Evaluation of the AHCS Practice Educator Programme 4: Leading Workforce Change

October 2023 – April 2024

The programme

- A national programme for pathology health care scientists in education or workforce development roles.

- Informed by 2 previous PEP evaluations in collaboration with programme alumni - healthcare scientists and educators

- A 7 month online programme. Comprising 5 workshop days, three ½ day action learning sets, self directed learning trios and a final colloquium - presenting the achievements of the participants

Why the need for a programme?

A skills/competency-based approach to workforce planning was needed to focus on the existing workforce:

- Tackling shortages

- Changing requirements (modernised and automated ways of working)

- Moving away from professional silos (transferable roles and flexible ways of working)

- Managing demand (right test, right place, right time)

The policy drivers

- Long term Biomedical scientist workforce plan (2023) IBMS

- Recovery and renewal – Report of the independent review of diagnostic services for NHSE (Richard's review 2020)

- Pathology Annual Data Review

- NHS Long Term Workforce Plan (2023) which plans to

  - increase training places for healthcare scientists by 13% to more than 850 places by 2028/29, resulting in an increase training places by more than 30% to over 1,000 places by 2031/32.

Approach to evaluation

The purpose of this evaluation is to:

- Illuminate the impact of the programme for individuals and their services

- Understand which elements of the programme process, content and structure were useful in helping participants achieve their objectives

- Identify any areas for improvement in programme design

Approach continued

We conducted:

- A pre and post programme survey of participants

- A focus group discussion

- Individual interviews with two participants, and the programme commissioners (one of whom was also the manager of one of the participants)

Data were also gathered from ongoing programme reviews at the end of each module and the final colloquium.

Anticipated programme outcomes 1.

- Improvements for services and the workforce achieved through the implementation of quality improvement projects.

- A sense of individual and shared achievement.

- Increased confidence and satisfaction in role

- Increased confidence in leading and engaging others to work through change.

Anticipated programme outcomes 2.

- Increased knowledge in and ability to implement sustainable change, including sustaining the workforce.

- An expanded professional network with the skills to develop and grow it

- A vibrant community of practice to sustain and nurture the group and their thinking beyond the life of the programme.

Programme facilitators

The programme was delivered by:

• Leadership development facilitators – core AHCS faculty facilitated the workshops and action learning sets

• Senior healthcare scientists – guest speakers focused on wider strategic direction of the workforce, presented live case studies of change management and their own professional trajectories

Programme Content

- Understanding self and others. Understanding and developing their own leadership style

- Engaging and influencing stakeholders across the system

- Models and tools for leading quality improvement and change projects

- Networking for development and change

Introduced and worked with through:- presentations, experiential activities, application to live material, reflection, critical thinking and challenge

The people

- The cohort was recruited from across the regions by the two practice educators instrumental in initiating the programme

- 14 people were recruited from 6 regions.

- The person from East of England withdrew for personal reasons.

- No-one was recruited from NE & Yorkshire.

London	4
South West	4
South East	3
Midlands	1
North West	1
Cohort completing the programme	13

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Bands and Job Title	
Senior Biomedical Scientist	7
Senior Biomedical Scientist	7
Operations Manager & Training Officer	Not given
Microbiology Lab Manager & Network Practice Educator	Not given
Programme Lead – Workforce development	8a
Advanced BMS, Training Manager & Practice Educator	8b
Haemostasis Lead	8a
Specialist BMS & Leading Training Officer	6
Pathology Practice Education Facilitator	7
Pathology Network Education Trainer	7
Training Manager & Pathology Network Education Trainer	7
Pathology Network Education Trainer	7
Cellular Pathology Training & Development Manager	Not given
Pathology Education Facilitator	7

We asked the cohort at the start of the programme what they hoped for

- To build confidence
- To be able to lead and manage improvement projects across the system and make a difference
- To develop my personal leadership skill set
- To build my influencing skills
- To increase my networks and create opportunities to collaborate with others
- To get new ideas, and tools
- Space to deal with everyday problems

What the cohort reported at the end 1.

- Increased confidence. This came up time and again. Participants felt better able to:

  - Speak up - *I never used to speak in meetings and now I do.*
  - Enable others to speak up
  - Engage others both within and across teams
  - Approach and tackle more challenging issues
  - Reduce imposter syndrome

- Better appreciation of different perspectives

  - How to pitch ideas differently to engage different people
  - How to enable others to speak up, to get everyone's views
  - More aware of other people's differences, more compassionate
  - Looking at situations in new ways

What the cohort reported at the end 2.

Teams now:

- Have had more success in achieving their goals
- Feel more inclusive
- Have better more effective meetings – within and across sites
- Are clearer about their direction of travel and how to get there
- Have a better sense of community
- More accustomed to having a voice
- More motivated

What the cohort reported at the end 3.

- Networks
    - Greater connections between ourselves therefore across the country
    - Developing and engaging with other networks
    - More confident reaching out to people - I never thought I would do this

- Practical tools and frameworks
    - Project management
    - Quality improvement
    - Coaching skills
    - Influencing skills

What the cohort reported at the end 4.

- Time management

  - Better able to prioritise
  - Better at managing upwards - more able to manage my workload
  - Better at establishing boundaries
  - Better sense of accomplishment, better able to take care of my own physical and mental wellbeing

What difference it made: Projects undertaken 1

- Stream lining and merging of all Blood Transfusion Competencies

- Training program for newly registered scientists.

- Harmonisation of training structure and documentation across the two hospital sites.

- Harmonisation of training structure and documentation across 5 specialist sections at two hospital sites.

- Harmonisation of training structure and documentation across three hospital sites within Dorset to enable staff passporting. Increase training capacity

- Writing the Standard Operating Procedure and Competency for a new Electronic Patient Record system,

Projects undertaken 2

- Developing a registration portfolio school for the network, encompassing all specialties and divisions across 7 hospital sites.

- Introduction and implementation of e-competency programmes alongside coagulation training schedule

- A streamlined career map across the S4PP network, incorporating opportunities for development & progression

- Developing E-Learning content for the IBMS Cellular Pathology Specialist Diploma

- Network Training- registration portfolio out of hours school

- Scope and identify succession Planning Initiatives within the West of England Pathology Network.

A case study.

The Wellbeing Project:

Context:

A blood transfusion team. On return from maternity leave, she found 5 people had left from a team of 15. Morale was low.

She conducted a survey and did some individual interviews to understand what the issues were and found:

- Capacity and workload

- Equipment not functioning or fixed

- Exhausted

- Not really working as a team – split between staff in post for a while, newer staff

- Culture of negativity

- Experienced staff were least satisfied with the status quo

Changes made

- Introduce new staff member between 2pm to 10pm
- Fixed some of the broken things
- Include positive achievements in the daily huddles
- Daily walks around the hospital in breaks – get to know each other and the hospital
- Shared lunches with a story about the food you bring
- Charity events organised
- Wellbeing bulletin board – announcing successes
- Reintroduction of Harvey Lab tours where children or teenagers with long term conditions have a tour of the lab to see how their blood is tested.
- Competencies reviewed and streamlined

What next?

- These have been reported as welcome and positive changes.

- Intends to undertake another survey

- No one else has left

- Working on how to embed these activities as business as usual across both sites. This is challenging.

Survey results

The following three slides give the pre and post programme survey responses in relation to some of the programme objectives.

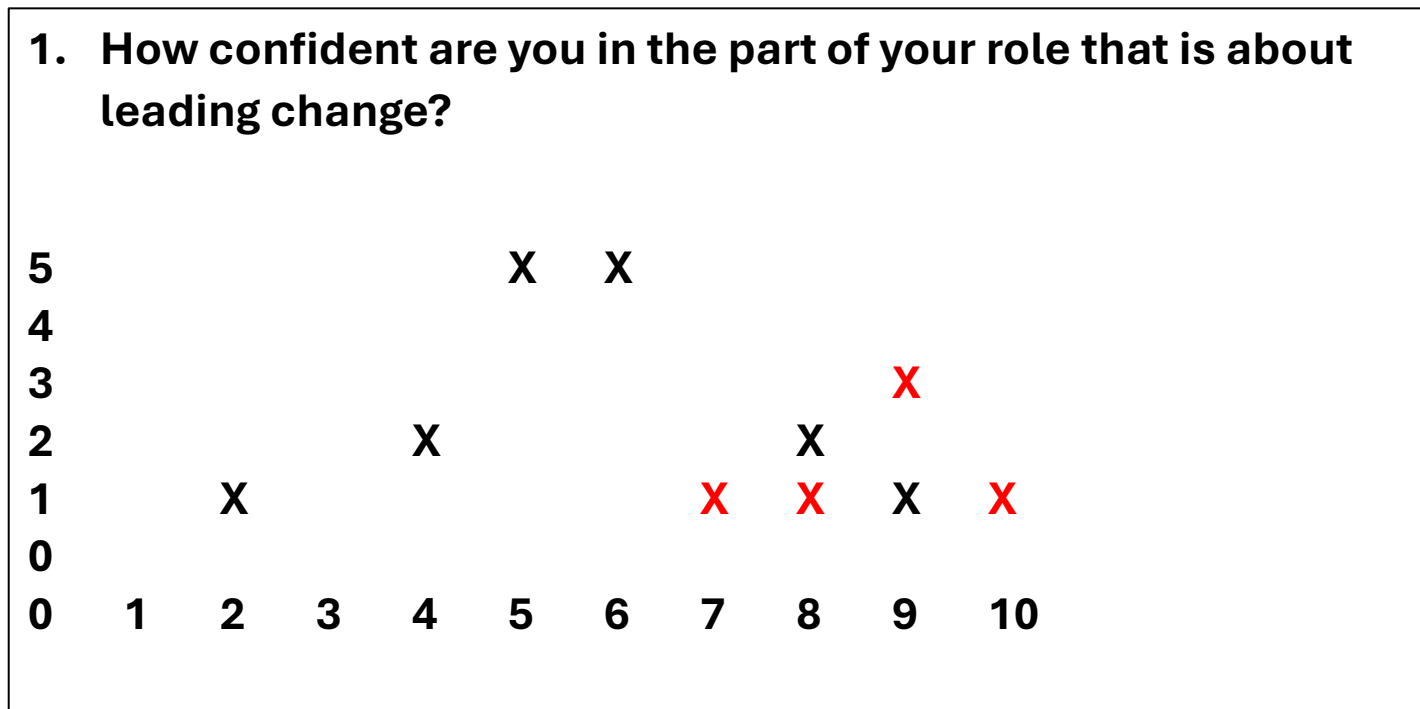16 people completed the pre programme survey

13 completed the programme

6 people completed the post programme survey

On the scales below **1** is *very unconfident* and **10** is *very confident*

The vertical scale is the number of people giving that score.

The black crosses are before the programme
The red crosses after the programme

1. How confident are you in the part of your role that is about leading change?

```
5                       X   X
4
3                                           X
2               X                   X
1           X                   X   X   X   X
0
    0   1   2   3   4   5   6   7   8   9   10
```

On the scales below **1** is *very unconfident* and **10** is *very confident*

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2. **How confident do you feel leading a Quality Improvement project?**

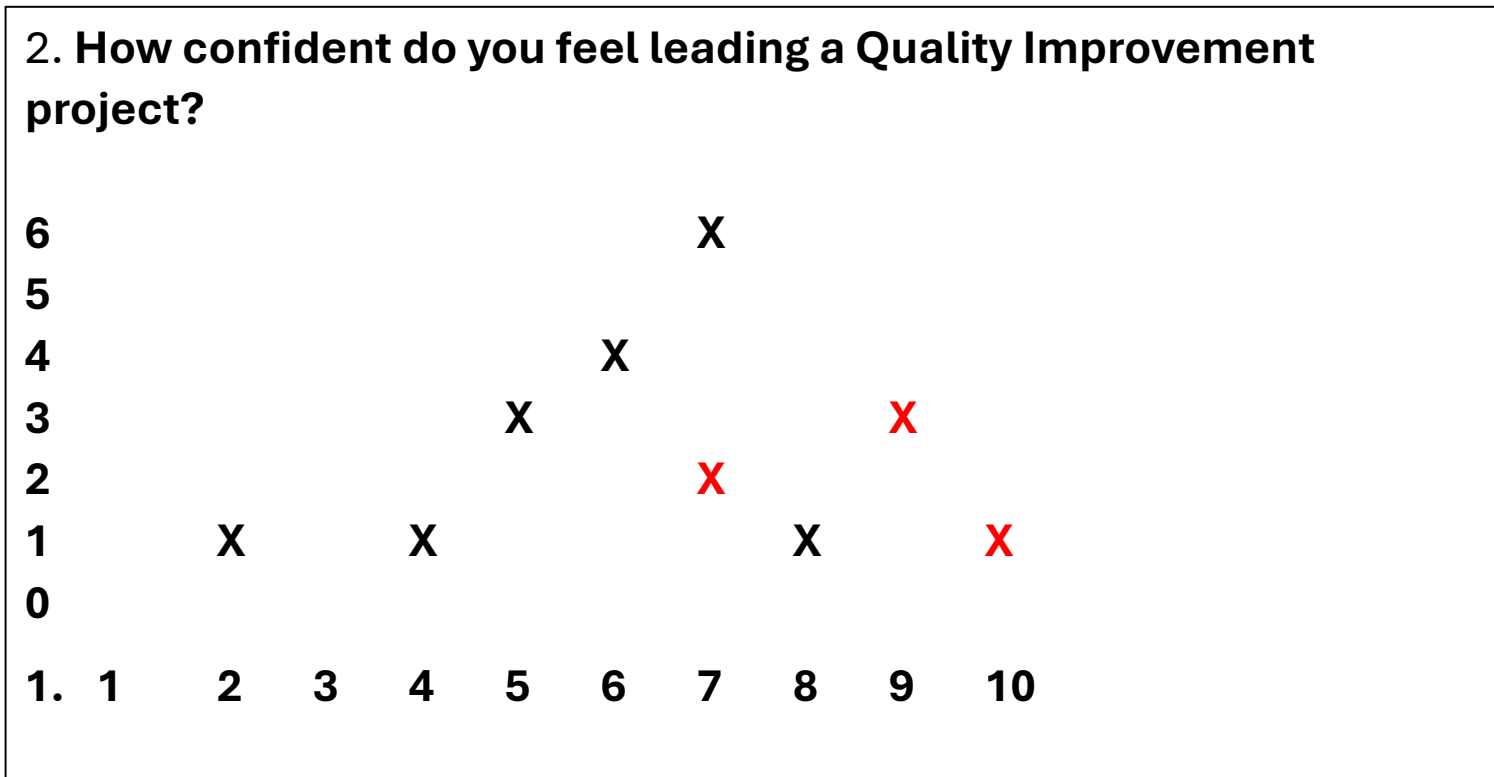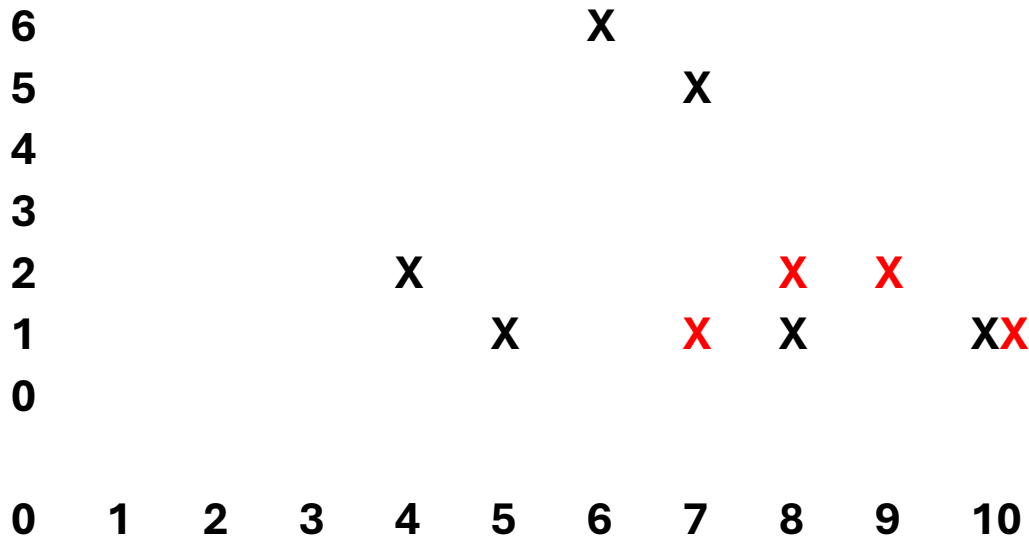|										
6							X			
5										
4						X				
3					X				X	
2							X			
1		X		X				X		X
0										
1.	1	2	3	4	5	6	7	8	9	10

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3. **How confident do you feel in engaging others in the project?**

6						X				
5						X				
4										
3										
2				X				X	X	
1					X		X	X		XX
0										
0	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**

What managers have observed 1:

- an increased skill set and knowledge regarding workforce development

- a significant increase in self-confidence and assertiveness, the ability to set boundaries

- commitment and skills to bring about a positive culture change

- high levels of self-motivation and self-belief

What managers have observed 2:

- Courage to 'speak up' and challenge status quo

- Innovation regarding inclusivity and valuing staff

- the ability to utilise and share practice quickly with an expanded national network of pathology HCS

- Strategic thinking

- Identification of different stakeholders, tailoring communication to their specific needs

What aspects of the programme enabled the positive changes?

- Excellent facilitation – felt heard, taken seriously, enabled us to contribute

- Raising their own self-awareness

- Meeting others facing similar challenges, sharing ideas

- Time away from the workplace to meet, discuss, think, reflect and learn together

- Introduction of practical tools / frameworks

- Small group discussions

- Action Learning – very valuable. Helped bring it all together

What could be improved?

- More time to plan and prepare for the colloquium

- Have the rehearsal colloquium before the actual event - not the morning before

- Use previous case studies as examples of what previous cohorts have achieved

- Ensure people are aware beforehand of the commitment required e.g. time for thinking partners

- It would be good to have a certificate for CPD