

Leadership Conversations

Supporting developmental conversations in postgraduate medical training v1.1



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Introduction

There is growing evidence that supports a strong relationship between the engagement of clinicians in the leadership task and a range of healthcare quality and outcomes (West M et al. 2015).

Healthcare delivery is now the responsibility of all individuals working collaboratively as distributed leaders within complex systems that cross disciplinary and organisational boundaries. Effective clinicians need to be able to work within *and* between these systems in order to deliver high quality effective care for patients and patient populations. In order to develop these skills, clinicians need to be exposed to a variety of learning opportunities within the domain of management and leadership.

On completion of training all doctors find that their work includes a significant element of leadership and management and for a small cohort, it may well form a much larger component should they choose a career path of senior medical leadership. It should be acknowledged that leadership and management are not skills to be learnt in the closing months of postgraduate training, but to be developed during the entirety of training and beyond.

This resource pack is therefore designed to help trainees to develop competencies for the leadership roles they will assume during their training years and to prepare them for life as a senior doctor. It supports the need for practical experience and reflection on their leadership and management during training and seeks to put theory into practice. This resource is flexible, meaning it can be used in its entirety, or to complement existing leadership and management training programmes.

A series of four short illustrative <u>videos</u> have been commissioned to accompany this resource pack and explore the importance of clinical leadership in postgraduate training, facilitating reflection, coaching for development and structuring experience. The resource pack and videos have been primarily designed to be used by postgraduate medical education supervisors as they integrate leadership learning into their conversations with trainees but can also be used independently by trainees.

It's stressed that merely undertaking a leadership or management activity is no evidence of leadership competency development unless the trainee has thought about/ reflected/ received feedback *and* they have linked behaviours to an established leadership framework, such as the Medical Leadership Competency Framework or the Healthcare Leadership Model. A reflective template is included at the end of this resource pack to facilitate the reflective process.

How to use this pack

This resource pack is designed to support developmental conversations about leadership between supervisors and doctors in postgraduate training. It can be used year on year as the trainee progresses through the speciality programme.

The role of the trainee

- All trainees at entry into specialty training and at the start of subsequent training years should carry out the NHS Leadership Academy Healthcare Leadership Model (HLM) self-assessment tool.
- Based on the results of this self-assessment, trainees are expected to prioritise up to three leadership development areas from the
 nine domains each year. Trainees should then seek to gain experience and understanding of the specified leadership behaviours,
 reflecting on the way/s they are demonstrating/can demonstrate these behaviours in their day to day work and looking for
 development opportunities whilst making full use of the local and self-directed learning resources suggested. It will also be helpful for
 trainees to identify discrete projects or activities to enrich their experience of or exposure to particular leadership behaviours. The
 trainee's learning priorities and activities should be agreed with supervisors and regularly discussed throughout the year.
- At the end of the training year, trainees are asked to complete a reflective log of their leadership learning, specifying their learning goals, activities and demonstrable development. These reflective logs may be uploaded to each trainee's ePortfolio for review at ARCP.
- Upon completion of training, trainees should aim to have covered each of the nine domains in this way.

The role of the educational supervisor

- The supervisor's role is to ensure that trainees integrate learning about leadership throughout their training years.
- At the start of each training year, supervisors will agree with their trainees which HLM leadership behaviours (up to three) to prioritise
 for the year ahead. The results of the annual HLM self-assessment and related questions in the second column from pages 9 to 21
 will help to identify these development priorities. This should be a joint decision and should take into account current work and
 opportunities within the organisation
- Together the trainee and supervisor will agree a plan for developing these behaviours; resources and signposting will be identified, and progress will be reviewed regularly. The opportunities identified in the third column on pages 10 through to 23 are designed to support with the identification of developmental activities.
- Evidence and demonstration of learning in these areas may be uploaded to each trainee's ePortfolio for review at ARCP every year. The format of evidence provided will be at the discretion of the trainee and supervisor.
- A summary description of progress could be incorporated into the educational supervisor's final report for ARCP.

Supervisors will discuss progress with their trainees throughout the year, offering conversations to a) review developmental progress with the prioritised leadership behaviours and b) recognise the leadership they are demonstrating in their day to day work. The three reflective questions described in detail on page 24 will facilitate these conversations.
 These are:

Tell me about how your behaviour has developed with leadership in mind? What have you observed and learned from others in respect of leadership behaviours? What have people told you about your leadership behaviours?

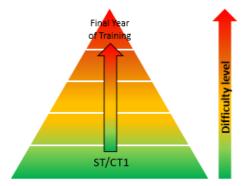
- Within any given organisation, it may be useful for supervisors to come together and host face to face workshops with trainees to help solidify learning and exposure within certain domains, e.g. a face to face workshop around team working, exploring individual roles, etc.
- For those trainees who demonstrate a natural flare or wish to take their learning in management and leadership further, trainers should discuss the options available including local and national 'stretch' opportunities such as Fellowships, longitudinal development programmes, or other out-of-programme experiences.

Tiered learning

This pack is based on the nine leadership dimensions of the Healthcare Leadership Model (HLM) and is structured to align with trainee experience. As the HLM advises, "all nine dimensions are important in an individual leadership role. However, the type of job you have, the needs of the people you work with and the context of your role within your organisation will all affect which dimensions are most important for you to use and develop." (p3) This equally applies to the level of proficiency a leader may need to demonstrate in each of the nine dimensions, ranging from Essential to Proficient, through to Strong and Exemplary. Yet, both to provide a developmental focus and because a junior doctor's experience, exposure and responsibility varies according to their training year, this guide relates the level of proficiency to early, middle and later years. So, whilst an Early Years' trainee will work on the Essential characteristics of the nine leadership dimensions, a Later Years' trainee will be aiming to develop the Strong characteristics.

In relation to the dimensions themselves, broadly speaking Early Year trainees will be concentrating on managing themselves, their workload and their team contribution, Middle Year trainees on team and project leadership and Later Year trainees on service, organisational and system leadership. Whilst development will be cumulative, the intention behind this approach is not to constrain development but to help both doctors in postgraduate training and their supervisors to focus and prioritise.

Other factors that might affect each trainee's leadership development agenda are their preferred learning style, experience or interest in a particular area.



Managing self

As the HLM states "The way that we manage ourselves is a central part of being an effective leader. It is vital to recognise that personal qualities like self-awareness, self-confidence, self-control, self-knowledge, personal reflection, resilience and determination are the foundation of how we behave. Being aware of our strengths and limitations in these areas will have a direct effect on how we behave and interact with others, and they with us. Without this awareness, it will be much more difficult (if not impossible) to behave in the way research has shown that good leaders do. This, in turn, will have a direct impact on our colleagues, any team we work in, and the overall culture and climate within the team as well as within the organisation. Whether we work directly with patients and service users or not, this can affect the care experience they have. Working positively on these personal qualities will lead to a focus on care and high-quality services for patients and service users, their carers and their families." (p3)

While personal qualities and managing self have not been separately highlighted in the Healthcare Leadership Model, aspects of both are features of the various dimensions. It is important to realise that areas identified for development within the model may be as much about how you manage yourself as about how you manage your behaviour and relate to other people It is with this in mind that we encourage all trainees to undertake the HLM self-assessment at the start of every training year, using the 360 version where this is available, and asking colleagues and supervisors for direct personal feedback on leadership effectiveness where it is not.

Supporting resources

The pages that follow provide examples of activities or projects which can be undertaken at different stages in training to supplement day to day experience, where necessary and useful. Supervisors and trainees may wish to use and tailor these examples, or develop their own activities or projects depending on the specialty. We would also encourage using resources available within individual trusts to support workplace-based learning.

Most of the interventions and materials identified are either online tools or resources, the aim being for trainees to access the resources either individually or in groups at a time convenient to them and then hold discussions and reflections with their educational supervisor/ trainer, either in the workplace or via tutorials. The pack will be regularly updated, and new resources will be added as they become available. This blended approach to learning is centred on both self-assessed and peer learning, as well as discussions with educational supervisors.

A Reflective Log template is provided on page 25, designed for the trainee to complete on their activities and learning throughout the year. By the end of the training programme, each trainee will have a collection of reflective logs to document their leadership development.

Context

As well as being mapped to the <u>NHS Healthcare Leadership Model</u>, the Pack aligns with the aspirations of the <u>Developing People Improving Care</u> national framework for improvement and leadership development, and meets the requirements of the GMC <u>Generic Professional Capabilities framework</u>

Getting started

While the Healthcare Leadership Model describes nine important domains of leadership behaviour, it does not define what we mean by leadership. Accepting that there are many definitions and that any single interpretation will be contested, it is nonetheless helpful to offer a starting point for discussion, reflection and observation. Many writers distinguish leadership from management, emphasising the ways in which leadership is a social process whereas management is more technical; management does the thing right whilst leadership does the right thing. Effective health and care organisations, of course, need both yet it is leadership that is understood to create the conditions that shape the quality of care.

For the purpose of this document, we will take Spurgeon and Klaber's (2011) definition, which sees leadership as "a process of influence whereby those subject to it are inspired, motivated or become willing to undertake the tasks necessary to achieve an agreed goal." The nine dimensions of leadership behaviour described in the Healthcare Leadership Model offer us insight into and guidance on how to achieve this in practice.

Before identifying leadership development priorities for the year ahead, trainees are encouraged to familiarise themselves with their NHS leadership context through undertaking the activities below.

Understanding the NHS leadership context	Developmental resources
Understanding the health and care system	How the NHS in England is structured
The importance of leadership to healthcare	West M et al (2015) Leadership and Leadership Development in Healthcare: The Evidence Base. 'Evidence for Engagement'
Compassionate leadership	Leadership in Today's NHS Gawande, A (2014) Being Mortal: Medicine and What Matters in the End, Deckle Edge
Inclusion	The six signature traits of inclusive leadership
Publications, journals and introductory resources	Radcliffe, S (2012) Leadership: Plain and Simple, FT Press Mckimm, J & Swanwick, T (2017), ABC Clinical Leadership, Wiley Blackwell BMJ Leader; Journal of Healthcare Leadership Faculty of Medical Leadership and Management NHS Leadership Academy

On reflection

The trainee is asked to write a reflective piece in each year of training to upload to the ARCP. Prior to doing so, it will be useful for trainees to familiarise themselves with reflective writing through completing a short piece on any of the following and reading the resource on reflective writing:

- What is my natural style of communication when not under pressure?
- What is my style of communication when challenged?
- How do I react to stress, criticism and how do I develop resilience?
- How do others perceive me in non-stressful and stressful situations?
- How do I challenge myself to learn things outside my comfort zone?

The <u>Reflective practice toolkit</u> from the Academy of Medical Royal Colleges aims to facilitate best practice in the documentation of reflection on a variety of activities and events.

Once a trainee has sufficient familiarity with the nature of leadership, the importance of reflection and the context of the NHS, they are then ready to undertake a <u>leadership self-assessment</u> as the first step to determining their development agenda for the year ahead. After completing and reflecting on the self-assessment, trainees and supervisors should identify suitable leadership learning priorities from the appropriate sections of this resource pack.

The behaviours on which to focus, together with suggested activities and resources have been broken down into three continuous stages:



Early years: Foundation-CT/ST1-2



Middle years: ST3-5 and immediate post-CCT GPs



Later years: ST6 to 2 years post-CCT and early career GPs

Early years: Foundation - CT/ST 1-2

During the early years of postgraduate training, trainees are advised to concentrate on develop the leadership skills and approaches that enable them to manage themselves, their workload and their team contribution.

HLM Domain	Behaviours to demonstrate	Indicative development activities	Developmental resources
Inspiring shared purpose	 Staying true to NHS principles and values Do I act as a role model for belief in and commitment to the service? Do I focus on how what I do contributes to and affects patient care or other service users? Do I enable colleagues to see the wider meaning in what they do? 	 Review the many ways in which your work affects patients' lives. Familiarise with patient feedback on services. Shadow a Trust Governor/Patient Leader Read the NHS constitution 	 NHS England's information about feedback on services, including the <u>Friends and Family</u> Survey Simon Sinek's Ted Talk on <u>How Great Leaders Inspire Action</u> The NHS Constitution Take me to your leader - Lilly Lecture by Baroness Julia Cumberledge 'Top tips' on <u>How to get involved with leadership and management as a student and foundation doctor</u>? by Christina Whitehead
Leading with care	 Caring for the team Do I notice negative or unsettling emotions in the team and act to put the situation right? Do my actions demonstrate that the health and wellbeing of my team are important to me? Do I carry out genuine acts of kindness for my team? 	 Reflect on the messages your actions convey – are you acting as if the health and wellbeing of your team are important to you? Observe how other leaders convey this in practice. Spend some time noticing how others' emotions influence their work. When you notice negative emotions in a colleague, intervene to address the situation and reflect on your effectiveness 	Leadership That Gets Results by Daniel Goleman Ballatt, J and Campling, P (2011) Intelligent Kindness: Reforming the Culture of Healthcare. RCPsych Publications

Evaluating information	 Do I collect feedback from service users? Do I collect and record the essential data for my area of work accurately and on time? Am I regularly thinking about ways to do my job more effectively? Can I see patterns that help me to do things better, more efficiently or with less waste? 		Contact your Trust Quality Improvement Lead to discuss how feedback is collected and used. Review data from feedback to consider patterns and potential improvements.	•	NHS Improvement's Patient experience improvement framework
Connecting our service	Recognising how my area of work relates to other parts of the system 1. Do I understand the formal structure of my area of work and how it fits with other teams? 2. Do I keep up to date with changes in the system to maintain efficiency? 3. Do I hand over effectively to others and take responsibility for continuity of service provision?	•	Complete a dependency map, showing who depends on your areas of work and who you depend on. From this, plan which areas you need to strengthen relationships with to benefit patient care. Review NHSI's Model Hospital and reflect on the implications for your Trust. Review and improve the effectiveness of your handovers. Consider the patient journey through your area of work and plan for improvements.	•	The organisational chart for your Trust NHSI's Model Hospital Patient Journeys: The Process of Clinical Redesign

Sharing the vision	 Communicating to create credibility and trust Am I visible and available to my team? Do I communicate honestly, appropriately and at the right time with people at all levels? Am I helping other people appreciate how their work contributes to the aims of the team and the organisation? Do I break things down and explain clearly? 	 Review how visible and available you are to your team, asking colleagues for feedback on both. Develop and implement an action plan for improvement. Explain more of the context and connections in colleagues' everyday work. Myers Briggs Type Indicator; contact your Local Leadership Academy to explore further. Learning Style Explained, Learning Style Questionnaire The work of Albert Mehrabian Assessment and Diagnostic tools from the FMLM
Engaging the team	 Involving the team Do I recognise and actively appreciate each person's unique perspectives and experience? Do I listen attentively to my team and value their suggestions? Do I ask for contributions from my team to raise their engagement? 	 Hold a team meeting to invite, explore and action ideas for service improvement. Ensure there are regular opportunities for team members to offer suggestions. Leadership and listening blog Teamwork a user's guide from BMJ Learning Communication and Engagement from the Junior Doctor Representative Groups from the FMLM Running a Junior Doctor Representative Group from the FMLM
Holding to account	 Setting clear expectations Do I take personal responsibility for my own performance? Do I specify and prioritise what is expected of individuals and the team? Do I make tasks meaningful and link them to organisational goals? Do I make sure individual and team goals are SMART? 	 Initiate progress reviews with leaders to update and assure them about work to date. Help colleagues to manage their workloads by clarifying priorities. Schedule in regular individual and team meetings with colleagues to review progress and performance. Initiate progress reviews with leaders to update and assure Business Balls Advanced Time Management virtual seminar from the Foundation of Nursing Leadership Edward Jenner Programme SMART goals template Top Tips for 'Chairing a meeting' blog by Dr Judith Tweedie from the FMLM Medical Appraisal Scenarios resources from the FMLM

Developing capability

Providing opportunities for people development

- Do I often look for opportunities to develop myself and learn things outside my comfort zone?
- 2. Do I understand the importance and impact of people development?
- 3. Do I build people development into my planning for my team?
- Agree a leadership development plan for yourself with your Supervisor for the year ahead, taking care to set yourself significant challenges.
- Include a conversation about what colleagues want to learn or develop in the year ahead when planning workload.
- Undertake mentoring for physician associate students

- Receive <u>coaching</u> by contacting your <u>Local</u> <u>Leadership Academy</u>
- <u>Developing a growth mind-set</u> by Carol Dweck
- The <u>Developing People Improving Care</u> Framework
- Understanding how mentoring can benefit your career by the FMLM
- The mentor network from the FMLM
- What can coaching do for you by Alexis Hutson from the FMLM

Influencing for results

Engaging with others to convince or persuade

- 1. Am I respectful in all circumstances?
- 2. Do I listen to different views?
- 3. Do I share issues and information to help other people understand my thinking?
- 4. Do I develop and present well-reasoned arguments?
- 5. Do I avoid jargon and express myself clearly?

- Provide evidence of attendance and contribution to clinical governance meetings.
- Investigating an incident; learning about root cause analysis - trainees can spend time with senior colleagues working through the process of how a serious incident (SI) is investigated, using real examples and how a timeline of events is constructed, and root cause analysis is performed to discover why an incident has occurred.

Listening and levels of listening

- Advocacy and inquiry by Chris Argyris
- The Art of Powerful Questions
- Influencing styles by John Hunt

Respecting difference

- Healthcare Equality and Diversity online module
- <u>The Danger of Wilful Blindness</u> TED talk from Margaret Heffernan
- What does my headscarf mean to you TED talk from Yassmin Abdel-Magied
- Implicit bias podcast from the BBC
- Jayne-Anne Gadhia's podcast from the BBC
- Women in Leadership TED talk from Sheryl Sandberg

	•	Writing and implementing a	•	Why Gender Equality is Good for Everyone –
		business case, e.g. bid to		including men TED talk from Michael Kimmel
		purchase a new piece of	•	The power of Introverts TED talk from Susan Cain
		equipment with consideration of		
		the various funding avenues,		
		such as NHS funding or		
		charitable funding		

Middle years: CT/ST3-5 and immediate post-CCT GP

During the middle years, trainees will be building on their early years' leadership learning and concentrating on developing their team and project leadership.

HLM Domain	Behaviours to demonstrate	Indicative development activities	Developmental resources
Inspiring shared purpose	 Holding to principles and values under pressure Do I behave consistently and make sure that others do so even when we are under pressure? Do I inspire others in tough times by helping them to focus on the value of their contribution? Do I actively promote values of service in line with NHS principles? 	 Offer support to colleagues under pressure by providing a steadying, calming influence. Consciously remind colleagues about the importance of the work they are doing. Appreciatively acknowledge others' good work. Identify how pressure influences your behaviour and work out how best to manage your resilience. 	Managing self under pressure: Managing Yourself section of the London Leadership Academy Leadership Toolkit Self care from Guy's and St Thomas' Resilience questionnaire
Leading with care	Recognising underlying reasons for behaviour 1. Do I understand the underlying reasons for my behaviour and recognise how it affects my team?	Contrast how you're feeling when you're working well and less well. Reflect on any differences in your mood and feelings.	 Social Systems as a Defence Against Anxiety by Isabel Menzies Lyth 5 Drivers Questionnaire

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	2. Can I 'read' others, and act with appropriate empathy, especially when they are different from me?	 Observe how you react to the different moods and emotions of leaders you work with. 	
	3. Do I help my colleagues to make the connection between the way they feel and the quality of the service they provide?	 Find an opportunity to help a colleague recognise the link between their emotion and their impact. 	
Evaluating	Scanning widely	Join a Quality Improvement	Vincent, C & Amalberti, R (2016) Safer Healthcare:
information	 Do I look outside my area of work for information and ideas that could bring about continuous improvement? Do I establish ongoing methods for measuring performance to gain a detailed understanding of what is happening? Do I spot future opportunities and risks, and test resulting plans with 		 Strategies for the Real World. Springer Open Syed, M (2015) Black Box Thinking. John Murray Learning from life and death from the BBC Making Data Count by NHS Improvement Quality Improvement Guides from the IHI Running a Junior Doctors Forum with a particular focus (Quality Improvement) from the FMLM Leading cultures that deliver high quality care Lilly Lecture from Michael West Make every moment count from the FMLM
	external stakeholders to improve them?		Make every memoric count men men men
Connecting our service	Understanding the culture and politics across my organisation	familiarise with the financial	Organisational politics articleJohnson and Scholes model
	Do I understand the informal 'chain of command' and unwritten rules of how things get done?	and strategic context of yourTrust.Arrange to meet a colleague in	 Healthcare Finance E-learning module Collection of 'How to' guides for junior doctors from the Trainee Steering Group at FMLM
	Do I know what I need to do and who to go to so that well-judged decisions are made in my organisation?	Finance to discuss the Trust's financial position. Review a recent decision to understand the informal and	3
	3. Do I understand how financial and other pressures influence the way people react in my organisation?	informal influences on the outcome.	
Sharing the	Creating clear direction	Create a vision with your team,	How to Tell Stories as a Leader
vision	Do I help people to see the vision as achievable by describing the 'journey' we need to take?	mapping the steps and stages towards achievement.	 Gallo, C. (2014) Talk Like Ted: The 9 Public Speaking Secrets of the World's Top Minds. St.Martin's Press
•			

Engaging the team	 Do I use stories and examples to bring the vision to life? Do I clearly describe the purpose of the job, the team and the organisation and how they will be different in the future? Fostering creative participation Do I ask for feedback from my team on things that are working well and things we could improve? Do I shape future plans together with my team? Do I encourage my team to identify problems and solve them? 	 Listen to the approaches that other leaders use to bring their ambitions to life. Ask your Communications Department for examples of patient stories. Develop a service improvement plan, facilitated by yourself and led by the team. Read the results of the most recent Staff Survey for your Service to understand levels of engagement. Undertake roles such as Educational Fellow, Trainee Representative for speciality/School, HEE TV Trainee Advisory Committee member. Join a simulation of human factors faculty. 	 Talk like TED by Carmine Gallo at Talks at Google Essential Capabilities for Medical Leaders in Complex Times by David Rooke - Lilly Lecture 2017 Staff Engagement in the NHS Review roles available via Royal Colleges, Local Educational Supervisors and FMLM Crossing Professional Boundaries – a Toolkit to improve team collaboration by the King's Fund Junior Doctor Forum and Junior Doctor Representative Groups by the FMLM Stage of training specific forums by FMLM
Holding to account	 Managing and supporting performance Do I challenge ways of thinking and encourage people to use data to support their business planning and decision making? Do I set clear standards for behaviour as well as for achieving tasks? Do I give balanced feedback and support to improve performance? Do I act quickly to manage poor performance? 	 Articulate and agree behavioural expectations (standards) with colleagues. Ensure that all performance conversations offer appreciative and developmental feedback. Be vigilant, plan how to and intervene to manage poor performance. 	 Army Lieutenant General David Morrison Giving feedback Ashton, Ripman, Williams (2017). How to be a Nurse or Midwife Leader, Wiley Blackwell (Chapter 7)

Developing capability	 Taking multiple steps to develop team members Do I explore and understand the strengths and development needs of individuals in my team? Do I provide development opportunities for other people through experience and formal training? Do I look for and provide regular positive and developmental feedback for my team to help them focus on the right areas to develop professionally? 	 Meet with your Trust's Learning and Development Manager to discuss the range of development opportunities open to your colleagues. Build regular developmental feedback into conversations with colleagues. Practice and develop your feedback-giving skills, both appreciative and developmental. Shadowing and buddying leaders and managers 	 NHS Long Term Plan Train to be a coach, accessed via local leadership academies websites here VIA Strengths Survey Johari Window (Johari Window (1955), Jo Luft and Harrington Ingham) Knowing Your Strengths by Marcus Buckingham Marcus Buckingham on Knowing Your Strengths Mentoring Matters – why we all need to get involved with mentoring
Influencing for results	 Adapting my approach to connect with diverse groups Do I adapt my communication to the needs and concerns of different groups? Do I use stories, symbols and other memorable approaches to increase my impact? Do I check that others have understood me? Do I create formal and informal two-way communication channels so I can be more persuasive? 	 Introducing a new medical guideline This project involves presenting how practice will change in the department, educating departmental staff about the change, and monitoring any change to practice. Discussion focuses on the difficulties in introducing changes to current practice and how to solve the problems that arise. Or Introducing a new piece of equipment Manage a project Manage a rota 	MBTI Helping/Influencing Styles Project Management

Later years: ST6 – Consultant and early career GP

During the later training years, trainees will be developing their service, organisational and system leadership.

HLM Domain	Behaviours to demonstrate	Indicative development activities	Developmental resources
Inspiring shared purpose	 Taking personal risks to stand up for the shared purpose Do I have the self-confidence to question the way things are done in my area of work? Do I have the resilience to keep challenging others in the face of opposition, or when I have suffered a setback? Do I support my team or colleagues when they challenge the way things are done? 	 Meet your Freedom to Speak Up Guardian to discuss the main issues in your Trust and how the Guardians advise colleagues to raise issues of concern. Note your own reactions when questioned or challenged and work on listening non-defensively. Work on raising issues of concern and supporting colleagues to do so. 	 Gutkind, L. (2007) Silence Kills: Speaking Out and Saving Lives. Medical Humanities, London The Fringe Benefits of Failure Ted Talk from JK Rowlng Transparency, Compassion and Truth in Medical Errors Ted Talk from Leilani Schweitzer The Danger of Wilful Blindness Ted Talk from Margaret Heffernan Dare to Disagree Ted Talk from Margaret Heffernan How Your Power Silences Truth Ted Talk from Megan Reitz The surprising secret to speaking with confidence TedXBrixton from Caroline Goyder Speaking truth to power Lilly Lecture from Professor Megan Reitz Agents for change: speak up with power! Webinar from the FMLM Having effective conversations with seniors and executives from the FMLM
Leading with care	Providing opportunities for mutual support 1. Do I care for my own physical and mental wellbeing so that I create a positive atmosphere	 Read up on resilience and develop a plan for your own personal wellbeing. Discuss and develop an action plan to address 	 <u>iResilience questionnaire</u> <u>Affina Team Journey</u> <u>Five Dysfunctions of a Team assessment</u> based on work by Patrick Lencioni Review differences in motivation <u>questionnaire</u>

	for the team and service users? 2. Do I help create the conditions that help my team provide mutual care and support? 3. Do I pay close attention to what motivates individuals in my team so that I can channel their energy, so they deliver for service users?	 mutual care and support within your team. Practice describing goals and ambitions in ways that motivate diverse team members. 	 The Importance of Working in an Effective Team The Developing People Improving Care Framework Mindfulness and Leadership and Resilience by John Hart
Evaluating information	 Thinking creatively Do I conduct thorough analyses of data over time and compare outcomes and trends to relevant benchmarks? Do I see the relevance of seemingly unrelated ideas which could be made useful in my area of work? Do I creatively apply fresh approaches to improve current ways of working? 	 Look across services and industries for practical improvement ideas. Suggest and seek to implement an improvement idea for your service. Shadow a Trust/CCG board member/attend a Board meeting 	 The Moral Era by Don Berwick Quality improvement e modules Patient safety Quality Improvement hub from NHS Improvement School of Quality Improvement from Wessex Deanery Quality Improvement Projects from RCGP Quality Improvement online course Improvement tools from the Health Foundation QI hub from Wessex Academic Health Science Network Allan, D (2002) Sticky Wisdom' by What If?, Capstone Got a Meeting? Take a Walk Ted Talk by Nilofer Merchant Contemporary Leadership from the FMLM
Connecting our service	Adapting to different standards and approaches outside my organisation 1. Am I connected to stakeholders in a way that helps me to understand their unspoken needs and agendas?	 Complete a stakeholder map showing the various interests in and potential perspectives on your area of work. Ask to attend a STP meeting Consider how these stakeholder interests might differ from your own. Reflect 	 Identifying and managing stakeholder interests in health Getting to Yes by Fisher and Ury Flexible leaders Communication and Engagement Junior Doctor Representative group from FMLM

	2. Am I flexible in my approach so I can work effectively with people in organisations that have different standards and approaches from mine?3. Do I act flexibly to overcome obstacles?	on the extent to which you are operating to meet your own interests and/or custom and practice. Plan to change your practice to meet stakeholder interests. • Attend Trust/CCG business meetings • Shadow senior systems leaders/managers	Using social media to promote communication and engagement from the FMLM trainees steering group Stories of us from the FMLM
Sharing the vision	 Making long-term goals desirable Do I encourage others to become 'ambassadors' for the vision and generate excitement about long-term aims? Do I find ways to make a vivid picture of future success emotionally compelling? Do I establish ongoing communication strategies to deal with the more complex and difficult issues? 	 Develop a vision with your team. As part of this, ask each colleague to describe the vision, why this matters to them and how they see their contribution. Create a communication plan for your vision. Speak to your Communications Director to understand their approach to developing communications strategies for complex and difficult issues. 	 <u>Talk like TED</u> by Carmine Gallo at Talks at Google <u>Physicians and e-health: How to lead disruption</u> by Wouter Keijser <u>Contemporary Leadership</u> from the FMLM (members)
Engaging the team	 Co-operating to raise the game Do I enable my team to feed off each other's ideas, even if there is a risk the ideas might not work? Do I encourage team members to get to know each other's pressures and priorities so that they can co-operate to provide a seamless service 	 Invite colleagues from other teams to talk with team members to improve mutual support and alignment. When meeting with your team, include a session on 'what's worrying you right now" to foster empathic cooperation for patient care. Join a leadership community. 	 Super Chicken Ted Talk from Margaret Heffernan Why good leaders make you feel safe Ted Talk from Simon Sinek Building a psychologically safe workplace Ted Talk by Amy Edmondson The power of vulnerability Ted Talk from Brenee Brown Build a Tower, Build a Team Ted Talk from Tom Wujes NHS Collaborate events

	when resources are stretched? 3. Do I offer support and resources to other teams in my organisation?	Attend RCGP First 5 Groups/ LMC organised meetings	 National Primary Care Improvement Community Royal College of GP's Leading Teams by John Hunt Distributed Leadership in Junior Doctors How to manage your peers by Iain Wallace How and Why develop a professional network by Hunter Clinical and FMLM Trainees Steering Group
Holding to account	 Challenging for continuous improvement Do I constantly look out for opportunities to celebrate and reward high standards? Do I actively link feedback to the overall vision for success? Do I notice and challenge mediocrity, encouraging people to stop coasting and stretch themselves for the best results they can attain? 	 Create opportunities to celebrate success and acknowledge excellence. When setting SMART objectives, encourage colleagues to identify stretching as well as specific goals. 	 Ashton, Ripman, Williams (2017). How to be a Nurse or Midwife Leader, Wiley Blackwell (Chapter 7) Dealing with difficult doctors from BMJ A Positive Revolution in Change: Appreciative Inquiry Medical Appraisal Scenarios Exploring conflict resolution with Tim Ojo Positive Psychology and leadership by John Hunt
Developing capability	 Building longer-term capability Do I explore the career aspirations of colleagues in my team and shape development activities to support them? Do I provide long-term mentoring or coaching? Do I spot high-potential colleagues or capability gaps in my team and focus development efforts to build on or deal with the situation? 	 Reflect longer-term career development into your performance conversations and agree related development activities. Actively identify and sponsor a high-potential colleague. Undertake a team capability assessment and develop a plan to address identified gaps. Shape and inform talent management in your Trust. 	 NHS Long Term Plan Train to be a coach, accessed via local leadership academies websites here Leadership Pipeline Goldsmith, M (2008) What Got You Here Won't Get You There, Profile Books Running a Junior Doctor Representative Group from the FMLM Stage of training specific forums by FMLM Recruitment in Clinical Leadership by FMLM Trainees Steering Group Receive coaching by contacting your Local Leadership Academy

		 Participate in active trainees committee /become education fellow. Information is available via local educational supervisors, training programme directors. Involvement with local trainee networks 	
Influencing for results	 Developing collaborative agendas and consensus Do I use 'networks of influence' to develop consensus and buy-in? Do I create shared agendas with key stakeholders? Do I use indirect influence and partnerships across organisations to build wide support for my ideas? Do I give and take? 	 Developing a new service. More complex project management skills can be developed if a trainee is part of a team introducing a new service. Planning, teamwork, overcoming obstacles, resilience and completer- finisher skills are developed in this scenario. Introducing a new medical guideline Attend Trust/ CCG business meetings Shadow senior systems leaders/ managers 	 Ashton, Ripman, Williams (2017). How to be a Nurse or Midwife Leader, Wiley Blackwell (Chapter 7) Getting to Yes by Fisher and Ury The four building blocks of change How to start a movement Ted Talk from Derek Sivers Johnson, S (1999), Who moved my Cheese, Vermilion Bridges, W (2017) Managing Transitions, Nicholas Brealey Publishing Managing Change from BMJ Doing Coproduction Having effective conversations with seniors and executives Managing Disagreement and Negotiation by John Hunt

Developmental conversations

Three questions that can be used to facilitate discussion, with suggested subsidiary questions are:

Q1: Tell me how your behaviour has developed with leadership in mind?	Q2: What have you observed and learned from others in respect of leadership behaviours?	Q3: What have people told you about your leadership behaviours (including feedback from individuals and multisource feedback)?	
Focuses on behaviours	Focuses on observations	Focuses on feedback	
 Which of the HLM domains does this relate to? Why is this leadership behaviour important? How does this behaviour influence your colleagues or others? What is the subsequent potential impact on patient care? What has your experience of developing this leadership behaviour been thus far? What has gone well, and how do you feel you might further develop these skills? 	 What was the setting and how did they demonstrate the leadership behaviour? What was the impact of these behaviours on team members/patients? How might you have behaved differently? 	 Reflecting on the feedback you have received, what are your main learning outcomes? What leadership behaviours/s have you demonstrated especially well? Which areas would benefit from further development? How would further feedback help you to develop your leadership skills? What specific behaviours should we be asking people to give you feedback on and how can we gather this feedback? 	

Leadership reflective log

Adapted from Rolfe, G, Freshwater, D and Jasper, M (2001) Critical Reflection for Nursing and the helping professions, a user's guide. Basingstoke, Palgrave Macmillan AoMRC guidance on reflection; http://www.aomrc.org.uk/wp-content/uploads/2018/08/MCJ15414-Academy-ReflectivePractice-Main-v3.pdf

Local programmes and opportunities

FMLM in collaboration with the NHS Leadership Academy have collated leadership development opportunities that are available both locally and nationally. This central resource for doctors in postgraduate training, signposting development opportunities, can be found on the FMLM website.

Regional representatives of the FMLM Trainees Steering Group will monitor for new opportunities and this site will be regularly updated.

Members of the FMLM Clinical Fellow scheme have also put together a helpful <u>Toolkit</u> signposting everyday opportunities for leadership learning in the workplace and during the course of a training programme.

In addition, educational supervisors may wish to note other relevant or local opportunities below:

Opportunity	Contact/website
e.g. Q initiative - Health Foundation	http://www.health.org.uk/programmes/the-q-initiative

Recommended reading

No reading list is ever complete, and not all readers will be interested in all the titles suggested. The intention is to signpost you to some of the more useful publications in recent years, exploring leadership styles, examining how you might enhance your own leadership and personal effectiveness, human factors, strategies to enhance clinical safety and how your own mindset and attitudes could hinder your progress and success as a leader. Many of these books can be downloaded as free audio titles, in addition to being available on e-readers and traditional format books. All were available to purchase October 2019.

Clinical leadership

ABC of Clinical Leadership, 2nd Edition Tim Swanwick and Judy McKimm

The ABC of Clinical Leadership explores and develops the key principles of leadership and management. It outlines the scope of clinical leadership, emphasising its importance in the clinical context, especially for improving patient care and health outcomes in rapidly changing health systems and organisations. Using short illustrative case studies, the book takes a systematic approach to leadership of clinical services, systems and organisations; working with others and developing individual leadership skills. This second edition has been fully updated to reflect recent developments in the field, including current thinking in leadership theory, as well as a focus throughout on workforce development and working in multidisciplinary healthcare teams.

Modern leadership tools and theories

Leadership Plain and Simple Steve Radcliffe

Described by *The Times* as the 'no-nonsense approach...shaking up the world of leadership', this book really does offer instantly-applicable advice. It contains no jargon or irrelevant theory, just practical insights, straightforward actions and simple guidelines to accelerate your growth as a leader. Whether you need guidance to lead an organisation or team or just want to feel more confident and effective at work, this book will show you how.

Consiglieri: Leading from the Shadows Richard Hytner

Hytner suggests it is time to celebrate the second-in-command, the *consiglieri*: Merlin to King Arthur, Al Gore to Bill Clinton, Rasputin to the Russian Royal Family. These are the deputies, Vice-Presidents, Chief Operating Officers, Chief Financial Officers, Department Heads etc. Supremacy comes with drawbacks (one of which is that everyone wants your job) and influence, authority and power can be found in much more interesting places than behind the CEO's desk. *Consiglieri* brings together historical examples, insights into Stalin, JFK, Winnie the Pooh and Eeyore, interviews with leaders in sport, business, politics and music and cutting-edge research from psychologists and academics to produce a fresh (and refreshing) approach to leadership.

The New Leaders: Transforming the Art of Leadership Daniel Goleman, Richard Boyatzis and Annie McKee

Goleman argues that emotionally intelligent leaders are now 'must-haves' for business today. But many readers have been left with, So now what do I do? *The New Leaders* answers that question by laying out the map for transforming leadership in individuals, in teams and organisations.

The 7 Habits of Highly Effective People Stephen Covey

A holistic, integrated, principle-centred approach for solving personal and professional problems. With penetrating insights and pointed anecdotes, Covey reveals a step-by-step pathway for living with fairness, integrity, honesty and human dignity - principles that give us the security to adapt to change, and the wisdom and power to take advantage of the opportunities that change creates. The adaptive action framework introduces a simple, common sense process to guide organizations and people through uncertain times.

Adaptive Action: Leveraging Uncertainty in your organization Glenda Eoyang and Royce Holladay

What? So what? Now what? Three deceptively simple questions invite you and your organization to devise solutions and improve performance across multiple challenging situations.

Coaching and Mentoring at work Mary Connor and Julia Pokora

Coaching is a pretty mainstream activity in many large, and small, organizations. This book focuses on the common ground between coaching and mentoring, offering key principles for effective practice. It is useful for trainers and trainees in medicine, and the authors have provided coaching training to postgraduate medical and dental education departments.

Human factors and clinical safety

Safer Healthcare: Strategies for the Real World Charles Vincent & Rene Amalberti

The authors of this book set out a system of safety strategies and interventions for managing patient safety on a day-to-day basis and improving safety over the long term. These strategies are applicable at all levels of the healthcare system from the frontline to the regulation and governance of the system.

Complications: A Surgeon's Notes on an Imperfect Science Atul Gawande

Gawande's first book is a series of essays on medical issues that arise in the life of a surgeon. There's some history of medicine, some looking towards the future, some powerful stories of the everyday life of a surgeon, and some thoughts on ethics (when should the doctor be paternalistic - for example, not wanting to take responsibility for complex decisions on the care of his own child,) the training of surgeons - obviously they need training but they aren't so good while they are practising.

The Checklist Manifesto Atul Gawande

Avoidable failures are common, and the reason is simple: the volume and complexity of our knowledge has exceeded our ability to consistently deliver it correctly, safely or efficiently. Gawande makes a compelling argument for the checklist, which he believes to be the most promising method available in surmounting failure. The checklist is an essential tool in virtually every area of our lives, and Gawande explains how breaking down complex, high pressure tasks into small steps can radically improve everything from airline safety to heart surgery survival rates.

Safety at the Sharp End: A Guide to Non-Technical Skills Rhona Flin & Paul O'Connor

Safety at the Sharp End is a general guide to the theory and practice of non-technical skills for safety. It covers the identification, training and evaluation of non-technical skills and has been written for use by individuals who are studying or training these skills on Crew Resource Management (CRM) and other safety or human factors courses. The material is also suitable for undergraduate and post-experience students studying human factors or industrial safety programmes.

How our own minds function

A Mindfulness Guide for the Frazzled Ruby Wax

Five hundred years ago no one died of stress: we invented this concept and now we let it rule us. Ruby Wax shows us how to de-frazzle for good by making simple changes that give us time to breathe, reflect and live in the moment. Let Ruby be your guide to a healthier, happier you. You've nothing to lose but your stress.

Thinking, Fast and Slow Daniel Kahneman

Why is there more chance we'll believe something if it's in a bold type face? Why are judges more likely to deny parole before lunch? Why do we assume a good-looking person will be more competent? The answer lies in the two ways we make choices: fast, intuitive thinking, and slow, rational thinking. This book reveals how our minds are tripped up by error and prejudice (even when we think we are being logical), and gives you practical techniques for slower, smarter thinking. It will enable to you make better decisions at work, at home, and in everything you do.

The Secret Thoughts of Successful Women: Why Capable People Suffer from the Impostor Syndrome and How to Thrive in Spite of It Valerie Young

This book provides important insights into the Impostor Experience of very competent women. The author provides important knowledge that can help women begin to truly appreciate and acclaim their success. A book that provides insight on how to overpower limiting thoughts and behaviours for any gender.