Management of service change and culture in a new era!

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The COVID-19 pandemic, which hit just as we entered the new decade, has impacted and altered everyone's lives in so many ways, and the situation is still far from perfect, as we experience an enormous worldwide impact and tragic loss of loved ones, as well as disrupted travel plans, meetings and holidays. Now, more than ever, effective communication is an essential tool in maintaining strong, lasting friendships and professional working relationships, especially when the majority of us have to communicate remotely in these uncertain times.

The pandemic personally highlighted the importance of communication and I have witnessed its benefits firsthand, having been in enforced social isolation. Hence, I started writing monthly 'Notes from the wilds of Suffolk' to family, friends, fellow colleagues and the Leg Club network. One month, I reflected on the proverbial phrase by Geoffrey Chaucer, 'time and tide wait for no man', as regardless of events, one cannot stop the passage of time or movement of the tide, and this year has, without doubt, reinforced the importance of valuing time as an amazing gift that I'm sure many of us have learnt to appreciate over the past months. This is especially true as we enter winter and reflect on the overwhelming effect COVID-19 has had on so many loved ones, friends and colleagues since our professional status and family lives have changed drastically since early spring.

In the healthcare sector and industry, the ramifications have been many, and everyone has had to adapt and navigate around the global responses to the pandemic. This has included reviewing government guidelines and observing the impact of pandemic-related changes on healthcare service delivery, products, international exhibitions and clinical education; many of these have not been able to move forward due to the climate of uncertainty.

During my working lifetime, I have witnessed many changes in working practice throughout the years, as firms introduced flexible hours and commuters began to work one day a week from home due to increasing pressures on organisations to be more competitive and streamlined. Similarly, shift patterns in the NHS changed much before lockdown. However, the pandemic has drastically changed all our daily work patterns and office hours, as working from home and furlough schemes have been introduced.

There is no denying that our digital capabilities as a society have grown and, due to the modern technological world we now live in and with access to smart phones and internet communication, individuals who had never attempted video conferencing before the March lockdown were suddenly able to embrace Zoom and Teams, along with many other virtual platforms.

Hence, we should not underestimate how far we have come in a few months. We have responded to the global shift, in the way we have started to reintegrate back and socialise.

It is also inevitable that healthcare professions will operate differently from how they did in pre-COVID days. Now is the time to embrace modern technology, change working patterns and embrace new goals, with innovations in service delivery and objectives for a productive future.

A change in Leg Club working culture

Many Leg Clubs were suspended due to Government regulations imposed on public venues, while those that remained operational had to change their Club policy, adhering to NHS directives during the COVID-19 crisis. This provided the lateral-thinking Leg Club clinical teams a window of opportunity to review past practice and introduce new, improved ways of working and streamlining their Leg Club service to accommodate the new NHS edits. As the late John Harvey-Jones stated during one of his management lectures, 'Management is not about the preservation of the status quo, it is about maintaining the highest rate of change that the organisation and the people within can stand.' Hence, successful introduction of changes in care delivery required clear objectives, a well-defined strategy with realistic and achievable goals and good communication by the Club teams using a systematic approach to assess the needs of their volunteers, members and clinical teams.

Change always involves alterations to existing policies. If a policy is not explicit in the first place, then changes are difficult. Hence, it is important to reduce the change to a single issue that can be polarised. The teams' approach to adopting a change in social distant working culture involved support from their volunteers, as Leg Club members (patients) were encouraged to become digital, enabling many to actively participate in an electronic supported shared care pathway. Overall, our interconnected digital usage has increased, and technology has become an important feature in healthcare.

Further, the culture in various Leg Club teams changed as they radically adapted operational care delivery with digital technology and telecommunications. Digital communication provided a new, smarter, innovative, streamlined approach for remote consultations for skin care and wound management. These were delivered to

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members, along with productive ways of staying independent, while lower limb management was undertaken through virtual consultations, which replaced physical interaction.

Change is ongoing and, in the experience of the Leg Club network, members have successfully received healthcare during the pandemic. However, change in future ways of streamlining a service is not always straightforward as, inevitably, it can bring about conflict in teams. Plus, it is so easy for individuals and managers to return to old habits and traditional ways of doing things. Therefore, its important to view evaluation as a continuum, as change is a continuous process that has to be evaluated continually, to refine and optimise the quality and standard of care and the cost-effective service that Leg Club teams strive to provide. It must be remembered that this new culture of change is a continual cycle where procedures and policies should be constantly updated and modified depending on the climate of practice. As stated by Harvey-Jones, 'If you are doing things the same way as two years ago, you are almost certainly doing them wrong.'

With challenges and uncertainty, service delivery in the NHS has changed, and the public has required more support and information relating to future digital consultations and supported shared care programmes. In Leg Clubs that have remained functional, the social side has continued in line with Government guidance, along with supported shared care, telehealth and remote monitoring. This has provided the teams a great opportunity to embrace changes in their working culture, be innovative in new ways of working and deliver a quality healthcare service that people expect and deserve!

Socially distanced set up at a Leg Club

Celebrating a Leg Club member's 90th birthday

A not-for-profit organisation supporting food projects across the world

Over the summer months, the vWin Foundation, a not-for-profit organisation, embarked on a global educational humanitarian initiative and invited the Leg Club network to participate in webinars. The president of the vWin Foundation, Professor Sergio Gianesini, and his board members created a stellar global faculty of key opinion leaders from phlebology, vascular and lymphology societies for a course of 12 educational online events, encouraging an interactive exchange of expert opinions and live questions from delegates via an educational online platform. All proceeds from the webinars and personal donations received were donated to World Food Day held on 16 October to support food projects worldwide.

Now a converted luddite, I became absorbed in all the programme themes as they addressed and challenged current trends, procedures and new technology relating to research and practice, and I found the webinars enlightening.

Throughout the 12 weeks, there was an eclectic mix of subjects discussed, which were of interest regardless of speciality, ranging from invasive vascular procedures to current developments in new generation anticoagulants and pain gateways to side effects from cosmetic surgery.

It was great to have a presentation on current research findings relating to new-generation compression wrap systems. Both presenters addressed the benefits of empowerment and care management for individuals (or carers) and its impact on quality of life as individuals were enabled to apply their own compression therapy. There was an outstanding lecture on new-generation deep vein thrombosis (DVT) treatments, followed by an expert panel stressing the importance of a person-centred approach and patient quality of life.

Through the weeks, it was great to see the presenters (followed by comments) stressing the importance of the patient, who was continually mentioned throughout their discussions. Recognising that the patients' perceptions of their leg-related problems, demonstrating a deeper understanding of their health status and sharing the true meaning that treatment has on personal experiences of living with a wound can provide a research team with new and important information.

Many recognised their patients as stakeholders and ensured their views and experiences were central to the team's decision-making regarding protocols and study design.

Quality of life should always be a prime consideration in any assessment and care of an individual, and I was pleased that the speakers highlighted this during the 12 weeks. All in all, it was an outstanding, informative programme demonstrating genuine professional commitment from leading experts in the world of phlebology. The vWin Foundation showcased an interesting selection of topics, ranging from research to changes in everyday patient care. It also brought together international luminaries from venous and lymphatic societies to share their expertise to help promote the Lancet Global Health 2020 World Food Programme, which was admirable. **CWC**

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