

Project Title

Training Effectiveness of Leadership Programmes Suites–Developing ExCEPtional Allied Health and Ancillary Leaders (DEAAL) – A Systematic Structured Programme to Equip **Emerging Managers**

Project Lead and Members

- Hsu Li Ren, HRD / Deputy Director
- Joanne Ho, HRD / HRD Consultant
- Heidi Tan, Allied Health Services / Professional Development Manager –
- Susan Niam, Allied Health Services / Director of Operations Pauline Yong, Clinical Support Service / Director of Operations

Organisation(s) Involved

Tan Tock Seng Hospital

Project Category

Leadership Training, New Pedagogy, Organisation Development

Keywords

Tan Tock Seng Hospital, Human Resource, Allied Health, New Pedagogy, Organisation Development, Leadership Training Programme, , Personality Profiling, Emerging Leader, Staff Empowerment, 3600 Feedback

Name and Email of Project Contact Person(s)

Name: Heidi Tan, Allied Health Services / Professional Development Manage

Email: Heidi Tan@ttsh.com.sg





THE ASIAN HOSPITAL MANAGEMENT AWARDS 2012 Presented in Conjunction with Hospital Management Asia

ENTRY FORM FOR HUMAN RESOURCE DEVELOPMENT CATEGORY

A series of activities or a project undertaken by the hospital that was aimed at developing a large percentage of its people as knowledge-based workers. Is it a sustainable activity and did it achieve its goals? How innovative was the project and program. Did it have a lasting improvement in the skills of its employees? How meaningful was the program to the employees? How useful is it in their work? Special weight is given to the percent of employees covered, how well it motivates employees to provide better service and how the training improves service.

INSTRUCTIONS

- a. Please fill out all the sections below and abide strictly by the word count. Words exceeding the maximum word count will be cut off automatically/truncated.
- b. IMPORTANT: It is necessary that the CEO certifies that all information you provide is true and correct by signing the form indicated in the last page.
- c. By submitting an entry, you agree that HMA will share relevant aspects of the Entry submitted on the HMA or related Resource Center website.

Background Information

Project Title **Training Effectiveness of Leadership Programmes Suites**– **Developing ExCEPtional Allied Health and Ancillary Leaders (DEAAL)**– A **Systematic Structured Programme to Equip Emerging Managers**

Date Project Started 1 Feb 2012

Enhancements made (for projects that did not start operations between January 2012 to May 2013)

Key staff involved in the project

| - | |
|---------------------|---|
| 1. Name | Hsu Li Ren |
| Department/Function | HRD / Deputy Director |
| 2. Name | Joanne Ho |
| Department/Function | HRD / HRD Consultant |
| 3. Name | Heidi Tan |
| Department/Function | Allied Health Services / Professional Development Manager |
| 4. Name | Susan Niam |
| Department/Function | Allied Health Services / Director of Operations |
| 5. Name | Pauline Yong |
| Department/Function | Clinical Support Service / Director of Operations |

PLEASE ANSWER THE FOLLOWING QUESTIONS USING THE MAXIMUM WORD ALLOCATIONS INDICATED

 Please give some background to the project or program including how it originated such as if a needs analysis was done? Give details of how the project related quality of care to improving skills and knowledge of service staff. Outline any specific goals or targets you had in mind prior to the project or program being put together. MAX 350 WORDS.

Background/ Origin:

As healthcare professionals are promoted into supervisory and leadership roles, they require new sets of competencies in leadership.

Quality of Leadership -> Engaged staff -> Quality of Care / Services

The impact leadership might have on the stress or wellbeing of staff, is related to the quality of care produced. Key UK studies of health service leadership reveal that staff want leaders who are able to engage them; provide them with discretion and control wherever possible; characteristics which incidentally, have been shown to be important in terms of lowering staff stress and increasing job satisfaction (Firth-Cozens & Mowbray, 2001; Alimo-Metcalfe & Bradley, 2008), which affect the overall quality of patient care, including safety.

Thus, the DEAL project embarked on a journey to review and propose a training framework and support structure to equip emerging leaders with the necessary leadership skills /behaviours and to encourage demonstration of theses leadership skills / behaviours to manage and engage their staff.

Project Goals & Key features of the programmes include:

1) Equip emerging leaders with a set of first level key leadership skills focus on managing and leading staff (people) according to Mintzberg 10 Management Role.

A suites of 7 leadership programmes, starting with a profiling exercise, was conducted over a 7 month period, at monthly interval, introduced from simpler to more complex module, allowing time to internalize, practice and review and level on the skills learned. *(Appendix A).*

2) Create a learning support structure to transfer learning from classroom to job through continuous skills practice, application & review at multiple points *(Appendix B)*:

- With facilitator
- With course peers
- With immediate supervisors

The HODs of both AHS and CSS went through the 7 series prior to the emerging leaders. This sets alignment of tools and methodologies use, as well as for HODs to provide a supportive culture to coach and guide their emerging leaders as they undergo the courses.

3) 360° 'Before & After' Measurement to ascertain positive change and increase demonstration of leadership behaviour.

Focus Group Findings:

A focus group was conducted with the Allied Health Service Division and Clinical Support Service Division to identify current training gaps and determine the learning needs and approach suited for their emerging (next generation) leaders.

Gaps and Issues Highlighted:

Leadership Learning was based on what was available (rather than based on competency needed specific to the leadership level):

- Training places of in-house programme,
- Availability of in-house Speakers for talks.
- There was no dedicated, systematic leadership training for emerging leaders:

Learning Needs Analysis

It yielded useful insights:

- a. The skills sets identified for the emerging leaders focus mainly on people supervisory / management skills: effective people engagement, communication skills, coaching and delegating, ability to lead teams, including leading change and conflicts.
- b. Preference was for batches of selected staff to undergo and complete a series of selected core leadership programmes, structured systematically to build up their leadership competencies within a safe environment of

peers (without direct reports) to allow them to share freely about their challenges, to get advice and to try out the new skills sets.

c. Provide learning platform that promotes networking and support for fellow emerging leaders.

Intended Outcome of Programmes:

That emerging leaders:

- 1) Gain insight about self and others personal preference, current people leadership skills sets and gaps;
- 2) Appreciate the different personalities and strengths of staff
- 3) Learn and apply the leadership skills to engage and lead teams, balancing both the business and people aspect of work.

Word count: 587 / 350

 Please describe how the project was beneficial for the staff as well as benefits from the patient's perspective and experience. Was any attempt made to correlate this program with better service? Preferably please present quantifiable information such as "before and after" measurements if any. MAX 200 WORDS.

Measurement of Training Effectiveness . Benefits for Course Participant

We adopted the belief that:

A) Participants would rate the course as meeting its objective (good) (KirkPatrick Level 1) if the training taught the skills they require.

B) The right selection of course based on skills required should lead to an increase in knowledge / skills.(KirkPatrick Level 2)

C) The strength of the training, must be in the transfer of learning back to work, with an increase in the skills / behaviours observed back on the ground (KirkPatrick Level 3)

D) There must be a positive impact on staff by the leaders behaviours back at work (KirkPatrick Level 4)

360° 'Before & After' Survey Measurement by Supervisors / Peers / Direct Reports

The project was measured in terms of its effectiveness in skilling the participants as well as their leadership impact felt by their Supervisors, Peers and Direct report through a 360% survey.

Key Results Areas:

Level 1: (Reaction) If Programme Met its Objective.

Participants indicated the training was good as the courses met its objective (Rating: 4.3/ 5).

Level 2: (Learning) Transfer of Learning.

Participants reported an average 40% increase in knowledge and skills, validating that the courses identified meets the training needs of the participants in leadership skills.

Level 3: (Behaviour) Was Skills Applied Back to Work

An online survey using 360 degree feedback from supervisors, peers and direct reports measured 11 leadership behaviours that were taught in the courses. The results shows a positive increase in leadership behaviours post training, validating that participants found the course useful; and that they were able to apply the leadership skills and techniques back at work **(Appendix C).**

Level 4: (Results) Does it translate into positive impact/results for the staff they lead on the ground.

Survey respondents feedback that the impact on them from the change in the participants' behaviour made them feel more involved, engaged, and that they experience more transparency at work as well as better leadership.

The positive results and feedback from this leadership training approach sets the stage for further training of emerging leaders. As a result, the programme will be systematically rolled out to subsequent badges of emerging leaders, to equip them with the essential leadership skills, that will translate to more engaged, involved staff - professional and front-line staff who provide direct services to patients on the ground.

Word count: 392 / 200

3. Please explain the affect of the program on employee morale and how well it was received. What other benefits were derived BY THE STAFF or by the Hospital? **MAX 200 WORDS.**

Programme Benefits for Course Participants and their Staff Morale The DEAAL programme was well received by the participants. The effects felt by staff were positive.

There were 3 main areas of benefits experienced by the DEAL course participants:

- 1) Gaining insight of self and developing leadership competencies
 - DEAL participants talk about their more dominant traits and being aware they have to develop/flex their other less dominant traits to balance their leadership style.
 - The process of acknowledging their predominant style and actively adapting it when interacting with others in different situations is a great start for change.
- 2) Knowing others in the group and learning together as an intact group

- Participants feedback that the structure of learning together in an intact group improves the learning effectiveness and facilitate peer sharing between colleagues from different department with similar supervisory experiences.
- They feel more open to share and discuss about 'sensitive issues' which they may otherwise not be comfortable in mixed classes, with more junior staff.
- One participant particularly enjoyed learning with other participants who had different personality traits. That gave her opportunities to learn to relay, find out what worked and what did not within a safe class environment, to fine tune her style engaging staff of different personalities and preferences.
- 3) Seeing increased empowerment from others Some participants feedback that:
 - they now find it easier to talk to their staff;
 - their work has become easier using the right tools and techniques of managing people. Staff feels more empowered and engaged.
 - One other participant feedback that they feel a sense of achievement from helping and seeing others grow.

Word count: 274 / 200

4. Please explain how staff was selected to be included in the training program and what percentage of the staff was included. Did the project produce sustainable results? **MAX 150 WORDS.**

Whilst the focus of the Leadership training programmes was to equip the emerging leaders, further deliberation on how to reinforce and achieve sustainability of the behaviours concluded that we need to adopt and create alignment through common terminologies, language and tools starting from the HODs down to the emerging leaders, creating an environment to reinforce the desired leadership behaviours.

Staff Selection for the Training Programme:

- Heads of Department (HODs) of the 2 divisions (Allied Health Services and Clinical Support Services)
- Emerging leaders:
 - Assistant Managers
 - Staff newly / about to be promoted
 - Staff who are leading small teams / projects involving people

Percentage of Staff Included

The project was piloted on 2 classes of HODs followed by 2 classes of Emerging Leaders

While the HODs were not the main intended audience, the aim was to synchronise with them the set of common skills and terminologies in which to provide coaching, support and feedback on the ground to the emerging leaders. The survey targeting the emerging leaders was conducted at the end of the 7 months of their learning journey, to check for consistency and sustainability of leadership behaviours. The positive change and increase in leadership behaviours confirmed that the training methodology worked.

Forward Plan

With the positive results shown, this emerging leadership framework is fully endorsed by the 2 divisions. Both the AHS and CSS will be committed to sending 2 batches of emerging leaders each financial year to go through the structured programme to equip all their current and subsequent emerging leaders with the right people management skills to engage and lead.

Additional divisions / department, have and are coming on board, to adopt similar learning systems and approaches.

Specific department include:

- 1. Nursing Division Nurse Leadership Management Progarmme (Staff Nurse / Senior Staff Nurse)
- Office of Clinical Governance CSI / PRS (Assistant Managers / Senior Executives)
- 3. Department of Continuing & Community Care (Pilot for Doctors and Clinical Front-line Supervisors); &
- 4. Division of Operations (Outpatient) Senior Patient Service Associates (front line service supervisor)

The programme when rolled out in its entirety, will essentially equip 70% of the entire leadership positions within the hospital of 7400 staff.

Word count: 364 / 150

5. Please give some background to the project team that originated, studied and developed the project or program. MAX 200 WORDS.

| Name | Position | Role |
|------------|------------------------|--------------------------|
| Hsu Li Ren | Deputy Director – | Provide advice and |
| | Human Resource | guidance, Custodian of |
| | Development | TTSH In house Learning |
| | (HRD)Department | Programme |
| Joanne Ho | HRD Consultant – | Oversee and develop |
| | HRD | leadership training |
| | | programme and |
| | | framework |
| Heidi Tan | Professional | Oversee the professional |
| | Development | development of staff, |
| | Manager – Allied | including leadership, |
| | Health Services (AHS) | within AHS. Key person |
| | | who mooted the review |
| Susan Niam | Director of Operations | Key Stakeholder of |
| | (AHS) | Programme |

Background of the project team that originated, studied and developed the project / programme:

| Pauline Yong | Director of Operations (CSS) | Key Stakeholder of Programme |
|--------------|--|--|
| Clint Ong | Professional Development Manager – Allied Health Services (AHS) | Oversee the professional development of staff, including leadership, within CSS. Invited to come onboard |

Word count: 118 / 200