

## Dr Lloyd McCann



When Lloyd entered Medical School, he thought at that time he would be headed towards neurosurgery as a specialty, and then later he considered orthopaedics. However, towards the end of his first year as a house officer, he started to explore other options to traditional training programmes. *“Many of the issues I saw in clinical medicine and issues relating to teams and interpersonal relationships always seemed to link back to the general work environment, rather than individuals.”*

He recognised he wanted a portfolio and flexible career, and the opportunity to do other things, having been drawn over time to leadership and management roles. Lloyd had entered the NZ Army at the same time as he began Medical School. During his holidays – winter and summer – he was involved in military training, becoming a Commissioned Officer in his third year. Lloyd describes his time as a Platoon Commander as a *“brilliant escape”*; as an infantry officer he enjoyed the physicality of training and learning the broader skills of effective interaction with people.

After graduation, Lloyd did some work at CETU, where he developed house officer education programmes, and took leadership roles in project management work. He began to more aggressively explore his options in Health Management, spending three months at Middlemore Hospital in a medical leadership role. When his wife Karina won a scholarship to study in Oxford, England, other doors opened for Lloyd. He began a Masters in Health Services Management degree at Warwick University, and he is currently a part-time student in his second year.

*“As I was exposed to more leadership and medical management, I thought, yes, I am interested in clinical medicine, but I am more passionate about how organisations work, and in providing the environment in which people are inspired to do their best work. The clinician–patient relationship is one to one, but it became clear to me that if we could look at systems we could have a greater impact.”* Lloyd identifies as important not only providing the right environment for good work, but the need to give people the opportunity to reflect on how they can make systems better. *“If I were lucky enough to run a hospital, I would want my staff to have every opportunity to focus on continuous quality improvement.”*

Lloyd ‘s degree offers this focus on service improvement and quality in health care, and he notes that while this is touched on in some medical curricula, it is not in the undergraduate curriculum, and he feels it needs to be. His degree also provides a focus on leadership and management in

healthcare, acknowledging the things that are unique to health. *“I do think there is a certain type of personality drawn to work in healthcare – people are driven and have a sense of competition, as well as a high level of curiosity and compassion. These attributes can be used to drive quality initiatives”.* He describes his current study as a unique opportunity – he is able to do the degree part time, he has very close links to the UK Health Institute for Innovation and he has exposure to high level players in healthcare in the UK. This allows him to interact and learn at a high level of leadership and complexity, and he gives the example of his academic supervisor being the National Director for Emergency Care in the UK.

Lloyd is also a Clinical Fellow in Performance Improvement at the Oxford Radcliffe Hospitals NHS Trust. In this role he mostly works for the Trust’s Services Improvement Team on efficiency initiatives, such as providing new IT systems for emergency departments, and developing urgent care initiatives with GP academics at Oxford to establish GP services within emergency departments. Some of the projects are huge, and he comments *“it’s a great opportunity to be part of big financial projects and a challenging responsibility, as the scale is massive.”*

Lloyd also continues to do part time work in emergency medicine, working one or two shifts a week.

*“Being a doctor helps in terms of your credibility, and I do think that actually not having specialised does allow me to have a broader view and come across as less biased, especially when working with colleagues from a range of specialties.”* Lloyd describes having a clinical background as *“a massive advantage, you know about disease management, patient pathways, you speak the language of clinicians and you are able to build relationships and credibility.”*

He identifies the key skills from his medical training as the critical thinking processes; the training for taking a history, and examining a patient as transferable to approaching an issue, and assessing a problem.

The satisfaction in his current role is gained from *“making a difference,”* and he likes having variety and a broad range of things to look at. *“In recent weeks I have worked on a switchboard merger project, and putting together professional development for contact centre staff.”* He also has the opportunity and the ability to interact with a wide variety of people at all levels of the health services system, and *“a chance to see what’s done well.”*

*“People think that when you become a doctor that your path is narrow – but in fact the opportunities are very wide. We need to think about more flexible systems and approaches to meet the needs of RMOs. We could and should be doing more in NZ – more quickly, because of our size and our ability to think creatively when it comes to tackling challenges.”*