



LEADER

Management development policies in the district health authorities

A conference was held in Lancashire during February under the auspices of the 'Standing Committee on Management Education and Training'.

The task of the fifty participants, under the chairmanship of Professor T. Chester, was to discuss the how, why and what of management education and training in the new district health authorities.

It was extremely interesting to hear of the new challenges and opportunities presenting themselves for consideration by the new health authorities and their chief officers.

In discussing this topic, it is important to identify how training needs are identified in an organisation. One health authority may have very sophisticated staff appraisal systems with management development action programmes to support them but may never provide for or actively encourage the self-motivated person who pushes for courses and training as part of his development. Another authority may respond only to the personal wishes of the more determined of its employees. But why train and educate for management in the first place?

Nurses know of the rush for first line and middle management courses in the mid-sixties and seventies. They did not fully meet the needs of the time and so they fell into disrepute. There are many reasons why management education is still essential. First, we must fully equip managers to do their job of managing people and resources. Secondly, we should prepare staff for promotion to vacancies known or likely to occur in the future. Due to national agreements, however, internal promotion is discouraged and to some extent prohibited; and senior management have to invite applications from all who are interested nationally. This could be considered by some as a waste of money and time. Internal staff in turn feel unsure of where they will end up in the organisation.

There is certainly a need to educate the three senior members of the new units. I say 'educate' in terms of learning about each other's professional background and personal knowledge, and how to work together. The participants of this conference were reminded that even the reluctant doctors would come together and talk about management in its various aspects if approached in the right way.

Discussion also centred round devolving training responsibilities and the subsequent training budget to units. Two schools of thought can emerge. One view is that it does not matter what the units do or what they spend their money on as long as their organisation is working well. The other view is that there had to be understanding and co-ordination at district level to ensure that district policies and objectives were being observed and achieved.

Outside education centres like the King's Fund, Gwent College of Higher Education, St. Helen's College of Education, Leicester Polytechnic, and the Health Services Management Unit — University of Birmingham, who were all represented, also contributed to the discussion. This is where education and training should be seen as rather different aspects to staff preparation. Training is very much assistance in the job environment to analyse and solve problems while education takes place in a more controlled learning environment where there is time to explore with others the various theories and concepts of management.

In informal discussion the idea of educating the aspiring administrator and nurse together in some form of National Training Scheme was pursued. With the development of 'unit' senior staff perhaps this idea should be considered further by the National Staff Committees and the appropriate education establishments.

Finally, developing and maintaining relationships across the disciplines and using the informal organisation was important in identifying and satisfying training needs.

It costs nothing to hope does it?

Anthony Carr