

**Leading on the
COVID-19 frontline**



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Hospital Chief Executive Officers (CEOs), unlike most other CEOs, are at the forefront of the global fight against COVID-19. Given this relatively unique vantage point, we believe that their experiences and reflections will be of interest and value to leaders beyond the health sector and indeed, beyond the immediate crisis. We have spoken to a select number of health senior leaders; CEOs who are responsible for large hospitals and community care facilities, collaborating closely with their university counterparts to discover a vaccine for COVID-19, and working to enable the largest transformation of a country's health system in a generation. In this article we share their insights on how the pandemic has actually created opportunities to deliver better care to patients and how these leaders have managed to maintain a healthy balance between various divergent management practices.

The unique nature of a crisis

A crisis can create conditions that are not always present during normal times. We found that COVID-19 has provided the health CEOs we interviewed with an opportunity to align their people around a smaller number of priorities and has enabled them to accelerate the execution of their organization's strategic priorities, with minimal resistance. Dr. Bruno Holthof, CEO of Oxford University Hospitals (OUH) NHS Foundation Trust and Senior Fellow and Clinical Lecturer at the University of Oxford, said:



OUH is a large, diversified health system with lots of priorities. Whilst on any given day currently I'm having to juggle a multitude of different tasks like vaccine development, sourcing Personal Protective Equipment (PPE) for our people or redesigning clinical areas to ensure maximum capacity and safe social distancing, they are all in pursuit of a single, unifying priority; tackling COVID-19.



Furthermore, they observed that the crisis has brought their workforce closer together and that people were very supportive and willing to help. Dr. Mohammed Ibrahim Alsaghier, a practicing surgeon and CEO of the Health Holding Company - the organization set-up to drive the health transformation of Saudi Arabia - said:



Everyone has been incredibly helpful, supportive and positive. For example, my board has been very accessible and very open to sharing their expertise to help us through this. My executive team that only came together last October has been incredibly cohesive and unified.



In some instances, they observed that strongly held opposing opinions, personality differences or diverging agendas have been put to one side since the virus appeared; an observation that is supported by psychological research. Sir Jim Mackey, CEO of Northumbria Healthcare NHS Foundation Trust – one of England's highest performing providers of NHS care - stated:



Our people, local partners and the local population have been amazing throughout. Our lives as leaders are often dominated by finding ways of pulling people together in pursuit of a common goal. COVID-19 did that very effectively with traditional silos and tensions rapidly broken down as we mobilized.



"A common danger unites even the bitterest enemies."

Aristotle

Problems and polarities created by COVID-19

There is much about COVID-19 that creates problems for governments and specifically the health sector, from securing sufficient quantities of PPE, ventilators and tests, through to how to introduce social distancing. However, there is also a number of other big issues that need to be grappled with, like managing the inherent tension between keeping people safe and the needs of the economy, and in the case of health, ensuring access to treatment for chronically ill patients alongside COVID-19 patients. The latter two issues are actually examples of polarities that leaders need to manage.

A polarity (also known as a paradox, dilemma or conundrum) is an interdependent pair of opposites where either side has benefits and drawbacks but both are needed over time to create positive results and achieve sustained high performance. Attempting to address a polarity with traditional problem solving skills will only make matters worse.

Problems have solutions and can be fixed whereas polarities are ongoing, unavoidable and unsolvable. Good CEOs know this, are able to distinguish between the two and manage them accordingly.

There is a risk in a crisis that CEOs overemphasize one end of a polarity at the exclusion of the other. For example, the demands of the crisis may force them to focus almost exclusively on the 'here and now', centralize decision-making, and wherever possible, limit the risks they take. There is a danger however, that this can result in:

1. The negatives or downsides of that end of the polarity being played out; and
2. A pull towards the opposite end of the polarity as it is perceived as preferable and the solution to the downsides being experienced.

The risks of not effectively managing a polarity are illustrated using the trust and challenge polarity in the diagrams below. In our conversations with the health CEOs, we found examples of where they had

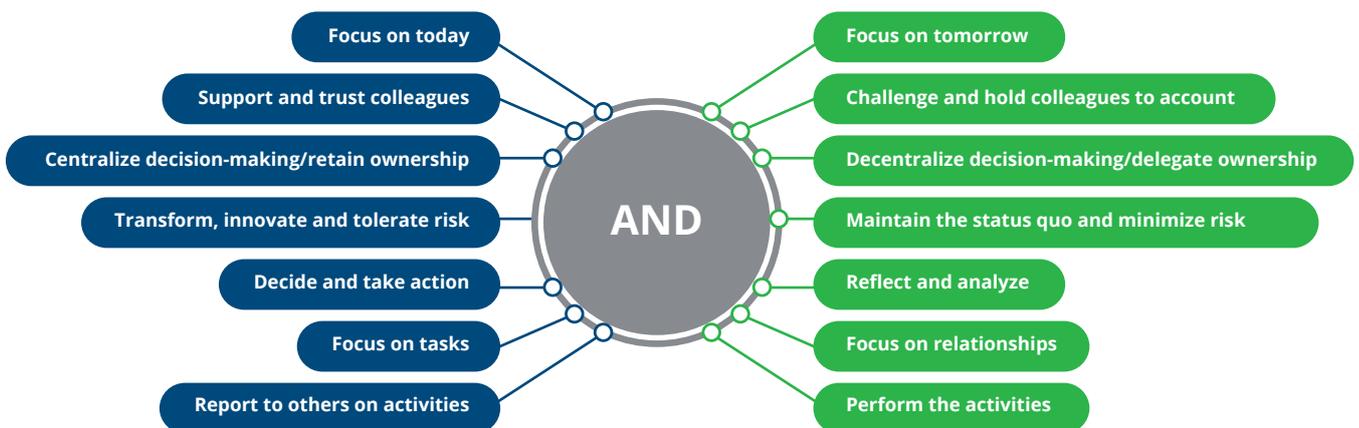
managed to achieve a healthy balance between various polarities common at their level, optimizing opportunities presented to them by COVID-19.

Managing today and tomorrow

The health CEOs all stated that managing the immediate requirements of COVID-19 has given them the opportunity to implement some of their longer-term priorities earlier, especially in relation to digital transformation. Dr. Mohammed Ibrahim Alsaghier said:

To help manage capacity in our hospitals and maintain safe social distancing, we have introduced virtual clinics at an unprecedented rate. In a few short months we are now performing a significant number of consultations virtually via digital platforms.

Typical polarities that CEOs have to manage on a regular basis



Alongside being able to accelerate digital transformation, COVID-19 has also given health CEOs and governments more generally the opportunity to focus on, and accelerate the development of: prevention and wellbeing measures designed to address chronic diseases and mental health issues which put people at greater risk during the COVID-19 crisis; localizing critical supply chain items (e.g. the manufacture of tests, PPE, etc.); and the development of Artificial Intelligence driven surveillance systems.

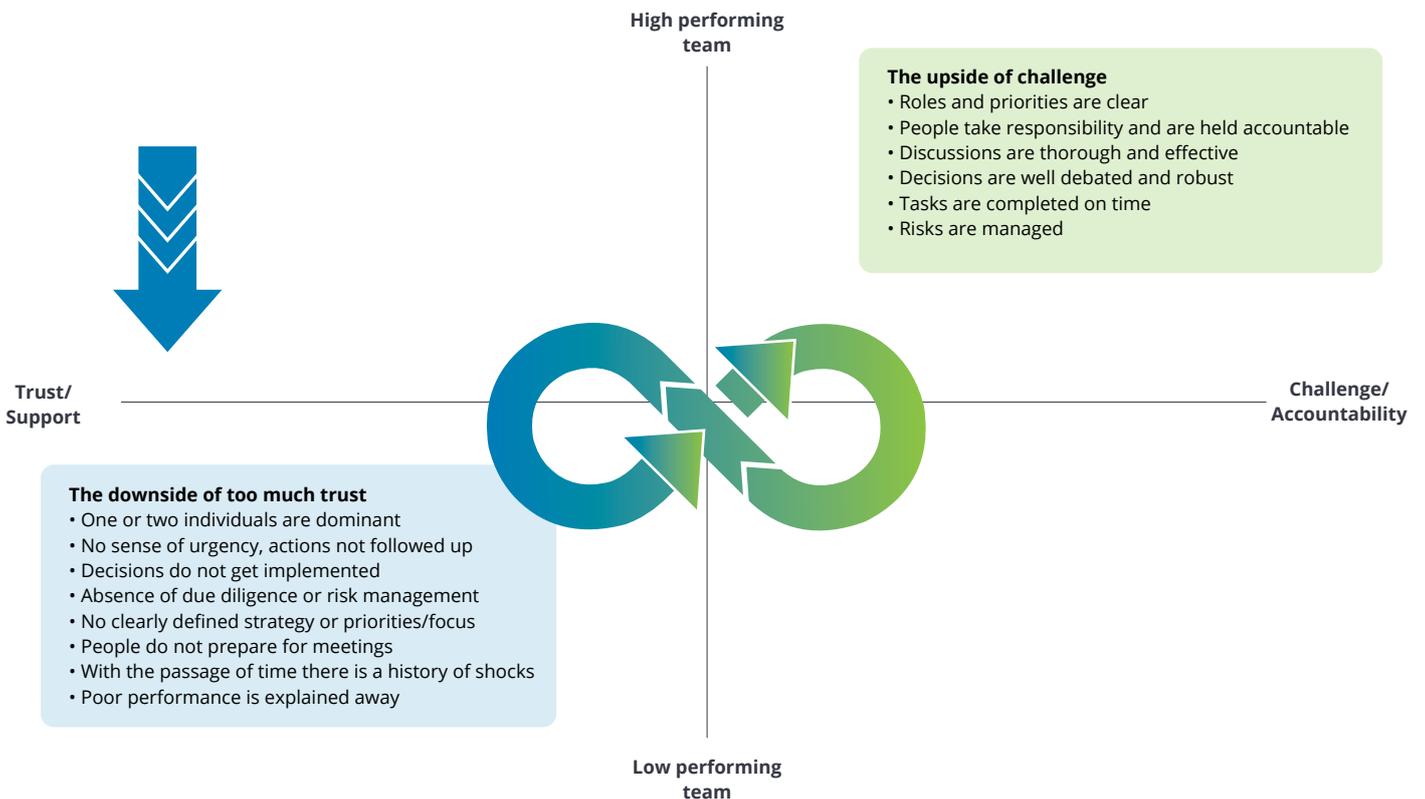
Sir Jim Mackey highlighted the balance that needs to be struck between dealing with operational matters in the here and now and having the ability to step back and take a view on what is happening at a systemic level, but also crucially, acknowledging the importance of taking care of yourself as leaders:

I found myself having to make myself stand back because everyone else was up to their armpits. With this, comes the challenge of managing self. COVID-19 has challenged us all. For me, that has ranged from irritation, annoyance, fear, anxiety, confidence highs and lows, boredom, fatigue, adrenalin bursts, family worries and so on - just like everyone else. It's worth stating that we all have to be aware of this, and manage ourselves, however hard it is. It's more important in a crisis than ever.

Trust and accountability

Trust is most often built slowly and lost quickly. In a crisis, trust can be grown much more quickly and easily by sensible decisions taken at pace and with the values of the organization in mind. However, the ease with which trust might have been gained during a crisis can also be lost even quicker than in normal times due to poor decision-making, inaction or bad behavior. The health CEOs all spoke about the high levels of trust and support that they were experiencing amongst their executive colleagues and wider teams during the pandemic but they also mentioned the 'accelerant affect' that COVID-19 could have on destroying trust if they did not remain attentive to the impact of their decisions and behavior on trust.

This is what can happen when there is too much emphasis on trust and support by the CEO



They also remarked that high levels of trust were not at the expense of accountability and constructive challenge, as Dr. Bruno Holthof stated:



We have daily 'Gold Command' meetings and are making important decisions every day. When you are reporting on a 24hr basis, the feedback cycle is much quicker so you get feedback on whether something is working or not much faster. In addition, I can also determine whether a solution is working or not because I can physically visit the wards and see things for myself.



Centralized control and delegated responsibility

Dr. Bruno Holthof recognized the importance of balancing centralized control and delegated responsibility:

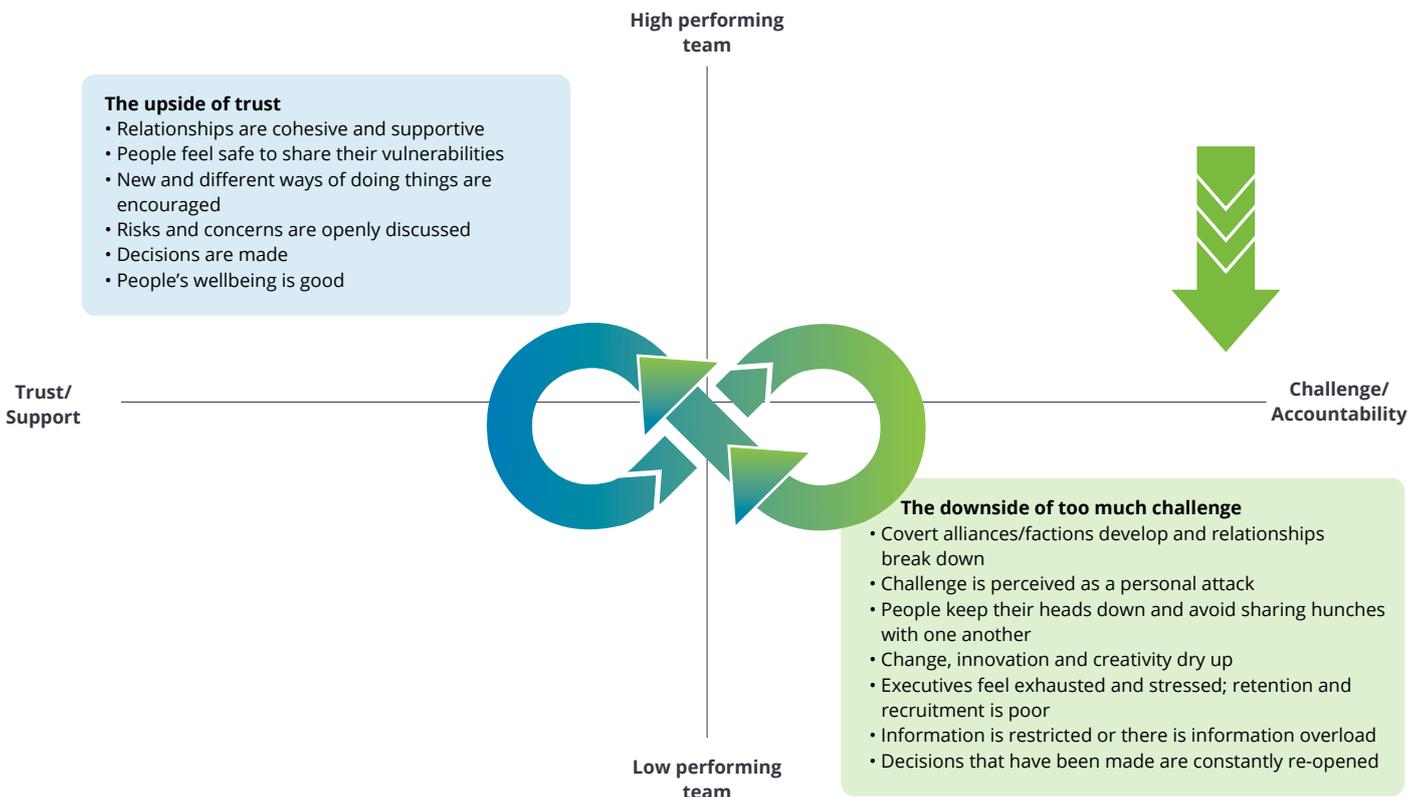


We introduced centralized controls on the stock levels of different Personal Protective Equipment items in the hospitals, but ward managers and other department leaders were responsible for adequate training and use of PPE in their areas.



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COVID-19, quite rightly, resulted in governments setting up command structures to manage the crisis. This has been effective and helpful in the short-term but one of the tricky judgments leaders have to make is what needs to be held tightly, and where people need to be given space. Leaders will need to find ways of constantly recalibrating this as they move through the next few months and must not fall into the trap of believing that command structures like this can work, or be healthy, in the long term. As Sir Jim Mackey stated:

It [centralized control] can be toxic, demoralizing and disempowering if held too tight for too long. Humans need space, clear frameworks to work within and to be trusted in order to thrive.

In conclusion

Conventional wisdom dictates that for a CEO to increase their chances of successfully managing a crisis, they should focus on the ‘here and now’, centralize decision-making, wherever possible implement ‘solutions’ that are tried and tested and do not take risks, and create a climate of mutual respect and support. This indeed maybe good advice but there is a danger with this approach that other important aspects of a CEO’s role, such as strategy, innovation and accountability, take a back seat or are ignored altogether. We found that the health CEOs we interviewed all recognized this and have found ways to maintain a healthy balance, even during COVID-19. We believe that their experiences and reflections will be of benefit to CEOs from other sectors as they lead their own organizations through and beyond COVID-19.

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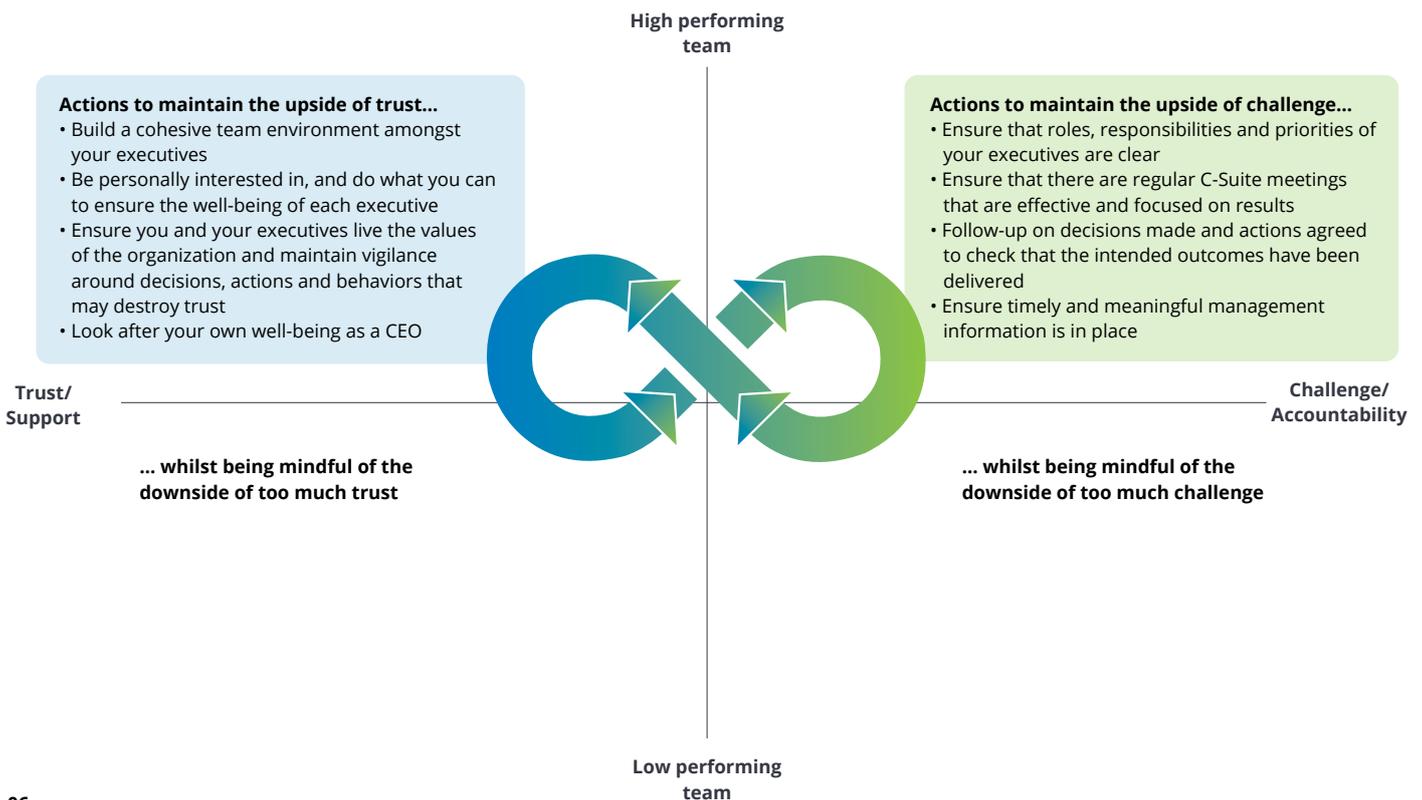
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Actions to help CEOs manage the ‘trust/challenge’ polarity well



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