

CASE STUDY: GROWING YOUR OWN – ASPIRING DIRECTORS OF PUBLIC HEALTH

To drive improved health outcomes, the public health system needs a competent and driven workforce. The challenge is to create a culture of leadership at all levels, with staff who are engaged, empowered and encouraged to lead public health into the future.

The 'Growing Your Own' leadership development programme, cultivated by Health Education North West's public health workforce team, aimed to develop and grow leaders at all levels across the public health workforce. It comprised three programmes, which focused on the development of:

- aspiring directors
- practitioners
- advanced practitioners

Aspiring Directors

This case study, which is part of a series of three, focuses on the design, development, implementation and evaluation of a bespoke leadership programme for a cohort of consultants in the North of England, who aspired to be directors within public health.

The aim of this programme was to develop senior leaders from within the system at a time of transition and significant organisational transformation. This programme for leadership development was a response to workforce planning intelligence, identifying the number of vacant Director of Public Health posts in the public health system, and recognition locally of the need to progress a model for succession planning.

Key Outcomes

- Eight of the programme's participants were successful in applying for the National Leadership Programme for Aspiring Directors.
- Five of the cohort have secured interim or permanent Director of Public Health (DPH) posts to date (October 2013). Informal email communication from these individuals suggests that participating in the programme



directly benefitted them when applying for these roles, and was a key contributing factor in their applications being successful.

“The programme was great - I got a DPH role!!!!”

- In addition, individuals indicated in a feedback survey that they benefitted from participating in the programme, and that it provided direction for their next career move.

“[the programme]helped me to decide a DPH role was part of my future ambition.”

“...I have realised that at this stage in my career I need to focus on the job in hand and my longer term plan for retirement.”

- Each component of the programme was rated as good or excellent by at least 85% of the respondents.

“[the programme benefitted me by]....Helping me make a decision! Finding out that the DPH role is within my capabilities. Focusing my mind on what I need to do next practically and psychologically.”

“Well worthwhile - space to reflect, pause and mull things over. It has helped crystallize my thinking for future career.”

Background

The backdrop to delivering this workforce development opportunity was the reorganisation of public health services as part of the overall changes to health and social care, as set out in the Health and Social Care Act 2012. Consequently, the public health workforce now works across many new organisations. The majority of staff are based in local authorities or within Public Health England, but there are also staff based in academia, Commissioning Support Units (CSUs) and other NHS organisations.

The workforce is very complex and diverse, working across the three core domains of public health that include health protection, health improvement and population health care. Staff employed in public health roles come from a wide variety of other professional backgrounds, and their roles vary from that of health trainers right through to director level roles, with only the specialist consultant workforce currently professionally registered and regulated.

Within the North West Strategic Health Authority (NWSHA), it was recognised that policy changes associated with the transition would require changes in working practice, employment and in leadership. The Health and Wellbeing Alliance in the North West and the regional public health team recognised the opportunity to build staff resilience and individual leadership skills, and to mitigate against the potential negative impact of organisational change and its impact on staff morale, retention and productivity. Therefore the Grow Your Own programme was developed to provide a

development opportunity that would allow people to think beyond the immediacy of change and focus how they would work in the future as public health leaders. Strategic support and approval was provided by NWSHA's senior management team at that time.

With regards to senior level public health posts, a survey undertaken by the Association of Directors of Public Health in 2011 highlighted the loss of capacity in senior public health roles and the number of vacant, unfilled director posts. Further national policies and the enactment of the Health and Social Care Act 2012 resulted in North West Strategic Health Authority's commitment to support the workforce through the transition and support a bid for funding to deliver an Aspiring Director Programme.

Key Aims

The key aims of Growing Your Own leadership development programmes were to:

- secure increased leadership development at all levels of the public health workforce during a period of significant organisational change
- support public health workforce resilience and responsiveness to change both personally and at an organisational level

The Aspiring Director programme, which forms part of the above programme, was developed to secure increased leadership development within a nominated group of public health consultants, and to strengthen resilience and responsiveness to change, both personally and at organisational level.

The deliverables of the Aspiring Director programme were to ensure:

- the supply of a workforce ready to take up director level roles in public health over the next two years;
- that there were suitably prepared senior public health leaders across the North of England, equipped to access National Leadership Academy programmes;
- professional leadership development of senior public health consultants

Key Stages of Setup

Once funding was secured, a small team was established within the public health workforce team at the North West Strategic Health Authority to co-design and commission a programme that would be 'future proofed' over the transition period.

The governance for the project was held by the senior management team of public health regional leads, who also provided valuable oversight and feedback on the programme design.

The timescales for delivery of the programme were tight. Funding was allocated in October with delivery of the first component required by December.

The team took the following actions within the last week of October 2012:

- the tender document was written and circulated. Potential providers could bid for
- delivery of all or part of the programme
- directors of public health were contacted and asked to nominate consultants within their own organisation

The team received three tenders and opted to work with two of them - North West Employers Organisation and Deloitte (public sector arm). Deloitte were to deliver the residential programme and North West Employers were involved in developing the coaching and leadership master class series.

The components of the programme were created to complement each other and form part of a leadership development journey. With this aim in mind a number of assumptions were made about the overall design of the programme:

- the design of the programme assumes variability in whom the director of public health role reports to across different authorities
- it is a leadership programme, and not a management programme
- it will be rooted in real work examples and case studies
- the cohort will take responsibility for their own learning
- contributors who are invited to input into the programme will have an understanding of the director of public health role, the role of public health within a local authority context and the expectations of directors of public health
- all participants will attend both residential events in full
- there will be no components of the programme open to non-participants

Contributors to the programme included local authority chief executives, directors of adult social care, local councillors and portfolio holders for health. A number of directors of public health also provided their perspective and experience of working within local government.

How it Works

Recruitment

There are approximately 80 public health consultants employed across the North of England, and more than half were nominated for the Aspiring Director Programme by their Director of Public Health, with the nominated shortlist

reviewed by the Regional Director of Public Health. Of the 51 consultants nominated, engagement and commitment was high. 46 consultants took part in total, with only one consultant withdrawing during the course, and just four opting not to take up the offer in the first place. Public health consultants who were selected to attend the programme were offered further details. Attendance at both residentials, for the full two days, was compulsory.

Programme content

The programme was delivered over an eight month period, from December 2012 until May 2013 and comprised of:

- two residential workshops (Dec 2012/May 2012)
- 360 degree feedback appraisal (Jan - Feb 2013)
- three personal coaching sessions (Jan - March 2013)
- four master classes in Strategic Influencing; Leadership; Resilience and Resourcefulness; and Building Teams (March - July 2013)

Expected learning outcomes

The expected learning outcomes were that participants were to:

- understand what it takes to be a successful director of public health - the behaviours, values and culture
- be able to make an informed decision about their career path
- prepare for successful application to national or regional development programmes
- kick-start a 'learning network' that will be supported by the public health workforce Team

Evaluation

Each component was evaluated separately, and following completion, a short Survey Monkey Questionnaire was circulated for overall comments on the design of the programme. Overall evaluation was positive.

Resources

Non-recurring funding was received from the Department of Health across the North of England.

Key Challenges

- **System-wide change** - it was difficult to maintain momentum and discourage fatigue over a period of eight months as staff moved to different organisations, particularly with staff having new contact details, etc. However, the public health design team were fully aware of the potential pitfalls they would face in commissioning and delivering the programme at a time of system-wide change, and managed to successfully navigate ways to ensure that attendees updated the team of their new contact details.

- **Securing speakers** - there were also challenges in securing executive speakers and presenters for the residentials. Consultants from the Yorkshire and Humber and North East regions facilitated dialogue with colleagues who might be interested in supporting the residentials.
- **Post-course engagement** - it is a challenge to maintain engagement post-completion and to continue supporting the group. Yet overall the cohort were extremely engaged and are still keen to remain 'connected' as a group, so this should help maintain peer support and the sharing of good practice.

Key Learning

- **Don't reinvent the wheel!** There are a number of expert organisations who provide leadership courses. It is more cost effective to adapt an existing module and to tailor it for a specific workforce, than to try and create a programme from scratch.
- **Get the best speakers you possible can** - this sounds straightforward, but when funding is limited it's better to spend more on speakers and save on venue costs.

Sustainability

Irrespective of next career steps, all participants were keen to maintain links with the rest of the group and continue to network with consultant colleagues across the North. This is being developed with the assistance of some legacy funding

Next Steps

Legacy funding from Public Health England has been allocated to fund a short programme of leadership development, supportive of the wider public health consultant group. The public health workforce team will lead the design of a six month programme to support two groups of consultants. Network 1 (Aspiring Director Network) will comprise those who are committed to continue the learning and self-development towards being ready to be a successful DPH. This cohort will be offered group coaching and action learning sets. The programme will also include a series of workshops around 'wicked issues'. The programme for Network 2 (Wider Public Health Consultant Network) will be complemented by the learning from the Aspiring Director Programme, and participants from the programme will be contributors to master classes.

The geographical footprint for this Network (the North of England) lends itself to exploring the role of digital technologies and the use of social media to facilitate the programme's delivery. The team aims to develop this medium, increasing capacity and capability in the use of social media.

A digital platform (www.phlive.org.uk) has already been developed to enhance the communications and on-going engagement of the public health workforce, and support networking and collaboration. There has been a keen interest in contributing to this and already there are regular tweet discussions taking place ([#phlive](https://twitter.com/phlive)) on a wide range of public health topics.

Supporting Material

Evaluation summaries for all three programmes are available at www.nw.hee.nhs.uk or by contacting Alison Farrar, using the contact details below.

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