

<https://media.neas.nhs.uk/news/director-spotlight-karen-obrien>



12 Mar 2026

Staff stories

Stakeholder

People spotlight: Karen O'Brien

Share:

We caught up with our Deputy Chief Executive and Director of People and Development to find out more about her and her role

Leading with authenticity, compassion and courage

I often joke that when my Grandma — who lived with dementia — asked what I did for a living, I'd tell her I worked for the NHS, in HR. She'd immediately ask whether that meant "hiring and firing", and I'd say yes for simplicity. Of course, my role is far broader.

My portfolio spans HR, education, communications, engagement and diversity and inclusion, and while I am accountable for recruitment and complex employee issues, they make up only a small part of my day-to-day work.

For me, a good week is one where projects land well, colleagues feel heard and supported, and I have the headspace to think about the organisation we need in the future — not just the pressures of today.

Driving decisions that protect patients and strengthen care

Much of my influence happens quietly, in the rooms where decisions shape the safety and quality of patient care. A major focus recently has been supporting and delivering increased staffing levels across our emergency operations centre and unscheduled care. Without colleagues providing care - or supporting those who do - we simply don't have a service.

Some decisions are harder. There are occasions when I must determine whether a colleague can safely continue to practise. Those decisions are always taken with patients, the public and safety firmly in mind.

Operational pressures, including through my on-call responsibilities, keep me grounded in the reality of the service. But long-term sustainability is just as important. Culture change is slow, collective and rarely linear - but improving the experience of work for our people is something I'm committed to every single day.

My leadership style? Authentic, humble, brave, tenacious and grounded in listening. Some describe me as diplomatic, others as direct — but care always sits at the centre.

What safety means to me: protecting our people

The issue that sits heaviest with me is aggression, abuse and violence towards colleagues who are simply trying to help others. While there are often underlying factors, unacceptable behaviour remains unacceptable. Our responsibility is to protect every member of our workforce, including those who may be more vulnerable to hostility or bias. Keeping all our people safe is fundamental to an inclusive and compassionate organisation.

We manage risk by looking ahead (such as upcoming employment legislation), monitoring real-time trends (like applicant numbers), and listening closely to colleagues through Blink, welfare cars, Freedom to Speak Up and informal conversations. Bringing these insights together helps me identify where support or intervention is needed, ensuring our approach to safety and wellbeing protects everyone across the organisation.

If I could correct one assumption about HR, it would be the idea that we only “hire and fire”, or that we act as organisational police. My approach is grounded in compassion, fairness and practicality.

Improving care through collaboration

One of the changes I’m proudest of is the redesign of working patterns in unscheduled care, where I acted as director lead. It wasn’t a quick process - but involving colleagues at every stage was absolutely the right thing to do. The outcome reflects the principles we agreed together.

Looking ahead, I see a huge opportunity in bridging the widening gap between primary and secondary care. We have talented staff who can deliver care at home, in urgent care spaces and in the community, and stepping confidently into that space will make a real difference for our population. I’m also hopeful that rolling out the learning disability and autism training will continue to improve patient experience.

To keep patient voice present in decision-making, I start with a simple truth: I’m a patient, my loved ones are patients, and our colleagues are patients. Listening to staff is listening to patients.

Championing colleague experience

Supporting staff begins with getting the fundamentals right - models of care, staffing levels, payroll, training and wellbeing. I lead teams in occupational health, wellbeing and education, and I want everyone to feel able to ask for support when they need it.

System partnerships and what matters most

Partnerships with the CQC, acute trusts and wider system partners are essential. These relationships rely on honesty, persistence and shared purpose.

One thing I wish partners understood more clearly is the importance of estates. For us, a safe, fit-for-purpose base is as fundamental as a waiting room is for a hospital. It’s core to safety, resilience and team culture.

I’m hopeful that our continued transparency with the CQC will support a positive inspection outcome.

Above all, I want patients, communities and partners to feel confident that we provide honest, patient-focused care — and that when someone calls us, we will always do our best.

Staff survey update: confidence and connection growing

Alongside my spotlight, I’m pleased to share encouraging improvements from our latest staff survey themes — progress shaped directly by colleagues’ voices.

1. **A stronger staff voice** – More colleagues feel listened to, supported by conversations through Welfare Cars, visible leaders and channels like Blink and Freedom to Speak Up.
2. **Greater psychological safety** – More people say they feel safe to speak up and challenge, which is vital in a learning culture.
3. **Improved development and training** – LD&A training and clearer pathways are helping colleagues feel more supported.
4. **Stronger sense of belonging** – EDI activity, staff networks and more inclusive communication are contributing to people feeling valued.
5. **Better day-to-day team experience** – Communication and peer support have improved, particularly in operational and control room environments.