What motivates NHS managers?

. . . . is it just money?

Cranfield Healthcare Management Group
Research Briefing 3

How do they manage?
a study of the realities of middle and front line management work in healthcare

Janice A. Osbourne: December 2010
Our research revealed that organizations do not have to worry that managers will leave simply because there are fewer financial incentives. In fact, we found that while hygiene factors such as pay, conditions and job security are motivating, there are other significant factors which organizations can become more creative with to maintain managerial motivation.

The UK election 2010 brought announcements of pay freezes and government spending cuts, and the NHS is expected to find efficiencies of £20bn by 2014. NHS managers will come under even more pressure to reduce costs in extremely difficult circumstances. The dilemma which healthcare organizations now face is threefold. They need to motivate and retain managers who might be tempted to ‘jump ship’ into less pressured (private sector?) environments. And they need to achieve this without generating more cost pressures.

The aim of this briefing is to highlight some of the non-monetary motivators and rewards and suggest some practical approaches that can be taken to ensure that this expensive under-utilized resource remains motivated within health organizations.

**A few research facts**

- People work for money, but they also work to find meaning and a sense of identity (Pfeffer, 1998).
- Despite 50 years of research demonstrating that people are not just motivated by money, many organizations continue to rely on financial rewards (Silverman, 2004).
- The expectation that effort and performance are connected, and that performance will result in valuable rewards, is critical to our motivation (Vroom, 1964).

**This is what you said**

We asked hospital managers at front, middle and senior levels what motivated them and what their rewards were. Here are the findings with a few quotes to illustrate.

**Making a difference for patients**

_The main rewards are in improving the patient experience and patient safety, making sure that resources are well used. It’s a rewarding role, which is why I keep doing it._

**Praise and recognition**

Managers indicated that feeling valued and being recognized came from several sources: patients and their family members; line managers; senior managers.

_Sometimes it’s just getting a heartfelt ‘thank you’ from patients. It’s also getting recognition from your line manager, but that rarely happens. Managers are only concerned with targets. They don’t care how you do it as long as it’s achieved._

_The bouquets of congratulations to staff - individually and personally - from the CEO in the weekly bulletin are motivational._

**Relationships in the workplace: teamwork, working together**

Managers viewed positive relationships with their line managers and peers as motivating, and making the work environment a pleasant place to be.

_This is a really nice Trust to work for; the people we work with; good humour._
Training, development and career progression

Having opportunities to develop and grow was cited by a number of managers as motivating.

*Excellent opportunities for training and development.*

*If you show initiative and show willing you can fly.*

Having a sense of achievement

Feeling that they had achieved something for their patients, staff or the organization was a powerful motivator for many managers.

*Seeing how staff are learning, how they are progressing. My motivation is making sure that there are no job description clashes. Staff are being asked to do things that are not in their job description. It’s making sure that the workload is what they can manage. My motivation is keeping it fair.*

Public sector values

Their personal values in terms of service to the NHS was a motivating factor for some managers: ‘a lot of NHS managers want to work in the public sector and believe in the NHS’.

Motivation checklist

These motivators are not unfamiliar. However, in the NHS, the issue is not about what, but how. How can managers feel a sense of ownership when they are under huge time pressures to deliver rapid changes? How can managers feel a sense of achievement when the goalposts keep changing and they have to make tough decisions between patients and organizational directives? Here are some answers based on Victor Vroom’s expectancy theory of motivation:

**Strengthen the belief that effort will result in performance**

- Allow managers to feel a sense of ownership through a participative style of management. This means involving managers in decisions that affect their role or area.
- Provide a clear direction of travel. This means clarifying roles and objectives, budgets, timescales, and measurable outcomes. This avoids the ‘schizophrenic’ environment which some managers say they currently work in.
- Listen to managers in face-to-face and group settings. Ensure that messages from the top, including the vision and strategic goals, are communicated clearly and consistently, to reduce scope for ambiguity and to clarify the outcomes the organization is looking for.
- Cut the bureaucracy that managers have to work through in order to get simple tasks done.
- Reduce the number of negative messages. Do your managers feel rewarded or punished for what they do? One of our participants said, ‘middle managers only get beaten up’. Views like that can be changed simply by blaming less and encouraging more.

**Strengthen the belief that performance will lead to reward**

- Provide constructive feedback. Let people know when they have performed well. If performance is weak, explain, and discuss how to improve.
- Encourage multidisciplinary team working. This increases the likelihood of everyone having positive expectations that their performance will lead to valued rewards.
Enabling valued rewards

- Use management development strategically. When promotion and financial rewards are limited, there are still opportunities to offer rewards through training and development.
- Use stretch tactics. Open up opportunities which stretch management abilities by allowing scope to explore ideas and new initiatives which can benefit the organization.
- Use multidisciplinary teams to strengthen relationships, mutual trust, cooperation, and effective teamwork. This can be achieved through offsite events as well as routine work. Our research shows that positive relationships act as a significant management motivator.
- Respect individual contributions. Many managers report that one effect of the pressure on senior managers is behaviour that devalues and demeans the contributions of others, particularly in performance review meetings. In a pressurized environment, individuals are more engaged, more motivated and less stressed if they and their efforts are respected and valued and their views are treated as legitimate, even when there is disagreement.

If you have a view on any these issues, please let us know.

Sources


The research

This study is based on interviews and focus groups with middle and senior managers at six acute trusts and one primary care trust. The next stages of the project include a management survey, debriefing groups, and case studies exploring how changes are managed in the aftermath of serious incidents.

Participating trusts

Bedford Hospital NHS Trust                 NHS Bedfordshire Primary Care Trust
Cambridge University Hospitals NHS Foundation Trust Gloucestershire Hospitals NHS Foundation Trust
Northampton General Hospital NHS Trust North Bristol NHS Trust
Whipps Cross University Hospital NHS Trust

Project team

Prof David A. Buchanan (PI)                Dr Charles Wainwright
Dr Catherine Bailey                        Dr Clare Kellih
Dr David Denyer                           Dr Emma Parry
Dr Janice Osbourne                        Dr Colin Pilbeam
                                                Dr Janet Price
                                                Prof Kim Turnbull James

Acknowledgements: The research on which this briefing is based was funded by the National Institute for Health Research Service Delivery and Organization programme, award number SDO/08/1808/238, ‘How do they manage?: a study of the realities of middle and front line management work in healthcare’.

Disclaimer: This briefing is based on independent research commissioned by the National Institute for Health Research. The views expressed are those of the author(s), and not necessarily those of the NHS, the National Institute for Health Research or the Department of Health.

For further information about this project, contact Jayne Ashley, Project Administrator
T: 01234 751122
E: J.Ashley@Cranfield.ac.uk