Article 2. Strategy to every day operational management

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Feedback
The question about weekend waiting times will be discussed in the next edition. However, there are some things that will not wait, complaints for example should be dealt with promptly. The full replies are listed on the internet pages for this month. In summary Dr York felt that the accident and emergency (A&E) staff acted appropriately (see internet pages for answer from the consultant and from the chief executive).

You have to ensure the advertisements for the next set of junior doctors (SHOs) are ready as this will not wait. The draft person specification for the SHO and the advertisement are in the internet pages.

We have asked to meet the chief executive.

Time out—introduction
The first article introduced the concepts of the series, gave some baseline information and set initial problems to be answered. However, the series will also call “time outs” from day to day management to discuss important points of management theory or to take a longer term strategic view. This will be done under the headings of strategy, people management, specialist topics, A&E topics and, perhaps most importantly, attitudes.

From the start of your management life it is important to develop a proactive approach rather than a reactive one. This will enable you to take control of your own (and departments) destiny. We will therefore begin by looking at Strategy, this is the process by which we define our objectives, examine the department’s current strengths and weaknesses and state where we want to be in five years time.

Time out—strategy
In the first article we defined management as the organisation and motivation of groups to achieve planned objectives. In A&E management there are many people who will hand down objectives, for example the chief executive has already given you a clear objective about the waiting time. In any management position (even if it is concerning our own career), there should be clearly defined objectives. There are a number of well established tools that can greatly assist strategic planning to analyse the current position and try to look to the future.

SWOT, OBJECTIVE SETTING, GAP ANALYSIS, STAKEHOLDER ANALYSIS
This is classic management approach to analysis and objective setting.

The pneumatic FESSG1 has been used to help list the tools of strategic analysis. It is basically a way of saying:

“Where are we now?”
“Where do we want to be?”
“What is the gap between present reality and future vision?”
“What financial and human resources do we need to achieve the future vision?”
“Who else do we need to convince to get there?”

“When are we now?”
SWOT analysis is a management tool that has been used for decades because it is practical, easy to understand and simple to use. The department’s strengths, weaknesses, opportunities and threats may be listed. This process will have two dimensions, internal—those operating within the department—and external. In any business it is essential to consider the external influences on the work of the department, as the main problems in providing a service might lie elsewhere. An obvious example of this is the lack of beds causing long trolley waits and the consequent catastrophic effects on patient care and the workload of A&E staff.

The objective is to give clear understanding of the present position. The work of an emergency
Strategy to every day operational management

The immediate task is the SHO recruitment programme. It is essential to attract good quality staff. Sound staff selection procedures have to meet both legal and NHS requirements. Applicants are increasingly aware of employment law and the process of selection has to be demonstrably fair. Nevertheless it is clear that you as an employer have to ensure that the best people are appointed. The job analysis should lead to the production of the job description (example on the web). This must contain certain information, the place of duty, type of duty, hours of duty, reference to pay scales and conditions of service.

Where do we want to be?

We would like to thank I Sammy, Carlos Perez Avilla and Peter Driscoll for detailed comments.

Disclaimer

The characters and incidents in this series are mostly fictional and resemblance to any department, individual or event are coincidental. Some problems are based on real situations but details have been altered and in no case are any details used that might identify an individual or department.