is an assessment of the impact of this testing on the patients and families concerned—a point made in a recent review of the ethics of genetic prediction in Huntington's disease.¹¹

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“Macho” management in the NHS

May wreck everything

The most valuable resource of the NHS is its staff. The people who know that best are the few managers who understand modern management and the health service and who have the respect of all the different tribes within the NHS. These are the people who more than any others are carrying the burden of translating the government's sketchy plans for reforming the health service into reality. Now some of them are being sacked in a bloodletting initiated in a fit of what Duncan Nichol, the chief executive of the NHS Management Executive, called last week “macho management” (p 1588).

Those who know little of big business imagine that it is a world in which people are regularly and ruthlessly thrown on to the street without a moment's hesitation. Sometimes it is. But the world's most successful companies know that such behaviour is hugely wasteful. A sacking is as much of a failure for the organisation as for the sacked employee—often more so. The best managers empower their employees, delegate to them, nurture their skills, allow them to make mistakes, and guide them in solving their own problems. But there is an old fashioned style of management—often called heroic management—in which heavy handed bosses are reluctant to place confidence in their employees and insist that they know best concerning the interests of their organisation. The worry is that some NHS managers and chairs of health authorities and trusts are adopting the worst practices of big business. Although there are times when employees must be moved or even sacked, strong management is much more about having the courage to let people use their skills in their own way.

The NHS is at a particularly vulnerable time managerially. Professor Colin Carnall, the dean at Henley, the management college, told the annual conference of the British Association of Medical Managers that the NHS is like a train about to leave a station. Those who have concentrated on the political struggles over the NHS might imagine that change is slowing down in the health service—in fact it is just about to accelerate. The first 14 months of the new NHS have largely been about preparing for the move to something closer to a

market. As the health service switches to cost and volume contracts, commissioning begins in earnest, and general practitioner fundholders energetically seek improvements in services for their patients the rate of change will accelerate—the train will leave the station. This acceleration in change has already become visible in London. It is then, warned Professor Carnall, an expert on the management of change, that there may be a sudden collapse in staff morale. That is when managers with a deep knowledge of the health service and the trust of all sections of the staff become particularly important. Some of those being sacked are just such managers. It may even be that the precipitous sackings are signs of panic. But for the NHS to copy football teams who sack their manager on Monday after losing on Saturday would be disastrous.

One of the most worrying rumours being heard at the moment—and an increase in rumours is itself a symptom of accelerating change—is that some managers being sacked are the ones closest to doctors. It has been one of the tenets of the NHS reforms that managers and doctors must work more closely together, which necessitates building trust. To sack managers who understand well the problems of doctors and nurses is extraordinarily shortsighted.

Duncan Nichol called last week for the sackings to stop. “We cannot,” he said, “afford to waste the skills of people.” He called on chairs and managers to come down hard on macho management. His words must be heeded or else the NHS reforms may be derailed not by political or professional opposition but by managerial heavy handedness.

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