



**Middlesex
University**

Executive Summary

Institute for Healthcare Management.

**Evaluation Study of the Accredited Manager
Scheme Pilot Project.**

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1. Introduction

This evaluation report was commissioned by the Institute of Healthcare Management (IHM) in March 2009 and is based on the accredited manager pilot project that started in May 2009. The IHM pilot project was funded by the Department of Health (Estates). The pilot project aimed to offer managers for the health and social care sectors the opportunity to gain accredited manager status based upon their previous performance and achievements towards nine core manager behaviours¹. The pilot project was intended to develop and implement materials that would support the managers in completion of a portfolio of achievement to demonstrate competence in the behaviours (Sugden, 2009).

The evaluation study of the pilot project has aimed to include the experiences of the main stakeholders, namely; the candidates (Healthcare and Social), the pilot project team, a representative from the Department of Health (Estates), representing the commissioning body for the project, and the assessors of the candidate portfolios and viva voce examinations. The candidates were drawn mainly from the field of estates and facilities managers within the healthcare sector, with two participants for the social care sector.

The project was prompted by the recognition that many managers in the health and social care sector may encounter difficulties in finding the time to attend conventionally delivered training and development programmes. There was also recognition of the need for experienced managers to be able to demonstrate their competence towards good practice behaviours rather than have to undertake taught delivery.

The pilot project was intended to work with a small sample of between 12 – 18 relevant managers from health related organisations, including (though not exclusively limited to) managers of estates and facilities, as well as managers within the social care sector.

The pilot project was intended to run from April 2009 to November 2009. However, due to candidate pressures of work, agreement was obtained from DoH Estates to delay the start until May 2009. The project timescale was also amended to finish at the end of May 2010 to enable the pilot candidate group to complete.

Evaluation remit

The evaluation study was to focus on the effectiveness with which the IHM pilot project enabled the potential for accreditation of health and social care managers and ultimately, the development of an IHM accreditation scheme. The evaluation study was also to consider the potential for expansion of the pilot accreditation scheme.

The IHM recognise the need for regulation of health and social care managers, which it believes should be the responsibility of the profession. The IHM is a professional body for health and social care managers and considers that it has a role in exploring the potential for a professional accreditation system.

The evaluation of the pilot

¹ The Nine Behaviours, referred to as the “Behaviours” or “Nine Behaviours” throughout this report, were developed by Blended Learning Limited (www.blendedlearning.ltd.uk) and have been adopted by the IHM for use in the Accredited Manager Pilot Project with agreement by Blended Learning Ltd.

This document reports on a qualitative evaluation of the IHM accredited manager pilot project. The evaluation period was May 2009 to May 2010. The evaluation included data collection of stakeholder views questionnaire, focus group interviews and individual telephone interviews. The evaluation was undertaken in four stages by two experienced researchers from the School of Health and Social Sciences. The stages in the evaluation project are shown in the main evaluation report.

Evaluation Research.

The evaluation study was based on mainly qualitative data with some quantitative data used for supplementary analysis. The data analysis was intended to draw a balanced understanding of the initiative as a whole whilst pinpointing specific highlights in the experience of the stakeholders. The analysis of findings from the evaluation was analysed from an appreciative inquiry perspective (see for example Oliver, 2005); where learning can be derived and enhanced through understanding of actions that are deemed positive. The interview data was analysed using a thematic analysis approach in order to derive key themes emerging from the voice of the participants.

All views expressed in this report are those of the researchers and not necessarily the view of Middlesex University.

Ethical issues

The evaluation study will aim to maintain confidentiality of participants and data collected. Informed consent will be obtained from all participants involved in the research. This research has been approved by the Middlesex University Health Ethics Sub-committee.

2. Structure of the evaluation and methodology

The evaluation was based on a relatively small pilot group sample of 15 managers from the health and social care sector, which included a high proportion of managers with responsibility for estates and facilities. The evaluation was intended to focus on the effectiveness of the pilot project to test a new IHM accredited manager scheme.

The main evaluation project research questions were to understand:

- How the candidates were able to interpret the behaviours and gather evidence for a professional portfolio.
- What opportunities and difficulties were there in gathering the evidence for accreditation?
- How useful was the information and support provided to the candidates throughout the project?
- What is the potential for university accreditation of the IHM Accredited Manager Scheme?

In order to understand the above points, the evaluation was structured to gather the following data:

1. An initial evaluation questionnaire on background professional details was sent to all candidates.
2. Candidates were invited to respond to a list of project themes around the mid point of the project.
3. The project team and DoH representative were also asked to comment on the themes.
4. Assessors were interviewed for their experience of the process.
5. Candidates were asked to comment on their overall experience at the end of the project after they had successfully gained accreditation. The themes and questions explored are shown in the full report.

The methodology for the evaluation project has been to analyse the data as a qualitative case study using a thematic analysis of the key emerging themes in order to answer the research questions and propose any recommendations for future delivery of the IHM accredited manager scheme. This approach draws on the qualitative evaluation method described by Guba and Lincoln (1989) as 'fourth generation evaluation' as it is intended to go beyond quantitative measurement. The aim is to capture aspects of practice, culture and meaning for participants in understanding potential effectiveness, efficacy and efficiency of, in this case, learning development.

Sampling strategy

The evaluation study has focused on capturing as many responses as possible from the main stakeholders (Candidates, Project team, DoH representative, Assessors). Purposive sampling started with the administration of the questionnaire at the start of the project. All of the participants were invited to complete an initial questionnaire together with participant information sheet informing them about the evaluation study and ethical issues and a consent form.

Out of the 15 participants recruited to the project, 14 completed the consent form to take part in the evaluation. Of the 14 who consented to take part in the project, 10 completed the initial questionnaire.

During the pilot project period data was collected in the form of a focus group meeting involving 5 participants and 7 individual telephone interviews. It became evident that working with a participant group of mainly senior professionals meant that it was extremely difficult to arrange focus group meetings and so individual telephone interviews provided a more flexible option.

The Project team were included in the interim interview stage and 2 members were interviewed, using the same question themes as had been asked of the participants. A representative from the Department of Health (as the Pilot Project Sponsor) was also included, also using the interim question themes.

The Assessors of the completed were interviewed, 3 assessors agreed to participate in telephone interviews. Assessors were invited to respond to specific questions and themes.

Lastly, 5 candidates who had passed the portfolio and viva voce were invited to respond to questions and themes about their overall experience. These five candidates were chosen as they were the first of the group to pass overall.

3. Discussion and conclusions for the IHM Pilot

The evaluation of the IHM Accredited Manager Scheme pilot study has benefited from a cohort of interested and enthusiastic managers from the health and social care sector. The pilot will prove invaluable for developing the learning materials and delivery and assessment process for future candidates to benefit from the scheme.

The underlying ethos of this evaluation study was one of appreciative inquiry, where the benefits or positive aspects of a development are considered in order to draw out the learning from success. This is fundamentally different from focusing on problem solving (Cooperrider et al, 2000). This evaluation report has aimed to draw on the experiences of participants in a new IHM initiative for accredited managers in health and social care, which has been received with enthusiasm by all who took part.

All of the candidates who took part were genuinely supportive and positive about the potential for this form of learning development. Many cited its importance to busy professionals who may not have the time to attend formally delivered courses and whom had much experience in their area of management responsibility.

The Accredited Manager Scheme was considered for possible accreditation by Middlesex University, though in the pilot stage the learning materials were still in development. The scheme would seem to relate, in terms of academic level, to postgraduate study and broadly at around 60 credits. However, a formal application would be required in order to consider the academic level in more detail.

The pressure points in delivery and assessment have been captured in the voice of the participants as a means of providing a balanced overview of the experience of this approach to professional learning and development. In this respect, the consolidated recommendations that are recorded below should be seen as a part of a process of positive change.

4. Consolidated Recommendations

The consolidated recommendations have been located under the main related category, which is shown in bold:

Overall Accredited Manager programme

- Guidance on the workload would be helpful and to reinforce the need for candidates to undertake the work on a regular basis rather than leave it all to the submission deadline.
- The memory stick was found to contain a fault in the structure of the portfolio file.

Assessors

- Improved communication would be helpful with the assessors so that there is a regular feedback/discussion route about the level and standards expected within the portfolios.

Candidates

- Named contact persons would be helpful including contact telephone numbers.
- Candidates could be allocated a personal 'mentor' to support them throughout their portfolio development.
- Encourage independent learning groups so that candidates can learn from each other.

Workshops

- It would be useful to have preparatory workshops early on and closer together in order to enable candidates to respond to any queries or misunderstanding that they have after the first workshop.
- Navigation within the memory stick and use of the portfolio development file and other materials contained on the memory stick could be discussed and included in a workshop at the start.
- Workshop dates should be set in advance with repeat sessions scheduled.

Portfolio

- A selection of anonymized example portfolios should be made available as a guide.
- Need for candidates to have additional advisory support as they near portfolio completion to ensure that portfolios are checked by the advisor prior to submission for summative assessment.
- More detailed information is needed for the candidates in portfolio preparation so that evidence is considered from a strategic perspective and is critically reflective in nature and not historic narrative.

Guidance

- More detailed guidance required on the types of evidence that might be used
- More guidance on reflective writing and how this is presented in the portfolio would be helpful.
- The Nine behaviours could be individually numbered so as to ease the process of candidates cross referencing to their evidence within the portfolio. This might also aid the portfolio assessment process.
- It would be helpful to have clearer guidance on how much evidence is required against each strand in the behaviours.
- Specific areas were highlighted as difficult for some estates and facilities candidates to evidence; the behaviours related to; corporate governance, patient engagement and innovation. There might be further written guidance on how these behaviours might be understood and evidence.

Viva

- It would be helpful to ensure that candidates understand the focus of the viva voce in advance.
- Candidates should be made aware that the viva may go beyond the evidence included in their portfolio and introduce some perspectives that they will be invited to respond to.
- Some respondents felt that the viva panel had not seen their portfolio, it might be interesting for candidates to formally present their portfolio to the panel, which would also demonstrate their communication skills. This could be in addition to the normal panel questions.

The evaluators are indebted to the candidates, IHM project team and assessors who contributed to this study, thank you all!

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