice and support.

If we have an objective measurement of performance in its place we can determine which area of skill needs to be developed in the case of an underperforming employee. If the reason is the lack of task-related skills a specific technical training could solve the issue. If the problem is the lack of good decisions we could consider giving responsibility to the person^{31 32}. Another possible approach is to create alignment between organizational and personal goals and values³³. We can do that by familiarising employees with the organizational values and mission statement. If the reason for the poor performance is the poor interpersonal skills and not being able to work in teams it would be wise for the manager to address the issue by making one on one conversations with the person. In many cases, such issues could be solved on a personal level by considering the person not just as an employee, but a whole human being. It would be wise for the manager to have a healthy amount of emotional intelligence to deal with such

issues. A useful approach to find out the root cause of a problem could be to exercise the technique of "humble inquiry", developed by professor Edgar Schein.

To identify working standards, spot quality problems, and maintain a consistent delivery of high-quality care there are three different techniques that could be used in almost every care organization. W. Edwards Deming, the father of the quality movement once said: "Eighty-five percent of the reasons for failure are deficiencies in the systems and process rather than the employee. The role of management is to change the process rather than badgering individuals to do better."³⁴ Perhaps the most effective way of delivering consistent quality care is to design systems and environments in which employees are capable of achieving their highest potential. The second way is to build quality assessment into the day-to-day processes that employees perform. Rather than assessing employee performance and quality from the outside we could rely on the powerful force of peer pressure. Peers and colleagues can be the most effective motivating force because it is not pushed down from the top, instead, it is built up from the bottom.³⁵ The third approach is to pay particular attention to the anomalies³⁶. If someone made an unusual mistake if something unexpected happened if the usual daily routine is disrupted by something. By spotting early signs of change we can be much more sensitive to new trends, changes in customers' taste, and new expectations about quality care delivery. However, it is also a leadership responsibility to build a culture that allows that. People are particularly talented at hiding mistakes if they are punished for them. Leaders have to build a culture of openness, where bad news is circulating as fast as good news. Harvard professor Amy Edmondson calls this an environment of psychological safety³⁷.

In a healthcare organization, a significant part of the work gets done as individual projects. These projects are complex, nonroutine one-time efforts to meet customer needs.

While managing a project the first thing to do is to define the project scope. During this phase it is useful to write the project scope statements, also called statements of work (SOW). Also, we could further clarify the project by writing an expanded version of the scope statement, called the project charter. This document is authorizing the project manager to initiate and lead the project. However, when planning the project we should pay particular attention to the tendency for the project scope to expand over time because of the constantly changing details. This is also known as the "planning fallacy" discovered by Nobel Prize-winning psychologist Daniel Kahneman³⁸.

The second step would be to decide what should we focus on. Establishing project priorities assures that the most important things get done. Most of the time there are different trade-offs. That's why it is crucial to establish priorities as early as possible.

The third step is to determine how work gets done by creating a work breakdown structure (WBS). It is a hierarchical map that identifies the products and work elements involved in a project. By creating a WBS we could identify work packages that define work, identify time for completion, identify costs, resources, the personnel responsible for it, and finally, monitoring points, such as milestones to measure success³⁹.

The fourth step would be integrating the WBS with the organization by creating an Organizational Breakdown Structure (OBS)⁴⁰.

The next step could be integrating the WBS for the information system of the organization. By doing that we can create alignment and create the basis for accountability.

During the implementation phase of the project, we can construct a Responsibility Matrix (RM)⁴¹. By summarizing the tasks to be accomplished and clarifying responsibilities for each task we can avoid confusion and conflict among employees. Peter Thiel, entrepreneur, founder of PayPal, and Stanford University professor suggests assigning a particular task or job to one single employee⁴². He argues, if everyone is responsible just for one single thing we can eliminate unhealthy competition at the workplace. A clear understanding of responsibilities can free up mental resources for creating greater value for customers.

Another great tool that can create alignment is the Project Communication Plan⁴³. It clarifies every need related to gathering, sharing, and interpreting information. A good Project Communication Plan clarifies what information needs to be collected, by whom, by which methods, when will the information be communicated, and how.

Developing a Project Plan helps us to monitor and control the project during the implementation phase⁴⁴. It helps us with timing and scheduling, helps us to better communicate, plan the budgeting and cash flow, defines activities that have to be done, clarifies priorities, and helps managers to make real progress.

One of the best ways to get the job done is to assemble small, cross-functional, high-performing teams based on mutual trust and cooperation. Jeff Bezos, the CEO of Amazon has a simple rule for creating such high-performing teams. It is called the "two-pizza" rule. Every high-performing team has to be fed by 2 pizzas, which usually means fewer than 10 people⁴⁵. When working with such small teams the frequency of communication increases, giving and receiving feedback and crucial information becomes more or less instant and a real job gets done^{46 47}.

However, no matter how hard we try eventual mistakes are inevitable from time to time. These situations are especially worth paying attention to. Managers who jump in the middle of the crisis and start fixing things as soon as possible like firefighters are seen as brilliant and effective managers. However, solving each problem as soon as possible has its dangers as well. Without analyzing the underlying cause of the problem it may come to the surface again. It is similar to a doctor who is treating the symptoms of a disease with quick and strong intervention. But without finding the real cause of the disease it will come back in the future⁴⁸. Management guru, Peter Drucker explains this phenomenon in his theory, called "The opportunity-focused organization"^{49 50}. When executives are complaining about poor organizational performance and lack of innovation he used to ask them a single question: "How many of your top-performing people are assigned to solving problems and how many of them are busy spotting opportunities?" Most of the times executives get to the point immediately.

In business, a very effective approach is to find and eliminate the root cause of the problem. A very useful technique is the "fishbone" technique⁵¹. It can help visualize the structure of the problem and finding the underlying root cause of it. It has three major part that looks similar to a fishbone. We start with the problem itself, then visualizing different possible causes. It can include measurement, methods, environmental factors, people, processes, equipment, and many others. For every cause, we can note many contributing factors and we can continue the process until the route cause (the back of the fishbone) is found. By eliminating the route cause we can make sure we will not repeat the same problem in the future.

Another powerful route cause analysis technique is the "5 Whys" technique. It is developed at Toyota Production Systems during the 1950s by Taiichi Ohno⁵² and Shigeo Shingo⁵³ and was popularised by Eric Ries⁵⁴ among high-tech startups. The basis of the method is to ask "Why?" at least five times when a problem occurs. This way we can find and eliminate the underlying cause of the problem.

In conclusion, we can say that management and leadership are both crucial for the effective operation of a healthcare company. Fortunately, we can an abundance of widely researched and proven tools and techniques that can make our job more effective. Some of these tools are: using SMART criteria to set goals and motivate people; using Tannenbaum and Schmidt's Leadership styles for effective leadership; assemble high performing teams; focusing on training and learning to improve team performance; using a shared approach for quality management; using project management techniques to get the job done and finally,

analyzing and eliminating the root cause of problems. These tools could be particularly useful in healthcare where effective management and leadership actually can save lives.

Endnotes

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