Doctors can and should be involved in the management of the NHS at all levels, for they are the most appropriate group for the task.’ Anthony E. Young (2003)

The National Health Service (NHS) has always involved doctors in leadership and management. Professional managers need their clinical help and expertise, and psychiatry skills are pertinent: we understand the needs of the population and we are comfortable dealing with systems and groups.

What is medical management?

All psychiatrists are involved with medical management. For example, a clinical leader in a multidisciplinary team uses management skills for the population served by that team. Other medical management roles include:

- A clinical lead may advise managers about need within a service but does not normally have operational management responsibilities.
- The clinical director works in partnership with a professional manager and is normally responsible for part of a mental health service, including budget. They are not always medically trained.
- The associate medical director is a deputy for the medical director and is normally primarily involved in the professional management of doctors, although some have operational responsibilities.
- The executive medical director sits on the trust board and provides professional medical advice to the board and its officers. They provide medical input to strategy development and communicates the trust’s perspective to clinicians. They support the work of clinical directors, is often involved in clinical governance and is a professional lead for the doctors within the trust. They have a corporate role, most obviously in foundation trusts.

Why do it?

- You might naturally enjoy leadership and political environments.
- You might become dissatisfied with managers in mental health services not considering doctors’ views and want to try to improve this situation by getting involved.
- You might think the best way to improve patients’ mental health is by looking at the whole population.
- You might want another career path after becoming bored, frustrated or tired of clinical work.
- You might have a specific reason – personal development, championing your own services, or financial reward.

Practical steps

If you are considering a career in medical management:

- Talk to someone in a medical management role and get a mentor.
- Start with small roles and work your way up so you gain confidence in yourself and from colleagues.
- Make sure you have clear training: the British Association of Medical Managers can help develop skills; generic negotiating skills training can be particularly helpful.
- Ensure that any management role is clearly within your job plan in such a way that you could readily return to full clinical activity.
- Make sure there is a job description that can be fulfilled within the time allowed.
- Ensure you have practical support within the trust (e.g. administration, finance, HR) and professional support outside the trust (e.g. regional medical managers’ meetings).

Remember –

- you are a doctor and are answerable to the General Medical Council, which has clear expectations of medical managers’ duties
- you are a psychiatrist who needs to meet the expectations of the Royal College of Psychiatrists.
Relationships with colleagues

A management role can be personally rewarding, but it can cause tension with other consultant colleagues. Consultants value their autonomy so management arrangements with medical directors can create difficulties.

Medical managers balance responsibilities to patients, the profession and the organisation where they are senior managers. This can be challenging when managing close colleagues on performance difficulties or service changes/development, but it is also where good medical management is vital.

Medical managers can be criticised for ‘switching camps’, but most are valued and respected for their work. Having clinical programmed activities will help.

FAQs

• How old should I be before considering medical management?
  In general, a newly qualified consultant needs to concentrate on their clinical work and get used to being a consultant before taking on extra duties.

• How do medical managers get paid?
  Either part of the programmed activities, i.e. by decreasing clinical sessions to enable the work to be done, or by paying extra programmed activities or a responsibility allowance.

• Will I get a clinical excellence award?
  Clinical excellence awards are based on quality, not quantity, of work. Extra programmed activities for management work might not result in an award.

To be successful you must address all five domains determined by the Advisory Committee on Clinical Excellence Awards. A medical management role makes it easier to complete the domains of developing medical services and managing clinical services. However, if you are the medical director it may be more difficult to provide clinical services and undertake research and teaching.

• What job can I do after being a medical director?
  Some medical directors find it difficult to go back to being a clinical consultant psychiatrist. However, the medical management skills are transferrable so there are interesting opportunities for former medical directors, either in the same trust or national roles at bodies including the Royal College of Psychiatrists, the Department of Health and the Care Quality Commission.

See the PSS website for a list of resources: www.rcpsych.ac.uk/pss

Further reading


Notes

This information guide is intended for a consultant psychiatrist considering taking up a management role. The information can be used as a guide only and is not a substitute for professional advice. If you need further advice and support, please contact the Psychiatrists’ Support Service.

©2017 The Royal College of Psychiatrists. www.rcpsych.ac.uk/pss