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Leadership Development. What difference does it make? Perspectives of NHS Managers

Introduction

In recent decades there has been a shift in perspectives on how the National Health Service (NHS) should be run. Since 2001, there has been an increase in the use of the term 'leadership', away from 'management', to signify those who are charged with meeting the perceived challenges the NHS faces (Martin and Learmonth, 2012). There is a lack of consensus over what 'leadership' can achieve (Haycock–Stuart and Keen, 2012; McDonald, 2014; Learmonth, 2015) but despite this lack of clarity, leadership remains at the forefront of NHS policy and as such there has been a rise in the number of Leadership Development Programmes (LDPs) available to NHS staff (West et al, 2015; National Institute for Health Research, 2013).

Healthcare LDPs have covered a wide range of disciplines and specialities and while there has been an increase in the number of programmes, there is no agreement on what successful leadership development should look like (Edmonstone, 2011). Furthermore, there is ambiguity about how leadership training should be implemented in the workplace. Martin and Waring (2013) suggest that there are many barriers (for example, hierarchy) within NHS organisations that prevent leadership behaviours and skills from being implemented. Further research from large NHS organisations suggest that a disconnect, between those with the power to authorise change and those with the capacity to deliver it, results in diminished leadership capability (Martin et al, 2015). The debate around how the NHS develops leaders suggests that there is a need for further exploration of NHS LDPs, as an increased evidence base will provide a wider understanding on the efficacy of leadership development. This paper aims to examine the perspectives of a group of NHS managers who have undergone leadership development and seeks to understand how they are able to bring in their learning from the LDP into the day to day performance of their roles.

Background

This study focuses on one NHS health provider in Wales that started an LDP in 2015. At the time of

the study two cohorts had completed the programme. An overview of the LDP is outlined in Table 1.

/////Insert Table 1 about here/////

Table 1: The leadership development programme

Methods

Approach: As the research aim was to explore NHS managers experiences an inductive qualitative

approach was adopted. University ethical approval was acquired and organisation permission

granted prior to approaching staff to participate in the study. Participants gave written consent to

participate.

Population: Inclusion criteria were, completion of the LDP and still working within the organisation

(n= 32) people. Potential participants were invited to participate via an email from the Programme's

co-ordinator. Respondents wishing to be interviewed contacted the researcher directly to maintain

confidentiality. In total five people volunteered and all were invited to interview. The participants

were all involved in change management programmes and activities, but did not necessarily have

line management responsibility (see Table 2).

////insert Table 2 about here/////

Table 2: Participant details

Data collection and analysis: Interviews took place over a one-week period in June 2016, in a

private location of the participant's preference (either the respondent's own office or a private

meeting room). The interviews lasted between 25 and 50 minutes and audio recorded with

participant consent. Semi structured interviews were used to explore the topic areas. Data were fully

transcribed by the researcher before systematic coding.   Data analysis was undertaken using Braun

and Clarke's (2006) six-phase approach. Codes were then collated and iteratively grouped into 'thematic maps' shown in Figures 1,2 and 3 and outlined next with exemplar quotes.

Findings

All of the participants interviewed for this study had a positive opinion of their experiences on the LDP. The thematic maps highlight three themes: Personal Development, Organisational Opportunities and Barriers, and Differences Between Leadership and Management, shown in figure 1, 2 and 3.

Theme One – Personal Development

Confidence: Respondents felt that their participation on the LDP provided them with increased confidence within their roles in the organisation. The findings in figure 1 suggests LDPs are a useful means of improving an individual's confidence in performing their roles and professional.

/////////Insert figure 1 about here//////////

Figure 1. Personal Development

Confidence and Self-Awareness: Respondents reported greater levels of self-awareness of the impact that their attitudes, behaviours and outlook have on their professional lives and relationships. Figure 1 demonstrates that elements of the LDP have proved useful to respondents in encouraging them to think more carefully about their responses and reactions to situations within their working environments. The findings also suggest that the newly acquired self-awareness helps those in leadership roles to work more effectively with their teams and with challenging individuals operating within their working environments.

Knowledge and Skills: Participants identified a range of skills, (such as time management, managing difficult people and prioritisation, see figure 1) acquired from the LDP. In combination with increased confidence and self-awareness some participants could utilise specific LDP tools and techniques into their day to day work activities.

While this first theme highlights benefits to the individual the impact of the LDP on the organisation is also significant, which will be explored in theme two.

Theme Two – Organisational Opportunities and Barriers

The second theme offers further understanding of what respondents perceive to be opportunities to practicing their leadership techniques and the elements they feel are organisational barriers to utilising their learning.

Change management/ Hierarchy and culture: Respondents felt that one of the key purposes of the LDP was to develop influential individuals to help deliver a range of change management schemes and to implement new ways of working within the organisation. The ability to lead on change was seen as a major opportunity by some respondents to use their learning from the Programme (see Figure 2).

//////////Insert figure 2 about here//////////

Figure 2. Organisational Opportunities and Barriers

The culture of the organisation played a key role – both as a barrier and facilitator to implementing learning from the LDP. Respondents' experiences, in figure 2, highlight the importance placed on senior managers to enable participants to make use of the learning from the LDP. The role senior managers play within the organisation can be found in Table 3 and is seen as having a crucial impact on the wider organisational culture. From the perspective of some respondents to the study, this negative impact has prevented the full use of learning from the Programme.

////insert Table 3 about here/////

Table 3: Role of senior managers

These findings demonstrate the importance that organisational culture has on the ability for participants to take their learning forward. Respondents reporting line manager support found it easier to implement learning from the programme. Where support is not present from senior managers within the organisation the impact of the LDP was lessened.

Networking and support: Finally, within this theme is the use of the LDP as a 'support network' for discussing ideas and issues arising from their roles. Action Learning Sets (ALS) were employed to provide the opportunity to discuss any issues in confidence.

Theme Three – Perceptions of Leadership and Management

The final theme identifies participants views of management and leadership, both their own and as part of the organisation.

Dual roles: All respondents viewed their roles within the organisation as leadership roles (Figure 3). Although only three have line management responsibility this perception suggests that participants on the LDP view leadership as something distinct from line management. Table 4 offers areas participants considered as 'management'. This group saw their leadership and management roles as combined, that they had leadership elements and managerial elements to the work that they do.

/////////Insert Table 4 about here//////////

Table 4: Management

Distributed leadership: Participants realised the importance of delegating authority and responsibility through their own department as a result of their participation on the programme. This finding suggests that the LDP has encouraged respondents to think more about distributed leadership styles and promoted an increase in autonomy for staff members.

/////////Insert figure 3 about here//////////

Figure 3. Perceptions of Leadership and Management

Discussion

This study identifies three pertinent themes in the exploration of managers' perspectives on leadership development. Respondents discussed their perspectives and experiences in light of their own personal development, the organisational opportunities and barriers to leadership, and their own perceptions on what leadership and management are.

Increased confidence was noted in line with other studies (Sutherland and Dodd, 2008; Boaden, 2006). There is criticism that LDPs focus on personal development, leading to increases in the 'human capital' of the individuals participating in the programme, without any corresponding benefit to the organisation (Hewison and Morrell, 2014; Edmonstone, 2013). However, respondents in this study described that the LDP increased their confidence to deliver change in addition to understanding perspectives of co-workers or to empower individuals within their own department. This finding suggests that this LDP has used the development of human capital as a stepping stone to increasing social capital across the organisation.

Respondents also reported an increased self-awareness, and a better understanding of their own reactions to their colleagues and working environments. While Day (2001) argues that development of self-awareness (as found in this study) is a human capital factor, increased self-awareness by managers has been linked to better working relationships and environments (Sutherland and Dodd, 2008). The role of the ALS was key here providing opportunities for problem solving and as a support network were. This reinforces previous studies (Doyle, 2014; Young et al, 2010) that find ALS help participants to support each other and cement stronger working relationships.

This ability to turn human capital development into social capital outcomes for the organisation highlights the effectiveness of the LDP, however potential barriers were identified. While some respondents stated that they were able to increase their knowledge and skills as part of the programme, they highlighted difficulties in being able to put the knowledge into practice. Some

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respondents reported having the support of their line managers in trying out new skills and testing assumptions, however others felt that they were unable to due to senior management behaviour and organisational culture.

Respondents identified distributed leadership as an essential element of organisational effectiveness, however many identified possible hurdles to the implementation of distributed leadership within their workplace. The Senior Management Team (SMT) were reported by some participants as potential barriers to the successful delivery of change in line with the LDP. It may be that there is a limited understanding of the aims of the Programme from some senior managers and more could be done to encourage the SMT to participate in future iterations of the Programme. Suggestions to resolve the lack of understanding included the SMT attending the workshops and ALSs. It would be interesting to observe whether a cohort made up of senior managers would be able to provide more substantial organisational impact than those cohorts made up of staff members lower in the organisational hierarchy than the SMT.

Despite not all participants being in a line management role the findings identify an understanding that all interviewees had both managerial and leadership aspects to their roles. It was accepted that there was a difference between the concepts of leadership and management. In contrast to Martin and Learmonth's (2012) study of Chief Executives and Director level managers, participants did not disparage management in favour of leadership and indeed discussed both aspects of their roles, suggesting that the discursive distinction between leadership and management may be the realm of more senior individuals within NHS organisations. The difference between leadership and management is perhaps not as important to the staff that participated in this study as they are nearer to the front line of service delivery. It is also possible that through participation on a LDP the respondents' perceptions of what management and leadership have has changed. One element where the respondents showed a similarity in their thoughts on leadership was in their assertions that distributed models of leadership are possible within the organisation.

Limitations – Credibility and Rigour of Data

As with all studies there are limitations. The sample size was small though this is not necessarily an issue in qualitative research where the quality and depth of the data collected is deemed to be of greater importance (Myers, 2013). One limitation of the study is the relationship between the interviewer and interviewees; all worked within the same NHS organisation and therefore there may have been a reluctance on the part of the interviewees to disclose information fully. Mitigation was sought with the assurance that the identities of participants in the research would be confidential.

Another limitation is the self-selection of respondents to participate in the research. It is possible that only those who were positive about their experiences came forward for interview and that due to this, alternate experiences and perspectives were missed. While a lack of opposing views may exclude some valid lessons for the organisation, it does not in itself undermine the validity of the research contained within this study.

Conclusion

This paper sought to explore the views of NHS managers who have undertaken a LDP and how this experience could be brought into their everyday practice. While the LDP has performed well in increasing the human capital of participants, there is less clarity in how the social capital of the organisation has been impacted. Opportunities to deploy new found skills and knowledge were either thwarted or enabled by senior managers. As such role of the senior manager is fundamental to the ultimate success of any leadership development.

Areas for wider NHS research have been identified:

- Longitudinal studies (as opposed to *post hoc* evaluations) of NHS LDPs to determine their impact on NHS organisations

- Further exploration of NHS non-clinical middle managers' perspectives on leadership and leadership development - the area is under represented within existing literature

These areas for wider NHS research could build on some of the topic areas raised by this research study and add to the existing knowledge on an area that is prevalent within the NHS.

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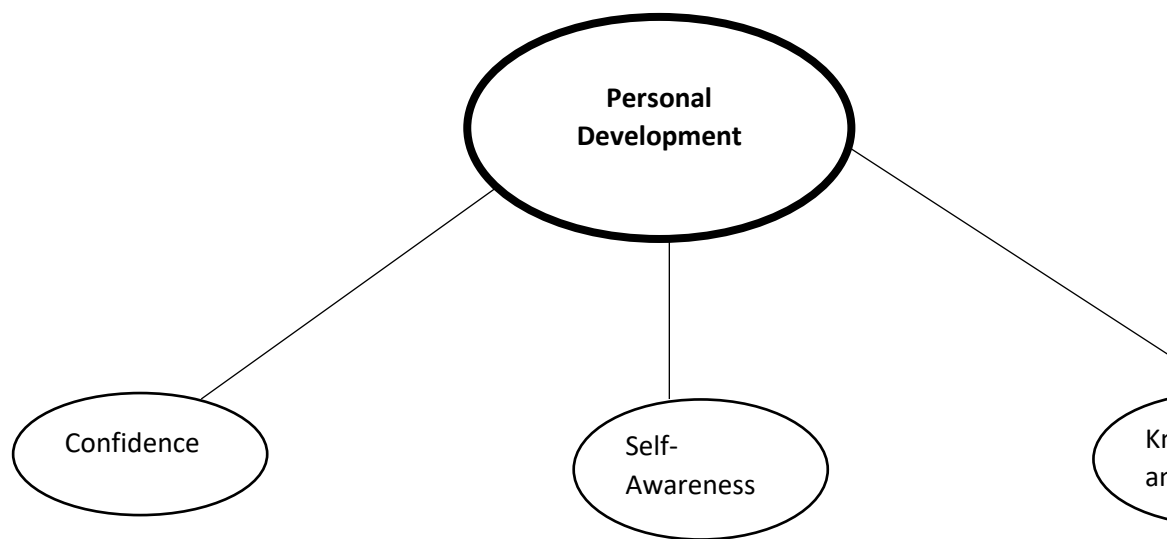
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The LDP helped to give me the tools to push back and ensure that deadlines for delivery were met. It helped me to deal with some difficult characters that operated within the regulatory framework. The course gave me confidence, resilience and gave me an out. (Respondent C) It was a bit of an eye opener, it made me think about how I work and engage with certain individuals and groups, it was a massive confidence boost, it's an area that I've been conscious of during my career. In a group environment I sometimes struggle to get across the point I want to make or feel like the point I'm trying to make is valid or important enough, so for me, having that massive confidence boost from helped my ability to recognise that everyone's opinion is important and that we all have a role to play in what the outcomes are. (Respondent D)	It's trying to learn to temper the emotional side of your brain from your rational side and bring that side in because it makes you more effective. That's the key thing I've learned, to try and focus on that rational side more. (Respondent E) It's silly things, like how your mood and outlook can have an impact on a group of people you are trying to motivate and lead and the more upbeat you can be, even when you are not feeling particularly upbeat, can have an effect on a room full of people and I am able to test these assumptions out on a regular basis and actually watch the response. (Respondent D)	A per in situ quite and it you c frustr some yours how about give y findin that v
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Change Management	Hierarchy and culture	
I think it's been easier for me than it has been for some of my colleagues on the cohort, because when you are doing [in Programme and Project Management] there is an obvious leadership role as part of that. As I've said you are taking people on a journey and implementing change, so there's a good opportunity for you to showcase some of those traits and abilities that you've developed. That might not be as easy to achieve in other roles. For me on a personal level, I felt that I was able to try things out and gauge reactions quite easily because I chair a lot of meetings, they very nature of my role is to get actively involved with lots of different people and try to encourage them do things that I want them to do that they might not necessarily buy into. So I think, leadership for me is about selling the story, getting people on board, it's much easier to take people on a journey with you than to force them or drag you along. So for me, I had lots of opportunities to try these sorts of things out. (Respondent D) [The LDP] was really useful for the system change as it gave me the credibility to say, '*I'm going to switch this on and you are going to come with me. We'll have a bumpy road but we will make it safe'*. I learned from the guys on the ALS and used it as a safe space to talk about the issues that affected the delivery of the programme which was the biggest change programme at the time. (Respondent C)	I think that there are a lot of techniques that we covered during the action learning sets that I would like to implement, but I do feel a little bit like a small fish in a big pond trying to get those things off the ground. A lot of it again is the new ways of working and we are struggling a bit with getting staff involved. The staff aren't used to being involved. I think it's because the organisation doesn't have that mind-set at the moment, that mind-set of open communication and people taking responsibility, making decisions themselves, we've almost got to have a structure to drive that and embed that within the organisation to encourage it to take on a life of its own. (Respondent B) Yeah, I've been allowed the opportunity to try these sorts of things. I had a very supportive line manager when I was on the course. Things like that make a massive difference to what you are able to get out of the course. Some of my other colleagues didn't have quite the same approach. I was very fortunate that my line manager was always happy to allow me to step up, sometimes outside of the remit of the role to gain experience, to test the learning and to push me out of my comfort zone. That's had a massive impact on what I've been able to achieve while I have been on the programme. Some others have been a little stifled, not encouraged or even discouraged from doing that. (Respondent D).	It was no c last 12 mo ALS was m delivered congratula confidenc them, gav I thought [divisions] a really us business a (Responde I think tha each othe There wer really, rea at the end me now fo

Figure 2: Organisation

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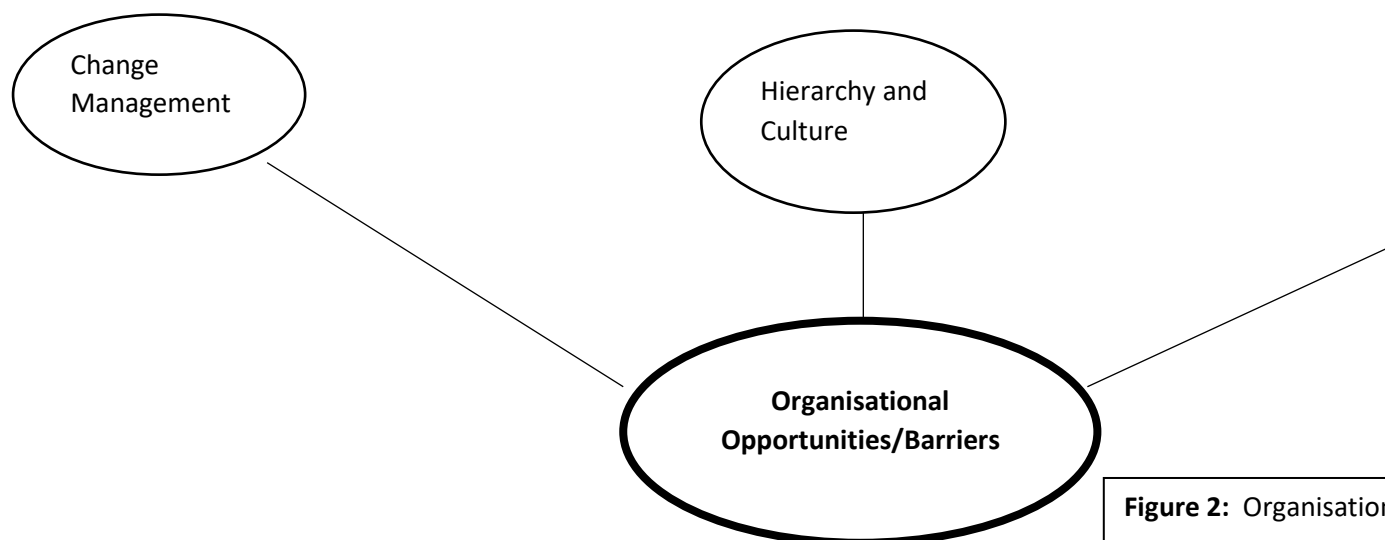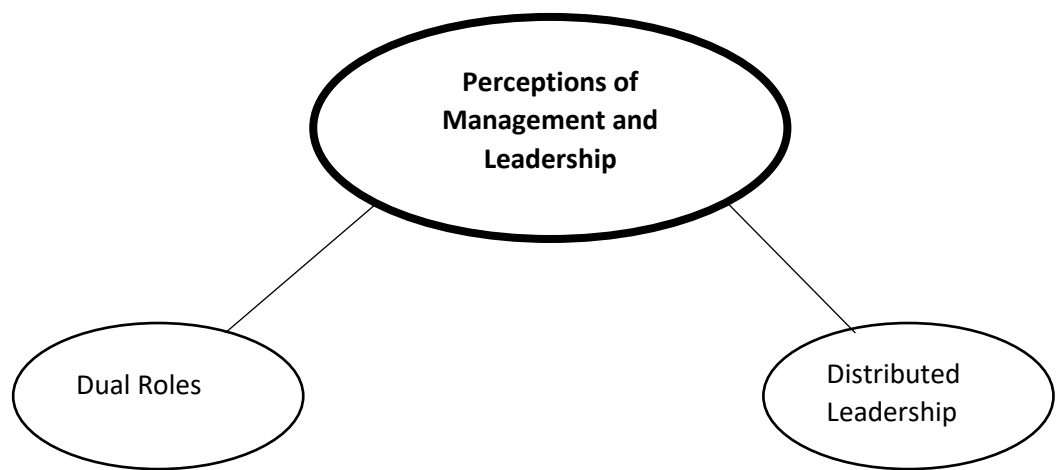| Dual Roles	Distributed leadership
I am in a position whereby I am going out into areas of the organisation to try and encourage members of the organisation to try and encourage people to take on board change. In that respect you are in a leadership role because you are trying to get people on board with moving in a new direction. Not so much a leadership role within a department or team, but a leadership role within an organisation where you are trying to implement change. (Respondent B)	I kept my regulatory responsibilitie… and take ownership of their projec… opportunity for them in terms of th…
I'm the deputy Head of Department, for want of a better description, so there's leading by example but also leading through my position in the department, there's an expectation that people look to me to find out what to do or what the best course of action is. (Respondent A)	The organisation wants to start dev… be able to do that we've got to be … they can take on board some of tha…
I was responsible for leading the whole [named] department. I was the most senior [named] speciality] person in the organisation. (Respondent C)	… you can have leaders based in te… lead and motivate within their env… by great leaders at the top, which y… setting the leadership and direction… really great, you need a lot of self-r… all levels within their working envir…
The bit I lead is making sure that everyone in [my area] who works with me has what they need to do their job. That's what I lead on. If they aren't able to do their job, then I'm not doing my job right. (Respondent E)	For me all jobs have a process and … required to be successful in your jo…
I think that you can have leaders across the organisation at all levels. Individuals that can lead teams or departments, or even lead other people to achieve something. In my role I definitely feel I am a leader. (Respondent D)	

Figure 3. Perceptions of Leadership…

The NHS Organisation's LDP runs over six months and trains 16 middle managers in each cohort.

The first programme started in March 2015 and the second ran from September 2015.

The LDP aims to increase the confidence and knowledge for managers within the NHS Organisation. There are eight workshops focusing on many aspects of leadership, such as emotional intelligence, political awareness, and leading change and service improvements. Also included are eight Action Learning Sets where the participants discuss issues and challenges within their working environments in order to identify solutions. As part of the LDP, participants are asked to design and implement a service change, reporting on the progress of their project throughout their participation on the Programme.

Participants in the programme are drawn from across the NHS Organisation and are from a diverse range of backgrounds, reflecting the diverse scope of the NHS Organisation's activities. Participants have included doctors, nurses, allied health professionals, biomedical scientists, administrative and clerical staff.

Table 1: The Leadership Development Programme

Identifier	Gender	Background	Line Management responsibilities	Change management responsibilities
Respondent A	Female	Scientific	Yes	Y
Respondent B	Female	Scientific	No	Y
Respondent C	Male	Technical	Yes	Y
Respondent D	Female	Administrative/General	No	Y
Respondent E	Female	Scientific	Yes	Y

Table 2: Participant details

I was doing a report that the Programme Manger had asked me to do for a [large scale change programme] and the content of that report contained information that my boss didn't like… He said to me, "*I want that taken out*", I said that it was relevant to the business and he reminded me that I worked for him. Six months previously, I would never have responded in the way that I did, I said that we all work for the organisation and that we need to work for the core business function and if we forgot that then we should go home. The course enabled me to say that, and it angered him, but there was nothing he could say in response to that. (Respondent E)

I'm in the position where I absolutely have the skills, give me a group of people and ask me to lead a change and I can do that, but I don't think I'm in a position where I can, I still feel that I'm in a position where the staff say '*we still need the manager's say so'*. Without that support, we can't make that happen. A recent example would be a senior manager that has asked for work to be carried out in that department. Then having a conversation with that senior manager to feedback my thoughts and my proposed action plan, giving the actions list back to the staff and the response I got was that I don't want anything going to the staff until I've given it the OK. So you can see why staff feel that they don't have the authority to take responsibility when senior managers say things like that. (Respondent B)

Table 3: Role of senior managers

It's hard sometimes, you want people to do stuff that they don't want to do. Whether that's sometimes going into manager mode and saying I've got an expectation that this is done by Friday and now I've got to put the hard line on you, it's got to be done and any manager would do that. (Respondent A)

For me, the management bit is essentially the process stuff I need to learn for my role. (Respondent E)

The actual planning [of system change], you could argue, is a management function, but the approach to planning is a leadership attribute. There's a level of tolerance which is a management function, a project management terminology, but the flexibility to react or shape shift is leadership. (Respondent C)

Table 4: Perceptions of 'management'