



WFMM
World Federation of
Medical Managers

2015 International
Medical Leaders Forum
VALUE THROUGH MEDICAL LEADERSHIP

DIALOGUE THEME

*Developing the next generation
of medical leaders*

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with Dr Tiego Selebano, South Africa**



THANKS TO THE FORUM HOST



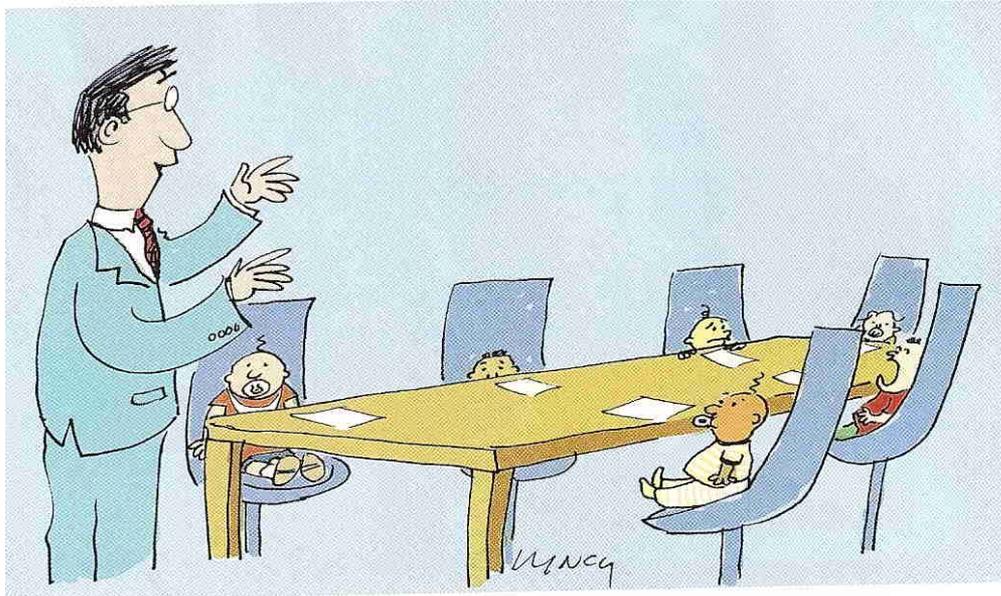
Developing the next generation of medical leaders



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Obviously we were thinking to the long term when we assembled this board

Ambition 7

Junior doctors in specialist training will not just be seen as the clinical leaders of tomorrow, but clinical leaders of today. The NHS will join the best organisations in the world by harnessing the energy and creativity of its 50,000 young doctors.

Review into the quality of care and treatment provided by 14 hospital trusts in England: overview report

Professor Sir Bruce Keogh KBE

16 July 2013

Ambition 7

- Contribution of junior doctors to review process hugely important.
- Capable of providing valuable insights
- Too many not being valued or listened to.
- Junior doctors:
 - Inadequate supervision and support (particularly dealing with complex issues out of hours).
 - Often felt disenfranchised.
 - Some not included in mortality and morbidity meetings - considered 'not adult enough to be involved in the conversations'.

Review into the quality of care and treatment provided by 14 hospital trusts in England: overview report

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Developing the next generation of medical leaders

The UK Experience

- Regional leadership development programmes ++
- Regional fellowships
- National fellowships (England, Wales, Scotland
 - NHS
 - Policy organisations
 - Major Consultancies
- ~1,000 FMLM junior doctor members

Wessex Professional Programme 2005 - *n*>10,000 alumni

Early years	Variable Middle	Penultimate	Transitioning
How the system works	Quality improvement	Development centre: <ul style="list-style-type: none">• Experiment with performance management• 1:1 feedback	Master classes
Teamwork	Project based		
Leadership			

Wessex Professional Programme 2005 - *n*>10,000 alumni

- Input into all years of training
- Colleagues not juniors.
- Fun
- Require initiative and hard work on their part and we will expect them to be responsible and accountable.
- Practitioners not theorists
- Involve trainees in running, designing and evolving the programme.
- Involve senior managers in training especially chief executives and medical directors

National Medical Director's Clinical Fellow Scheme

National competition

Spend one year out of training

Induction programme

Entirely funded by hosts

Work with most senior leaders at top of national organisations

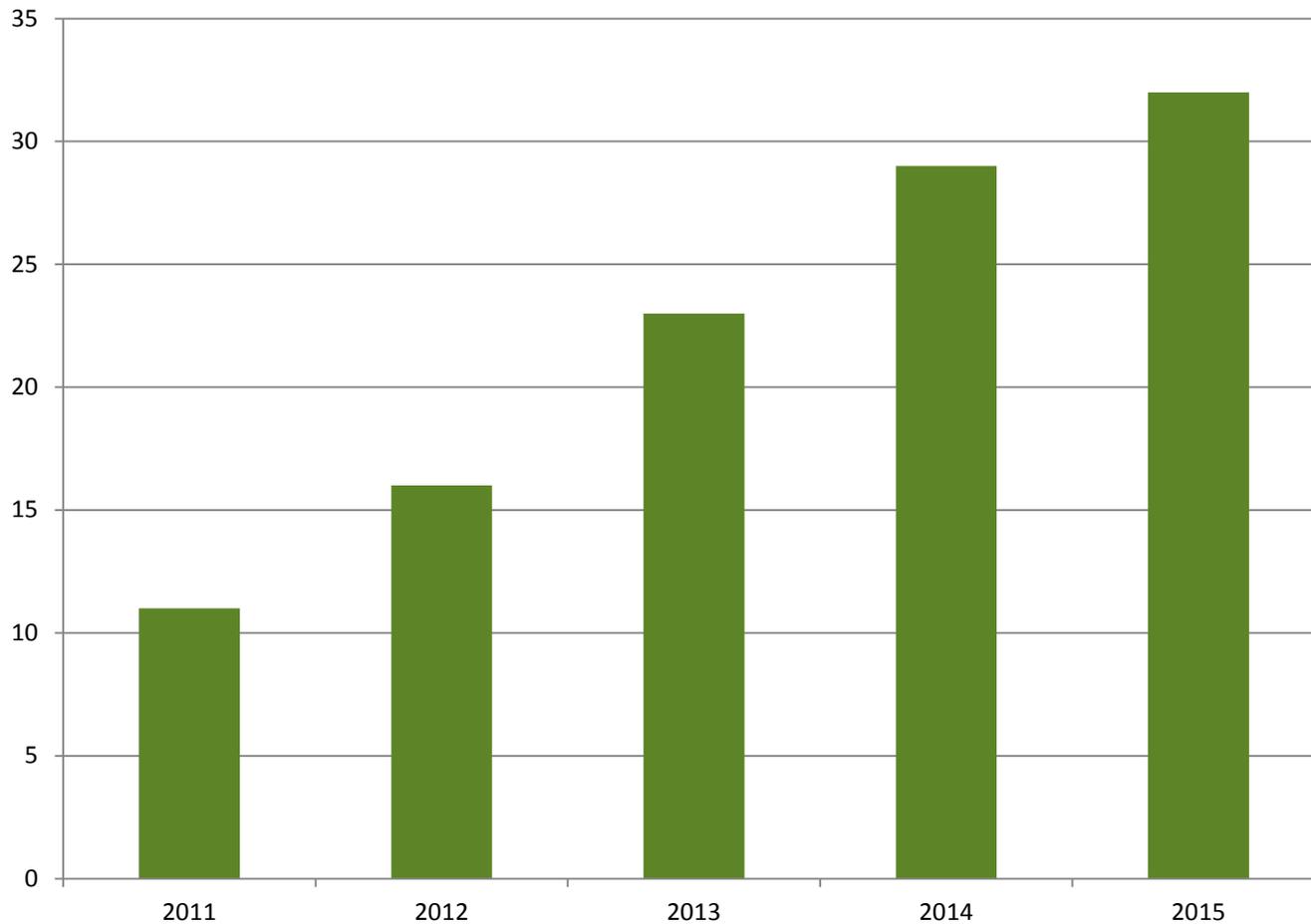
Informal CPD programme – they organise

Senior mentors

Do meaningful work



National Medical Director's Clinical Fellows Scheme No. of Posts



National Medical Director's Clinical Fellow Scheme Hosts

Host Organisation	No of posts	Location
BMJ	1	London
BMJ/NHS England (<i>split</i>)	1	London
BUPA	2	London and Leeds
Care Quality Commission (Primary Care)	2	London
Care Quality Commission (Secondary Care)	2	London
General Medical Council (London)	2	London and Manchester
Health Education England	4	London and Leeds
Health and Social Care Information Centre	1	Leeds
Macmillan Cancer Support (<i>New Host</i>)	1	London
Monitor (<i>New Host</i>)	2	London
NHS England	4	London
NICE	2	London & Manchester
Public Health England – Health Protection Agency	1	London
Public Health England – Reference Microbiology Service	1	London
Royal College of Physicians	2	London
Royal College of Physicians /FMLM (<i>split</i>)	1	London
Royal College of Psychiatrists/St Andrews Healthcare (<i>split</i>)	1	London/Northampton
Royal College of Surgeons of England (<i>New Host</i>)	1	London
Trust Development Authority	1	London

National Medical Director's Clinical Fellow Scheme

Next steps:

- Alumnus scheme
- On-going Medical Leadership and Management Fellowship scheme

Junior doctor leadership

Remaining Questions:

- Is patient interaction not leadership or management?
- Therefore, ?clinical tutors teach leadership.
- They cannot all go on a course!
- Needs more sustained development and experience



Junior doctor leadership

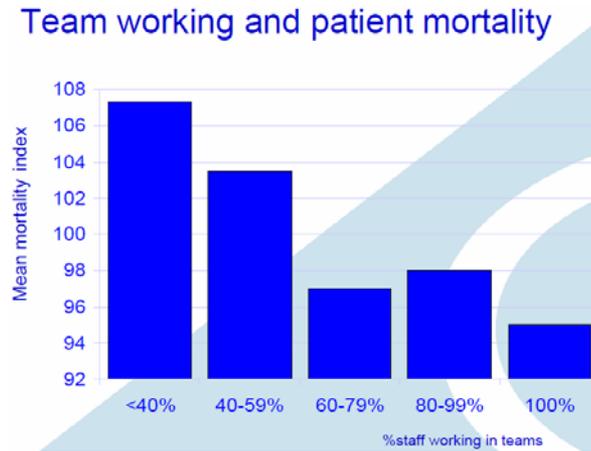
Remaining Questions:

- What works and when?
- What does an optimum programme look like?
- Pure leadership and management as a career?
- Degree programmes?
- Fast track scheme?
- International links and global health

Summary

Leadership development for junior doctors:

- They lead as well
- They understand and want it
- I wish I had more much earlier
- Do we want this to apply in 2022:



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Developing the next generation of medical leaders

It is common for large private sector organisations to nurture talented emerging leaders as an investment in the future. By contrast, many healthcare systems take junior doctors with similar potential and focus exclusively on their clinical training, largely through an apprenticeship model. Without diminishing the value of excellent clinical training, it can be argued that this wastes many of the most productive and creative years of some of the most talented graduates in any nation. It also misses the point that such highly able individuals have, not least through their 24 hour commitments, a unique perspective on systems and how they might be improved. Perhaps most importantly, there is a growing body of evidence demonstrating an association between leadership and patient outcomes including mortality.

It is likely that greater early exposure to leadership and development opportunities will have a positive effect on patient care, talent management and succession planning. Furthermore, junior doctors are required to show leadership from the start of their careers; why would any system not wish to support them to develop the necessary skills? Experience suggests that juniors have much to offer and that they relish the opportunity of influencing beyond direct patient care.

In short leadership is not the sole province of the most senior and leadership development for more junior doctors should be a right not a privilege. This will be discussed in the context of the growing UK experience.

Peter Lees

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April 2015