

A new approach

Paul Bomke, chief executive of Pfalzkrankenhaus für Psychiatrie und Neurologie discusses the need for a new approach to transnational leadership in mental health

The challenges in mental health in Europe are complex. Beside the mainstream in psychiatry and mental health there is a strong movement for individual patient's rights in Europe and for treatment and assistance of a non-pharmaceutical orientation and for alternatives for compulsory psychiatric treatment. And the primary service providers in mental health in all European countries are looking for new ways to combine good medicine and personalised treatment.

On the other hand innovation must deal with the fact that nearly every institution in mental health in Europe is dealing with economic recession, increasing poverty and an ageing population. Austerity measures necessarily perpetuate social and economic hardship in the EU, and hence such hardship is more pointed for the users of mental health systems. Adding to the complexity of service delivery, especially in Germany, is the challenge of change within the reimbursement system for acute care in mental health. Mental health institutions, while not inherently designed to deal with these issues, require preparation to meet the challenges faced on multiple fronts. From a leadership perspective, mental health institutions must deal with an increasing rate of complexity embedded in the daily clinical decisions in addition to the needs for concise strategic planning.

Paradigm shift

A paradigm shift is required to cope with changing social and political environments, while simultaneously adapting to increasing demand in the constraint of more limited resources. Two cornerstones of successful adaptation challenges faced by mental health institutions are focusing on leadership and increasing the rate of innovation. Hence, increasing the rate of innovation through leadership represents an integration strategy that may directly address the ability to maintain a standard of care and the capacity to serve the mental health needs of the population in view of current social, political and economic pressures.

One key to the integration of leadership and innovation is leadership in an international or transnational context: The Transnational Leadership Program (TNLP). The base of the programme is a mixture between educational, managerial and group dynamic methods in an international learning environment. The international forum represents the crucible of innovation. The different mental health systems in Europe could benefit from this knowledge translation, localisation and implementation model, as it has resulted in perhaps novel approaches to solving well known and familiar problems. Furthermore, this model appears to



Fig. 1 Dr David Cawthorpe (Canada) and Dr Sylvia Claus (Germany), both participants of the next phase of TNLP in Edmonton, October 2013

overcome certain aspects of the fundamental, time-consuming and costly operational resistance and barriers to required change typical of established institutions.

Based on the leadership curriculum designed by the chief executive officer from a mental health provider in the state of Rhineland-Palatinate, Germany, in collaboration with a researcher in public health in Canada, the idea to combine leadership development and 'paradigm shifting' international experience was created in the form of a novel learning environment for senior managers in mental health to recognise and adapt to the increasing complexity in the field.

Increasing innovation

In its first iteration, the TNLP represented a method designed to increase innovation and to improve leadership in mental health service provision. The model was embedded in a programme-based collaboration between the University of Calgary and Alberta Health Services (Alberta, Canada) in collaboration with the Pfalzkrankenhaus, Germany, for senior managers and clinical leaders. While culturally similar, the North American mental health system in Alberta, a public system, is a mixture between the two-tiered, private public healthcare system in the United States and the more state-orientated system extant in Europe.

The core elements of the two-year programme were a 'buddy system' (bringing a Canadian and a German expert together to share their collective experience in the management of their unique local projects and their understanding of innovation),

coupled with the idea of creating an international learning environment in which there was responsibility for each of the 18 participants to realise an innovative project in their own local jurisdiction. The project introduced the need to cope with a foreign or unknown culture and a second language, which introduced a process of dissonance and accommodation. The international context introduced 'a new novelty in the old situation' that required a new adaptation and a shift in the way one perceived the normal environment of adaptedness.

Challenge

The open design and international context of the programme presented a practical and paradigmatic challenge for all participants, which necessarily represented the engine for innovation and reflection on one's role as 'expert and leader'.

The effects of the programme are summarised thus:

- The requirement to simplify language, the message and the core story in the international context was directly related to the ability to simplify language and concepts in the communication of innovation within the host organisation;
- The international context also highlighted leadership an internal and shared learning process;
- The international context provided an atmosphere directly related to the ability of participants to identify foci for innovation, strengths and weaknesses within their own organisations; and
- The long term nature of the programme was a cornerstone of its success in relation to participants realising their organisational goals and objectives.

The TNLP was successful in that nearly all *a priori* projects of each participant were realised or evolved to new or innovative projects as a result of international exchange. Based on the success of TNLP in widening the perspective of all participants, it was recommended that future phases include a broader selection of community leaders that extended beyond the internal leadership of the psychiatric and mental health services to include senior bureaucrats and politicians of related allied professional and community organisations.

Recommendation and invitation

A wrap-up symposium in March 2012, the concepts of the programme were formally adopted, whereupon, based on recommendation, an invitation was established to participate more broadly within the Alberta milieu. Subsequently, a collaboration with the Alberta Family Wellness Initiative (AFWI) and the Norlien Foundation, Alberta, developed for the next TNLP phase.

The German TNLP team was invited to participate in the multiyear Accelerating Innovation Symposia designed to integrate and accelerate evidence-based mental health and addictions practice in the province of Alberta. The symposium brings evidence-based science from fields of addiction research and treatment, together with early brain development, in order to directly inform practice

and policy to improve integration of scientific research with mental health service delivery.

The symposia included participation of consumers, frontline staff, managers, senior leaders, bureaucrats and elected political decision makers. The symposia process is led by internationally recognised experts. This event and model, developed by the Norlien Foundation under the auspices of the Alberta Family Wellness Initiative, was relevant for the TNLP in Germany in order to develop a local knowledge exchange platform designed to actively include participation of multiple levels of the community and the community of care.

Reframing social matters

Based on their experience with this approach to accelerating innovation begun in October 2013, the German learning team has returned to Europe in order to implement the idea of reframing social matters, based on the new method developed by the Frameworks Institute, Washington, D.C., in Germany.

In June 2014 the concept from Alberta and the German experience will be promoted on the World Research and Innovation Congress in Brussels. The focus on early childhood development, the key to understanding mental health, based on the Alberta experience will merge with the German perspective of creating programmes for improving resilience in the community. The current and on-going collaboration is strongly connected with the decision makers in the responsible ministry in the state of Rhineland-Palatinate.

Phase 1 of TNLP has led to the second phase, which represents an on-going and sustainable process of adaptive education-based change in mental health in the south of Germany. Of note, the strong collaboration with the Norlien Foundation, a champion of accelerating innovation in Alberta has facilitated access to this process by decision makers in Europe and represents *in terminus* a novel paradigm designed to improve the rate of innovation.

The next set of results will be reported in October 2014 in Calgary and will include on-going learnings from the German participation in the Alberta Innovates Symposia process, which now conjoins with delegates from the ministry and a state-owned non-profit organisation for public health.



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