



Case study: NHS clinical services team

The clinical services manager of an NHS team was one of the participants on a 12 month long aspiring leaders programme. As part of that programme we introduced participants to the tools and techniques of creative problem solving and helped them apply it to a challenge relevant to their world.

The problem

The clinical services manager was in charge of a team of 80 that was responsible for two specialist services across a city. They recognised that their service was not as prompt or effective as it needed to be: they were often accessed too late to prevent amputations and other major surgery.

The manager wanted to align the team with corporate objectives and solve a particular challenge: to improve healthcare outcomes for diabetics in the city.

The initial piece of work was diagnostic: looking at the team's climate for innovation to determine what was holding them back. The results were clear: although they scored highly in some areas (a fairly high degree of trust and debate within the team and support for each other's ideas) there were other areas which needed to be improved to unlock the team's potential:

- challenge and involvement
- freedom and
- risk-taking.



The challenge the team wanted to solve was: to improve healthcare outcomes for diabetics in the city.



The solution

As part of the programme we trained delegates, including this clinical services manager around creative problem-solving methods, including equipping them with tools to:

- frame the challenge
- generate and select ideas
- translate the ideas into an agreed plan of action.

We also did some work with around Adaption-Innovation, looking at personal problem-solving preferences styles so he could identify where and why his team were not working so effectively and ensure he and his team operated more effectively.

From this work, the clinical services manager took back the learning and through facilitating his team's thinking, they came up with ideas and strategic projects they were all motivated to progress. They created a plan for the whole department about which they were committed and excited.

The workshops and discussions were followed up with one-to-one support to help him with implementation.

The outcomes

In the following 12 months, the team completed a number of high-profile projects and the profile of the service within the city rose dramatically.

The team set their own strategic direction, developed a 5 year plan for service with 12 monthly milestones and pitched for funding, successfully.

Over the subsequent 2-3 years, they experienced a reduction in siloed working force, reduced waiting times by 80% and the amputation rate by two-thirds and created a new GP electronic referral process. One team member commented: we are "more focused and [have more] direction". Another said: "the leadership team is the best I have worked with".

When we measured their climate for innovation nine months after the first diagnostic, they had, even in that time, seen a dramatic improvement. Their learning and observations from this included:

- Ideas and innovation breeds activity;
- Time, resources and hierarchy can all be barriers to change;
- The right course of action can emerge if you keep asking the right questions and listen carefully to the answers;
- That being their own agent for change made the most dramatic difference.

Key outcomes:

- 5 year plan with 12 monthly objectives and milestones
- Reduced waiting times by 80%
- Reduced amputations by two-thirds
- Made innovation a part of their everyday work



The leadership team is [now] the best I have worked with.

