# Evaluation of the NHS Leadership Academy Intersect Systems Leadership programme – Findings Across Cohorts 1 and 3

Karen Shawhan, Alan Boyd, Adrian Nelson

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## About the Authors

**Karen Shawhan, Associate Lecturer, Alliance Manchester Business School, University of Manchester**

Karen has significant experience in NHS management, consultancy, project management, leadership and role evaluation, and teaching and development, including being a tutor on the Elizabeth Garret Anderson Programme. Karen recently evaluated a Vanguard project utilising 'blended learning' and 'flipped classroom' methodology, to develop advanced practitioners, and is also involved in the evaluation of the Mary Seacole Programme – Local with colleagues at Alliance Manchester Business School. She also has significant experience of working with senior teams in developing solutions to 'wicked' problems within the NHS, and has worked with NHS providers, social care, independent providers and third sector providers in an organisational consultancy role.

**Alan Boyd, Research Fellow in Healthcare and Public Sector Management, Alliance Manchester Business School, University of Manchester**
Email: alan.boyd@manchester.ac.uk

Alan leads the research team from Alliance Manchester Business School that is evaluating the Intersect Programme. He has been involved in conducting a number of evaluations, including an evaluation of a large scale regional capacity building programme for local authority staff and councillors, and a national evaluation of health scrutiny committees. Alan has experience of working in healthcare and social care and the voluntary sector and has expertise in systems approaches to problem structuring.

**Dr Adrian Nelson, Lecturer in Healthcare Management, Alliance Manchester Business School, University of Manchester**

Adrian is an organisational psychologist with particular interest and experience in designing evaluations of training and development programmes and in the development of psychometric tools and surveys. Adrian has an in-depth knowledge of the Group Relations approach, having been a member of the professional staff of the Tavistock Institute between 1999 and 2005. During this time he led an evaluation of a 'cross-boundary' management development programme which examined the effectiveness of Group Relations approaches in improving cross-sector working between health and social care across Hertfordshire Health Economy.

## Acknowledgements

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## Executive Summary

This report describes the findings of the final part of an independent evaluation by researchers from Alliance Manchester Business School of the NHS Leadership Academy's Intersect Programme, which aims to develop systems leadership capability among public sector leaders.

The focus of this evaluation was to explore any similarities and differences in the experiences of Cohort 3, and the impact of the programme compared with Cohort 1, which are described in our earlier evaluations.

Our approach to this final evaluation was purely qualitative: we undertook nine semi-structured telephone interviews.  Our interview sample was informed by the demographic profile of the cohort overall, with the majority of participants from an NHS background, female, white British, and in senior leadership roles.  The approach to selection for the programme itself was not examined in detail, however, the evaluation team did identify potential for compounding any indirect bias already present amongst the public sector senior leader population.

Since Cohort 1, a charging structure for the programme was introduced and we explored if this had any impact on Cohort 3 participants; overall whilst there was some awareness of this, the impact in respect of expectations from participants and sponsoring organisations did not appear to be important.  It is possible however that the charging arrangement may compound difficulties for senior leaders from non-NHS backgrounds from accessing the programme, although the charging structure included bursaries for such applicants.

The Faculty Team changed from four faculty members to three from Cohort 1 to 2, and stayed the same for the delivery of Cohort 3.  The Faculty Team reported an evolution in their approach to the delivery of the programme, which whilst remaining faithful to the underpinning psychoanalytical and phenomenological perspectives, was described as more compassionate and supportive.

Participants from Cohort 3 had very similar experiences to those in Cohort 1, with accounts of personal transformation which spanned all aspects of themselves, enriching their personal as well as professional lives.  The personal transformation

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was evident with increases in being emotionally and psychologically present, self-awareness, and ability to regulate one's own emotional responses, all of which led to an improvement in self-confidence. The overall impact from a leadership perspective was a reported ability to engage and improve the quality of relationships, and to respond and manage positively diversity and difference. The personal transformative effect was not present in all accounts, and one account contrasted significantly from others, illustrating the need for the programme's methods to be thoroughly explained, and the importance of having a number of ways to provide pastoral care and support.

The role of the community of Intersect participants continued to be significant for the majority of participants, although to varying degrees. In this evaluation, the faculty's role as part of the Intersect community appeared to be more significant.

There are some limitations to the evaluation in that the context in which systems leaders are working was not explored. Secondly, the evaluation team managed a degree of tension between the theoretical perspective of the faculty team and that of the programme facilitators, in order to produce findings that may be more generalisable more widely.

Overall, the impacts identified in our earlier evaluation reports are also identified in this evaluation, with a greater number of similarities identified than differences. These impacts make an important contribution to the knowledge base about how systems leadership can be developed through programmes like Intersect.

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# 1   Introduction

This report describes the findings of the final part of an independent evaluation by researchers from Alliance Manchester Business School of the NHS Leadership Academy's Intersect Programme, which aims to develop systems leadership capability among public sector leaders.  The findings relate to common areas of impact between Cohort 1 and Cohort 3, and observations about any contrasts.  The approach to evaluation of the Intersect Programme is somewhat unique, in that for Cohort 1, an in-depth mixed methodology evaluation was undertaken during programme delivery, with a follow-up enquiry examining longer-term impact.  This evaluation compared and contrasted findings with this earlier work; the purpose is to increase confidence about the evaluation findings and offer conclusions about the reproducibility of the programme's outcomes and highlight critical factors which influence the outcomes.  It may be helpful therefore if this report is read in conjunction with our earlier two evaluation reports[1].

In this first section of the current report we provide a very brief overview of the Intersect Programme, and discuss the findings from this smaller qualitative study, in comparison to prior evaluation findings.

## 1.1   The Intersect Programme

The Intersect Programme was a 12-month leadership development programme, offered by the NHS Leadership Academy, for a range of participants across public sector organisations[2].  The Intersect Programme was targeted at leaders across the public sector who were already in, or close to executive roles, with cross-sector experience and influence.  Individuals in such positions were believed to be best placed to lead system-wide change across sectors.  In total, three cohorts have participated in the programme, comprising of approximately 36 participants in each

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[1] The reports are available for download from
https://www.research.manchester.ac.uk/portal/en/publications/evaluation-of-the-nhs-leadership-academy-intersect-systems-leadership-programme(f337399e-9297-47e5-92ab-4f03a490adcf).html and
https://www.research.manchester.ac.uk/portal/en/publications/evaluation-of-the-nhs-leadership-academy-intersect-systems-leadership-programme(f4d14a4a-e574-40b7-a9ca-d285c29154d3).html

[2] https://www.leadershipacademy.nhs.uk/wp-content/uploads/2014/10/NHS_Leadership-Academy_FAQ_A4_Download.pdf

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cohort.  The programme consisted of 5 or 6 residential modules, and ongoing dialogue through a virtual community space.  Applicants were selected by the Faculty Team through application and interview.   Cohort 1 were able to enrol on the programme without any cost to themselves or their sponsoring organisation but there were charges for Cohort 3: the full charge was £9,000, with a subsidised price of £4,800 for participants from the NHS, public and third sectors; some bursaries were also offered.

The programme offer was a developmental experience for 'systems leaders', drawing on the evidence about the need for systems leadership.[3] Systems leadership is considered to be highly relevant to working upon complex and ambiguous problems within a context of scarcity and uncertainty, which characterises contemporary public sector services[4].

There were 35 participants on the third cohort of the Intersect Programme, which can accommodate up to 40 participants.   There were five residential modules, interspersed with on-line content and (asynchronous) dialogue, and the opportunity to meet with faculty on a 1-1 basis (this is an added feature from Cohort 1).

The Intersect Faculty team's theoretical approach is from a phenomenological perspective.  Leadership development from a phenomenological perspective can be differentiated from other approaches to leadership development.  The following distinction is made by American academics who developed a leadership development programme for armed forces personnel, based on a phenomenological perspective.  They describe this kind of leadership development as 'being on the court', that is, fully experiencing the leadership challenges within the boundaries of a programme[5]:

> "Leader and leadership can be taught employing either of two possible
> methods for providing students with *access* to what it is to be a leader and

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[3] Welbourne D, Warwick R, Carnall C and Fathers D (2012). *Leadership of whole systems.* London: The King's Fund.

[4] Needham, C. and Mangan, C.  (2014) *The 21st Century Public Servant,* University of Birmingham.

[5] Erhard , W., Jensen, M. And Granger, K.  (2013) Creating Leaders: An Ontological/Phenomenological Model. *Harvard Business School Negotiation, Organizations and Markets Research Papers, Harvard Nom Unit Research Paper No. 11-037*

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what it is to exercise leadership effectively. The *being* of being a leader and the *actions* of the effective exercise of leadership can be accessed and taught either 1) "as being and action are lived and experienced *on the court*", or 2) "as being and action are observed and commented on *from the stands*". Specifically, "from the stands" is to access, research and teach what it is to be a leader and what it is to exercise leadership effectively as these are *observed by someone, and then described, interpreted and explained* (third-person theory of). By contrast, "on the court" is to access, research and teach what it is to be a leader and what it is to exercise leadership effectively as these are *actually lived* (first-person experience of)." (Erhard, Jensen, and Granger, 2013)

The 'lived experience' of the Intersect Programme was created by mirroring social structures in wider society and inter-organisational working, through creating a wider learning community, within which there are smaller groups, based on the Group Relations theoretical perspective[6].  This was explained in the Programme Handbook:

> "The membership of the programme itself is also a learning vehicle. We learn as much from the **process** as from the **content**; from how we take up and do tasks as from the purpose of doing the task itself. This community of leader-learners will, in many ways, replicate the various tensions, relationships and challenges that exist across the systems that provide health and care in our society. We will use the membership to explore inter- and intra-organisational/sector dynamics with a view to enhancing ways of managing these more productively in the real world." (Intersect Programme Handbook 2016/2017, NHS Leadership Academy, pg 4.)

The faculty maintained firm boundaries of role, time and space through their facilitation of the programme, and the community was presented with a series of experiences and/or content that provides the opportunity to interact with others. Commentary and reflective narrative, at individual and group level, focuses on

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[6] Shapiro. E and Carr, W. (2012)  An Introduction to Tavistock-Style Group Relations Conference Learning. *Organisational & Social Dynamics* 12(1) 70c80.

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interpersonal and intrapersonal dynamics; insights into one's individual impact, and as a result contributes to growing self-awareness and insights, leading to personal transformation.

## 2   Evaluation Aims

Building on the extensive mixed methodology evaluation of Cohort 1[7], this focused final part of the evaluation aimed to explore and compare the experiences of Cohort 3, with the earlier evaluation findings.

The main qualitative findings from the initial study, and the follow-up study exploring longer term impact identified the following areas as key features of the Intersect experience:

- Engaging effectively in inter-organisational systems
- Improvements in self-confidence
- Improved relationships within the system
- Improved self-awareness through reflection, and reflexive capacity
- Valuing diversity and difference

The longer term impact evaluation[8] indicated these positive effects were sustained over time, with a particular focus on the ability to establish and maintain high quality relationships within and across the participants' systems. Participants spoke positively regarding their Intersect experience and for some, there were ongoing connections with their Intersect community specifically.

Based on our understanding of the programme, the following evaluation questions were devised:

- What was the demographic profile of Cohort 3?
- How did this compare to the demographic profile of the other two cohorts?

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[7] The report is available for download from
https://www.research.manchester.ac.uk/portal/en/publications/evaluation-of-the-nhsleadership-academy-intersect-systems-leadership-programme(f4d14a4a-e574-40b7-a9cad285c29154d3).html

[8] The report is available for download from
https://www.research.manchester.ac.uk/portal/en/publications/evaluation-of-the-nhs-leadership-academy-intersect-systems-leadership-programme(f337399e-9297-47e5-92ab-4f03a490adcf).html

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- How did the experiences of Cohort 3 relate to those of Cohort 1?

- What was the nature of their experiences?

- Were the same impacts experienced?

- What were the reflections from the faculty on any differences in the programme's content and process?

# 3  Methods

Evaluation data was collected at one point in time only, three months after the programme concluded.  Participants were emailed by the Programme Administrator to request their participation and a Participation Information Sheet was provided (Appendix 1).

All participants who were asked to participate in the evaluation agreed to take part, and in total, 9 participants were interviewed.  The three members of the Faculty Team were interviewed as a group, and this was recorded and transcribed in the same way.  The purpose of the faculty interview was to uncover differences in the programme between Cohorts 1, 2 and 3, either in content or process, any additions to the underpinning theory of the programme, reflections on the mix of participants across the three cohorts, changes in the wider public sector systems and how they may connect to the programme, and any learning and reflections from the faculty team.  The interview schedules are in Appendix 2 and 3 respectively.

## 3.1  Semi-structured Interviews

The interviews were semi-structured, with participants given the opportunity to relate actual examples of personal impact from the programme.  The interview approach was purposely open to capture the richness of experience, informed by the phenomenological design of the programme.  The focus of the interviews was to explore the participant's role and associated leadership challenges, the process and impact of funding arrangements to obtain a place on the programme, experience and insight into personal impact and/or transformation attributable to the programme, and the role of the Intersect community.

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All interviews were conducted by telephone and recorded verbatim then transcribed for the purposes of analysis.  Transcripts were anonymised and analysis was supported by using a qualitative software package[9].

## 3.2  Analysis

The transcripts were thematically analysed[10], using a flexible approach more suited to real-world evaluations.  A theme can be described as

"repeated patterns of meaning" (Braun and Clark, 2006, pg 15)[11]

and includes semantic and latent themes.  Semantic themes can be described as 'surface' themes and relate to the literal meaning of the word/term used whereas latent themes are more concerned at sense-making the underlying assumptions, beliefs, values and concepts.  An initial analysis of themes was converged to create more easily differentiated themes, with each theme labelled and an associate description written.  The final set of themes was reviewed by the evaluation team for congruence within the overall evaluation findings, and to make final refinements.  For notation purposes throughout the report, and to protect anonymity of the participants, an identifier of P1 through to P9 is used for the 9 interviewees, and for quotations from the Faculty interview, individual members of the Faculty are not identified, as the interview reflected the views and opinions of the group as a whole.

## 3.3  Ethical Practice

The study is an evaluation of a leadership programme and therefore does not constitute formal research, requiring formal approval processes.  The evaluation team's ethical approach is evident in how the study was conducted:

- A comprehensive Participant Information Sheet was provided to all potential participants
- All participants gave their consent to interview, and for their data to be transcribed

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[9] Dedoose Version **8.0.35**, web application for managing, analyzing, and presenting qualitative and mixed method research data *(2018)*. Los Angeles, CA: SocioCultural Research Consultants, LLC www.dedoose.com.

[10] drawing on the approach of Braun and Clark (2006)

[11] Braun, V. and Clarke, V. (2006) Using thematic analysis in psychology. *Qualitative Research in Psychology,* 3 (2). pp. 77-101.

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- Participants were informed verbally and in writing that quotations may be used for illustrative purposes in reports, but these would not be attributable to any individual

- Where it was possible that a quotation could indicate the identity of the participant, but the evaluation team felt it imperative to include, consent from the participant was sought

- Where any content of the interviews needed to be shared with the NHS Leadership Academy, consent from the participant was sought

- A copy of the evaluation report will be available publicly for participants and any other interested parties

## 3.4  The Interviewee Sample

Selection for interview was by 'maximum variety sampling'. In this approach, interviewees are selected in order to maximise the diversity of participants and therefore, a diversity of experiences and perspectives are anticipated.

Interviews with programme participants were conducted in December 2017, so a short time had elapsed since the completion of the programme.  The interviewees were selected on the basis of their gender (Chart 1), ethnicity (Chart 2), and professional roles (Chart 3), and organisational backgrounds (Chart 4).  A description of the interviewees according to these characteristics is given in the following charts.

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### Interview Sample - Gender
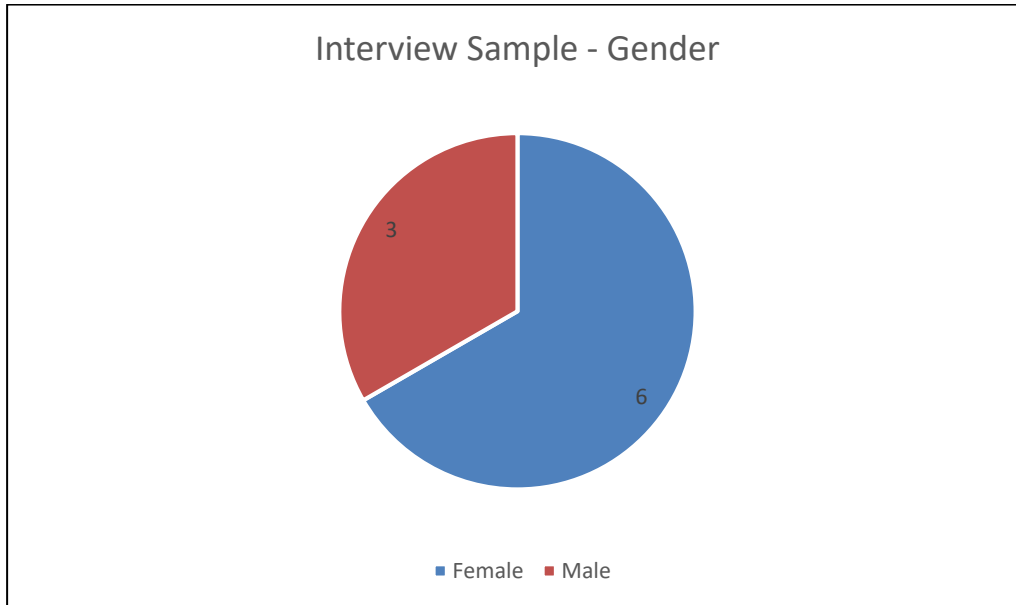
**Chart 1 showing gender mix of the Interview Sample**

### Interview Sample - Ethnicity
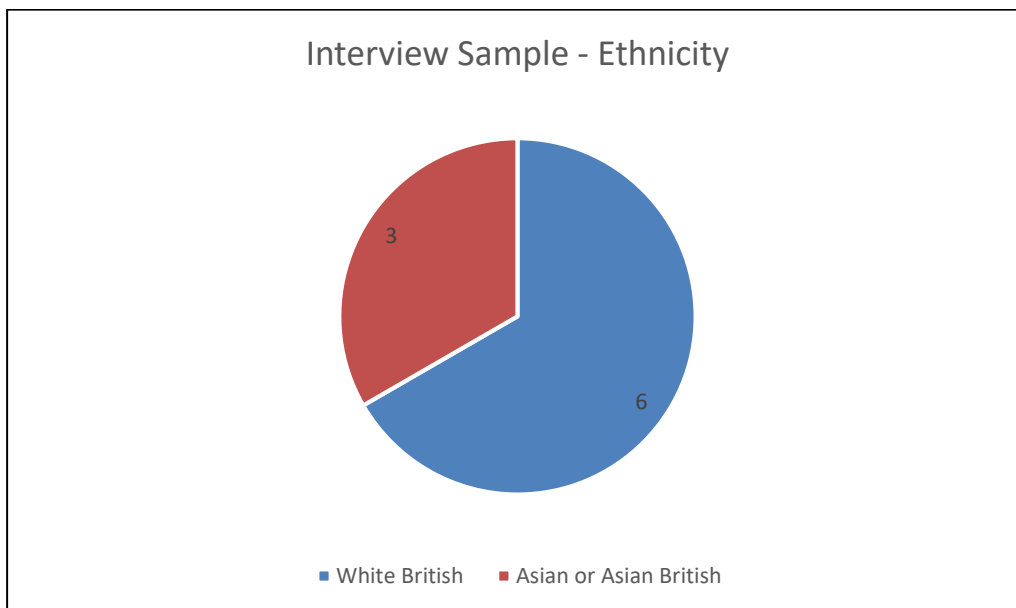
**Chart 2 showing Ethnicity of Interviewee Sample**

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**Interview Sample - Professional Roles**

- Corporate - Director
- Corporate - Admin and clerical
- Clinical - Leadership Role
- Clinical - AHP
- Other
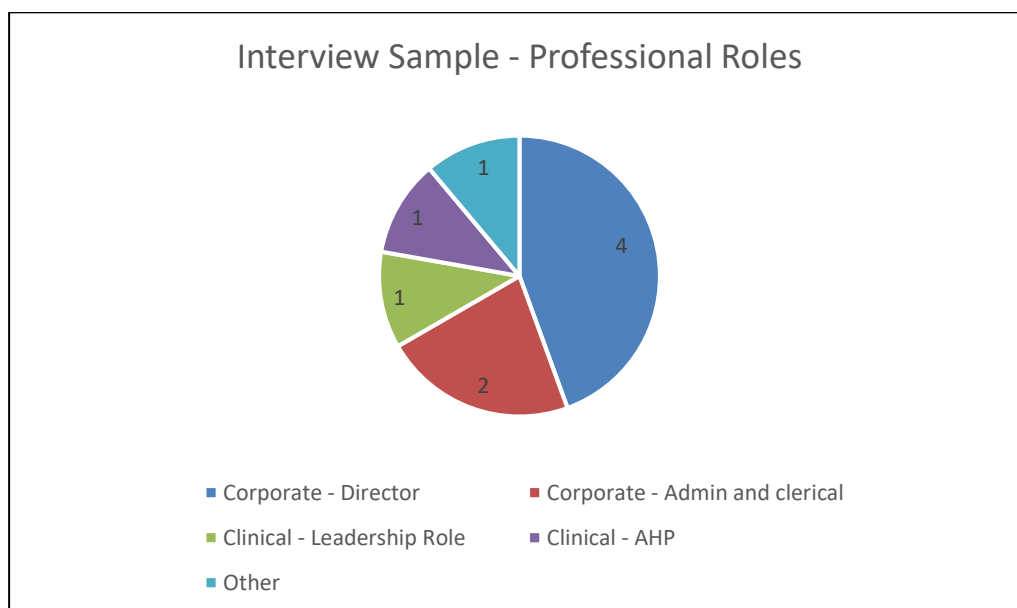
**Chart 3 showing Professional Roles of Interviewee Sample**



**Interview Sample - Organisation Backgrounds**

- NHS Trust
- Clinical Commissioning Group (CCG)
- Local Authority
- Non-NHS Organisation
- Government Department
- GP Practices in England
- Other
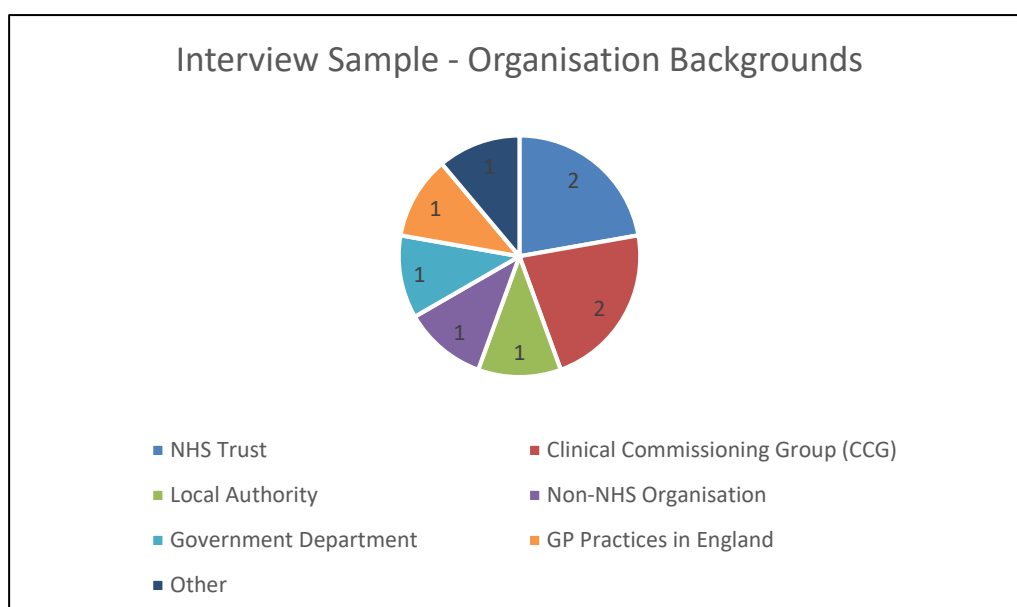
**Chart 4 showing Organisation Backgrounds of Interviewee Sample**

The gender and ethnicity breakdown of the interviewee sample broadly reflects the overall composition of the cohort and of the wider NHS workforce.

### 3.4.1  Funding Arrangement

Given the difference in funding arrangements for Cohort 3, the following chart (Chart 5) shows the different funding arrangements for the interview sample, although this was not a factor in the sampling approach.

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## Interview Sample - Funding Arrangements



Legend: ■ Full Bursary   ■ Partial Bursary   ■ Subsidised Cost
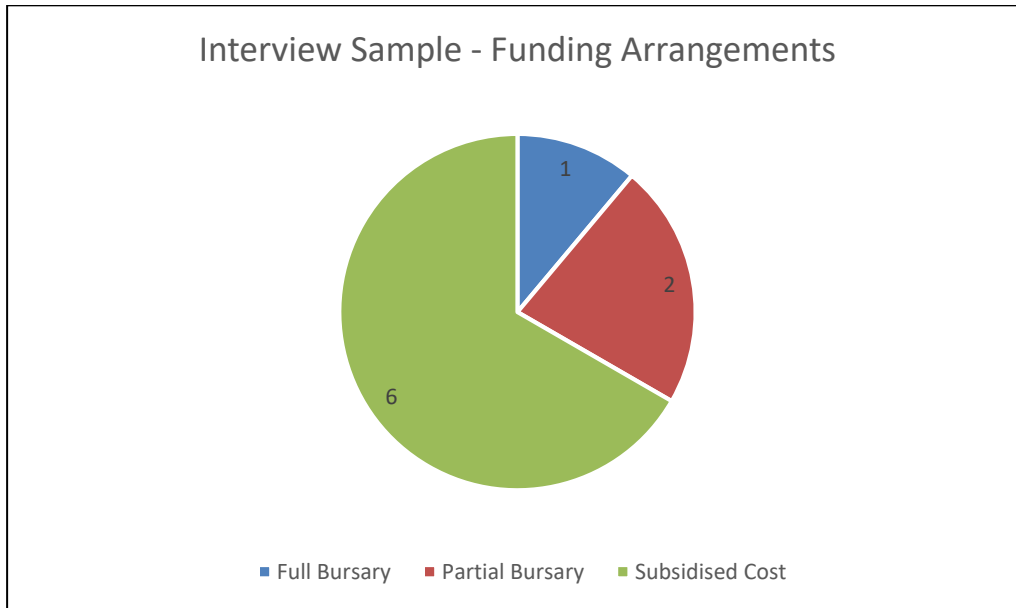
**Chart 5 showing funding arrangement for interview sample**

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# 4   Findings

## 4.1   Demographic profile of Cohort 3

The third and final cohort ran from September 2016 through to September 2018, with 35 participants from a variety of public sector backgrounds; a more detailed demographic is given below in the following charts showing gender mix (Chart 6), ethnicity (Chart 7), professional roles (Chart 8), and organisational backgrounds (Chart 9).
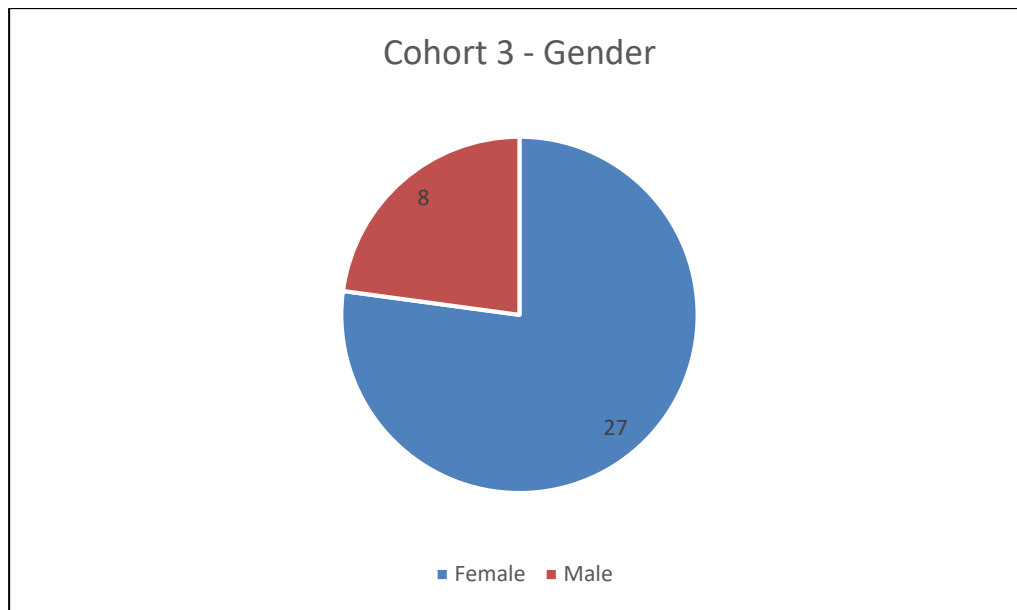


**Chart 6 showing gender mix of Cohort 3**

## Cohort 3 - Ethnicity



- Asian or Asian British
- Mixed - Black / Black British
- White British/Irish
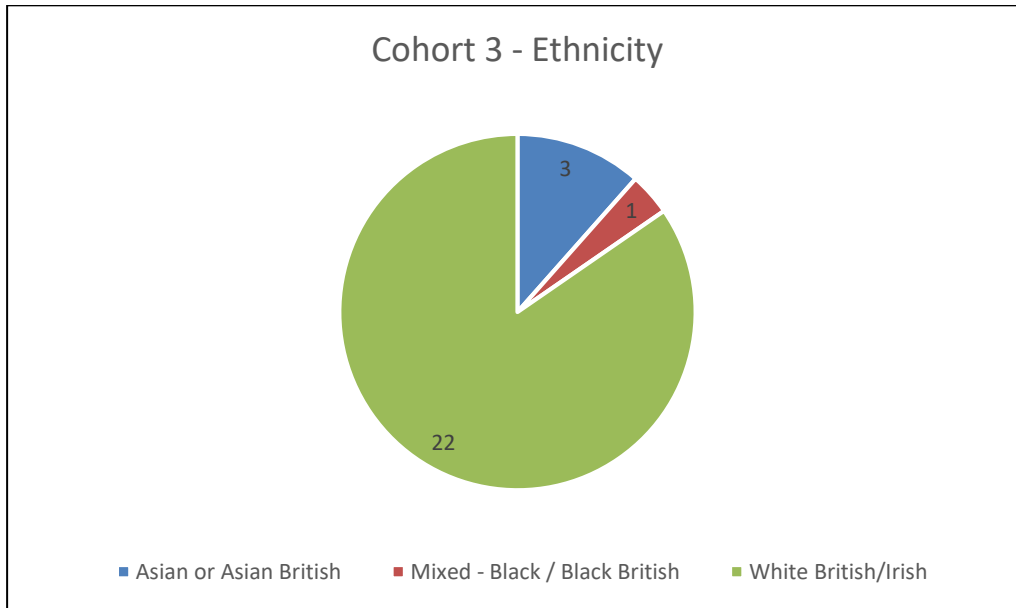
**Chart 7 showing ethnicity mix of Cohort 3**

## Cohort 3 - Professional Role
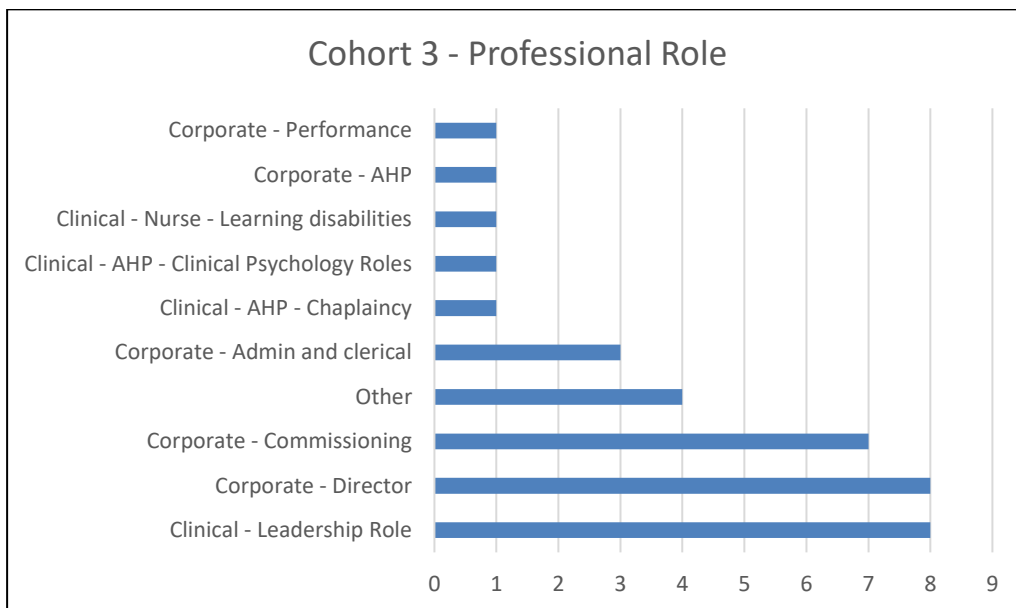


**Chart 8 showing professional roles of Cohort 3**

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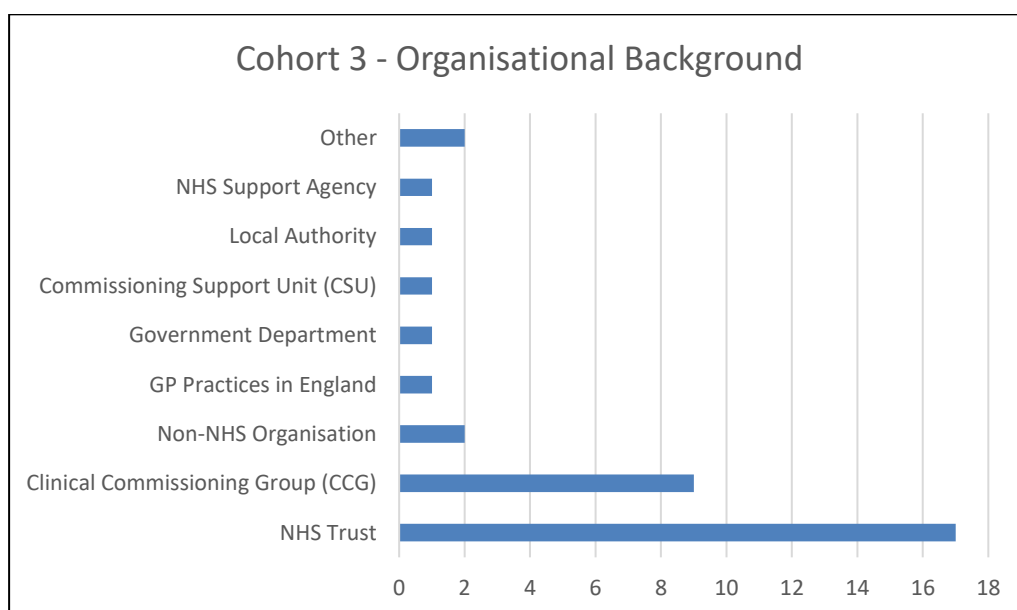
**Chart 9 showing organisational background of Cohort 3**

As reflected in the interview sample, the majority of participants were white British, female, and from a variety of organisations in the NHS.  Many of the participants were in senior roles, with a mix of clinical and non-clinical roles.  Cohort 3 had a very similar ethnicity profile to that of Cohort 1, which also had 28 white British participants, but there was a greater proportion of men in Cohort 1 (17 participants) and a greater proportion of participants from a non-NHS background (12 participants).

The programme was hosted and delivered by the NHS Leadership Academy therefore through its communication networks, it is likely that more applicants were from NHS backgrounds than non-NHS backgrounds.  The evaluation team were not made aware of any specific action to actively promote diversity within the cohort, although some applicants may have been more aware of the Intersect Programme from other leadership development programmes offered by the NHS Leadership Academy, for example the 'Ready Now' programme[12], which is targeted at senior leaders from a black, Asian and minority ethnic (BAME) background.  The

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[12] https://www.leadershipacademy.nhs.uk/programmes/the-ready-now-programme/

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recruitment approach appeared to focus on readiness to embark on a leadership programme that was highly interactive, experiential and emotionally demanding.

## 4.2  Expectations about the programme

In the first Intersect Cohort, all places were fully funded.  In the third cohort, places were either fully funded through a bursary, partially funded through a bursary or received a subsidised place.  The detailed breakdown is shown in Chart 10 below:
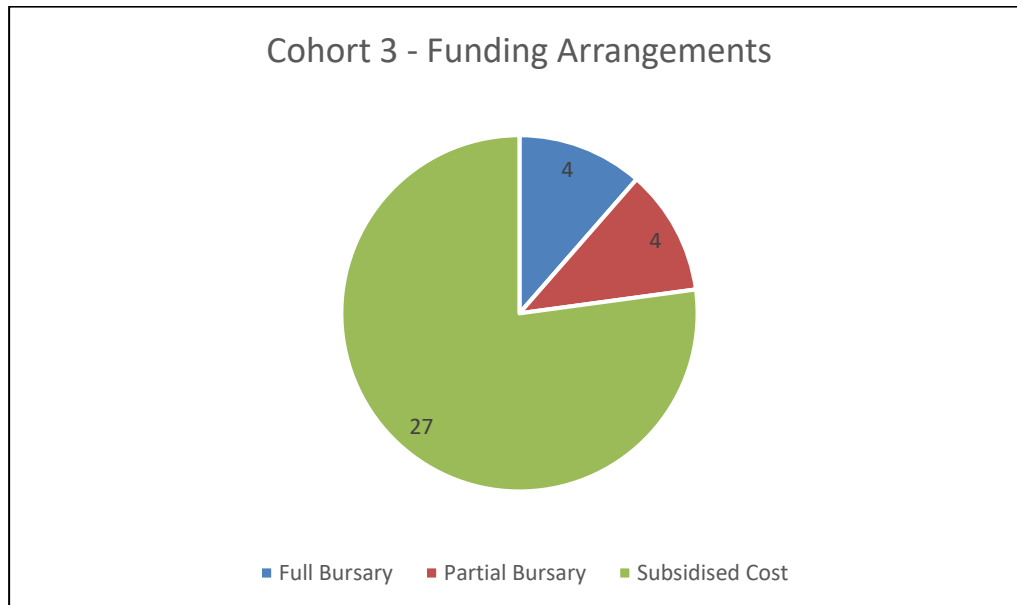


**Chart 10 showing funding arrangements for Cohort 3 participants**

Participants were asked directly what effect the funding arrangement had and this varied across the sample, from being of little or no consequence, to some implicit expectations from the sponsor (employing organisation), heightened awareness of privilege, through to anxiety regarding exiting from the programme, in a desire to avoid financial implications for the sponsor and/or participant.  Selected quotes below illustrate this range of responses:

> Little or no consequence: "*don't think it mattered, that wasn't a factor. If I think about the fact that we did it to work more influential in the process, that wasn't one of them… So yeah, I felt that the offer from the academy was very generous and enabled me to participate.*" (P4)

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Implicit expectations: "*I guess I would say there maybe were more implicit expectations, so my funding was agreed across the two organisations, so that's quite nice in itself in terms of that kind of investment across organisational boundaries" (*P8)

Heightened awareness: "*My understanding was that this was a course which itself as very costly to run and that I was very privileged to have the benefit of the bursary. Because without it there's no way I could have expected my organisation to pay more than that, given the sense of one of my major problems was a financial one."* (P9)

Anxiety about exiting the programme: "*And actually, the funding is what kept me there, the fear that I would have to pay back, £3,000, £4,000, £5,000, £6,000 whatever, because my organisation certainly wouldn't have done that. Yeah, the funding is what really was the fear factor that kept me going."* (P6)

Some participants had to undergo an internal recruitment process to secure a place on the programme, whilst others had to negotiate funding with their board.  Most participants interviewed felt the programme had been a worthwhile investment, compared to other courses and programmes on systems leadership; the value appeared to lie in the experiential nature of the programme, and the resulting personal transformations.  One participant noted the significant financial investment, and pondered if this did provide an equitable investment, and sufficient return on investment:

"*the challenge is the investment in that..versus..is that best value for the whole NHS. That's the bit I'm unsure about. So in terms of doing something different it's whether the monies could be used differently to reach out to more people really."* (P3)

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## 4.3   Evidence of impact in their own organisation

For some participants, they experienced a 'ripple effect'[13] of learning with their teams and colleagues, through sharing the learning from the programme; in addition to the impact of change in their leadership practice.  Two participants reported:

> "*But people have made informal comments, like maybe comments about 'Oh, I can see what you're doing here'. Because I would take back that learning to them. So for instance, we did, just for example, we had a session on a coaching model that was about how to ask important questions, what words to use, what the questions could helpfully begin with. And I took that learning to my senior team.*" (P9)

> "*Bringing it back into my organisation the principles of what I took away from the programme I'm very keen to share with my leaders so that they can have a taste of it as well. Because they'll never get the opportunity now to do the programme, but certainly through some of the things that I've experienced on it they'll get my experience of it because hopefully that will help them to be more in check with themselves so they can be a better leader.*" (P2)

## 4.4   How the programme works

Some interviewees identified pivotal moments and/or key features of the programme which had a particular and important impact, while others attributed impact to the programme as a whole.  Six of the interviewees identified specific pivotal moments, of which 8 separate incidences were described.

Of the participants who identified pivotal moments, some examples include:

> "*Module three and four for me were the most substantial.*" (P4)

> "*Our third cohort in March, so that was really, really significant.*" (P7) (Note, the interviewee uses the word 'cohort' here to mean 'residential' so the participant referring to Residential 3 within the Intersect Programme.)

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[13] Barsade, S.G. (2002) 'The ripple effect: Emotional contagion and its influence on group behavior', *Administrative Science Quarterly,* 47(4), pp. 644-675.

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> "*I think that first week for me really set a tone that actually this is about you and this is about looking at you, and I think in all my professional years I've never really took the time to think about me as a leader…think the pivotal bit for me was the lifeline exercise which is probably the most profound exercise that I've ever really done with a group of strangers, because obviously at this time we didn't really know anybody, we'd only just met.*" (P2)

For others, it was the whole programme with all its component parts that created impact:

> "*So it was a journey. I can't think there was one pivotal moment.*" (P3)

For some participants, it was the nature of the programme experience, rather than specific moments in time that was critical in creating impact:

> "*If I had to pick out a kind of element that had a particular impact, I guess it would be the group based work, so the large group sessions, the smaller group sessions, because I guess that would be one of the key elements of experiential learning in the course, so the opportunity to be in a group in a system, and to experience what happens in that system, and then also reflect on what the meaning of that is, and what we can learn from that, take from that.*" (P8)

In contrast to Cohort 1, more interviewees in Cohort 3 identified 'pivotal moments of change' as opposed to an overall impact from the whole Intersect experience; this may be an incidental finding given there does not appear to be significant changes in the programme content, or it may be that the evolution of the 'community' within Cohort 3 meant critical points in community formation coincided with particular content, which subsequently became memorable for participants.

## 4.5  The Intersect Community

The relationships developed with other participants were a key component for many participants, in respect to diversity, support and challenge, and the common 'lived experience'.  For some participants, the relationships continued beyond the programme, both as informal support and social gatherings, and this was also evident for Cohort 1.

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The relationships that developed matured through shared difficulties, not least related to diversity and difference, as one participant reflected:

> *"I think, that the respect within the community had grown a lot. I think there was far more acceptance of people's differences, and almost, to some extent, actually valuing that diversity, which I think wasn't there in the, kind of, first few days when we were all together. Because I think people were still finding out."* (P5)

However, the influence of the community aspect was not necessarily experienced by everyone to the same degree, as one participant commented:

> "*I just didn't respond in the same way. Not to say that it wasn't enjoyable and a productive learning experience for me. Not to say that there's anything about that community aspect that I found difficult or didn't enjoy. It was good and it did have a positive impact. But not to the same degree that I saw it on most people."* (P9)

One aspect of community that Cohort 3 participants commented on (much more than in Cohort 1) was the role of the faculty, who were clearly seen as part of the community. Moreover, for some, there appeared to be some emotional significance about being part of the 'last cohort' of Intersect, which appeared to heighten emotions about their experience, manifested by feelings of gratitude, and reverence of the faculty team and their skills.

> *"We were going to be the last cohort… I think that sort of sat with certainly myself and everybody else really … and equally for the facilitators who were clearly very skilled and insightful themselves and could help develop others but they wouldn't have the opportunity to come on this kind of programme again…so I think that kind of made it more special in a way, that we knew we were the last cohort, which I think has underpinned a lot of why we want to keep in touch with each other and keep the Intersect experience alive really."* (P2)

However, whilst the community aspect was a critical feature, the experience was not always positive or comfortable, reflecting the dynamics in any community:

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*"But there were some exchanges within our community, particularly in the large group exercises that I thought were unkind. Some I thought were unnecessary. But again the learning from that and the impact on me of why I was feeling how I was feeling about whatever had been said or whatever actions had been taken I found quite challenging on a personal level that I had to explore by myself; what was it about that person getting up, walking across to this other person and being quite abusive, and how I'm right to feel justified how I felt about that, should I have said something more, should I have… But then I didn't feel I needed to rescue that."* (P2)

*"Because we did have some of the negative things, like there was some sort of cliques clearly of individuals, and in terms of people coming together for the first time. We had some positive behaviours in terms of individuals wanting to get to know each other and build relationships, but you also had the competitive element."* (P3).

Relationships beyond the end of the programme were evidently strong for some, with face-to-face social gatherings, for others, there was continued engagement via social media, and for some participants, relationships had served a purpose within the confines of the programme, and were no longer pursued.

*"We are still in touch in the way that we tomorrow actually have our Christmas gathering in London, so anyone and everyone from the course has been invited, and anyone who can attend is coming along, so there's the social aspect.* (P8)

*"we've got a very large WhatsApp group that pings almost daily, so that's quite good."* (P1)

*"Has it been maintained well on a bigger scale? No, not for me. I'm part of the WhatsApp group and I hear what is going on and I see other people exchanging photographs and news and views and meeting up and all that kind of thing.  so I would say not for me personally."*  (P9)

This finding concurs with our earlier finding in Cohort 1; the community experience was significant for some as part of the wider Intersect experience although there was

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inevitable variation in the degree of significance for participants.  There was little comment or observations offered about how the community experience mirrored societal structures, although many identified with the relationships and dynamics that arose, as being typical of those within their workplaces/systems.

## 4.6  Faculty perspective

There was a change in faculty members from four facilitators in Cohort 1 to three for Cohorts 2 and 3, although each of the three facilitators were constant throughout the successive cohorts.  It is unclear whether the interests or perspectives of the faculty changed because of the fourth facilitator leaving, or occurred naturally.  This could be in relation to the content and processes of the programme, gained through familiarity with programme delivery, as well as mutual trust and confidence amongst faculty members; or it could be a combination of these factors (references were made in the Faculty interview of pre-existing working relationships).  What is evident is that in the first cohort, the faculty maintained rigid boundaries[14] between faculty and participants, and this appeared to have relaxed somewhat for Cohort 3.  Since the one member of the original faculty team left, the remaining faculty acknowledged the need for a more compassionate approach to the programme and its participants, whilst remining faithful to holding boundaries within the programme:

> "*I think we've just been more living of our humanities…I think that we more explicitly, whilst still holding very firm boundaries, but we were more explicitly about caring about the participants and creating a nurturing environment for the system and their growth.*"  (Faculty Team)

The Faculty Team referenced the influence of contemporary thinkers on the subject of spirituality[15], relating to all aspects of human nature expressed as action - '*to*

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[14] Boundaries are a characteristic of the Group Relations approach as outlined by Green and Molenkamp (2005) - Green and Molenkamp, (2005)  The BART System of Group and Organizational Analysis Boundary, Authority, Role and Task.  Version: December 2005.  Available at https://www.it.uu.se/edu/course/homepage/projektDV/ht09/BART_Green_Molenkamp.pdf date accessed 29th June 2018

[15] Rowson, (2014) Spiritualise Revitalising spirituality to address 21st century challenges.  The RSA (Royal Society for the encouragement of Arts, Manufactures and Commerce) Action and Research Centre

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*spiritualise'.* This refers to the human capacity for compassion, understanding one's own emotional responses as a vehicle to improve one's emotional connections to others; in other words, social transformation (and in this sense, transformation of the complex relationships within systems) stems from personal transformation.

The faculty team commented:

> "*So what I'm coming back to is the fundamental purpose of this programme is to help people read more, understand more, notice more about themselves and about other people so that they can manage human relationships more adeptly, so that they can become more trusting of themselves and of others. And that they communicate trustworthiness even when they go into a room because of the signals they've done on coming to terms with their own anxieties and having the benefit of facing into themselves and what they're worried about and so on.  It should make them freer as people.*" (Faculty Team)

The programme design originates from a phenomenological perspective (outlined earlier), and is therefore experiential in nature and not overly concerned with specific system leadership challenges in the participants' own areas.  This flows from the faculty's perspective on leadership development, that the focus of efforts is less about understanding systems and how they function, and how a leader is effective within this context.  Alternatively it is much more related to the rounded development of the whole person, their empathic capacity, emotional presence, awareness of interpersonal and intrapersonal dynamics, and compassion.  A member of the faculty described this approach using a sailing metaphor:

> "*Intersect is … it's like giving people a boat and telling them to sail across the sea and what they learn is how to manage currents and the winds and so on and, hopefully, they don't capsize their boat.  But because of the extraordinary difference between winds and currents and tidal conditions between different cohorts there'd be no point in measuring any of this.  All you can say at the end of it is that both cohorts the next time they go to sea will have hugely more experience of managing currents and winds and so forth than they had before they did this programme… they've learnt more about being a human being,*

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*they've learnt more about sailing themselves across the currents, and the currents are the other people and, indeed, their own internal thoughts inside them."* (Faculty Team)

This approach aligns with contemporary commentary on the nature of systems leadership, it is concerned with:

"**Re-directing attention: seeing that problems "out there" are "in here" also—and how the two are connected** | Continuing to do what we are currently doing but doing it harder or smarter is not likely to produce very different outcomes. Real change starts with recognizing that we are part of the systems we seek to change. The fear and distrust we seek to remedy also exist within us—as do the anger, sorrow, doubt, and frustration. Our actions will not become more effective until we shift the nature of the awareness and thinking behind the actions." (Senge, Hamilton, and Kania, 2015, pg 29)[16]

The faculty team also discussed how the group and community structures that are created within the Intersect programme mirror those in real life, therefore facilitating direct experiences of power, diversity and difference:

*"These are the choices that I am, therefore, choosing to make about how I will work my power differences and how I will work with the other's differences.  But we don't do that by lecturing the people and by explaining a theory of power to people, we put them in situations in which they experience themselves without their formal job roles as human beings working with other human beings or seeking to make sense and to achieve outcomes that they themselves are not always conscious of."* (Faculty Team)

## 4.7  Development of self

Participants provided insights into the personal transformative effects of the Intersect Programme, which can be described as impacting on their 'whole self', so across all psychological, social and emotional dimensions, and across the boundaries of their personal and professional personas.

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[16] Senge, P., Hamilton, H, & Kania, J.  (2015)  The Dawn of Systems Leadership.  Standford Social Innovation Review.  At https://ssir.org/articles/entry/the_dawn_of_system_leadership#

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### 4.7.1  Emotional Presence

In the earlier evaluation, emotional intelligence was quantitatively measured, and reported upon in qualitative data.  This continued to be a strong theme in Cohort 3, described in multiple ways: as being emotionally present, increased self-awareness through reflective capacity, and the development of empathic capacity.

One participant relayed,

> "*for me it had a kind of similarity around giving me a deeper understanding around the different systems that I operate in, being more aware of how other people are within those systems and about being in the room, because I can have a tendency to multitask and be out of the room quite a lot. Whereas I never had an appreciation for that before, whereas now I'm aware when I'm going out of the room emotionally or…and then I challenge myself to say why am I disengaging with this conversation?...It's just having that mindfulness time for myself just to refocus and centre where I'm at. That's something I've got from the overall programme really, and it brings a certain comfort and peace really.*" (P2)

Emotional presence, or availability, is strongly associated with emotional intelligence which has been defined as

> "the capacity of recognizing our own feelings and those of others, for motivating ourselves, and for managing emotions well in us and in our relationships" (Goleman, 1998, pg 317).[17]

### 4.7.2  Self-Awareness

The increase in self-awareness was referred to by many participants in both cohorts, and can be distinguished from emotional presence as an awareness of one's own impact on the people and circumstances a person find themselves in.  For example, a participant from Cohort 1 commented:

> "*Understanding my response to certain situations and people and unpacking it to make different decisions. So I think…and I've said this before. I think I was*

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[17] Goleman D. (1998) *Working with emotional intelligence.* New York: Bantam.

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*pretty self-aware, so I could probably tell you how I was going to respond to any given set of circumstances, but I think what Intersect did was help break down for me why and what to do with that information. So it makes you a little bit more tolerant. So I think I'm a bit more tolerant after having been on the programme.*"

Similarly, one Cohort 3 participant commented,

"*one is around a deeper understanding of myself*" (P1)

and further, another participant stated,

"*The experience was good in a way that I think these programmes are really useful when it comes to your…the learning of your inner self*" (P7).

The increased ability to notice emotions arising, and make deliberate choices about how to act can be described as reflexive capacity; this has also been described (as above) as the ability to make meaning from learning and is strongly associated with critical thinking and reflection as noted in the literature:

"it is possible to argue that a reflexive ability is central to critical reflection, in that an awareness of the influence of self and subjectivity is vital to an appreciation of how we construct and participate in constructing our world and our knowledge about that world" (Fook, White, and Gardner, 2006, pg 18) [18].

### 4.7.3  Emotional Self-Regulation

Related to emotional and psychological presence, increased self-awareness appears to be improved self-regulation, equipping participants to feel more confident about themselves as people and as a leader.  One participant commented,

"*I'm quite a direct person.  I know and understand what makes me direct, because of all the prejudices, the control, you know, everything that has, kind of, [Inaudible 00:08:20].  So now, when I realise that I'm in a situation where there is conflict, because I can feel it, or…I can either use that to be direct,*

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[18] Fook, J., White, S., Gardner, F. (2006) *Critical Reflection in Health and Social Care.*  Maidenhead: Open University Press

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*because that's the right thing to do, because I've read the room, I understand people's…I think it has enriched my emotional intelligence, more than anything else.  More than anything else in the whole world, it's enriched my emotional intelligence."*  (P1)

What also appears to be associated with self-awareness, confidence, and emotional self-regulation is growth of empathic capacity, that is a greater ability to experience and express compassion to self and others.

One participant observed,

"*I think one of the key things was actually, I've learnt to like myself a lot more, and value my own self a lot more, from this.  And it has been a lot around self-growth and self-development.  And I understand my triggers; I understand my own prejudices. "* (P1)

And another participant revealed,

"*I think the other really key thing for me has been around the importance of simply loving myself and that enabling me to love other people and be more compassionate to others around me. I think that is one major part of it, looking after myself is the most important in terms of my effectiveness in the local system."* (P3).

This connects to literature which states that the

"emotional task of the leader is primal and positions the leader as the emotional guide for the group and establishes the emotional climate of the group." (Goleman, Boyatzis, Richard and McKee, 2002, pg 77) [19]

To be such a leader, a range of personal and social competences are required, encompassing self-awareness, self-confidence, emotional self-control, empathy, and understanding relationship dynamics.  These findings concur with those in Cohort 1,

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[19] Goleman, Daniel & Boyatzis, Richard & McKee, Annie. (2002). Primal Leadership: Realizing the Power of Emotional Intelligence. Boston: The Harvard Business Review Press

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where both quantitative and qualitative evidence revealed an increase in emotional intelligence in participants.

## 4.8  The Whole Self

The nature of personal change and transformation inevitably transcends professional boundaries, and encompasses the whole self:

One participant's account captures this,

> "*It has been definitely a key sort of life changing sort of experience, and definitely in my career it's been a really key milestone in terms of clarifying what my purpose is as a leader, clarifying what the work is and also giving me the confidence to pursue that work, and yeah, I say life changing in the sense that I would say the benefits of Intersect have not only been seen at work, so I've found that after the Intersect experience, I've led a richer, more meaningful life generally, at home with my family, just in terms of my personal sense of self, and yeah, obviously that's not necessarily the focus of the programme, it's funded to make people better at work, but I guess my feeling, and whilst it's important to mention that, is I think that this is closely tied to what Intersect offers that's unique and what's different from other leadership development programmes. It's not just about kind of cognitive learning, it's also about the deeper learning about yourself, it's about becoming a more well-rounded person, and it's about using aspects of yourself that maybe previously were not emphasised at work, so yeah, not only bringing your sort of brain, your hard graft to work, but also bringing your whole self, your sensitivity, all your human qualities, that actually are essential to working well, I think.*" (P8)

Participants commented on their ability to notice, understand, and respond differently to the intrapersonal and interpersonal processes within the different group formations they experienced during the residential programmes, which illustrates the social competence identified above.

One participant relayed,

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"*So I can…the micro-body language of people I can pick up and be more sensitive to, now, and understand that it's not always about me. It's about what's going on in that; because before, I would always think, what have I done wrong? What, is it me, have I provoked them, is it something I've said, whereas now, it's actually, they will be coming out of whatever situation it is, from a very different benchmark than I will be coming out of; and it's understanding that difference between people, and allowing that to either be supported, or be allowed to play out. So it's how do I…then it's bringing people together and understanding.*" (P1).

The impact of the programme on the whole self – personally and professionally – was also noted by participants in Cohort 1, and is likely to be indicative of the phenomenological approach to leadership development; the experience is immersive, and requires connections between personal values and experiences from childhood, to enable sense-making of habitual patterns that may emerge as an adult.

## 4.9 Personal Transformation

Most participants reflected on the personal transformative effect of the programme, wherein this has positively shifted their inner perspective, and consequently, positively impacted their leadership practice. Examples of this transformative effect are illustrated by several participants:

"*In terms of impact, I think it had a tremendous impact on supporting me to look at some of the parts of my leadership which I was struggling with. And in a safe way develop strategy and some honesty. I think parts of what was going on for me in the workplace and some of the key relationships which I needed to develop and change and be realigned. And some of that was about taking some risks within that. And also having [inaudible 12:00] understand. So I think it had some tremendous impact on some key relationships.*" (P4)

"*I think the range of opportunity and experience that Intersect affords its members is almost unique really. So in terms of exposure to issues around social injustice, discriminatory practice, the challenges of life that we might not normally experience. It's almost unique and impressively so. And I think in*

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*conjunction with the quality of the faculty it makes it a very important opportunity. I consider myself very privileged to have been a part of it."* (P9)

*"You were giving out your best and giving your true inner instinct feeling at all times, so that was something which was really useful, and it was thought provoking as well, because after going through those interactions and exchanges, I need to just think over those things, why that person has said those things, but then I also used to underpin the philosophy behind that exchange as well, so I think it was a very, very useful experience being on the programme."* (P7).

It is evident that the impact seen in Cohort 1 participants is also manifested in Cohort 3 participants: personal transformation is evident from all participants, although there are differences in how this is experienced – inevitable in a leadership programme that has a central principle of 'lived experience', and the social construction of reality for each individual.

## 4.10 Contrasting Experience

The magnitude of personal development and change appears to have enriched the lives and leadership practice of participants.  Many participants describe the process of personal transformative change as challenging, difficult, uncomfortable, and in some instances, highly stressful – this was apparent for participants in both cohorts. Overall most participants reflected that whilst the process may have been difficult, the personal transformative gain made it worthwhile.  For one participant in Cohort 3 (P6) however, this was not the case and their account revealed a destructive experience, which had significantly impacted on their wellbeing.  This participant's account is presented separately here for a number of reasons: firstly, it is important for readers to gain a full contextual understanding of this participant's narrative; secondly, to offer a clear point of contrast to other findings and thirdly, as the participant felt unheard and unacknowledged in the validity of their experience, presenting their account in full gives 'voice' to their story.

However, the evaluation team make a clear distinction between giving 'voice' to the experience from amplification of it.  The evaluation team do not intend to make any inferences about the representativeness or broader significance of this participant's

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experience, both for Cohort 3, and for the Intersect Programme more widely.  As part of the ethical approach to the evaluation, the team alerted the NHS Leadership Academy of our preliminary findings, with the consent of the participant.  The participant has also fully consented to their transcript being used as part of the report, even if their anonymity is compromised.  P6 shared the following account:

> "*We spent most of our time divulging people's personal life stories, many of whom used Intersect as their personal therapy, which made me feel quite teary and uncomfortable actually, thinking about right now. Because I'm not very clever, I'll be honest, I'm not a very clever person, I don't really know how to play the game or play the system, or do any of these kind of things. And so all I know to do is to speak fairly honestly and learn to contain it.winds people up completely the wrong way and that we're pressing forward and moving ahead. So I don't always get it right. But my approach is not often one that's taken…received well.  And I was the outsider in my small group in Intersect, and probably in the large group, for many reasons. But we spent so much time therapising people, and I'm not a psychologist, I'm not a therapist, I'm not a psychiatrist, I don't have an academic qualification or I don't practice in mental health, for me to understand a lot of this stuff.*
>
> *And it was largely about that and it was quite uncomfortable. And I left feeling…I had a mini breakdown, I put it down…I've never experienced mental health problems in my life, or one that I've never been confident enough to explain that I have, and I can feel confident that I can say Intersect put me in that place. And there was one day on module three whereby I just stopped, my brain just stopped working, I shut down. And I physically shut down. And I remember the course tutor being so compromising to that position, whereby their stance was, well, you know, you've got to get through this yourself because you're a senior leader, you've got to be able to kind of muck on through the difficult times.*
>
> *I think what would have been useful to be able to gauge this a bit more pragmatically and objectively, and there are tools to do this I think but I don't know them very well again, probably because I don't work in organisational psychology, that sort of field, is to have had a starting point and an ending*

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*point to this course. Because I think some of the things that became very clear to me, despite it being an incredibly difficult experience, was that there are no better ways to shine a light on a person than to be sat in a room with 36 people telling you how you come across, openly, honestly, clearly, and you've got nowhere to run. And then you are forced to deal with you and how you are, and how that may impact on your role as a leader. So absolutely, there is benefit, absolutely strong benefit in that very reflective and very, I don't know, unusual experience of people being made to feel like they need to speak openly and honestly, despite the circumstances around them, and challenge people's perceptions, how they come across and what they say and how they say it.*

*So whilst there may have been some great benefits for me as an individual, to the system in which I work it's very difficult to say. And I would go so far as to say I'm now working on the STP with a couple of my services and I don't understand it any better, don't really know what to do. I don't feel any better equipped to deal with those circumstances*

*Pivotal moments?  Well, there's lots of racist behaviour, lots of inequality, lots of discussions that signal people's natural long held position of inequality. Lots of pitting against the non-white people in the room when they tried to raise concerns about being non-white.  Yeah, it was heightened to me just how…well, there was no particular pivotal moment but it heightened to me throughout those large group processes that, one, there was going to be no support for any tutor or any colleague in the room that would be forthcoming if you were struggling with that at all. Because if you are different, you are markedly different, and it's always going to be pointed out and that's your tough shit to deal with in your life.  And it came very clearly to me that if you want to work as a leader in healthcare, if you look a bit different or you are a bit different…I'm not sure it was the right message, if I'm honest. And that's what largely came through. When I think of large group now, that's what I remember, people are mostly racist, oh my God, I'm not sure I want to work in health.*

*For me, a community is where you feel safe.  And I've repeatedly mentioned today that I felt unsafe in Intersect every time I went, every day, every week.  I*

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*constantly challenged why I was there. I felt unsafe to talk, I felt unsafe to be honest, I felt unsafe to say anything negative. I felt if you had non-cultish response, that wasn't…oh, Intersect is the demigod of life that's going to change me, and look at the better person I've become already, that you were chastised.  I felt you said anything that was not in-keeping with what the tutors expected or what the rest of the group wanted.  You couldn't challenge.*

*And for me, in a community, you have conflict, you hold it, you know, you keep it together, you ultimately respect each other and trust each other. People that are feeling marginalised, you give them a…you help them, you prop them up. And we did the opposite. I found the group was abhorrent to people that were marginalised.  I found that, yes, there certainly are people that...stuff like that, who have got better jobs since they started Intersect, that's lovely, wonderful. But I just…oh, wow, for some reason it's bringing out a lot of frustration that I felt throughout the programme.  I did not feel any sense of community whatsoever, other than the fake accounts that were created to do that.*

*So, there's definitely some things that I can take incredible positivity from pragmatically, in perspective, but they don't take away my overall feelings of…my overall negative feelings in terms of the experience of the programme from many perspectives, objectively."* (P6)

The account provided by this participant demonstrates the importance of psychological safety[20], which given some of the content on challenging issues of difference and diversity, is perhaps even more important.  It is evident that the participant did not feel psychologically safe, and felt unable to alert others of her increasing needs and distress.  This account provokes the need for reflection on the approach to selection for the programme, the management of conflict within the community, and pastoral support and care during the programme and afterwards.

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[20] Kolb, A. & Kolb, D.  (2005)  Learning Styles and Learning Spaces: Enhancing Experiential Learning in Higher Education.  *Academy of Management Learning & Education*, Vol. 4, No. 2, pp. 193-212

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## 4.11 Diversity and difference

Dealing with diversity and difference in group situations is inevitably a sensitive and challenging proposition; the experiences of other participants illustrate the conflict that arose, and their responses:

One participant observed,

> "*nudging at people provoked quite a lot of debate, because the conversations that took place outside the large group, then were brought into the large group, specifically around race, and sometimes it just got to a point where we just thought, how many…this is just going to end in a terrible position, when actually, race isn't a problem here.  Everybody understands their prejudices; it's actually, it's about people not liking other people and the values that they have, rather than the fact that they're white, or they're male…And I think it became quite a…the male, white males in the room became – because we talked about the question of white men or everybody else – they actually felt a, sort of, you know, the kind of…it became quite distressing for some of them, around the fact that they were then considered as an oppressor, rather than just another person in the room.  So I think some of the gender – sorry, not the gender – some of the race stuff could have been slightly less rather than more.*" (P1)

Diversity manifested in ways other than race, from the backgrounds participants came from, with a lack of connection about the challenges faced in their systems and organisations.

One participant relayed,

> "*I'm not NHS, but I am a leader of a charity, in a charity, that some of my context was quite starkly different to the majority of other people. There were only three of us I believe who weren't NHS employees. And that at times could be a little isolating because the environment I'm working in is very different. But that was a feeling that certainly…yeah, I felt at times people couldn't connect to the context of my work environment and things. But that was inevitable because I chose to approach an NHS leader academy programme. So I was somewhat prepared for*

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*that…there is a feeling that the NHS can act a bit like an island. And it sees itself as the centre and other things are separate. And in local practice, working with commissioners and NHS providers, there's almost like the NHS and everyone else."* (P4)

# 5   General Discussion

## 5.1   Comparison of Demographic Profile

The demographic profile of Cohorts 1 and 3 were very similar with a majority of women, majority of participants from NHS backgrounds, and a minority of participants from black, Asian and minority ethnic (BAME) backgrounds.  These findings broadly reflect the overall demographic profile of the NHS and public sector:

- The current NHS workforce is 77 per cent female yet women remain under-represented at senior levels in the NHS[21] and this finding is replicated in the civil service[22] and in public sector bodies generally[23].
- There is lower representation of black, Asian and minority ethnic (BAME) backgrounds in senior roles in the NHS[24] and this is replicated in other public sector organisations[25].

Moreover, recruitment processes have been found to be discriminatory, as reported by Kline, (2014)[26]:

"The ethnicity and gender diversity of national English NHS bodies at senior level is similarly poor, with BME executives being entirely absent and women being disproportionately absent, from the Boards of NHS England, Monitor,

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[21] Sealy, R.  (no date)  NHS Women on Boards 50:50 by 2020.  University of Exeter and NHS Employers.

[22] https://www.instituteforgovernment.org.uk/explainers/gender-balance-civil-service
[23] Why are there so few women at the top? Submission to the Women and Equalities Select Committee Chartered Institute of Personnel and Development (CIPD) April 2016

[24] Kline, (2014). *The "snowy white peaks" of the NHS: a survey of discrimination in governance and leadership and the potential impact on patient care in London and England.*  Available from Middlesex University's Research Repository.

[25] Steel, (2016).  *The New View Report 2016 BAME representation in the Public Sector.*  Elevation Networks.

[26] Kline, (2014). *The "snowy white peaks" of the NHS: a survey of discrimination in governance and leadership and the potential impact on patient care in London and England.*  Available from Middlesex University's Research Repository.

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the NHS Trust Development Authority, Heath Education England, and the Professional Standards Authority. The historical trends nationally mirror those within London and display similar patterns of under-representation both within the workforce as a whole and within the governance of the NHS." (pg4)

Many reports which reflect the current demographic profile also advocate aspiration and ambition to reflect the demographic profile in the population, such that diversity and difference nourishes organisational life, and within the NHS, this leads to improvements in the quality of care[27].  The capacity for heterogeneity to stimulate thinking and create an environment where difference is valued is asserted by Nancy Kline, a thinker and writer on organisational life and leadership and personal development:

> "Diversity raises the intelligence of groups.  Homogeneity is a form of denial."[28]
> (Kline, 1999, pg 87)

The Intersect Programme has the potential to not only address issues related to diversity and difference through the leadership development itself but to do so in an environment where diversity and difference is fully represented.  This may require an active selection approach, whereby BAME leaders and potential leaders are actively sought, and/or there is a specific mix of participants in each cohort.  Further, a representative cohort may mitigate some of the difficulties experienced by participants discussed below.

## 5.2  Funding Arrangements

The impact of funding arrangements varied across participants and sponsoring organisations, although overall, it appeared to have little influence on the participants' expectations and experience of the programme, based on the interviewee sample. However, the ability to access and secure funding may have inadvertently limited the ability to include a wide range of public sector leaders in Cohort 3, where the proportion of non-NHS participants was lower.  It is noticeable that no participants

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[27] West, Dawson, and Kaur, (2015).  *Making the difference Diversity and inclusion in the NHS.*  The Kings Fund.

[28] Kline, (1999)  *Time to think*. Ward Lock: London.

paid the full fee for the programme.  Places were either subsidised (NHS participants) or supported through bursaries (non-NHS participants).  Leaders in the NHS may have easier access to leadership development through a nationally organised body (the NHS Leadership Academy) and centrally allocated budgets.  Third sector leaders traditionally have poor access to leadership development linked to smaller and leaner budgets[29] and local authority budgets have also been under severe pressure[30].  The cumulative effect may be to have compounded indirect bias in the selection approach, which resulted in less diversity within the cohorts.

## 5.3  Sharing the Learning

As with Cohort 1, several Cohort 3 participants shared their learning with colleagues in their own workplace, essentially increasing any 'return on investment' for the sponsoring organisation.  Whilst this is not a requirement of the Intersect Programme, participants may wish to consider how to share their learning, to create a 'ripple effect', increasing the overall benefit for the sponsoring organisation.

## 5.4  How the Intersect Programme Works

The nature of the experiences between Cohort 1 and 3 were very similar:

- Participants reported the experience of the Intersect Programme to be personally transformative
- The personal transformation was evident in improvements in ability to be emotionally and psychologically present, increased self-awareness, ability to regulate emotional responses more easily, and the ability to feel and demonstrate compassion
- This personal transformation resulted in reports of increased self-confidence and the ability to improve the quality of relationships

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[29] https://www.kingsfund.org.uk/publications/cascading-leadership
[30] Financial sustainability of local authorities (2018).  National Audit Office available at https://www.nao.org.uk/wp-content/uploads/2018/03/Financial-sustainabilty-of-local-authorites-2018-Summary.pdf date accessed 29th June 2018

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These findings concur across the evaluations and demonstrate a positive impact in emotional and psychological aspects, commonly associated with emotional and social intelligence, identified as a key factor in leadership development[31].

The role of the community was similar for both cohorts (although its importance varied across participants), and the immersive experience transcended personal and professional boundaries, meaning that the personal transformation had a positive influence on the quality of personal relationships in the private lives of participants; from this the 'whole person' impact of the Intersect Programme is evident.

However, the nature of the personal transformation, achieved through challenge, conflict, exploration and confrontation of diversity and difference, came at a cost, and whilst the majority of the interviewees reflected that on balance, this was worthwhile, this was not the case for all participants.  Moreover, the Group Relations approach with strict boundaries and role, can be very challenging for some participants, and this was identified in our first evaluation report:

> "Group Relations is very different to the leadership development approaches that most participants will have encountered and it was found very difficult by some participants. If the programme is to produce radical change then it must be challenging, but not so challenging that participants are alienated, and it might be that participants would benefit from more support to help them through the programme. Such support might take the form of additional information about the approach and how it might affect participants, plus emotional support. The faculty did provide materials about the Group Relations approach as the programme proceeded, but some participants might perhaps have benefitted from having a greater understanding of the theory at an earlier stage. It is hard for faculty to provide emotional support because of the particular nature of Group Relations facilitation, and this therefore falls mainly on other participants and their existing support networks. It might be that having some further dedicated support available during modules would be beneficial for participants who are finding the programme

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[31] Goleman, & Boyatzis, & McKee, (2002). Primal Leadership: Realizing the Power of Emotional Intelligence. Boston: The Harvard Business Review Press

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particularly difficult and lack appropriate support networks. Some additional support for out of module networking between participants might also enhance the emotional and other support they provide for each other. Networking with other leaders was an important motivation and benefit for participants. There was a strong sense of community among a proportion of participants, who arranged to meet up as a group after the end of the programme, and this might be built upon." (pg 55)

The contrasting account from one participant in Cohort 3 demonstrates the need to provide pastoral care. The Intersect Programme had a detrimental effect on the participant's wellbeing and self-confidence and perhaps unsurprisingly, did not appear to provide any worthwhile leadership development.

## 5.5  Role of Faculty

The Faculty's approach appeared to have evolved between Cohorts 1 and 3, as well as the composition of the faculty team changing from 4 to 3 members from Cohort 2 onwards. The Faculty Team acknowledged a more compassionate approach to participants, whilst still upholding clear psychological boundaries. This may have been in response to feedback from participants and/or from the first evaluation report.

It is also evident from Cohort 3 participants that they valued the Faculty team and recognised their inclusion on the last Intersect cohort as a unique opportunity; that this was featured for participants may reveal some possible 'transference' from the faculty team; as the faculty utilise a Group Relations approach underpinned by a psychodynamic theoretical tradition, the notion of 'transference' occurs[32]. Whilst transference and counter-transference are common occurrences when working from a psychoanalytical perspective, in this instance, the transference may have served to amplify feelings of gratitude over more negative aspects of the Intersect experience.

Finally, the role of the Faculty Team is explained in the Programme Handbook, in relation to pastoral care:

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[32] Atkins, Kellner and Linklater Becoming a psychoanalytically informed consultant in Developing Organisational Consultancy. Neumann, Kellner, Dawson-Shepherd (Eds) (1997) Routledge: London.

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"Programme design and direction.  The faculty are responsible for the design of the programme and how it runs. They meet regularly with an external supervisor throughout the period of the programme. Sometimes they share aspects of the programme process with a visiting speaker. Apart from that, anything personal you say to a faculty member will not be mentioned to anyone who is not present. They also hold a pastoral concern for your well-being." (pg 5)

The contrasting experience of one participant in Cohort 3 may mean future arrangements for pastoral care need to be reviewed and refreshed.  This is not to imply that the Faculty Team were not highly conscientious in their pastoral support, it may simply mean that other alternative arrangements are required to bolster the levels of support available.

# 6   Reflections from the Evaluation Team

Defining the theory of change underpinning a leadership development programme is critical if we are to invest in development programmes which nurture the leadership talent that public sector services require.  It does not necessarily follow that a programme designed from a phenomenological approach needs to be evaluated from a phenomenological perspective.  What is apparent from the evaluation data is that there is a convergence in findings across the qualitative and quantitative data, and across both cohorts.  Nevertheless, the qualitative data has provided rich insights into the personal transformative impact of the programme, and the stories bear testament to the developmental journeys that participants have travelled, coloured by a variety of psychological, social, emotional, and spiritual aspects.

It is virtually impossible in any kind of social inquiry (including this commissioned evaluation) to evaluate and enquire without some form of boundaries, and the faculty and evaluation teams acknowledged this as a point of potential tension.  The faculty team adopt a pure phenomenological perspective, where the individual experience of participants is paramount, and in which impact can only be understood through individual narrative accounts.  The NHS Leadership Academy however, may also be interested in findings which are generalisable and applicable to other leadership

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development programmes, in order to inform future commissioning decisions.  The evaluation team have attempted to work across these perspectives, by undertaking a real-world evaluation which captures quantifiable psychological constructs (for example, emotional intelligence) as well as appreciating and reflecting the idiopathic experience of participants.

As such, the evaluation team worked hard to hold this tension in mind whilst at the same time, being rigorous in collecting meaningful data, and providing 'space' and safe, ethical boundaries for participants to narrate their experience.  Particularly for Cohort 1 participants, some of whom were interviewed three times by the same evaluator, the interviews became a reflective space, where it was evident the participant was not just narrating their journey but also making sense of it.  The faculty team were anxious that these interview points during the development programme constituted a developmental intervention in itself, through the provision of 'space' and ensuing sense-making; this is referred to as using reflection to make meaning become learning[33].  For this reason, Cohort 3 participants were only interviewed once the programme had concluded.  From the evaluation team's perspective, the reflective space of the interviews was a necessary component to capture rich, free-flowing accounts of personal transformation.

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[33] Mezirow, J. (1990) Fostering Critical Reflection in Adulthood.  San Francisco: Jossey-Bass

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# 7 Conclusions

This report is the third and final evaluation report as part of a longitudinal evaluation study examining the impact of the Intersect Programme. Inevitably, there are some limitations to the evaluation:

I.   There was some attempt to understand the context in which participants were working in the first evaluation study. The Faculty Team's used the sailing metaphor to illustrate that an understanding of the various leadership challenges inherent in the public sector[34] was immaterial to the leadership development itself: developing leadership capacity at the individual level through experience was sufficient. However, there is an alternative view that a rich understanding of 'context' is important, as the interface between individual leadership practice and the environment is critical[35].

II.  The methodology of this final evaluation was strongly influenced by the theoretical orientation of the faculty team, drawing from a phenomenological perspective, thereby employing a purely qualitative approach; the balance of this tension between delivery and evaluation is discussed earlier. In meeting the expectations of the commissioners, and indeed the wider learning and development community, a mixed methodology including validated measures of psychological constructs may provide more insight of interest to this wider audience.

The Intersect Programme focuses on the personal and leadership development of senior leaders in the public sector, through development of the whole self, providing catalysts for personal transformation. The transformative effect is not consistently experienced by all participants, and commissioners may wish to consider pastoral support provision in future iterations of the Intersect Programme.

The programme approaches and confronts diversity and difference in a challenging and perhaps unique way, and for many participants, this results in profound personal

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[34] Welbourn, Warwick, Carnall and Fathers, (2012) *Leadership of whole Systems*. Kings Fund

[35] Hamilton, F. and Bean, C. (2005) The importance of context, beliefs and values in leadership development. Business Ethics, A European Review, October 2005, Pages 336-347

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change, ultimately having a positive impact on their workplace in their role as a 'systems leader'.  The positive transformations are seen through increase in self-awareness, self-confidence, ability to work on improving the quality of relationships (within and across their system) and work through conflict, improved capacity to reflect and practice reflexivity, actively value and seek diversity, and awareness of personal impact on others.

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# 8  Appendix 2 – Participant Information Sheet

**Evaluation of the Intersect Programme – Cohort 3**

**Why is the evaluation happening?**

The National NHS Leadership Academy commissioned the evaluation to understand the impact of the Intersect Programme, with its focus on systems leadership.  This evaluation is builds on an earlier evaluation of Cohort 1, at the inception of the Intersect Leadership Programme.

We are interested in the experience of participants, specifically:

- The importance of systems leadership for you in your current role
- Your personal leadership development, qualities and attributes
- Your experience of the programme and how you experienced impact on your leadership practice, your leadership qualities and attributes
- How the impact of the programme translated to your role
- Elements of the programme that were perceived as critical to your experience and/or impacts that occurred

Outputs from evaluations are extremely valuable – and previous participants have commented positively on the value of reviewing their experience, and making a positive contribution to the thinking about leadership development more broadly.

**General Principles guiding the work**

Although this is not a formal research project requiring ethical permission, we ensure we follow ethical principles in our work, this means:

- Taking part is voluntary
- Participants can withdraw from the process at any time
- Data we collect will either be anonymised (so as not to be personally attributable) or if this is not possible, we will seek permission to use it, particularly where data is used within our evaluation reports
- Data on individuals taking part in the research will not be divulged to any other individuals or organisations**.** No individuals will be identified personally by the comments that they make during the interview. Any recordings or notes of the interview will be kept in the strictest confidence, and individuals will not be identifiable in any reports.  Participants also have the right to request copies of transcripts of their interviews.  All records of interviews will be seen only by the Alliance Manchester Business School evaluation team, and will be stored securely in locked cabinets or password protected computer files for a maximum of 6 years after the research is completed and then destroyed, as prescribed within the Data Protection Act (1998).

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**Data Collection**

In this evaluation, our main method is interviews with participants.  We will arrange a convenient time to be interviewed; interviews will be conducted by telephone or web conferencing software.  The time needed for interviews will vary but we recommend allowing 45 – 60 mins in your diary.  It is helpful to be in a comfortable place for the interview, where you are unlikely to be interrupted.

Interviews will be recorded and transcribed – this means there will be a word for word written record of the interview and this will be used to inform our evaluation.  The recording of the meeting will be stored confidentially.  We may use quotes to illustrate our findings within our evaluation reports - where possible, we will anonymise all sources, if this is not possible, we will request permission to use the quotation from you.

**Contact Details**

The Evaluation Team will aim to be as flexible as possible in arranging dates and times for interviews and it is anticipated that each participant will aim to keep to agreed appointment dates and times.

Linda Wallace at the National NHS Leadership Academy will assist in the liaison for interview arrangements.  Linda Wallace can be contacted at linda.wallace@leadershipacademy.nhs.uk

The interviews will be conducted by Karen Shawhan, an Associate at Alliance Manchester Business School (AMBS).  Karen is an experienced evaluator, currently working on two leadership evaluations, and is also involved in the delivery of leadership programmes, and has extensive experience in NHS leadership and management roles; you can contact Karen at karen.shawhan@manchester.ac.uk

If you need to contact us about interview arrangements, please contact Linda or Karen.

If you have any concerns about the evaluation or you require further information about the evaluation please contact Alan Boyd at alan.boyd@manchester.ac.uk.  Alan is the Team Leader for the Evaluation and a Research Fellow at AMBS.

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# 9 Appendix 3 – Interview Schedule for Participants

| Question | Rationale for asking the question | Prompts |
|---|---|---|
| Tell me about your current role and where you work. | Establish rapport and context. Understand the importance of systems leadership for the participant in their current role | System or organisation? Which public sector? What are your key areas of focus? What are the leadership challenges you face, giving examples where appropriate? |
| We would like to understand if the funding arrangement for your place on the Intersect Programme had any impact on your experience. | Trying to understand the impact, if any, of the funding arrangements – in Cohort 3, participants were not funded by the Leadership Academy. | Why was Intersect selected over other programmes? Was the funding arrangement a factor |

| | | |
|---|---|---|
| How would you describe the impact?<br><br>What are your thoughts and feelings about that? | | during the experience of the programme – expectations, commitment, satisfaction?<br><br><br>Were there expectations (explicit or implicit) from the sponsors about the application of learning? |

## 10 Appendix 3 – Interview Schedule for Faculty

| Question | Rationale for asking the question | Prompts |
|---|---|---|
| Introductions<br><br>Purpose of the interview<br><br>Structure of interview<br><br>Check on time available<br><br>Check permission to record interview | Establish rapport and groundrules | |
| What is the high level programme theory and design?<br><br>Have any changes been made to the programme over its execution over three cohorts, with respect to:<br><br>• Structure<br>• Content<br>• Process<br>• Faculty team | Trying to understand how learning and experience of the programme has informed the design process<br><br>To understand key elements of the programme that Cohort 3 will experience, that may be key within their 'stories' | What was the impact for:<br><br>• Participants?<br>• Faculty? |
| Are there any differences in the participants in the three cohorts?<br><br>Differences in:<br><br>• Mix of sectors participants have been | Differences in types of participants may be important to capture in participant interviews. | Say something about the possible impact of these differences:<br><br>• For faculty<br>• For participants<br>• For the system more broadly |

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|  | | |
|---|---|---|
| recruited from<br>• Characteristics<br>• Demographics - ? inclusive | | |
| **Question** | **Rationale for asking the question** | **Prompts** |
| What is the faculty perspective on how are health and social care systems changing - how is Intersect responding to this? | Ongoing relevance of Intersect | What do faculty see as the key challenges?<br><br>STP's as a vehicle for delivery, possibly more devolution of budgets in the future.<br><br>What does this mean for Intersect now, and in the future - how well placed is the Intersect programme to equip participants with the requisite skills? |
| What, if any, learning and reflections have there been for the Faculty team? | Understand Faculty's 'lived experience'<br><br>How learning has informed the development of the programme. | What's been most important about delivering Intersect for you?<br><br>What would you most like to change?<br><br>What are your hopes for the future of Intersect? |

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