

## Leadership in Anaesthesia: A Perspective

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Globally, health care system is facing a challenge to improve patient centered care [1]. A major concern is improvement in safety and quality of patient care. Living in a third world country like Pakistan, we are making efforts to maximize the effective management of patient care in our hospital setting. Although progress has been made however, we require a change in the system to provide safe and efficient patient care. This transformation requires effective clinical leadership to ensure high quality performance in health care service delivery. The leadership role has been defined as directing the activities of a group to achieve a goal [2]. Apart from having clinical competence, effective clinical leaders must have skills to communicate and support other multidisciplinary clinical teams. They must have the ability to facilitate, motivate other health professionals with reflection of positive attitude towards their own profession [1]. As Anaesthesiologists we need to coordinate activities and manage events that occur at different severity levels. Thus the demand of the time is a model of leadership that is not fixed and changes with the situation [3]. The "Big Five" model suggests that teamwork requires five competencies: team leadership, mutual performance monitoring, backup behavior, adaptability, and team orientation [4]. Leadership and teamwork is an essential component in anaesthesia for managing the rapidly changing time pressured tasks in the operation theatre [5]. As anaesthesia team works in an environment that is characterized by intense dynamism, time pressure and uncertainty, non-technical skills such as leadership, decision making and team coordination is required to decrease medical errors and maximize patient safety [5]. A major concern is how information is communicated and tasks are performed. Roles may need to be changed during collaboration. We need to focus on shared leadership to increase team performance in handling complex situations and to decrease task overload. Shared leadership is a dynamic, interactive influence process among individuals who lead one another to the achievement of goals [5]. This function is not in the hands of a single person but performed by many team members simultaneously. The anaesthetists must learn to act as leaders in a non-routine situation but to step back in routine situations where no leadership behavior is required. Earlier studies have shown that shared leadership is effective when unexpected event occurs and leadership is distributed according to skill sets [5]. Better performance of teams have been seen when their members shared leadership [4].

In view of limited healthcare resources and increasing workload in our hospitals, we need to train anaesthesia professionals to improve leadership skills and teamwork for being effective in the OR and in critical situations. Many developed countries have implemented clinical leadership programs for their doctors and nurses in their respective health systems [4]. Like the Medical Leadership Competency Framework (MLCF), taken up by the medical professional bodies in UK, we must also initiate professional development programs in clinical leadership in our Medical Universities and Hospitals to improve efficiency and quality of hospital performance in patient care. Further research in effective team leadership in anesthesia and perioperative care is required to fill the knowledge gap.

### Key Sentence

Leadership and team work is essential for dynamic and complex environment where coordination is required for patient safety and better patient outcome in anaesthesia.

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