Dilemmas of Emergency Services Leaders in Creating Meaningful Work Environment: Evidence from the United Kingdom

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Servant-Leadership Centre for Research and Education (SERVUS), Vrije Universiteit Amsterdam

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State of emergency services leadership

- This symposium is a timely exploration of servant-leadership virtues in nurturing meaningful work and organizational practices.

- Leadership and management research about emergency services is an emerging phenomenon with a clear theory-practice divide.

- Organizations are characterised by reverence to a ‘heroic’ leadership style, ‘command and control’ culture, ‘top-down’ hierarchical structures including a tendency to blame.

- The challenges of leadership, funding, training and cultural transformation are now felt globally:
  1. Emergency services are witnessing a period of great uncertainty as new models of delivery, merger and reconfigurations are currently being practiced;
  2. Creating meaningful work and supporting a diverse, modern and healthy workforce is a critical function of the leaders in to these organizations.

- This is also a plea for building a community of scholars (academics, researchers and practitioners) for being emphatic in raising the issues of a meaningful work in the blue-light services.
Building community of scholars
The servant-leader characteristics which resonate with the emergency services include accountability, authenticity, communication and courage.

More work however needs to be done around empowerment, humility and inert-personal acceptance towards staff. The record on creating cultures of inclusion (discrimination), harassment and bullying and towards staff sickness is much to be desired.

I’ll present evidence from the emergency services in the UK as to how there are huge challenges for leaders creating meaningful work spaces for a culturally diverse work force (Raub and Blunschi, 2013).

I will try to argue a leadership style, which is grounded in the principles of servant-leadership, is the best way forward to resolve various ‘dilemmas’ (Trompennars, 2009) to reconcile passion and control and create positive work environment.
Supporting a diverse, modern and healthy workforce

- One of the key commitments in the NHS Five Year Forward View.

- Similar commitments in Police and Fire Services are evident.
State of the NHS

Source: Kings Fund (2016)
Dilemma of creating cultures of inclusion

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

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

<table>
<thead>
<tr>
<th>Category</th>
<th>Acute (%)</th>
<th>Community (%)</th>
<th>MH/LD (%)</th>
<th>Other (%)</th>
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<tr>
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<tr>
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<td>3.7</td>
<td>7.1</td>
<td>1.5</td>
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<td>6.3</td>
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<td>ethnic background</td>
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<td>1.6</td>
<td>2.7</td>
<td>1.1</td>
</tr>
<tr>
<td>religion</td>
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<td>0.3</td>
<td>0.7</td>
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<tr>
<td>sexual orientation</td>
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<td>disability</td>
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<td>0.9</td>
<td>1.1</td>
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<tr>
<td>age</td>
<td>2.1</td>
<td>1.5</td>
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<td>1.2</td>
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## Discrimination by occupational group

<table>
<thead>
<tr>
<th>Discrimination</th>
<th>Medical/dental (%)</th>
<th>Nursing (registered) (%)</th>
<th>Nursing assistants (%)</th>
<th>Scientific and technical (%)</th>
<th>Managers (%)</th>
<th>Central functions (%)</th>
<th>Social care (%)</th>
<th>Ancillary (%)</th>
<th>Other (%)</th>
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<td>17.3</td>
<td>10.4</td>
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<td>8.1</td>
<td>10.7</td>
<td>9.7</td>
<td>10.9</td>
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<tr>
<td>From...</td>
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<tr>
<td>...patients/relatives/public</td>
<td>8.0</td>
<td>8.5</td>
<td>11.8</td>
<td>4.4</td>
<td>1.7</td>
<td>2.0</td>
<td>5.7</td>
<td>3.2</td>
<td>3.8</td>
</tr>
<tr>
<td>...manager/team leader/colleagues</td>
<td>7.9</td>
<td>8.3</td>
<td>9.1</td>
<td>7.3</td>
<td>7.2</td>
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<td>7.1</td>
<td>6.5</td>
<td>7.7</td>
<td>2.9</td>
<td>1.9</td>
<td>1.7</td>
<td>3.0</td>
<td>2.8</td>
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<tr>
<td>...gender</td>
<td>3.6</td>
<td>2.2</td>
<td>2.9</td>
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<td>1.7</td>
<td>1.3</td>
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<tr>
<td>...religion</td>
<td>0.9</td>
<td>0.5</td>
<td>0.9</td>
<td>0.6</td>
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<td>0.3</td>
<td>0.3</td>
<td>0.5</td>
<td>0.7</td>
</tr>
<tr>
<td>...sexual orientation</td>
<td>0.3</td>
<td>0.6</td>
<td>1.1</td>
<td>0.5</td>
<td>0.6</td>
<td>0.3</td>
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<td>0.6</td>
<td>0.6</td>
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<tr>
<td>...disability</td>
<td>0.5</td>
<td>0.8</td>
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<td>0.5</td>
<td>0.9</td>
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<tr>
<td>...age</td>
<td>1.8</td>
<td>2.3</td>
<td>3.0</td>
<td>2.2</td>
<td>1.7</td>
<td>1.7</td>
<td>1.7</td>
<td>1.8</td>
<td>2.3</td>
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</tbody>
</table>
Protect Staff from Bullying and Harassment

London Ambulance Service NHS Trust

Quality Report

220 Waterloo Road
London
SE1 6SD
Tel: 020 7521 5100
Website: www.londonambulance.nhs.uk

Date of inspection visits: 1st-17th June 2015
Unannounced visits on 12, 17, 19 June 2015
Date of publication: 27/11/2015

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

Ratings

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

- Bullying and harassment was a major concern for the organization.
- Several frontline ambulance staff perceived that they were bullied by managers.
- A large number of frontline staff to be demoralized.
- Culture of fear amongst frontline staff.
- Most ambulance crews told that the organization was a good place to work in the past, but now they felt unsupported by the service.
- Forced to work with a new Rota system which was very demanding with little or no rest between shifts.
- Independent, external review into bullying and harassment in the organization found that the problem was widespread.
Theresa May slams fire service chiefs for allowing 'bullying and harassment' to flourish as she unveils sweeping reforms

Home Secretary handed fire service control for the first time in 15 years
May said there was 'no excuse' for 'toxic and corrosive' attitudes
She vowed to transform the almost universally white and male fire service
May praised the professionalism of fire fighters who do a dangerous job

Theresa May has accused fire chiefs of allowing a culture of 'bullying and harassment' to flourish in some parts of England and Wales.

In a stinging rebuke, the Home Secretary warned there was 'no excuse' for the 'toxic and corrosive' attitudes identified in some of the country's fire and rescue services.

She also criticised the lack of diversity among fire fighters, who were 96 per cent white and 95 per cent male, and vowed to 'transform' the make-up of the workforce.
High sickness absence rates in the NHS

### Annual Sickness Absence Rates by Organisation Type in the NHS

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<thead>
<tr>
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<th></th>
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</thead>
<tbody>
<tr>
<td>England</td>
<td>4.40%</td>
<td>4.16%</td>
<td>4.12%</td>
<td>4.24%</td>
<td>4.06%</td>
<td>4.25%</td>
</tr>
<tr>
<td>Acute trusts</td>
<td>4.18%</td>
<td>3.91%</td>
<td>3.89%</td>
<td>4.01%</td>
<td>3.84%</td>
<td>4.03%</td>
</tr>
<tr>
<td>Ambulance trusts</td>
<td>5.73%</td>
<td>5.67%</td>
<td>5.76%</td>
<td>6.05%</td>
<td>5.82%</td>
<td><strong>6.27%</strong></td>
</tr>
<tr>
<td>Clinical Commissioning Groups</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>2.07%</td>
<td>2.20%</td>
<td>2.60%</td>
</tr>
<tr>
<td>Commissioning Support Groups</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>2.69%</td>
<td>3.05%</td>
</tr>
<tr>
<td>Community Provider Trusts</td>
<td>4.07%</td>
<td>4.64%</td>
<td>4.60%</td>
<td>4.65%</td>
<td>4.47%</td>
<td>4.65%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>5.23%</td>
<td>4.95%</td>
<td>4.89%</td>
<td>4.94%</td>
<td>4.74%</td>
<td>4.88%</td>
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<tr>
<td>PCT</td>
<td>4.42%</td>
<td>4.20%</td>
<td>3.93%</td>
<td>3.09%</td>
<td>3.26%</td>
<td>2.15%</td>
</tr>
<tr>
<td>Special Health Authority</td>
<td>3.93%</td>
<td>3.69%</td>
<td>3.47%</td>
<td>3.56%</td>
<td>3.30%</td>
<td>3.47%</td>
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<tr>
<td>SHA</td>
<td>2.22%</td>
<td>2.31%</td>
<td>2.13%</td>
<td>2.55%</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

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

A total of 11,796 people (out of 23,438) responded to the SPA/Police Scotland’s first ever opinion survey (a response rate of 50.4%).

Positive message
Their Jobs, their teams, their managers

Areas of improvement

The Survey responses highlighted particular issues which are impacting on engagement. These being:
- Information and Communication
- Feedback
- Training and Development
- Wellbeing
- Commitment.
Areas of Improvement

- **Information and Communication** - Heavy reliance on non-verbal communication (particularly email and intranet). 47% of respondents also felt they were overloaded with information - this was more acutely felt by Police Officers.

- **Feedback** - Whilst 50% of respondents got a sense of personal achievement from their work, only 30% felt that they received any recognition of good work. Only 18% thought that they would be supported if they tried a new idea even if it did not work.

- **Training and Development** - Whilst 54% of respondents had received training in the last 12 months only 40% thought it was relevant to their current role and only 18% felt it was relevant to their career development.

- **Wellbeing** - Whilst 60% of respondents felt able to raise issues about their physical health and 53% of respondents felt able to raise issues on their mental health with their immediate manager, only 8% thought the organisation was genuinely interested in wellbeing.

- **Commitment** - 33% of all respondents indicated an intention to leave. Concerns about not feeling valued, work pressure, lack of resources, lack of genuine commitment about well-being, health and safety.
Should we be surprised??

Police officers and staff take 200,000 sick days over mental health

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Police Scotland officers and staff suffering psychological problems took nearly 200,000 sick days over the last three years, new figures show.
Holistic approach to resilience and well-being

- Major changes in the landscape of prehospital care and the impact on the patient and user groups.
- What about impact on leaders, officers and staff at every level?
- Organisational resilience has received greater attention but it’s still an unexplored topic within the workforce context and its various dimensions.
- Holistic approach to resilience helps with coping mechanism, lowers the cost for individuals and the organization while enhancing public trust.
- A modern, healthy and a resilient work force is integral to cultural transformation of the emergency services.
Right Leadership behaviour(s)

Healthcare Leadership Model

Fire Service Leadership Framework
Key leadership challenge: Dealing with Dilemmas

Russell (2013) argues how servant-leadership is inherent to effective acting in emergency situations. He shows how the successful features of the individual emergency worker (passion, their desire to serve) are the very same that make up the servant-leader.

Need for moving beyond traditional heroic or leader-centric frameworks to a much broader shared, connected leadership capacity (Dionne et al. 2014; Day et al. 2014).

Creating serving culture (attribute of a servant-leader) enhances individual attitudes and behaviours (Liden et al., 2014) and servant-leadership can help finding meaning in uncertain situations (Dierendonck and Sousa, 2016).

This might include supporting and building a professional workforce and systems that embrace and enhance differences.

This is also help the emergency services leaders to deal with various dilemmas, conflicts, contradictions in discharging their duties as servant leaders.
Closing thought!!

“You can have pessimism for free but we are paid to lead.”

Rob Webster, Chief Executive, NHS Confederation, 2016