

From Our Irregular Correspondent

Meetings – What a waste of £1.2 billion

One in a series of occasional papers on health and social care topics by Terry & Monica Dennis of Healthcare Alliances. The purpose of the papers is to give a high level view of current issues – making serious points in a casual style.

This paper explains why we think meetings in the NHS waste £1.2 billion a year, and what can be done about it.

According to a written answer in Hansard on 4 September 2006, there were 39,391 managers in the NHS on 1 April 2006 – let's say that that has now grown to 40,000. And let's assume that the average employer cost per manager is of the order of £40,000. The total managerial cost in the NHS is, therefore, of the order of £1.6 billion.

Recently we have run a series of workshops about performance. One of the questions we asked was how much time the participants spent in meetings. The average response was about 50% of their time. The more senior the manager, the more time they spent in meetings. The highest figure reported was 90%. Let's be conservative and assume that 50% of all managers' time is spent in meetings (and this figure does not include spent preparing for, or following up, meetings).

These findings are consistent with research that the majority of a manager's typical workday is spent in meetings and that the frequency and length of meetings have grown considerably in the last few decades.

So, if our low tech analysis is right it means that £0.8 billion of managerial resource in the NHS is spent in meetings (50% of £1.6 billion).

In the workshops we also asked what percentage of time in the meetings the participants got value from the meetings and what percentage of time the participants themselves added value to the meeting. The average response was 10% of the time spent in the meeting provided value to the participant, and that the participant added value for 10% of the time. If right, this means that 80% of time spent in meetings does not add value or is wasted – the cost of this wasted time is £0.6 billion (80% of £0.8 billion).

[There is an interesting aspect here that we will not follow further, which is that the value people think they add to a meeting assumes that everybody else in the meeting is receiving value from their input!]

These figures do not include the time cost of clinicians who get involved in management meetings in the NHS. Let's assume that there is a 1-to-1 ratio of managers to clinicians in meetings, so let's double the figure, which now becomes £1.2 billion. (This does not take into account that the average employer cost per clinician is probably higher than the average managerial cost. It also does not take into account non-NHS involvement, such as other organisations, patient representatives, etc).

There is also the hidden cost of the stress, anxiety and other negative aspects associated with meetings – which adds to tiredness, low motivation and a general feeling of lethargy. This non-financial cost has not been valued.

There is no doubt that meetings are useful. They can:

- save time
- be used to share ideas and information
- help to solve problems
- develop relationships and networking
- increase productivity
- achieve agreement and commitment

The written word is not sufficient to convey all the meaning and emotions that can be gained from meetings. Meetings are essential.

But from the information presented above, something is not right. Common criticisms of meetings are that they are:

- too long and not well organised
- often not needed or held too frequently
- do not achieve anything
- can be dominated by a few people
- do not deal with the important issues

Over the last twenty years we have noticed more and more formality – minutes, structured agendas, note taking, etc. This suits some people, but it is often inappropriate for most meetings which are about getting things done. (Key “Roberts Rules of Order” into Google to find out more about formal meetings).

Tackling the problem is not rocket science. Here are three suggestions:

- firstly, if you chair (although we prefer the term “meeting manager” rather than “chair”), ask yourself how do you get feedback? We have noted that meeting managers have a propensity of talking a lot, and find listening quite difficult
- secondly, if you mainly take part in meetings, learn 1) how to say “no” to attending inappropriate meetings and 2) how to give honest and constructive feedback about the management of the meetings that you do attend
- thirdly, and finally, do not let any meeting last longer than 55 minutes (we were tempted to say an hour, but that would be too neat)

You will not solve all the problems with meetings by just taking these steps, but some of the £1.2 billion will be used more effectively, and the health and well-being of the staff who work in and around the NHS will improve.

What's stopping you?

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We welcome comments on this paper which:

- disagree with us
- agree with us
- amplify the points we make
- give a different perspective

Please send your comments to:

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Comments will be added to this paper. Please indicate how you would like to be acknowledged – your full name, initials only or anonymous.

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