



Bicycles

AND THE DIFFERENCE BETWEEN TEACHING & LEARNING.

Have you ever taught someone to ride a bike? Almost certainly you have been there when someone has ridden for the first time. But think back to your experience. Didn't you discover the technique all on your own?

Your teacher probably explained about balance; connected stabilisers; held on to your saddle and ran next to you saying "look up" and "steer straight".

What a con! They knew very well they were going to let go of your seat despite your screams of "don't let go, don't let go!"

In a flash you understood – the coaching was well intended guile. You were on your own – you had to figure it out or fall over.

Figuring it out happened in an instant - part feeling; part belief; all relief. You felt the gyroscopic balance. You had faith, lifted your head and relaxed your grip on the handlebar.



Well maybe. More likely the relief was so huge your started giggling, disturbed the balance, wobbled, gripped and crashed. But thereafter you knew what you were looking for. And you leapt back the bike to find that feeling again. You had discovered this magic and you were free.

So where is the truth in this memory?

- The first truth is that we cannot learn on behalf of others – they have to find that point of feeling and faith for themselves. Only there will they also discover the conviction to carry on when they fall over.
- The second truth is that you cannot learn remotely. The point of feeling and faith can only be found on the bike.

- The third truth is that we actively contemplate our children falling each time we let go of the seat. We know this is the only way. But, we do reduce the risk of serious consequences (helmets and pads).

The Health Service is so complex, it is impossible to know the whole answer to the challenges we face, let alone teach it to our people. Yet as leaders, we need them to find a balance and steer their parts of the service with a light touch.

We want our people to keep their bicycles in balance whilst riding as a pack to a common destination called excellent patient care.

Since we cannot know the answer we cannot teach it. All we can do is help them discover balance first hand.

Applying our truths, this means getting them out of their offices, away from their reports and reconnecting them with the operation ie back onto their bikes. (And actually, they should require the same from their people.) Once they are directly connected through their primary senses to the operations they manage they will understand how best to balance and steer them.

The only other thing we can do is help them manage the consequences of mistakes and, when they fall, dust them off before they putting them back into the fray.



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