FIRST AND FOREMOST, ARE THERE ANY KEY LEADERSHIP MESSAGES YOU WANT TO GET OUT TO OUR READERSHIP?

Throughout my career, and more so since I have held leadership roles, it has become clear to me that as a leader, one has to communicate clearly and ensure consistency in messaging. This could be about a number of tasks in the workplace such as conducting board rounds or completing appraisals or having the influenza jab, for instance. The communication could also be about key priorities such as a focus on patient safety. The goal is to keep communication channels open with colleagues, be clear in what the message is and be consistent. For example, the Chief Nurse and I have sent out a ‘safety message’ every Tuesday to all staff at Oxford University Hospitals (OUH) since 19 February 2020. Organisations share a common purpose when communication is clear and consistent.

An important leadership principle I learnt, when I was part of the partnership between University Hospitals Coventry and Warwickshire and the Virginia Mason Institute, was to let the staff on the front line come up with the answers to problems. My role as the leader is simply to first, frame the question and second, enable and facilitate the changes they want to make to improve patient care. They really do know best.

Being kind to each other and oneself goes a long way in our work. We are all very busy and can very easily forget to appreciate our colleagues for what they do. It is important to put ourselves in their shoes—to gain powerful insights that shape how we act—and learn to appreciate others.

TELL US A LITTLE BIT ABOUT YOUR LEADERSHIP ROLE AND HOW IT IS CHANGING AS A RESULT OF THE PANDEMIC?

As the Chief Medical Officer (CMO) at OUH, I am accountable for delivery of high quality, safe care to patients; infection prevention and control; education and training; and research. During the pandemic, team working has been the key and as a team, we have had a common aim to ensure that all patients - with COVID-19 or other conditions - receive excellent, compassionate care. Staff must continue to be protected with adequate personal protective equipment (PPE) and be adequately trained for their roles. My routine at work has completely changed since the pandemic began. Pre-COVID-19, I took part in the Patient Safety Response Team every morning at 08:00 to review harm incidents from the previous 24 hours, visit clinical areas to support teams and ensure delivery of Duty of Candour. This changed to an Executive huddle every morning to discuss testing, PPE, service changes and daily communications. I worked with colleagues at OUH to set out our plan for the anticipated ‘peak’ in early April and create appropriate and adequate critical care capacity for patients with COVID-19, while ensuring that patients with other conditions could also be cared for in the hospital. I worked with multiprofessional teams to prepare the organisation for the pandemic and we are now working to recover our routine clinical services. All of this has required me to use different leadership styles, almost on a daily basis, with some meetings requiring a facilitative approach, some a coaching approach and a few, a directive style.
WHAT EVENTS IN YOUR PAST EXPERIENCE ARE MOST INFORMING YOUR LEADERSHIP IN THIS PANDEMIC?

There is no experience that can prepare one for managing a major incident as severe and sustained as the COVID-19 pandemic. However, my experience as an Obstetrician/Gynaecologist and over the past 8 years, as a CMO at two university teaching hospitals, has taught me to remain calm in stressful situations and made me a resilient person. I am not baffled by uncertainty. I always think about the desired outcome in any situation and focus my efforts on achieving those outcomes, be it a twin delivery as an obstetrician or maintaining safety in the emergency department during winter. I have also learnt that if I apply a systematic approach to a difficult or unexpected situation, it is easier to solve that problem. Despite the ambiguity in the early days of the COVID-19 pandemic, our aim was always to prepare the organisation and the staff. Working with the team, and drawing on their expertise, was the only way to achieve the desired outcome. My MBA has also allowed me to learn about leadership theory, and I have been putting this into practice over the last several years. By this, I mean that I have learnt to see things from others’ point of view and put myself in their shoes, to understand better how to communicate with them to reach a common understanding and solution to a problem.

WHAT ARE YOU FINDING THE BIGGEST CHALLENGES?

Needing to develop local solutions to changing guidance from the national bodies is a challenge, and one that requires courage and adaptability from the team. Personally, it is challenging not to be able to continue my work routine. Not seeing colleagues face to face on a daily basis, instead meeting and working on virtual platforms, is not easy. Losing colleagues to COVID-19 has been particularly difficult.

ANY PARTICULAR SURPRISES?

I am pleasantly surprised by the high level of partnership working, both at a regional level and with the independent sector. This has enabled mutual aid and continuation of cancer surgery which has been very important to the National Health Service. I have been putting Humble Leadership theory, and I have been putting this into practice over the last several years. By this, I mean that I have learnt to see things from others’ point of view and put myself in their shoes, to understand better how to communicate with them to reach a common understanding and solution to a problem.

ARE YOU SEEING ANY BEHAVIOURS FROM COLLEAGUES THAT ENCOURAGE OR INSPIRE YOU?

The way in which our medical students have responded, in coming forward to help in the hospital, is remarkable. They could have gone home, instead they chose to support clinical staff with donning and doffing PPE, delivering food, helping conduct swab tests and enabling conversations between patients and families with iPads. All of this requires compassion and courage and it is remarkable to watch the students at work. Equally, seeing my Chief Nurse work clinical shifts in the intensive care unit has been inspiring. She worked with colleagues in the most stressful environment and was a perfect role model.

HOW ARE YOU MAINTAINING KINDNESS AND COMPASSION?

Kindness and compassion are my core values and nothing even as severe as this pandemic could make me lose these traits; these are essential attributes of a leader in any situation. I have excellent support from my family and having them by my side has been a bonus. I try to go for long walks and spend time cooking recipes by Raymond Blanc and Nigel Slater over the weekend to relax a little. I also have friends all over the world who are involved in the pandemic in their own roles, and comparing international situations has been helpful. I believe that everyone is doing their best and respect for all is vital.

ARE THERE ANY IDEAS OR READINGS THAT YOU FIND HELPFUL FOR INSPIRATION AND SUPPORT THAT YOU WOULD RECOMMEND TO OTHERS?

Every day, I say ‘thank you’ to at least one person for their efforts and for what they do. I also recommend that we write one positive thing that we see or do every day. I suggest that everyone read Humble Leadership by Edgar Schein and Peter Schein.

WHAT ARE YOU LOOKING FOR FROM YOUR LEADERS?

Leaders should be accountable for their actions and responsible for maintaining staff and patient safety. Leaders should facilitate change and empower staff to speak up. Support for colleagues and consistent messaging are incredibly important.

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