Professional Leadership Development Programmes

Now, more than ever, invest to succeed
What’s the story?

The NHS Leadership Academy launched its professional leadership programmes in 2012 in line with its strategic aim of professionalising leadership within healthcare. These programmes have been designed with exceptional partners to help leaders acquire the knowledge, develop the skills, enhance the attitudes, and broaden the leadership behaviours to be better prepared for the complex roles they inhabit.

So far we have had a huge and positive response to the programmes, and continue to receive exceptional feedback.

The Edward Jenner programme has been accessed by over 21,000 people over the last two years and has provided a flexible, free and innovative development opportunity to a wide range of healthcare professionals. This programme has now been fully refreshed and redeveloped.

Over 4,000 people have commenced the Mary Seacole programme with our first graduates completing earlier this year. This programme has enabled those that are making their first steps into leadership to develop skills that reflect the values of the NHS, apply these skills to drive service improvement, and convert their learning into excellent leadership within Health.

A further 1,500 people have commenced the Elizabeth Garrett Anderson programme: a 2-year leadership development programme that includes an MSc in Healthcare Leadership. Our first graduates will complete the programme this autumn and it is clear that over the last 2 years those that have undertaken the programme have challenged the norm and improved staff engagement and patient care as a result.

And 524 people have commenced the Nye Bevan Programme; a 12 month leadership development programme that both prepares senior leaders for an executive level position within health and care, and assesses their readiness for these influential and demanding roles. This programme has helped leaders to lead across boundaries and make fundamental differences to the quality of care delivered by healthcare organisations.
Why invest now – when we are cash strapped?

Short term
- All participants on the programmes lead change programmes in their organisation and many of those have resulted in improvements in quality alongside significant financial benefits.
- One of the genuine benefits many people have found is a step-change in their ability to work better with others - critical at this time when we need to reach out to other organisations to share in finding joint solutions. This is through better networks and through better skills in cross-boundary working.
- Two big costs hitting organisations at the moment are staff sickness and staff turnover - contributing in part to the rise in agency costs. Investing in staff at this time is a well-evidenced way of retaining staff and releasing discretionary effort while avoiding stress and burn-out (not least through the support networks developed).

Medium term
- Very few of the solutions we need can be found entirely in one organisation. A huge benefit of the programmes is learning from others and applying that learning back at work. Whether it is people in other places across the NHS, other health systems or other industries the programmes have generated lots of changes in practice through lessons learnt elsewhere.
- Although operational excellence is needed for managing today - the programmes emphasise that planning for tomorrow is crucial to make sure we aren't just firefighting year-on-year, that needs significant changes to happen.
- The programmes are about preparing people for their next job while being better in the job they are in. Graduates of these programmes will be much better equipped to hit the ground running in new roles.

Longer term
- We can't keep being surprised at the lack of enthusiastic job applications for senior levels in the NHS from people who are ready and able to do the job. This radical shift in creating a real pipeline of skilled leaders addresses that issue.
- However, challenging the last few years have been the future of healthcare is likely to become much more, not much less, complex. The NHS cannot survive without properly investing now for its future.
Our approach

The focus of the Academy is to be more strategic in its approach to ensuring leadership skills are abundant where and when they are needed, flexible enough to respond to changes in demand and structural developments, and capable enough to address the pressures and vagaries of a fast evolving health system. This radical approach; drawing increasing interest internationally, is a system wide suite of programmes providing exceptional, rigorous and cutting edge leadership skills, knowledge, attitude and behaviour development from entry point to the most senior roles in healthcare.

- Our senior team, expert faculty and commissioned providers have created a suite of innovative, unique learning experiences providing leaders in health with an exceptional development experience, equipping them not just to manage with operational excellence today but to lead with vision and innovation for tomorrow.

- Academy staff are happy to present to staff groups, exec teams and boards to provide more detail about programmes and about working with us. For the Seacole, programmes can be run in house with host organisation branding. However our experience is that Seacole can work even more effectively when delivered in health economies because of the benefit of new networks.

- We know each organisation, each health economy, each community is different. Although believe the challenges facing health leaders across the whole of the health and care system are more alike than they are different the context in which leaders operate is different and can be properly captured in all our programmes. We can talk about how you adopt and adapt these programmes to meet your particular needs.
The Academy professional leadership programmes

There are four established programmes, designed to develop outstanding leaders for every tier across the healthcare system. Each programme is bespoke designed and all have a very practical focus, insisting participants apply their learning and review the impact of their leadership practice on staff, colleagues and especially patient care. There is a focus on systems leadership, productivity and innovation and shared use of resources. Importantly, whilst every effort is made to support participants through the programmes, not everyone passes. In short, we are setting standards for leadership capability across levels in the NHS, supporting people to attain these standards, and qualifying only those that reach them.

Edward Jenner Programme – Leadership Foundations

The New Leader Pathway

The New leader Pathway is an offer from the NHS Leadership Academy which launched in June 2015. The pathway is an accessible, vibrant programme which will develop skills, knowledge and behaviours, followed in participants own time and pace.

The pathway is linked into our new membership service. The first level of membership is complimentary and contains a range of leadership materials which can be accessed without any charge. All we ask is that people sign up and effectively become a ‘member’ of the Academy. Complementary content includes:

- Access to the New Leader Pathway starting with the Edward Jenner programme ‘Launch and Foundations’ levels.
- Access to networks and connecting you to other members for sharing best practice and support, blogs, thought leadership etc.
- The Healthcare Leadership Model self-assessment and taster sessions from the development materials
- The Talent tool kit
- Management skills and resources
- You will become a member of CHAIN ‘The Contact Help Advice and Information Network’ Leadership interest forum
- New inclusion and diversity materials
- Guest contributors

New content will be added each month with co-created additional material from members. The Edward Jenner Advanced programme is an optional, direct follow on with a choice of options including a route that gives credit against the Mary Seacole programme which is outlined below.

Cost – free to access, a face to face support programme of action workshops can be provided in house for up to 60 participants at a time, price on application.
Mary Seacole Programme – Leading Care I

- Mary Seacole prepares participants for their first formal leadership role. The one-year programme integrates online development using interactive content, video and scenarios with face-to-face behavioural workshops. This mix best supports the very diverse participants – from returners to learning, through doctors in training, to graduate management trainees. Throughout, the focus is on personal leadership impact and the evidenced delivery of practical service improvement. This evidence, together with a series of critically reflective assignments, lead to the NHS Leadership Academy award in Healthcare Leadership and an accredited Postgraduate Certificate form the Open University.

One- year post graduate certificate programme - £3,000
Bulk purchase price on application

Elizabeth Garrett Anderson Programme – Leading Care II

Elizabeth Garrett Anderson is for people becoming ready to step up to lead larger functions or more complex projects – generally to a role leading people who themselves lead teams. This two-year programme leads to an NHS Leadership Academy award in Senior Healthcare Leadership and an MSc in Healthcare Leadership. The programme follows a truly integrated development design where participants work face-to-face in cohorts (of 48) to explore systems, tutorial groups (of 16) to acquire knowledge and critical skills, learning sets (of 8) to support individual leadership impact, all supported with a vibrant online virtual campus. All the academic work is firmly practical and applied, with all assignments based on participants’ working realities, leadership interventions and impact. This Masters programme prepares people to take on more complex leadership roles managing multiple teams and significant resources. All participants, which include clinicians and other professionals, will benefit from academic input from Manchester Business School, University of Birmingham and Harvard Kennedy School as well as content from the Global Health team in KPMG. The programme follows an integrated design where participants acquire knowledge and critical skills in a virtual community and immersive virtual campus, and explore their personal impact in learning sets and residencies. Knowledge alone does not pass this programme - all the academic work is firmly applied, with all assignments based on participants’ leadership impact.

Two-year Masters programme - £ 10,500
Bulk purchase price available, can be paid over 2 or 3 financial years

The Nye Bevan Programme – Leading Care III

- Nye Bevan is for aspiring directors – those looking to move into executive team and boards. Participants are supported to create a personal learning contract and a set of criteria by which they should be judged as ready for executive leadership and an NHS Leadership Academy award in Executive Healthcare Leadership. Cohorts of 49 travel a 12-month programme and are exposed to international best practice and academic
insight from top-flight institutions including Harvard Kennedy School. The core though is the self-managed learning and peer assessment philosophy of the programme – participants submit development evidence to each other in moderated learning sets, making courageous decisions holding peers to account for their impact as leaders, and indeed making pass or fail decisions on each other’s work. Throughout, the programme mirrors the role of executive directors in healthcare, demanding: small group (senior team/board) process skills, personal courage to hold colleagues to account, critical judgement from complex data, tolerance of ambiguity, personal insight and self-management.

It is peer assessed, so as well as academic input the programme requires participants on the group to assess and pass or fail colleague participants.

One year Director ready programme - £13,500
Bulk purchase price available, can be paid over 2 financial years

The case for development

The professional leadership programmes form the Academy’s main intervention to achieve the professionalisation of leadership in healthcare – to insist that leaders are properly developed to qualify them for leadership roles before taking them up. If leaders are ever to be taken seriously in their roles, if the profession is to be recognised as a crucial contributor to a great health service rather than a burdensome cost then the discharging of leaders’ roles and responsibilities should carry the same requirements for demonstration of fitness to practice, as other professions across the NHS.

One manifestation of the lack of an industry wide approach has been the frequent restructures, particularly at national and intermediate levels, but also across each healthcare area. These restructures have often been predicated on an assumption that the wrong skills are in the wrong place. The shift to commissioning is an example that assumes the right skills exist but in a different place, or need to be recruited. The Development Dimensions International Global Leadership Forecast 2012 shows a real problem with the perceived quality of leaders globally. There is no evidence to suggest that the high quality leaders we need in the NHS are there to be recruited from elsewhere. We are much more likely to be successful by deploying tactics to ensure we ‘grow our own’ much more effectively and that routine development of talented individuals, linked to career progression, becomes a core part of our business.

There is a global search for talent: healthcare systems in the developed and developing world are all struggling with recruiting the right level of skills and capabilities. The fight for talent at senior levels is acute, across all sectors. Assuming that there exists talent externally, or just in some other place that we can better tap in to, makes the mistake of failing to understand the global market for talent. Conservative estimates indicate the last NHS restructure cost around £2bn. Many of those made redundant have since been re-employed, plugging talent and skills gaps to run a system that remains stretched for exceptional leadership talent.
Although ambitious and innovative, the philosophy behind the leadership development principles of the Academy is relatively simple and well proven:

- For leaders to be at their most effective they need confidence in their role.
- To secure confidence they need competence, skills, expertise, experience and support. This comes from expert development and training as well as on the job learning.
- Leaders need to have a breadth of behaviours to draw on to exercise their role in a multi-agency, complex system such as health care. Lack of development tends to result in leaders having a very narrow range of styles to draw on.
- Leaders need the right behaviours to build alliances with a wide range of professionals and across organisational boundaries to serve the needs of diverse communities with enduringly complex needs. The success of the NHS over the next decade or so will rely heavily on the behaviours adopted by healthcare leaders at all levels being able to work with leaders in other parts of the public and private system.
- Leaders need to be able to engage and empower those working with them, and rely less on old style command and control approaches that inhibit innovation, discretionary effort and a more caring and considerate climate to work that generate both employee engagement and compassion in care.

There are some examples of this more evolved leadership style and approach in the NHS – but not enough. We have all witnessed and have had recorded where the failure of leadership has led to an abject failure in care for our patients and the attendant emotional and financial costs. This dichotomy represents the prima facie case for investment in leadership development.

- A study in the Harvard Business Review (Bassi and McMurrer) provides a strong link between leadership skills and organisational performance.
- West et al have demonstrated the link between good leadership and HR practice in healthcare and patient mortality and morbidity rates – more engaged staff, through better leadership, saves lives.
- The Institute of Work estimates that 20% of the variance in productivity and profitability in organisations can be attributed to better people management – a stronger driver than strategy, technology and research & development.
- US companies alone spend over $13Bn on leadership development each year. Building the leadership capabilities of an organisation is a clear differentiator.

Yet there is nowhere in any of the regulations or measures currently applied to NHS organisations that seek evidence about leader’s professional ability to do their job. Clinicians will often be asked to take on leadership roles, with responsibility for people’s objectives, appraisal, and performance management as well as all other resource management issues, with no leadership development at all.

As important as it is to develop individual leaders, it is equally important to develop the collective leadership of a system: all leaders, at all levels, united by a common purpose and collective endeavour, moving in the same direction. Given the increasingly complex world we live and work in, the challenges and demands are too great for one top leader. Increasingly the concept of “individual leader as hero” is being replaced by collective,
boundaryless and connected leadership across the system. The national approach adopted by the Academy offers an opportunity for leaders right across the system, with all other types of organisations, to learn and develop together. In-house development inevitably lends itself to a more parochial style of leadership which protects the walls of an organisation. That kind of behaviour will no longer deliver the kind of radical change and revitalisation in healthcare that our communities demand.

The business case for leadership development is primarily the return from engaged people. Engagement is defined as the degree to which people are psychologically invested in the mission of the organisation, resulting in increased discretionary effort, greater loyalty and advocacy toward the core purpose. Leaders have a direct impact on engagement by inspiring commitment, providing recognition, growth and development opportunities.

More detail on these programmes is available through the video introductions via this link http://www.leadershipacademy.nhs.uk@grow/professional-leadership-programmes/