



Zombie Culture in the NHS

A discussion on the immobilisation
of NHS employees, hostile management
culture and the relationship with
patient safety

“A person may cause evil to others not only by his actions but by his inaction, and in either case, he is justly accountable to them for the injury” – John Stuart Mill, 1859¹



What is Zombification?

Many of us have heard this expression before used to refer to a type of desensitised state. Or we have heard it used in reference to voodoo magic or in the context of the horror genre in film and literature. Here, I use it the context of behavioural neuroscience and psychology, to present the Maria Paviour Company's analysis of the NHS.

When I say “immobilised”, I’m referring to a brain override system, whereby the brain, by means of the vagal cranial nerve, activates its shutting down response. This is known as the *vagal brake*.² It is a reaction to the environment or ecology within which the individual finds him or herself. Here I am paraphrasing the work of Stephen Porges, his polyvagal nerve theory and it’s use in trauma therapy. He has identified that the vagal brake happens when a person goes through, for instance, a high-risk situation, severe trauma and or isolation. If a person has no other option, instead of flight or fight, the self goes into a type of shut down and disassociation. Porges uses reptilian behaviour as an analogy – some reptiles can go into an inanimate state when facing a predator and some species even have the ability to go into a deep sleep or temporarily stop breathing as a form of defence.

In humans this works in a very dramatic way – by causing the shutting down of the body’s physical processes. The effect of this immobilisation – which in the context of work and hostile work environments I am calling zombification – is the physical inability to regulate vital organs: heart and lungs and gut – which makes it impossible for the brain to fully:



Hear correctly



Speak out or even speak at all



Connect what one Hears to one’s values



Act quickly



Alter behaviour



Change course of action to something more effective





What is Zombification?

What we think of as the fight or flight response is a healthy adaptation to the need for action. For many healthcare workers this response is activated when urgent events occur in the workplace, in the case of emergencies, making healthcare workers capable of reacting to the needs of patients quickly and effectively. However, the zombification process ensures that in any given situation that is 'out of the norm' or an extreme or traumatic situation the individual will be literally incapable of acting with effect. Zombification is a different neurological process and occurs when people are continuously living in a state of anxiety that is bordering on non-survival, that could lead to actual death, or career death, or spiritual death.

Perhaps one of the reasons this zombification is becoming more prevalent is because of current (and turbulent) political times and the social-economic and cultural impacts of events such as Trump's election, the Brexit referendum and extreme and devastating weather, i.e. Hurricane Irma and Ophelia. This can be related to what Naomi Klein³ recently described in her speech to The UK Labour Party in 2017, and her recent book 'Shock Doctrine'. Klein talks about how in organisations the effect and purpose of disorientation on the people enables a psychopathic self-interested agenda to be easily created. In her speech she spoke of 'the exploitation of a wrenching crises to smuggle through policies that devour the public sphere and further enrich a small elite'.

"Zombification creates a permanent feeling of disorientation; a dream state in which we follow any directions given as we no longer have a compass."

It is important to state that when zombification occurs it is not the individual's fault that they experience such horrific effects. They are not willingly acting, they are responding to the ecology in a natural way – their brain is overriding everything but the group survival driver. When they get home at night, they will rationalise their behaviour – again this is not their fault, it is the result of the ecology. In other words, it is driven by the culture that is the result of the leadership.⁴

This could be thought of in terms of **Z.O.R.D**:
Zombification → Override → Rationalisation-Delay





Strategic organisational zombification is where corporate organisations apply leadership strategies that have the desired effect of controlling and pacesetting the business⁵, but simultaneously have the unwanted effect of creating a permanent feeling of disorientation. Extreme (psychopathic) managers may use this as a tactic to achieve their objectives of self-preservation; by undermining the sense of self that an employee has, that gives them the ability to think and act⁶. We feel permanently dissociated from normality, and therefore, in this dream state we follow the directions given as we have no compass. As a result, those who have been zombified have identifiable behaviours.

“Zombies huddle into groups and deliberately exclude any individuals, employees or team members who are ‘activated’ and capable of responding differently or creatively.”

Zombies see others as a threat – particularly anyone upsetting the status quo (for example, employee whistle-blowers, patients who ask questions, patients or family who do not act or react as expected, patients who do not have symptoms that can easily be explained using standard algorithms).

Zombies regard anyone with agency (self-empowerment) as a threat to the zombie group⁷ to which they belong – and therefore exclude them, bully them and carry out any tactics to remove them no matter how apparently unethical they are. This is because the zombified groups’ ethics are different to common ethics.

Zombie rules do not resonate with usual moral codes, especially those values of inclusiveness and compassion⁸, because Zombie values are not objective related. The zombie group is immobilised and so they cannot determine right from wrong or make decisions, problem solve, act creatively or work co-operatively. This is not a group of functioning human beings – I posit that it is a random, undisciplined, ineffective zombie group desperate for self-preservation and acting only in that interest, but without the capacity for future planning or consideration of the implications or outcomes of their actions.





Consequently, zombified employees hold fast to zombie group belonging, even if the group is demonstrating behaviours or views that are wrong, unethical, fraudulent, immoral. Furthermore, they hold especially fast if the group behaviours are a danger to others, ironically, because, their 'in the moment' processing lacks - which lacks any objectivity and rationality - renders them incapable of considering how a 'future self' might regret the behaviour of the current 'zombie self' - this also means that they will therefore be in denial or stand by their claims, vehemently denying the truth.

Zombification is the result of strategies that intend to create transactional improvements in the organisation, but through measures that are contrary to emotional engagement and wellbeing of staff. These extreme and often targeted preoccupied approaches create mentally ill workforces. People that feel good about themselves often work productively, interact well with colleagues and make a valuable contribution to the workplace.

A recent Chartered Institute of Personnel and Development study highlighted the impact that mental ill health can have on organisations. The study found that:

- *37% of sufferers are more likely to get into conflict with colleagues*
 - *57% find it harder to juggle multiple tasks*
 - *80% find it difficult to concentrate*
 - *62% take longer to do tasks*
 - *50% are potentially less patient with customers/clients*

Taking the strategy to its conclusion means that the employees are considered expendable and replaceable (frequently at great expense) as the organisation uses up and destroys its existing talent. Whilst zombification may not be a deliberate strategy, it is the only possible outcome from the strongly hierarchical, driven and transactional- orientated organisations that employ extreme management and that are oriented towards self-preservation rather than continuous improvement through perpetuating a "threat culture".





Strategic Organisational Zombification

The effect of zombification on the brains of employees occurs on several levels:



It disables the ability to think creatively



It closes down the body's physical processes



Closes down the learning pathways



It disables problem solving



It disables contingent thinking

Those NHS organisations that are clearly failing are those that demonstrate cultures that are creating precisely this response in their staff. I argue that, although the intent may not be to immobilise people beyond their ability to act in favour of patient safety, that the intent is, instead, to control. The outcome is nonetheless dangerous to patients regardless of the intent.

Levels of control in many corporates are directly related to results; and these results are used to judge the efficacy of leadership. This corporate approach to the NHS means that the driving force in leadership is to prove oneself through the 'numbers'. The problem is that targets and numbers that may apply to a corporate setting, simply do not work in the NHS, because its core values and mission is not about finance – it's about the health of the nation.

In any event, corporate zombification is rife in the private sector and the lack of organisational values that create a chasm between corporates and the ordinary people who fund them through purchasing their goods can be seen on a daily basis; for example, the bigger the tax bill, the more likely the organisation will be able to "negotiate" it, unlike the small traders who are fined if they fail to pay their tax in whole and on time. The psychopathic nature of organisations has been covered by Joel Bakar (2005) in 'The Corporation - the Pathological Pursuit of Profit', and Clive Boddy's work on Extreme Management (Middlesex University) which demonstrates that corporate psychopathy is not simply common and pervasive, it is fundamentally normalised at senior levels.



It is the opinion of Maria Paviour Ltd that the NHS needs to change urgently if it is to survive, and perhaps even thrive. Official figures released in May 2016 by NHS Improvement showed that NHS trusts in England, which predominantly run hospitals, ended the 2015-16 financial year £461m worse off than the organisation had forecast. According to The Guardian “NHS finance experts said the true scale of the deficit was much worse than the £2.45bn headline total but had been masked by a series of accounting devices”. We must stop driving the NHS as though it is a private ‘for profit’ organisation. The complaint we hear about this idea comes from the ‘austerity’ driven position of gaining “value for money” – in other words, if we don’t count the pennies and target improvement we will fail to provide good value for the public purse.

Whilst no one can disagree that good value is essential, it is also palpably obvious that this is failing to achieve its aim. There is no evidence that targets are creating overall value for money when we review all the data regarding the finances, particularly the cost of staff attrition, sickness absence and errors of judgement – including the costs of investigations and enquiries. In my work, I draw a close correlation between NHS targets and how they can, when inappropriately communicated and with the wrong focus, drive a psychopathic culture.

Where cultures are working well, we suggest, is not because they are rigorously implementing actions to drive towards specific targets. I argue that the performing cultures are the ones that apply basic principles of employee care, and this results in the achievement of targets.

It is already well documented that employee wellbeing and engagement drive the best value for money – the government whitepaper of 2011 on employee engagement which spawned the Engage for Success Movement. It can’t be a coincidence that virtually every large corporate has an employee engagement strategy, that wellbeing measures are on the rise and that organisations with the highest levels of success and the greatest public esteem are those that make work as enjoyable as possible – Google, Virgin etc.

“Achievement of targets is the effect of a good culture, it is not the cause of a good culture.”





I am not suggesting that these organisations have got it all right, nor am I suggesting that they necessarily do not experience any zombification – I am saying that it is recognisable that where employee wellbeing is paramount, results are simply better. If we are to review the NHS results, and not focus on specific statistics such as waiting times, we can begin to piece together a picture of good public value. Where employee wellbeing is paramount – results are simply better.

The biggest cost to the NHS is its staffing bill. Hidden in this is the evidence of a failing system; staff attrition levels are extremely expensive. It costs nearly one year's salary to replace a senior member of staff and golden handshakes, hush money and compromise agreements are costing millions.

There are exceptional levels of staff sickness whilst at the same time agency fees and locum fees are often doubling the usual costs of these staff members. On that note, staff sickness frequently falls into long term sickness, which has its attendant costs. These are not just in replacement of the staff member, but loss of the intellectual 'capital' that this employee acquired through years of training and experience, 'capital' they own and willingly shared at work when they were capable of working.

- *According to recent studies conducted by the University of Leicester bullying and discrimination is linked to a 37% increase in time off.*
- *Data obtained by Bristol24/7 under Freedom of Information rules show University Hospitals Bristol (UHB), which runs the BRI, and North Bristol NHS Trust (NBT), which runs Southmead Hospital, have seen stress-related illness among staff almost double in five years.*
- *UHB saw the numbers jump from 275 staff members signed off in 2010 to 545 in 2014, while NBT saw 333 in 2010 and 512 in 2014.*

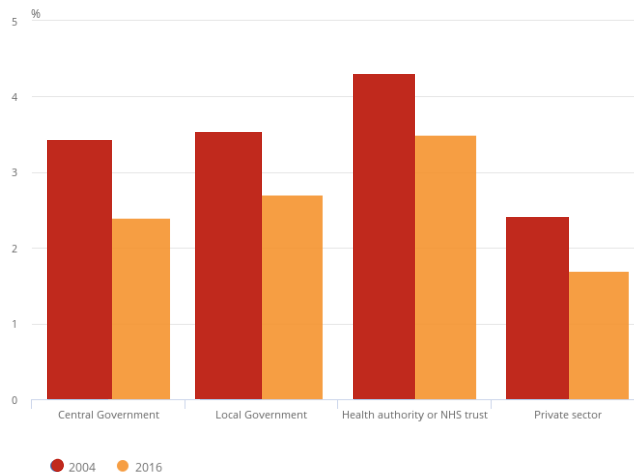
The irony of this is that high levels of presenteeism are keeping the NHS running; people whose wellbeing levels have dropped from healthy through reactive to injured or ill. This is a sick organisation and therefore what looks like a system that is stumbling along but coping, is already broken, and falling apart inch by inch, as sick and unsupported employees find it impossible to hold up the monolith.





Presenteeism is the lifeblood of zombification. Or perhaps I should say, presenteeism sucks the life out of the individual. It leaves them in a state of disorientation – running the ‘vagal brake’, incapable of consequential thought and attempting, in desperation, to keep functioning for the sake of patients. Sadly, this will lead to mistakes, errors of judgement, and inability to draw effective conclusions, inability to consider alternatives and most worrying of all, the tendency to disregard anyone whose views do not fall within ‘usual procedure’. In this state, all perspective dissolves and staff argue about ‘who moved the tea trolley?’ rather than ponder the unsolvable dangers posed by lack of resources that threaten the lives of their patients every day.

Figure 10. Sickness absence rate: by larger public sector organisation, UK, 2004 and 2016



Source: Labour Force Survey – Office for National Statistics

Without high levels of presenteeism, the NHS would be at a full stop





“Presenteeism sucks the life out of the individual and therefore leaves them in a permanent state of disorientation.”

Patients or families who notice worrying signs are disregarded by the zombified, not because these healthcare workers don't care, or are uneducated or foolish but because these NHS employees' brains are incapable of processing this information effectively. There is no capacity to think, consider or conjecture alternatives.

The principle way in which we think involves continual mental predictions that lead into mental simulations . We can run a number of these predictions and simulations, but when incapacitated by zombification we can only run a scant few, if any, effectively and find it impossible to consider a new option that would stretch normality for us. As a consequence, we stick to our guns. Sometimes, we do this even though our knowledge and experience contradict our actions; our bodies simply can do nothing different.

But where does this leave the NHS?

If there is no change from the top down, the NHS will disintegrate fairly quickly, by which time we will either see open minded Trusts that embrace change (where the leadership are more interested in group success than personal success) or the whole system will fall apart or cause political disintegration.





Where does this leave the NHS?

Those that opt for change will have to be brave enough to show the soft underbelly of the organisation. Those that opt for change will need to be led by leaders who are robust enough to admit their mistakes, ask for help, seek advice from their employees, provide support as it is needed and requested, and admit that they are not all-knowing. These leaders will spend more time on the front line, listening rather than talking, and less time in meetings. They will keep strategy simple, and make tactics flexible.

They will not compete for status. They will adopt wellbeing measures for employees which begin with a reframing of the success criteria for their organisation, keeping patients at the centre of everything by ensuring the wellbeing of their staff. The New NHS Leaders will measure patient satisfaction rather than focus on the measurements themselves: such as ambulance response times, diagnostic tests, waiting times and thus they will begin to work towards true patient-centricity.

The New NHS Leaders will be unafraid and unstinting in the support that they provide to those at the front line, and, rather than zombify them with targets, shock tactics and psychopathic leadership styles, they will exercise culture change by empowering this from the front line upwards, with a non-hierarchically driven system.

The New NHS leaders will see their managers' role as one of supporting delivery rather than one of controlling staff. The watchword of the New NHS will be UNITY and not SEPARATION, we are all here to work together, we include everyone, we seek leadership from those who have been the most disenfranchised and we remember that no system has greater importance than the individual patient.

The New NHS Leaders will be driven by the concept that only when the system serves the patient can it be a success.

“The New NHS Leaders will lead by example, by being openhearted, open-minded and emotionally functioning.”



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