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# Barking, Havering and Redbridge University Hospitals NHS Trust Fellowships in Clinical Leadership Programme

## An Evaluation

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## Summary

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Leadership is widely seen to be central to improving the quality of healthcare and existing research suggests that absence of leadership is related to poor quality and safety performance. Leadership training might therefore provide an important means through which to promote quality improvement and, more widely, performance within the healthcare environment. This report presents an evaluation of the Fellowships in Clinical Leadership Programme, which combines leadership training and quality improvement initiatives with the placement of temporary external clinical champions in Barking, Havering and Redbridge University Hospitals NHS Trust. We assessed impacts of the Programme on individual and organisational change, alongside core enablers and barriers for Programme success. Analyses drew on the principles of a theory-of-change-led realist evaluation, using logic modelling to specify the underlying causal mechanisms of the Programme. Data collection involved a stakeholder workshop, online questionnaires of programme participants, senior managers and support staff (n=114), and follow-up in-depth semi-structured interviews with a subsample of survey participants (n=15).

We observed that the Programme had notable impacts at individual and organisational levels. Examples of individual impact included enhanced communication and negotiation skills or increased confidence as a result of multi-modal leadership training. At the organisational level, participants reported indications of behaviour change among staff, with evidence of spill-over effects to non-participants towards a greater focus on patient-centred care.

One core feature of the Programme was protected time for participants to engage in quality improvement activities, which was perceived as one of the key enablers of Programme success, along with the strong support by members of senior management. Other reported enablers included dedicated project management support, and the commitment of the programme participants. Key challenges included financial and time constraints, staff resistance to change, and short programme duration.

Our findings suggest that there is potential for combined leadership training and quality improvement programmes to contribute to strengthening a culture of care quality in healthcare organisations. Our study provides useful insights into strategies seeking to achieve sustainable improvement in NHS organisations.