National Leadership and Innovation Centre
Office for the Nursing and Midwifery Services Director
HSE

Learning Site Evaluation Report
Clinical Leadership Development Foundation Programme
for Staff Nurses and Staff Midwives in the Saolta Hospital Group

December 2017
Learning Site Evaluation Report

Clinical Leadership Development Foundation Programme
for Staff Nurses and Staff Midwives in the Saolta Hospital Group
2017

About this Report:

This report includes details of a learning site evaluation on a 2.5 day clinical leadership development foundation programme for staff nurses and staff midwives that was tested in the Saolta Hospital Group in 2017. This report was prepared by the National Leadership and Innovation Centre for Nursing and Midwifery, Office of the Nursing and Midwifery Service Director, HSE.

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# Table of Contents

Foreword.................................................................................................................................................. 4
Introduction ............................................................................................................................................... 5
Overview of the Programme ....................................................................................................................... 5
Programme Aim ......................................................................................................................................... 5
Programme Learning Outcomes ............................................................................................................... 6
Programme Structure ............................................................................................................................... 6
Programme Requirements .......................................................................................................................... 6
Evaluation .................................................................................................................................................... 7
Sustainability .............................................................................................................................................. 7
Timetable Day 1 ......................................................................................................................................... 8
Introduction to Clinical Leadership Session ............................................................................................. 9
Self Awareness Session ............................................................................................................................. 10
Communication Session ........................................................................................................................... 11
Team Work Session ..................................................................................................................................... 12
Timetable Day 2 ....................................................................................................................................... 13
Decision Making Session .......................................................................................................................... 14
Quality and Safety Session ....................................................................................................................... 15
Empowerment Session .............................................................................................................................. 16
Advocacy Session .................................................................................................................................... 17
Guidance on Group Work Competency Based Activity ............................................................................ 18
Day 1 & Day 2 - Qualitative Feedback ....................................................................................................... 19
Timetable Day 3 ....................................................................................................................................... 21
Reflections on Participant Presentations .................................................................................................... 22
Evaluation of Group Work Competency Based Activity ........................................................................... 22
Overall Programme Qualitative Feedback ............................................................................................... 24
Feedback from Senior Nurse and Midwife Leaders ................................................................. 24
Impact on Practice .................................................................................................................... 25
Recommendations .................................................................................................................... 27
Appendix 1: Clinical Leadership Programme Steering Committee Members .................... 28
Appendix 2: Participant Guidelines for undertaking the Group Work Based Activity ............. 29
References .................................................................................................................................. 30

This report was prepared by Marie Kilduff, Leadership & Innovation Advisor, National Leadership & Innovation Centre (NLIC), Office for the Nursing & Midwifery Services
Foreword

Clinical Leadership’ occurs at all levels of patient care. At its essence, it requires attributes to lead a team, unit or programme of work in improving the delivery of safe clinical care. The Saolta Hospital Group commissioned the support of the National Leadership and Innovation Centre ONMSD to facilitate a 2.5 day Clinical Leadership Programme to enhance the leadership skills of staff nurses and midwives. The programme was underpinned by the 7 leadership competencies from the Clinical Leadership Competency ePortfolio, (CLCeP) available on www.hseland.ie.

The learning from testing this programme within the Saolta group has been invaluable. It has instilled confidence in participants enabling them to build local leadership capacity focusing on person-centeredness. They have established peer networks and developed in their current roles or in some cases progressed to more senior positions. The following report is the summation of the process and learning. I am delighted to see this work evolving as a national programme for staff nurses and midwives called ‘Empowering Self and Others’. It will be delivered in partnership with other providers for example Centres for Nurse and Midwifery Education and Practice Development Departments in 2018.

I would like to acknowledge the members of the Clinical Leadership Development Programme Steering Committee (Appendix 1) from the Saolta Hospital Group for their expert guidance during the development of the programme. A special thanks to Jean Kelly (Group DONM), Hannah Kent Practice Development University Hospital Galway (UHG), Marissa Butler Director CNME Galway, Maura Loftus Specialist Coordinator CNME Galway and clinical staff from UHG who supported and facilitated the programme with members of the NLIC team. I want to especially thank Marie Kilduff (Project Lead NLIC) for engaging all stakeholders and moving the project to success and Teresa Moore and Georgina Bassett NLIC for their project support.

It was a pleasure for all who worked with the participants who undertook this programme as they were enthusiastic, committed and engaged. The future of the nursing and midwifery professions is indeed very bright with such dedicated clinicians leading care for our service users.

Cora Lunn
Director, National Leadership and Innovation Centre
Office for the Nursing and Midwifery Service Director HSE
Introduction

Clinical leadership is concerned with demonstrating clinical excellence, giving support and guidance to colleagues and acknowledging the distinct contribution of nursing and/or midwifery within multidisciplinary contexts (HSE 2009). Effective clinical leadership is essential for optimising care and improving patient outcomes (Fealy et al 2011, Daly et al 2014). Clinical Leadership is not the sole responsibility of those occupying formal leadership and management roles but should be demonstrated by nurses and midwives across all clinical grades (HSE 2009). Ideally, nurses and midwives should start to develop clinical leadership skills from the time they enter undergraduate education and continue to do so as they progress through their careers. Early development would facilitate them to lead themselves and others while supporting them to contribute to the leadership for quality agenda in the organization in which they are employed (HSE 2016).

The importance of clinical leadership has been highlighted in the scholarly research and in National publications such as the People Strategy (2015) and the National Clinical Leadership Needs Analysis (2017). The National Leadership and Innovation Centre for Nursing and Midwifery recognise the importance of supporting leadership development for frontline staff and have therefore developed a ‘Clinical Leadership Development Programme’ for staff nurses and staff midwives. This programme is underpinned by the 7 leadership competencies from the Clinical Leadership Competency ePortfolio (CLCeP)\(^1\) to provide a solid foundation whereby participants will be supported to critically think about their leadership capacity and challenge themselves to become more effective, competent clinical leaders in practice.

In order to test the programme, it was delivered to 26 staff nurses and midwives from the Saolta Hospital Group in June and July 2017, by members of the NLIC team, the Director (Registered Nurse Tutor) from the Centre for Nursing and Midwifery, Galway and a Quality Advisor from UHG. Prior to its delivery, a steering committee was established with members of the NLIC team and the Saolta Hospital Group to plan the delivery of this clinical leadership programme for staff nurses and staff midwives. It was agreed by the steering committee to call the programme ‘Building and Developing Clinical Leadership Competency Programme’ and this is the title that was used when it was tested.

Overview of the Programme

Programme Aim

The aim of the programme is to support participants to develop their clinical leadership competencies thereby enhancing the care delivery for service users in their organisations.

\(^1\) The CLCeP is an elearning resource that supports staff nurses, staff midwives, Clinical Nurse and Midwife Managers 1 & 2 (and equivalent grades) to identify and develop their clinical leadership competencies and to maintain a portfolio of evidence to demonstrate Continuing Professional Development (CPD).
Programme Learning Outcomes

- Develop clinical leadership competencies by actively engaging with 7 leadership competencies outlined in the CLCeP: Self Awareness, Communication, Decision Making, Empowerment, Advocacy, Team Work & Quality & Safety
- Develop knowledge on the responsibility, authority and accountability associated with the role of the nurse and midwife
- Advance the ability to self reflect and use this enhanced personal understanding to support their personal and professional well being
- Engage in a Work Based Group Activity to develop the skill of applying learning to practice and further develop leadership competency
- Engage with other participants to create a peer support network that can be sustained thereby enhancing potential shared learning into the future

Programme Structure

The programme is delivered over 2.5 days. The first 2 days are delivered together and the final half day is delivered after 4 to 6 weeks. Gurgjian et al (2014) advise linking leadership development to real ‘on the job’ projects that impact and improve learning. In order to achieve this, participants on this programme participate in a Work Based Group Activity to support them to apply their leadership knowledge development to practice, engage with the CLCeP and share this experience on the final day.

Programme Requirements

Prior to commencing the programme, participants are required to:

- Register on HSELaND and familiar themselves with the Clinical Leadership Competency ePortfolio (CLCeP). Participants can do this by observing the CLCeP Video Clip and reviewing the navigation video and user guide on the CLCeP site (on HSELaND)
- Each participant is required to have completed the ‘assess’ and ‘plan’ stage of the self awareness competency
- At the start of the programme, participants were each given a reflective diary so that they could document their learning and reflections while on the programme and after it
- At the end of the Day 2, participants are given guidelines in relation to undertaking a work based group activity (See Appendix 2). Group feedback is presented on the final day.
Evaluation

Gurgjian et al (2014) highlight that often leadership improvement initiatives are not taken seriously as organisations fail to track and measure changes in leadership performance over time. In order to measure the impact of this programme on both the individual and the organisation, both qualitative and quantitative data were collected. The content, design and delivery of the pilot programme were evaluated using questionnaires. The impact on practice was evaluated from feedback on the work based group activity presented on the forum day presentations. In addition to the latter, a focus group with participants was held 3 months after the end of the programme to evaluate the impact of the programme on practice, over time.

Sustainability

It is envisaged that going forward, this programme will be delivered by the CNME, UHG for staff from the Saolta Hospital Group with the support of the National Leadership and Innovation Centre, ONMSD. Plans are also in place to deliver this programme nationally in 2018.
# Timetable Day 1

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
<tbody>
<tr>
<td>08.30 – 09.15</td>
<td>Welcome and introduction to the programme</td>
</tr>
<tr>
<td></td>
<td>Ms Jean Kelly, Chief Director of Nursing and Midwifery, Saolta Group</td>
</tr>
<tr>
<td></td>
<td>Ms Marie Kilduff, Leadership and Innovation Advisor, NLIC, ONMSD, HSE</td>
</tr>
<tr>
<td></td>
<td>Ms Marissa Butler, CNME Director, GUH</td>
</tr>
<tr>
<td></td>
<td>Ms Hannah Kent, Nursing Practice Coordinator, GUH</td>
</tr>
<tr>
<td>09:15 – 10:30</td>
<td>Introduction to the Clinical Leadership</td>
</tr>
<tr>
<td></td>
<td>Marie Kilduff and Marissa Butler</td>
</tr>
<tr>
<td>10:30 – 11:00</td>
<td>Break</td>
</tr>
<tr>
<td>11:00 – 12.30</td>
<td>Self awareness</td>
</tr>
<tr>
<td></td>
<td>Marie Kilduff and Marissa Butler</td>
</tr>
<tr>
<td>12:30 13:15</td>
<td>Lunch</td>
</tr>
<tr>
<td>13:15 – 14:45</td>
<td>Communication</td>
</tr>
<tr>
<td></td>
<td>Marie Kilduff and Marissa Butler</td>
</tr>
<tr>
<td>14:45 – 15:00</td>
<td>Break</td>
</tr>
<tr>
<td>15:00 – 16.15</td>
<td>Team Work</td>
</tr>
<tr>
<td></td>
<td>Marie Kilduff and Marissa Butler</td>
</tr>
<tr>
<td>16:15 – 16:30</td>
<td>Evaluation and close</td>
</tr>
</tbody>
</table>
Introduction to Clinical Leadership Session

Clinical Leadership is patient focussed and primarily the influence of clinical leaders stems from characteristics such as clinical credibility and capacity for collaboration (McKee et al 2013). The literature clearly demonstrates the importance of clinical leadership in ensuring a high quality health care system that provides safe and efficient care (Daly et al 2014).

Learning Outcomes of Clinical Leadership Session

To understand that all nurses and midwives are clinical leaders
To recognise the qualities and skills of an effective clinical leader
To develop knowledge of the Clinical Leadership Competency e Portfolio (CLCeP)

Overview of the Clinical Leadership Session

Further to the presentation of theory, participants were asked to explore the concept of clinical leadership in groups. This supported them to reflect on themselves and their roles so that they recognised that they are in fact clinical leaders. Participants were given time to reflect on their own leadership skills and qualities and to document their strengths and areas that required development in their reflective journals. In order to develop their clinical leadership competencies further, participants were provided with an overview of the CLCeP.

Clinical Leadership Session - Quantitative Feedback

![Figure 1. Introduction to Clinical Leadership Session](image)

Clinical Leadership Session - Participant Comments

‘Gave a good insight into the programme’
‘Excellent content, group work worked well’
‘Clear overview of what to expect and on e portfolios’
Self Awareness Session

Self-awareness is a process that enables nurses to learn more about their personal beliefs and values. It enables objective examination of oneself and is considered an important tool during the development of a therapeutic relationship with patients (Kroston & Jack 2016). There is much evidence from the literature that self awareness is fundamental for the delivery of compassionate care and to clinical leadership competency development (Palmiere 2012, Rasheed 2015).

Learning outcomes for Self Awareness Session
Understand Goals, sources of motivation, emotions, assumptions and core beliefs
Explore personal, professional and organisational values
Understand the impact of organisational culture

Overview of Self Awareness Session
While participants were provided with theory on self awareness, much of this session was experiential. Participants explored their own personal values, beliefs and behaviours and were given time to document their reflections in their diaries. The concept of culture was explored as participants discussed the environment in which they work and both the opportunities and challenges this presents. At the end of the session, participants were provided with templates from the CLCeP to support them to develop their self awareness further.

Self Awareness Session - Quantitative Feedback

![Figure 2. Self Awareness Session](image)

**Self Awareness Session - Participant Comments**
‘Food for thought, great reflection on oneself and to be more aware of yourself and others’
‘Very well explained and very good interaction from the group’
‘Great for self evaluation as well as giving insight into other people opinions’
Communication Session
Effective communication is a vital tool for effective clinical leadership leading to high quality, safe care. Ineffective communication remains the most frequently stated cause of preventable adverse events (Irish Society for Quality and Safety in Healthcare 2011) and in reports such as the Mid Staffordshire NHS Foundation Trust Public Inquiry (2013).

Learning Outcomes for Communication Session
Understand the communication process
Identify potential factors that could cause a breakdown in communication
Understand the importance of Active Listening

Overview of the Communication Session
Participants were provided with an opportunity to provide examples of good communication processes and poor communication processes in their organisations. This enabled discussions to take place regarding the importance of communication and potential and actual negative outcomes that can occur when communication is sub optimal. Experiential learning took place by using role play to demonstrate the impact of tone of voice and body language on the communication process.

Communication Session – Quantitative Feedback

Figure 3: Communication Session

Communication Session - Participant Comments
‘Very informative and interesting, learnt a lot’
‘Benefit to all staff in hospital in every discipline’
Team Work Session

A team is a group of people with complementary skills who know their goals, purpose, roles and responsibilities and are answerable for their actions (Carter et al 2008). All clinical leaders work as members of a team and therefore it is essential that they have the skills and knowledge of team work to be effective team members. As a team member, clinical leaders are required to be clear about the team’s objectives, understand the value of team diversity and the importance of meeting regularly to review their team’s performance.

Learning Outcomes for Team Work Session

Identify the skills and behaviours that support teamwork

Develop knowledge on the different stages of team development

Understand the value team diversity

Overview of the Team Work Session

Participants were asked to reflect on the skills and behaviours required amongst team members for an effective team. This led to much discussion on the benefit and value of team diversity. In order to demonstrate team development and function, participants were asked to engage in a group activity and each group was observed by one of their participants who documented their observations of how the team worked together. The activity enabled participants to see how they personally engaged as a member of the team and how their group worked together. The feedback from the observer was most valuable as it provided insight into team dynamics that emerged during this exercise.

Team Work Session – Quantitative Feedback

![Figure 4. Team Work Session](image)

Team Work Session: Participant Comments

‘Enjoyed team building activity’
‘Very enjoyable and worthwhile’
‘Everyone has something to offer’
# Clinical Leadership Development Programme

## Timetable: Day 2

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
<th>Speaker(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>08.30 - 08:50</td>
<td>Welcome and feedback from Day 1</td>
<td>Marie Kilduff, Marissa Butler, Hannah Kent</td>
</tr>
<tr>
<td>08:50 - 10:00</td>
<td>Decision Making</td>
<td>Ms Teresa Moore, Leadership and Innovation Advisor, NLIC, ONMSD, HSE</td>
</tr>
<tr>
<td>10.00 - 10.30</td>
<td>Break</td>
<td></td>
</tr>
<tr>
<td>10:30 - 12:00</td>
<td>Quality and Safety</td>
<td>Ms Helen Cahill, Quality and Safety Advisor, GUH</td>
</tr>
<tr>
<td>12:00 – 12:45</td>
<td>Lunch</td>
<td></td>
</tr>
<tr>
<td>12:45 – 14:00</td>
<td>Empowerment</td>
<td>Marie Kilduff and Hannah Kent</td>
</tr>
<tr>
<td>14:10 – 15:15</td>
<td>Advocacy</td>
<td>Marie Kilduff and Hannah Kent</td>
</tr>
<tr>
<td>15:15 – 16:00</td>
<td>Using the Clinical Leadership Competency e Portfolio to consolidate clinical leadership knowledge and support Continuing Professional Development</td>
<td>Marie Kilduff &amp; Hannah Kent</td>
</tr>
<tr>
<td>16:00 – 16:30</td>
<td>Evaluation and Close</td>
<td></td>
</tr>
</tbody>
</table>
Decision Making Session

As Clinical Leaders, all nurses and midwives have a duty of care and therefore are responsible for their decisions, actions, inactions and outcomes. Clinical decision making is a complex process involving observations, information gathering, critical thinking, evaluating the evidence, problem solving, reflection and clinical judgment (Standing 2005). The aim of decision making in healthcare is to select the best course of action/s to ensure safe care and minimises any potential harm.

Learning Outcomes for Decision Making Session
Identify the factors that influence decision making
Identify the core skills required for effective decision making
Understand levels of decisions (others) and the use of a systematic process

Overview of the Decision Making Session
Participants reflected on their scope of practice in relation to decision-making and on the types of decisions they are required to make daily. This was followed by an exploration of what participants considered core skills necessary for effective decision-making and the factors that influence their decision-making capability. Participants explored the types of decision they find most challenging, and processes they use when making clinical and other decisions. Participants were introduced to a range of decision-making frameworks and were guided on their use in clinical practice.

Decision Making Session – Quantitative Feedback

![Bar Chart]

Figure 5. Decision Making Session

Decision Making Session – Participants Comments
‘To have useful tools to use in decision making was excellent, will use it in my practice’
‘Good insight into how to make decisions and how to make them in the future’
‘Very realistic and informative’
Quality and Safety Session
Service users and their families have a right to receive consistent care that is safe and of high quality. Clinical leaders are responsible for enabling and supporting staff to do their job safely, effectively and to a high standard. To do this, nurses and midwives must be supported to know what they are responsible for and to whom and for what they are accountable and answerable for.

Learning Outcomes for Quality and Safety Session
Explore the importance of Quality & Safety
Identify and explore how HIQA standards apply to and impact on practice
Quality Improvement Information - what is available and where can it be found

Overview of Quality and Safety Session
This session was presented by the Quality and Safety Advisor. Following a presentation on the key aspects of Quality and Safety, anonymous adverse incident reports were presented which supported the participants to identify and learn from factors that contributed to their occurrence. This also supported participants to understand the important of clear concise documentation in relation to Quality and Safety.

Quality and Safety Session – Quantitative Feedback

Figure 6. Quality and Safety Session

Quality and Safety Session – Participants Comments
‘Highlights when incidents can escalate as a result of poor documentation’
‘Good in that it was relevant to the acute setting’
‘Makes you think how you document is so important’
Empowerment Session
The WHO (2010) define empowerment as Taking Control and Responsibility for Actions that have the intent and potential to lead to fulfilment and capacity. As Clinical Leaders, nurses and midwives play a vital role in empowering themselves, their colleagues, service users and families.

Learning Outcomes for Empowerment Session
Understand the meaning and importance of empowerment
Develop knowledge of how to empower oneself and others
Identifying ways to promote and support a culture of empowerment

Overview of Empowerment Session
In addition to the presentation on empowerment, participants were asked to reflect on a time when they felt empowered and to use art materials to draw on this experience. As this was an afternoon session, this enabled the participants to re engage with the programme after lunch, in a creative, enjoyable way. The participants who volunteered to present their drawings gave profound personal and professional examples of empowerment.

Empowerment Session: Quantitative Feedback

Empowerment Session: Qualitative Feedback
‘Really interesting and insightful’
‘Made me think about empowerment’
Advocacy Session
Advocacy in Health Care is seen as communicating and informing service users, protecting them, speaking out for them and building relationships with patients (Hanks 2010). However in addition to advocating for patients, clinical leaders also advocate for themselves, their colleagues, their service and their profession.

Learning Outcomes for Advocacy Session
Understanding the meaning of advocacy
Having knowledge on what effective advocacy looks like?
Identifying Opportunities for Advocacy
Managing challenges in relation to advocating

Overview of Advocacy Session:
Participants were provided with an overview of advocacy, its importance and their role as advocates for themselves and others. In order to really demonstrate advocacy, a you tube clip was shown of Margaret Murphy, External Lead Advisor for the World Health Organization’s (WHO) Patients for Patient Safety Programme. Margaret’s personal story had a profound impact on the participants and highlighted the importance role of advocacy for all health care professionals.

Advocacy Session – Quantitative Feedback

Advocacy Session- Participants Comments
‘This session opened my mind to the importance of advocacy and also our role as patient advocate’
‘I really learned from Margaret Murphy’s talk - a real insight that brings it all home’
‘Video of Margaret Murphy very good, helps to set the tone for the session’
Guidance on Group Work Competency Based Activity

Participants were asked to form groups of 3 to 4 persons. Each group was then given one of the 7 clinical leadership competencies for their group work based activity. Guidance was given in relation to this work that was to be undertaken between day 2 and 3. Participants were provided with a written copy of the guidelines (See Appendix 1). Participants were assured that they could contact the programme facilitators if further guidance was required.
Day 1 & Day 2 - Qualitative Feedback

Participants were asked to provide feedback on the 2 days of the programme using 3 key questions and were then provided with the opportunity to give their overall comments and suggestions:

Please comment on your experience of the programme over the past 2 days:

- ‘The whole experience was excellent, not what I had expected, will definitely recommend to fellow colleagues’
- ‘Fantastic programme, uplifting and motivating, I learned how to practice being a good role model as a leader, I feel I am more equipped to inform other colleagues of our role as leaders’

List 3 things you will do differently in your role as staff nurse or manager:

- ‘Communicate more effectively, use the tools I have been given, give more positive feedback to my fellow colleague - don’t jump to conclusions, be more self aware of others’
- ‘Be a better role model and advocate for junior staff and students - I will listen to them and be less judgemental, I will incorporate Quality and Safety into all aspects of my nursing care, I will be more confident and recognise that positive feedback is essential’
Please identify what, if anything you would change about the programme?

‘Change the name, the title does not incentivise nurses and midwives to come on the programme’

‘The name, as it does not enhance staff to apply, not many see leadership as their role but we are all clinical leaders’

Any other comments/suggestions?

‘I really enjoyed the course, good to reflect on our own learning abilities and needs, all the facilitators were friendly, professional and very helpful, I will highly recommend this to fellow colleagues’

‘Presenters were extremely interesting and worked so well together, made it easy for everyone to participate, all material covered was relevant to my role as a nurse and going forward to my career’
<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>09:00 – 09:10</td>
<td>Welcome</td>
</tr>
<tr>
<td>09:10 – 10:45</td>
<td>Leadership Competency Development – ‘Shared Learning and Reflection’</td>
</tr>
<tr>
<td>10:45 – 11:15</td>
<td>Coffee</td>
</tr>
<tr>
<td>11:15 – 12:00</td>
<td>Leadership Competency Development – ‘Shared Learning and Reflection’</td>
</tr>
<tr>
<td>12:00 – 12:15</td>
<td>Close</td>
</tr>
</tbody>
</table>
Reflections on Participant Presentations

On day 3, each group provided feedback on the programme using the headings from the guidelines (Appendix 1). It was evident that much learning had taken place from the programme as participants spoke about their clear new found understanding and belief that all nurses and midwives are clinical leaders. Participants spoke about the value of taking time away from their roles to reflect on their role as leaders. It was evident that participants had benefited personally and professionally from the programme. Team work was clearly evident in the way the group members had worked together to collectively reflect on their experience and present their learning in a professional engaging manner. Participants spoke about the value of becoming more self aware in relation to how they behave and how they now take the time to think about how this impacts on others.

The impact on practice was very evident from the presentations as participants spoke about sharing their knowledge and learning with colleagues. In relation to communication, quality and safety and advocacy, one participant shared how she had challenged the decision of a consultant as from her experience and evidence based knowledge, the decision was not in the best interest of the patient. Another staff nurse who worked in theatre, spoke about how she now realised how communication is negatively impacted upon when patients are faced with ‘gowned and masked’ staff standing over them. It was inspiring to see the wonderful impact this programme had on the participants and their services. The learning and leadership development was clearly demonstrated in these group presentations.

Evaluation of Group Work Competency Based Activity

On day 3, Participants were asked to complete an evaluation on their work based group activity in relation to their learning and the relevance to their role:

Figure 8: Group Work Competency Based Activity in relation to Learning
Figure 9: Group Work Competency Based Activity in relation to Relevance to your Role

Figure 10: Did the Work Based Activity support you to apply your learning to practice?
Overall Programme Qualitative Feedback

Feedback from Senior Nurse and Midwife Leaders

Following the programme, a number of senior nurse and midwife leaders contacted the NLIC to provide feedback on the programme.

‘I thought the programme was very practical and tangible for the participants. The content was relevant to the work that they are doing and could be transferred back to their units. The programme also equipped them with the language that is expected from senior nurses especially when applying for CNM positions. The impact is already palpable, those who attended feel that this was ‘their time’ and they got a lot out of it. It also created a positive air back on their units. The two days also created an energy that was very evident to all of us’

Ms Jean Kelly,
Chief Director of Nursing and Midwifery,
Saolta Group

‘Well done on the delivery of such a powerful programme to staff nurses/midwives, it is very evident from the feedback that the programme is addressing the development needs of staff nurses/midwives’

Ms Mary Frances O’Reilly, Director,
Nursing and Midwifery Planning and Development Unit,
HSE West/Mid-West

‘I felt the name when I started the programme was aimed at managers and not me. Now I have gone back to clinical areas and shared my experience with colleagues, they are much more interested in attending the programme in the future. Couldn’t say enough about this programme, excellent, thank you’

‘I will recommend this course to my colleagues, it was thoroughly enjoyable and I have learned so much, it has been a real learning curve, thank you’
Impact on Practice

A focus group was held 3 months after the programme to evaluate the impact of the programme on practice over time. The focus group was facilitated by an independent facilitator who had not involved with the programme; this was to ensure that participants were given the opportunity to provide honest, open feedback. An independent administrator supported the facilitator to document the feedback. The facilitator supported participants to provide feedback on the programme by asking key questions:

Q1. How was the programme for you?

The majority of participants were nominated to attend the programme and there was a general acknowledgement that if they were not ‘sent’ they would not have thought it was relevant to them. However, having attended the programme, participants spoke of it as a positive experience which led to increased confidence, self awareness and a sense of empowerment. They felt the style of facilitation worked very well and it was evident that the facilitators understood where they were coming from.

Q2. What worked well?

Participants felt that having the first 2 days together supported the group to get to know each other and build up an environment of trust where people felt ‘secure to say things’. There was an appreciation that the Chief Director of Nursing had opened the programme on Day One and had taken the time to come and meet the participants. Participants spoke of feeling welcomed to the programme and appreciated having ground rules especially in relation to confidentiality. They also liked the informal style of facilitation, variety of speakers and the inclusion of group exercises which supported everyone to voice their opinion.

Q3. What didn’t work so well?

Participants felt that the course should not be delivered during the summer months as it is difficult to get study leave during holiday periods. In relation to the Work Based Group Activity (WBGA), participants felt that they were not informed of the required time and work commitment, prior to commencing the programme. From a practical perspective, it was difficult for group members to meet up to work together on their WBGA.

Q4. What impact has the programme had on you personally?

The main themes that emerged were:

Improved self awareness

Participants spoke of becoming more aware that everyone has different personalities which enabled them to ‘see things from other people’s perspectives and not to take offence’. Participants spoke of feeling valued from attending the programme which was clearly demonstrated by one comment ‘it is great to feel we are worth it.’
Communication Skills
Feedback demonstrated that participants felt more assertive, had clearer communication skills and felt they were better equipped to deal with conflict.

Team Work
The experiential session on team work supported participants to value the ‘Importance of being a good team member’ while also reiterating the need to not only see themselves as leaders but to encourage team members to do so too.

Q5. What impact has the programme had on you professionally?

The main themes that emerged were:

Insight:
There was an increased awareness that is important to understand where other people are coming from and that everyone thinks and works differently. There was a feeling that other colleagues may not always understand why someone would attend a leadership programme as there seems to be a perception that it could lead to more work or having to undertake a management role.

Prior to the programme some participants would have been reluctant to say they were attending the programme in case it was met with a negative response. However having done the programme, these participants became aware that it is extremely positive to undertake professional development and they will actively encourage colleagues to avail of opportunities to do so.

Opportunities
Feedback demonstrated that the programme had created opportunities for the group. They spoke of feeling more prepared to engage with the competency based application and interview process for other posts. The programme provided clarity for some in relation to their career pathway. Some participants identified that they ‘would not find public speaking easy’ but presenting on the forum day in front of the Director of Nursing gave them an opportunity to demonstrate their learning and ‘put themselves out there’.

6. What supports do you need now?

Participants would like further training in areas such as interview training, advocacy, self awareness and confidence building.

7. Would you recommend the programme to others?

Yes
Recommendations

1. Change the name of the programme
In reviewing the feedback and from engaging with members of the steering committee and programme facilitators, it is evident that the name of the programme needed to change. Having requested suggestions from programme participants and key stakeholders, the programme will be renamed as ‘Empowering Self and Others: A Foundation Programme in Clinical Leadership’

2. Change the names of the sessions
In light of the feedback, the content, design and delivery of the programme will remain the same. However, in order to engage potential participants, the names of each session will be changed as follows:

<table>
<thead>
<tr>
<th>From</th>
<th>To</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self Awareness –</td>
<td>‘Let it begin with me’</td>
</tr>
<tr>
<td>Communication –</td>
<td>‘Effective engagement with others’</td>
</tr>
<tr>
<td>Team Work –</td>
<td>‘Working together for optimal performance’</td>
</tr>
<tr>
<td>Decision Making –</td>
<td>‘Effective Decision Making’</td>
</tr>
<tr>
<td>Quality and Safety –</td>
<td>‘Leading Better Safer Care’</td>
</tr>
<tr>
<td>Empowerment –</td>
<td>‘Empowering Oneself and Others in HealthCare’</td>
</tr>
<tr>
<td>Advocacy –</td>
<td>‘Clinical Leaders – Advocates for all’</td>
</tr>
</tbody>
</table>

3. Provide clear information on the time and work commitment required for the WBGA when advertising the programme and build in more time during day 2 for each group to plan how they will work together to complete their WBGA

4. Allocate more time to conflict management

5. Incorporate more scenarios into each session

6. Avoid having programme during summer months

Further to this pilot, the recommendations were taken into consideration and the requested changes have been made to the programme. The name has been changed to ‘Empowering Self and Others: A Foundation Programme for Staff Nurses and Staff Midwives’ and this programme will be delivered nationally in 2018.
Appendix 1: Clinical Leadership Programme Steering Committee Members

Marie Kilduff, NLIC Leadership and Innovation Advisor
Marissa Butler, Director CNME, Galway
Hannah Kent, Assistant Director of Nursing Practice Development, UHG
Maura Loftus, Specialist Coordinator CNME, Galway
Julie Nohily, Director of Nursing, UHG
Marita Fogarty, Director of Nursing, Portiuncula University Hospital
Ursula Morgan, Director of Nursing, Roscommon University Hospital
Margaret Casey, Director of CNME, Mayo and Roscommon
Margaret Coohill, Midwifery Practice Development Co-Ordinator, UHG
Appendix 2: Participant Guidelines for undertaking the Group Work Based Activity

You are a member of a group where all members will work on the allocated competency. The following guidelines will support you to engage with your self directed learning and prepare for your feedback on Day 3 of your programme.

Self Directed Learning:

1. Please access the CLCeP and choose your allocated competency
2. Assess yourself in relation to that competency and use this assessment process to identify your strengths and the areas you require development in
3. Access and complete the formal learning presentation on the allocated competency
4. In the plan stage, identify goals that will support you in the areas that you require development
5. Choose a goal that is SMART in relation to the time frame you have to complete this process
6. Use one of the work based activity templates from the competency to support you to achieve your goal
   Please note you can do this on your own or with members of your group. You are required to complete the template and bring it with you on Day 3
7. During this period, participants should use the opportunity to reflect on their own personal and professional development and record these reflections in your journals
8. Your group will nominate a link person who can contact an identified facilitator should you require support during the period of self directed learning

Feedback:

On Day 3, your group will provide feedback under the following headings:

a) What was the key learning for the group from attending the programme on day one and day two (max of 4 points)

b) What was the experience of the group in engaging with their allocated work based group activity development

c) What was the experience of the group in using their workplace activities in relation to their own learning and the impact on others (staff, service users etc)

d) What were the opportunities (max 4) and challenges (max 4) that arose from undertaking the programme and engaging in self directed learning

e) What will the individuals/group change in their role following this programme?
References


