



TRAFFORD PROVIDER SERVICES



RELEASE

LEADERSHIP DEVELOPMENT PROGRAMME

SUMMARY

Release is a programme that was designed to recognise and develop talent amongst managerial and clinical staff at Band 7 and above at Trafford Provider Services (TPS), the provider unit of NHS Trafford, between April 2009 and June 2010. It was created by Mark Brandreth, the Managing Director of TPS, who had firsthand experience of leadership programmes of this kind. Rather than implementing an external leadership programme this in-house version was created so that it could be specifically tailored to the needs of TPS employees and the business needs of the service. This allowed it to evolve and respond to the needs of individuals as it progressed and opened access to a wider group of staff who would not necessarily have been considered for existing models such as formal academic or Leadership Academy programmes.

KEY OUTCOMES

- 16 people joined the programme, 14 completed it and of these 11 have been promoted to different roles or had their role significantly enhanced. This equates to 78% of those finishing programme. The reason two people had to step down was caused by an organisational change of form. The participants were mainly clinical line managers, but also included staff from a resource centre, a communications team and learning disability team.

- Each participant undertook a project of their choice throughout the duration of the programme, in order to apply lessons learnt to real life scenarios. Not all of the projects were successfully completed, however they all offered great learning opportunities for the participants and of those that were fully implemented the Trust benefited from the changes that they generated. The projects covered:

- It was reported that all projects resulted in improvements in quality and service provision, including one that gained national recognition and one that resulted in changes in commissioning. Measuring of these projects was not formalised, as quality improvements brought about by individual projects was not the main thrust of this programme. Rather, the projects were used as vehicles through which individuals could grow and develop, via self reflection and action learning sets.

INDIVIDUAL PROJECTS UNDERTAKEN

Community Equipment One Stop Shop

Dedicated Team Palliative Care

Raise profile mental health in Intermediate Care

Increase engagement of service users

Supporting dementia clients and ulcer prevention and awareness in Nursing Homes

Multi-agency approach to tackle early obesity

Developing a therapy group within a GP practice

Redefine specialist CLDT service

Improving community based immunisation, speech and language services, treatment centres and walk in centres and physiotherapy self referral

Specialist weight management to reduce Bariatric Surgery

Developing podiatric surgery Service





GOOD PRACTICE CASE STUDY

BACKGROUND

Trafford Provider Services is the part of NHS Trafford that provides community health services for the borough's residents.

The services include:

- District nursing.
- Specialist nursing, such as Parkinson's Disease, end-of-life care and tissue viability specialists.
- Allied health professionals, such as physiotherapists, dieticians and podiatrists.
- Community dentists.
- Cancer support.

The services take place in a wide range of settings, including hospitals, health centres, GP surgeries, schools, community buildings and in patients' own homes.

The organisation manages a budget of £14million to provide these services, employing over 600 staff who between them hold around 350,000 appointments each year.

Its objectives for the year are to:

- Provide evidence-based services for patients.
- Develop staff knowledge, skills and competencies.
- Seek the views and involvement of patients in the delivery of services.
- Successfully manage the transfer of community health services into new organisational arrangements.
- Improve performance by acting on good information.

PURPOSE OF PROGRAMME

- Broadly develop people and give them the confidence to lead, by giving them the opportunity to undertake projects that could initiate change. The programme was designed to encourage people to believe in themselves and to offer peer advice and support to others at the same time. No specific areas of development were identified, based on a Competency Framework. However,

Myers Briggs was used as a diagnostic tool to identify strengths and allow staff to recognise other individual ways of working. Some participants have also proceeded to use a LQF, which has a very well defined framework.

- Develop those members of the team who were brought together to support the project. The aim being that they would benefit from the growth and experience that the project offered as well as the support provided by the person undertaking the leadership programme.
- Foster the development and implementation of projects that could lead to service redesign, improving service efficiency and effectiveness within the Trust.
- Encourage matrix working through the development of support networks amongst participants, giving rise to greater communication within the Trust, as well as shared projects and allowing individuals to gain greater confidence through peer feedback and support.

KEY STAGES OF SET UP

The **Release** programme was created by Mark Brandreth, the Managing Director of TPS. It was based upon Mark's own experience in undertaking a similar leadership style course but was then tailored specifically to the needs of the Trust by taking briefings from the Executive and Senior Management Teams, both before and during the programme. Mark also interviewed several external senior leaders about how they overcame challenges to reach their current positions, allowing the programme to be based on a greater understanding of how glass ceilings could be smashed.

The implementation and running of the programme was put out to tender resulting in two external consultants, Richard Ellison-Smith and Caroline Lambert, being commissioned to work in partnership with one another to provide this service.

Applications were then sought from staff at Band 7 or above who were already in a

managerial role but who would like to be part of the cohort to improve their leadership skills. All potentially eligible participants were invited to a launch event at which the programme was outlined in detail by Mark, the Facilitators and Senior Managers from both Trafford Social Services and Trafford Healthcare Trust. Participants were given the attached application form and asked to put forward outline project plans. Their application also focused on the applicants themselves i.e. their background and why they wanted to be part of the programme.

Final attendance on the programme was determined by a small group including Mark and his senior team who balanced both the desirability of the project and the potential development journey for the individual.

Mark also made three major philosophical decisions that underpinned the success of the programme.

- Firstly, to offer places to partner Trusts to emphasise the importance of partnership working.
- Secondly, to publish all dates in advance and to make commitment to attend all days key criteria for an applicant winning a place.
- Finally, to state that line managers had to sign off the application of their team members. These points resulted in virtual 100% attendance and contributed greatly to the success of the programme.





GOOD PRACTICE CASE STUDY

HOW IT WORKS

The project was owned and managed by the Managing Director, and the facilitators worked with him in order to organically respond to emerging needs within the business, during the course of the programme.

The programme itself was designed as a platform that was very much focused upon experience-based learning; successful participants were given permission to implement their outlined projects whilst being fully supported through the programme.

Psychometric profiling such as Myer-Briggs was initially undertaken by all participants, to create a profile of their personality to allow the programme to be tailored to their styles and needs as a group.

Action Learning Sets were run once a month on 11 set dates across the year from February to December. These problem-based learning environments were designed to allow participants to help one another to overcome any obstacles they might be facing, as well as to share best practice. Participants were invited to create a poster and to present this to the group each time, so that together they could provide support and constructively challenge one another as their projects progressed. Each cohort shared any problems they might be facing and were given feedback from the group but were ultimately encouraged to find their own solutions. Although not all the projects were successfully completed, the experience gained was invaluable and the group was empowered to become a robust support network. The external course facilitators who were commissioned to run the programme ran the two groups and staff were given an option as to which group they joined.

Internal speakers were often invited to learning sets to give the group the benefit of their experience. For example the Finance Director and the Contracts Monitoring Manager ran a 'Dragon's Den' style session to help the group review their business ideas. This helped break down any barriers with senior management and opened up communication pathways.

External speakers were also brought in on occasion. For example a marketing specialist attended the Trust to talk about marketing concepts. As this was something that could benefit many of the Trust's staff this was actually opened up wider than the Release group.

"Out of Body" experiences. The facilitators also designed "Out of Body" experiences for each Release participant to positively stretch their comfort zone. These ranged from direct briefings to the Executive team to undertaking research interviews with challenging senior leaders, both inside and outside the NHS. In all cases participants reported significant and surprising learning from these experiences.

A full day celebration event was run at an external venue at the end of the programme. Here participants displayed their final posters and a central PowerPoint presentation was given on the whole programme.

An evaluation process was undertaken at the end of the programme. This was qualitative and not quantitative, but gave a good subjective overview of how the participants felt about the programme and their own development.

RESOURCES

- The Provider Unit budget covered the £20,000 that was required to run the programme.
- Funding for the psychometric diagnostic tests and catering for the celebration event came from the OD budget.
- Internal speakers, such as the Finance Director and the Non-Executive Directors, provided their services free of charge.
- The consultants who were hired to run the programme used partnership working to bring in external speakers such as solicitors and marketing managers, also free of charge.





GOOD PRACTICE CASE STUDY

KEY CHALLENGES

- Sustaining business as usual, with staff out of the office for a full day each month was a challenge, particularly as there was no IT access at the external sites. Some participants were able to use their blackberries as a means of managing this, however others who didn't have blackberries juggled their workload whilst in the office in such a way as to free up this time.
- Avoiding a feeling of "them and us" within the rest of the Trust. This was achieved via individuals giving clear briefings to their teams and senior management constantly giving positive reinforcement to the programme in all communication. On the first point one participant asked their team for ideas and concerns to take to the learning set which allowed them to feel part of the process without breaching confidentiality.
- Securing a venue each time that was large enough to hold the full cohort, whilst still being affordable was difficult. However this was overcome by booking rooms within local authority buildings as opposed to hotels or other commercial locations.
- Avoiding complaints from those not granted access. This was assured through opening the programme out to tender, with staff asked to submit an application form with a proposed project outline to be reviewed by the MD. Also, there have been three subsequent programmes with a slightly different theme, which have a more managerial emphasis, offered to first line managers. Some of the staff who had originally applied for 'Release' have since undergone these programmes. Trade union presence is also provided at quarterly open forums, where the Release programme was originally publicised.

KEY LEARNING

- Networking is vital as it allows greater access to internal and external speakers, who often provide their time and services for free due to existing relationships.
- Delivering this programme in-house has the added benefit of allowing elements of the programme to be delivered by the Trust's Executive Team, which gives the programme a 'real' current tangible context.

SUSTAINABILITY

- A self-sustained support network has been developed amongst the participants, who regularly meet and have developed friendships as well as stronger professional relationships
- The same programme is still being run at the Trust but is positioned slightly differently with more focus on management skills as opposed to just leadership. This is open to lower band staff as well, so long as they are in a line management role.

SUPPORTING MATERIAL

The following resources are available as an appendix to this case study

- Release PowerPoint presentation
- HSJ article

CONTACT FOR FURTHER INFORMATION

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