



The University of Manchester Research

Evaluation of the NHS Leadership Academy Intersect systems leadership programme

Link to publication record in Manchester Research Explorer

Citation for published version (APA):Boyd, A., Nelson, A., & Shawhan, K. (2017). *Evaluation of the NHS Leadership Academy Intersect systems* leadership programme: Part 2 - Longer term impacts. Alliance Manchester Business School, University of Manchester.

Citing this paper

Please note that where the full-text provided on Manchester Research Explorer is the Author Accepted Manuscript or Proof version this may differ from the final Published version. If citing, it is advised that you check and use the publisher's definitive version.

General rights

Copyright and moral rights for the publications made accessible in the Research Explorer are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

Takedown policy

If you believe that this document breaches copyright please refer to the University of Manchester's Takedown Procedures [http://man.ac.uk/04Y6Bo] or contact uml.scholarlycommunications@manchester.ac.uk providing relevant details, so we can investigate your claim.







Evaluation of the NHS Leadership Academy Intersect systems leadership programme – Part 2

Longer term impacts

Alan Boyd, Adrian Nelson and Karen Shawhan

July 2017

About the Authors

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.

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

Karen has significant experience in NHS management, consultancy, project management, evaluation skills, and teaching and development, including being a tutor on the Elizabeth Garret Anderson Programme. Karen led a large evaluation of GP care and treatment relating to diagnosis of cancer, using a range of quantitative and qualitative tools. 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.

Acknowledgements

We are grateful to the participants in the first Intersect Programme for their generosity in giving their time to complete our evaluation surveys and be interviewed. We hope that this evaluation report will be helpful to you as you continue your systems leadership development journey.

We are also grateful to the many colleagues of participants who also gave generously of their time to complete surveys for this evaluation.

We would like to thank the Intersect Programme Faculty, and other colleagues at the NHS Leadership Academy for their engagement and cooperation, which have enhanced this evaluation.

Executive Summary

This report describes the findings of the second 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 pertain to longer term impacts, from early 2016 up until spring 2017; approximately 21 months after the conclusion of the programme. This report should be read in conjunction with our initial evaluation report which covered impacts up to 6 months after the programme ended, and can be downloaded from

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

Following on from the first part of our evaluation, we conducted a third emotional intelligence survey of participants and interviews with six participants who had each been interviewed at two previous time points. We also conducted a final survey of participants which asked directly about the impact of Intersect while also collecting further qualitative data.

Almost two years after completing the Intersect programme, the participants in our interviews and survey describe the development of a more collaborative approach to leadership that emphasises building relationships and enabling others to contribute their relevant skills and experience. This approach is underpinned by learning about the strengths and weaknesses of self and others through engaged action and reflection. This greater awareness of self and others has enabled them to develop and maintain more productive relationships across the systems they work in. Participants attribute this reflective approach to their participation in the Intersect programme, along with enabling others to make best use of their capabilities and establishing more productive relationships.

Participants report having gained the confidence to "let go" and work with others in a genuinely collaborative way, rather than feel threatened by them. They are also more confident to put themselves forward, and are more assertive, seeking 'win-win' outcomes. Furthermore, participants believe that it is their participation in the Intersect programme that has given them more confidence to engage with difficult issues and address them, rather than avoiding them.

Statistical analysis suggests that the Intersect programme has typically engendered sustained increases in emotional intelligence among participants. Qualitatively they describe improved emotional self-regulation – being able to stay calm in demanding situations and being more resilient in the face of difficulties.

Participants also report being better able to see the 'bigger picture' and attribute clarity of focus on key goals to Intersect, along with being better able to take account of the complex range of factors at play across systems. They believe that Intersect has helped them to make a difference, and has been more beneficial than other development opportunities.

The above outcomes are very similar to those identified in our previous report as being produced by the programme, where we noted improved confidence and self-belief; greater empathy which improved the quality of interactions and led to better relationships; and feelings of calm and patience. This additional evaluation work provides further evidence that this is indeed the case, evidence that these benefits have been sustained, and some insights into the causal chain of impact. Participants reported a greater capacity for reflection and reflexivity (reflection in the moment and adapting behaviour), and this led to feelings of calm and improved confidence, thereby improving their leadership practice.

The NHS Leadership Academy may be able to help enhance and sustain impact from all 3 cohorts of the Intersect programme by supporting ongoing networking within and between the cohorts. Consideration should also be given to providing access to career development advice for cohort 3 participants, and possibly retrospectively to previous participants. Going forward, this evaluation suggests that programmes like Intersect could make a positive contribution to needed improvements in systems leadership across health and social care.

Our evaluation will continue in order to better understand how it is that Intersect brings about changes in the leadership of participants. We plan to produce a further evaluation report in 2018.

Contents

1	Intro	duction	6		
1.1	The	Intersect Programme for developing systems leadership	6		
1.2	Ove	rall evaluation design and objectives	6		
1.3	Prev	ious results	7		
1.4	Eval	uating longer term impacts	8		
2	Meth	ods	9		
2.1	Our	Our approach to the evaluation			
2.2	Design and conduct of the surveys				
2.3	Design and conduct of interviews with programme participants				
3	Findi	ngs	.12		
3.1	Impa	act of the programme on the emotional intelligence measure (TEIQue)	. 12		
3.2	Impact of the programme according to participants - survey		. 12		
	3.2.1	Job role changes and impact on careers	12		
	3.2.2	Impacts of participating in Intersect	13		
	3.2.3	What would help participants after Intersect?	15		
3.3	Impact of the programme according to participants - interviews		. 16		
	3.3.1	Role	16		
	3.3.2	Contextual Challenges	17		
	3.3.3	Reflections on Leadership	18		
	3.3.4	Changes in Leadership since starting the Intersect Programme	19		
	3.3.5	The Impact of Intersect	21		
	3.3.6	The Future	23		
4	Discussion				
4.1	Impa	act of the Intersect programme	. 24		
4.2	Reflections on the evaluation process				
5	Conclusion2				

1 Introduction

This report describes the findings of the second 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 pertain to longer term impacts, from early 2016 up until spring 2017; approximately 21 months after the conclusion of the programme. This report should be read in conjunction with our initial evaluation report which covered impacts up to 6 months after the programme ended, and can be downloaded from

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

In this first section of the current report we provide a very brief overview of the Intersect Programme, summarise the results from our previous evaluation work on the programme, and explain how we have built on this to evaluate longer term impacts.

1.1 The Intersect Programme for developing systems leadership

The need for effective systems leaders is acknowledged across all sectors, and is characterized in health and social care by a leader able to engage with and positively respond to 'wicked' problems related to issues such as reduced public funding, on-going need for large-scale transformation and integration, increasing demand for services, and medical and technological advances.

The NHS Leadership Academy's Intersect Programme¹ is a leadership development programme which is framed by a phenomenological approach, and draws on Group Relations and psychodynamic approaches to personal and leadership development. It aims to develop social and emotional intelligence, to promote more effective inter-personal relationships within the workplace, and to increase self-awareness and reflexivity, all of which are acknowledged as important attributes of effective systems leaders.

An initial cohort of 40 participants, drawn from a range of public and third sector organisations, commenced the programme in July 2014; completing it in July 2015. The programme consisted of six 3-5 day residential workshops that incorporated a variety of activities, interspersed with facilitated on-line discussion.

1.2 Overall evaluation design and objectives

The evaluation is a longitudinal, mixed methods design incorporating semi-structured telephone interviews and structured online surveys, both during the programme and periodically after it ended. Data collection was informed by the development of a programme theory, drawing on academic literature, programme documentation, and interviews with the original faculty.

¹ http://www.leadershipacademy.nhs.uk/programmes/intersect-systems-leadership-programme/

The overall objectives of the evaluation are:

- 1. Assess the impact of the Intersect programme:
 - a. On participants
 - b. On local health and care systems
- 2. Generate insights to help improve this first programme as it proceeds, and future Intersect programmes:
 - a. Understand how the various components of the programme contribute to the impact that is achieved.
 - b. Understand how contextual factors affect the impact of the programme
 - c. Engage participants and faculty in generating these understandings and making use of them
- 3. Develop and test tools to facilitate effective and efficient monitoring of the programme by the NHS Leadership Academy.

1.3 Previous results

In the first part of our evaluation we assessed three qualities that are related to systems leadership capability: emotional intelligence, transformational leadership and civic capacity:

- Emotional intelligence the ability to monitor one's own and other people's emotions, to discriminate between different emotions and label them appropriately and to use emotional information to guide thinking and behaviour - as measured by the TEIQue instrument².
- Transformational leadership building trust, acting with integrity, inspiring others, encouraging innovative thinking and coaching people - as measured by the Multifactor Leadership Questionnaire (MLQ5)³.
- Civic capacity consists of three components civic drive is the motivation to be involved with social issues and see new opportunities; civic connection is the strength of social capital among the leader's social networks that enable successful collaboration; and civic pragmatism is the ability to translate social opportunities into practical reality.

Self-assessments of all these measures all increased substantially for the group of programme participants we surveyed. These increases were also statistically significant. The increases were greater than for a matched comparison group of colleagues, and observer colleagues also detected increases, but there was insufficient data to demonstrate statistical significance of these increases in observer assessments.

14 participants were interviewed part way through the Intersect programme, and 11 of these participants were then interviewed again approximately six months after the end of the programme. These interviews showed that participants had realised a number of profound changes which they reported had positively impacted on their leadership roles. Following programme completion, participants reported a range of impacts which would be helpful in engaging effectively in inter-organisational systems, including improvements in selfconfidence, relationships within the system, self-awareness through reflection and reflexive capacity, and valuing diversity. Participants were also able to recount practical examples of how their personal development translated into positive leadership actions and responses in the workplace.

² http://www.psychometriclab.com/Home/Default/2

3 http://www.mindgarden.com/16-multifactor-leadership-questionnaire

The developmental process was not always clear to the participants themselves, in that they could not attribute particular changes to particular components of the programme, but they did attribute change to the programme as a whole.

We concluded that the first Intersect Programme provided substantial value to many of the programme participants, providing them with insights into their leadership behaviours and giving them the confidence to engage more in the leadership of systems.

1.4 Evaluating longer term impacts

The second part of our evaluation, which is the focus of this report, aims to assess the longer term impacts of the programme on participants and on the health and social care systems they are part of. Many programmes are not evaluated for any significant length of time after the end of the programme, leaving their ultimate value open to question. By following up Intersect Programme participants for almost 2 years after they completed the programme, this evaluation provides evidence for a more complete assessment of impact and value.

2 Methods

In this section we first provide an overview of our overall approach to the evaluation, based on initial thinking about the nature of the Intersect programme. Then we provide details of the surveys and interviews we conducted.

2.1 Our approach to the evaluation

We planned to provide a longitudinal statistical analysis of participant outcomes through conducting online surveys incorporating instruments that measure emotional intelligence, transformational leadership and civic capacity. These would include surveys of participants, plus surveys of a matched comparison group of colleagues, and of observers of the participants. We had already conducted such surveys at two time points in part one of our evaluation. In the second part of our evaluation we planned to conduct a third round of surveys in order to produce longitudinal data at three equally spaced points in time, approximately 12 months apart. In addition we also planned to conduct a third set of interviews with selected participants to get a richer picture of impact, including impacts on health and social care systems.

Given the relatively small number of participants on the programme, high response rates would be needed for the findings from inferential statistics to be robust. In view of downward trends in response rates over time however, and taking account of the burden on participants, we decided to revise our survey plans. We conducted the third emotional intelligence survey with participants only, and we replaced the third transformational leadership and civic capacity surveys with a relatively short final survey of participants which asked directly about the impact of Intersect while also collecting further qualitative data.

Final follow-up interviews were conducted between January and June 2017 with six participants who had each been interviewed at two previous time points. The aim of these interviews was to discover the nature and experience of any learning and longer term, sustained impacts on participants' leadership in terms of their behaviour and attitudes. Comparisons with previous interviews would give a sense of how impacts changed over time. The final interview schedule was based on Borton's reflective model (Borton, 1970)⁴. We asked participants to reflect on their leadership approach, the challenges they faced, their reflections about their experience of Intersect, and their thoughts for the future, about their own leadership and future challenges.

2.2 Design and conduct of the surveys

Online surveys were conducted using QualtricsTM software. Invitations were issued by email, together with up to two reminders. In this section we describe the questions that were asked in the final survey. The questions for the emotional intelligence survey are described in our previous evaluation report.

In our final survey, conducted approximately 18 months after the end of the programme, we asked participants to describe up to three of the most important impacts on them of the Intersect programme, and to say what further impacts had followed, with regard to:

- The people you work with (within and beyond your own organisation)?
- Organisations, services and communities?

⁴ Borton, T. (1970) *Reach, Touch and Teach*. London: Hutchinson

Participants were also asked if they had changed their job or role since beginning the Intersect programme, what sort of change it had been (E.g., promotion, sideways move "downsizing", retirement), and how participating in Intersect had impacted on their career.

Based on our programme theory and data gathered previously in the evaluation we asked participants to indicate on a Likert scale the extent to which Intersect had produced the following impacts:

- It has helped me to establish more productive relationships with other people
- It has made me place greater emphasis on helping others to develop and make full use of their capabilities
- It has given me more confidence to engage with difficult issues and address them, rather than avoiding them
- It has helped me focus on what is most important and valuable, rather than on superficial things
- It has helped me to be more astute and take better account of the complex range of factors at play within and beyond my organisation
- It has helped me to make a difference

We also asked participants to consider the counterfactual – whether their systems leadership would have benefitted as much if they had participated in other development opportunities instead of Intersect.

Finally, we asked them to indicate what, going forward, might help them to build further on what they had gained from the Intersect programme.

2.3 Design and conduct of interviews with programme participants

Final interviews with six selected programme participants were conducted in Spring/Summer 2017; roughly 21 months after the end of the programme. The six participants were primarily selected on the basis of their prior engagement with the evaluation interviews, availability, and accessibility. They were also selected on the basis of 'maximum variation' sampling, wherein the characteristics of the participants were mapped for diversity of demographic backgrounds on a range of criteria for example as sector and gender so as to represent a diverse range of perspectives.

Table 1: Characteristics of participants who were interviewed

Gender	Job Title	Sector/Organisation Type
E	Consultant in Public Health	Local Government
E	Senior Commissioning Manager	Clinical Commissioning Group
E	Chief Executive	Third Sector Hospice Care
E	HR Director*	Central Government Department
M	Head of Challenged Provider Policy*	NHS agency
М	Deputy Medical Director & GP trainer*	Ambulance Trust

^{*} denotes change in job role since previous interview

The aim of the interviews was to understand how the programme was experienced and understood among different people, in different settings and at different times, and the outcomes and impacts that had resulted. The interviews were semi-structured, with

participants being given the opportunity to relate actual examples of personal experience about the programme or within their wider working lives. The themes covered during the interviews are shown in Table 2.

Table 2: Themes explored in the 3rd round interviews

Themes	Description
Role and context:	The person and their role (and how this may have changed) and the inherent challenges therein
■ Reflections on Leadership:	Participants' approach to systems leadership and how this has changed since commencing Intersect
Reflections on Intersect:	How the programme has impacted on participants' approach to leadership
The future:	Future ambitions and challenges for participants as systems leaders
Final thoughts:	Other thoughts and issues on the topics explored

3 Findings

In the following sections we report our findings from the surveys and interviews.

3.1 Impact of the programme on the emotional intelligence measure (TEIQue)

25 participants (64%) completed the TEIQue emotional intelligence instrument 12 months after the end of the programme, 22 of whom had also provided TEIQue data in the post-programme survey. Although there was a small rise in the average scores from post-programme to 12 months post-programme (see Table 3), a paired samples T-test did not show that this difference was statistically significant.

Table 3: Self assessed emotional intelligence scores of the 22 participants who completed TEIQue at three time points

Assessment point	Mean score for participants
Pre-programme	5.49
Post-programme	5.87
12 months post-programme	5.91

(TEIQue is measured on a scale from 1 to 7)

The TEIQue figures provide fairly strong evidence that the emotional intelligence of participants was higher 12 months after the end of the programme than it had been prior to the programme, and that this was due to the programme rather than other factors. Our best guess is that an increase in emotional intelligence post-programme was typically maintained, or even rose slightly over the following 12 months, but this cannot be firmly ascertained.

3.2 Impact of the programme according to participants - survey

We received 17 complete responses to our final online survey (44% response rate), plus one partial response. **Job role changes and impact on careers**

Seven respondents were still in the same role in the same organisation, while three had been promoted within their organisation and one person had moved to a more senior position in another organisation. Two respondents had moved sideways within their organisation, while two had moved sideways into another organisation, at least one of these being due to organisational change rather than being instigated by the individual. One participant had a complex career trajectory which involved being promoted and then downsizing/early retirement.

Some individuals who had been promoted felt that participating in the Intersect programme had been instrumental in securing promotion.

"I suspect I would not have been in the role I am in now if I had not participated in Intersect. In addition I would not have the aspirations I now have to further develop my career in the future."

The programme had given some participants greater clarity and confidence about what they could achieve, in some cases broadening their horizons to consider a wider range of possible roles.

"Allowed me to explore areas outside my immediate environment in the hospital. Gave me a broader perspective-I became a specialist adviser to CQC and a Lead assessor with NCAS⁵"

"I feel confident that I am well-placed to consider new challenges when my children are a little older - if that is what I want to do at that point."

Other participants who had stayed in the same role felt that the programme had given them more resilience, enabling them to continue in the face of many demands, or helping them to improve their work-life balance and feel more fulfilled in their role.

"It has helped me to continue in what is a very demanding role. In this respect Intersect has helped to me to shape my job into one that is more fulfilling overall."

"I'd be exhausted by now, if I had not learnt the coping skills and the sheer energy Intersect enthused in me. "

Some participants pointed out that the programme wasn't geared to promotion, and did not provide as much guidance as some other programmes. A couple felt frustrated that structural or cultural barriers to systems leadership within the NHS had limited the impact they could make.

"[The aspiring directors programme provided information about] the internal NHS system and how to navigate around it, including some of the pitfalls in transitioning to more senior and director level posts - I think that was invaluable on a personal career basis."

"I have become a more influential confident leader ... My frustration is I am often excluded from contributing by the bandist hierarchical way the NHS works currently."

3.2.2 Impacts of participating in Intersect

We asked participants to indicate on a Likert scale the extent to they agreed or disagreed with the following statements about the impacts of the Intersect programme:

- It has helped me to establish more productive relationships with other people
- It has made me place greater emphasis on helping others to develop and make full use of their capabilities
- It has given me more confidence to engage with difficult issues and address them, rather than avoiding them
- It has helped me focus on what is most important and valuable, rather than on superficial things
- It has helped me to be more astute and take better account of the complex range of factors at play within and beyond my organisation
- It has helped me to make a difference

Between 10 and 12 (60-70%) of respondents strongly agreed with each statement and between 4 and 5 (25-30%) agreed with each statement. This provides strong evidence that participants believe the programme has helped them in these ways.

One participant commented

⁵ CQC – Care Quality Commission; NCAS – National Clinical Assessment Service

"That is so interesting that the questions posed are exactly where I think Intersect made the biggest difference."

Where a respondent indicated that they neither agreed nor disagreed with the statement, they tended to comment that this was because they already possessed these qualities prior to the programme.

"I have never been afraid of engaging with difficult issues so this was a slightly less profound aspect of the programme for me - but I have got much more sophisticated at how I do it as a result of the programme."

Other comments made by participants in relation to these expected impacts reinforced those made earlier in the survey with regard to careers. They referred to greater resilience and determination, greater clarity of purpose and increased confidence. In addition, some participants had gained insights into their own strengths and weaknesses and become more open to learning from a wider range of people.

"Intersect has helped empower me to be the best me. To be more aware of my pros and cons and not be afraid to delve deeper into the unknown. Intersect has helped me to be the leader that I always wished to be."

"Intersect has helped me to think more about the perspectives of others and what they are trying to achieve, and to take account of how they might be feeling. I have addressed some very challenging issues within the senior team and it has made a massive difference I am much more engaged within the city and able to develop our own strategy and influence the city wide strategy with the whole system in mind, not just our organisation and service users"

All 17 respondents (100%) believed that their systems leadership would not have benefitted as much if they had participated in other development opportunities instead of Intersect.

"I have undertaken short courses in various aspects of leadership since Intersect, useful yes, but none have really matched the intensity or diversity of Intersect. The very nature of the course pulling in so many varied people from different professions and agencies was what gave it the edge over anything else I have ever done before or since."

In their final comments, many respondents expressed thanks for what they considered to have been a really valuable and insightful programme. They wanted others to be able to benefit from the programme, and expressed concern that cost might be a barrier to people participating in such programmes in the future.

"I have done lots of development programmes throughout my career. This was by far the most challenging, supportive, empowering and developmental. Thanks for the opportunity!"

"Amazing transformational programme - addressing the person rather than the task"

"I just wanted to thank you for being a participant in the Intersect programme. I know how fortunate I was and wish that others can also benefit from the wonderful wisdoms and insights that the Intersect programme is based on. We need transformational leadership and change in the dynamic world that we live in and it is only by being aware and confident leaders who build real and lasting relations can we create true systems leadership and change to lead us into the unknown future..."

3.2.3 What would help participants after Intersect?

We asked participants what might help them to build on what they had gained from the Intersect programme. A number of participants felt that meeting up again with other participants to share thinking and achievements would be insightful and motivating.

"Practice always helps; it is vital to re-kindle that fire which was ignited during the residential year long Intersect programme. Meeting with colleagues provide that opportunity; but a booster type session at the Academy or reviewing 3 or 5 years down the line where all the participants are; would also be very helpful."

Indeed some participants mentioned that they had continued to meet and had found this valuable. Others had continued to develop themselves through working with sympathetic individuals and organisations, or engaging in further projects.

"I am continuing my own development both through the practice of system leadership and reflection on my practice - on my own and with others."

A few participants suggested they would now find further reflection helpful, perhaps through coaching or mentoring, feedback from 360° appraisal, or other prompting to consider systems ideas and challenges.

Other participants noted that for them Intersect had never ended – it had been the start of an ongoing journey of discovery and change towards a better future.

"I still believe that Intersect has never, and will never, 'end' for me and if that was the idea then for me it has achieved what it set out to do."

"Life-changing - in a positive way and in all aspects. I know this programme will always be one of my most significant life experiences and almost everything I do today emanates from the experience I had on this programme. I am continuing to work to create the future that our society needs and the conditions for systems leadership - and active collaboration - to flourish."

"I am a different leader, I am seen as a strong effective part of the system and I now have the self belief that anything is possible."

3.3 Impact of the programme according to participants - interviews

Several themes emerged from our analysis of the final round of interviews. We describe these themes, organised under the different sections of the interview:

- Role and context how these might have changed, and the inherent challenges
- Reflections on Leadership the participant's approach to leadership, and how it has changed since commencing the Intersect programme
- Reflections on Intersect how the programme has impacted on the participant's approach to leadership
- The future ambitions and challenges for the participant as a systems leaders

3.3.1 Role

Participants were asked about their role and context and whether there had been any changes over the 12 months since the previous interviews in 2016. Three of the participants had moved into different jobs with greater influence and responsibilities and the other three were taking on different and clearly more challenging responsibilities within their present positions. The reasons for this were varied, from both an ambition for career progression to making more of a difference in the systems they operated in, to working across a wider system of stakeholders and building effective working relationships. This included taking a more strategic perspective and the need to change mindset because of the different range and level of relationships:

"I'm operating in a very different space from the space that I was operating in when I first went on the Intersect Programme or before that...I would say that I am engaged at a much more strategic level."

In other cases, the need to make a difference was clear; mainly by working more effectively and making connections with others in other organisations:

"I have a strategic role as part of their strategy group at the council. So internally in terms of that corporate role and also have a key role to play with NHS commissioners and providers as well. So sit on the local Health and Wellbeing Board and, you know, lead on the core offer if you like, in terms of the CCGs, sit on the CCG's governing body, et cetera, so it's really a leadership role"

And from another participant:

"I wanted to have, you know, to be closer to the NHS, the sort of things that we talked about on the course around system leadership, you know, what the Department does, what civil servants do, to me, is very important, but there are, you know, actually being part of the NHS, being able to look at how bits of the NHS work together, you know, was something that I'd always wanted to do"

Career progression can be a direct positive impact resulting from leadership development, implying that participants have developed and honed skills and are able to exercise these in a more senior role. This is not the only indicator of positive impact however, and indeed one participant expressed some ambivalence about career progression, suggesting that different contributions could be equally valuable:

"I think perhaps I don't know, I do sometimes reflect on my kind of level of ambition that, you know, I haven't been one of these souls that have kind of spring boarded onto a sort of a more senior role at the moment, you know, that's not been the choice that I've made. And I think I've probably, I've got a sort of slight sense of

conflict and uncertainty around that, but interestingly it's probably something of the hangover from the Intersect programme itself, and that I'm kind of aware of, you know, that uncertainty in my thinking at the moment."

3.3.2 Contextual Challenges

Participants described their context as one of flux and change, with increasing complexity and a greater need to break down institutional barriers and work more effectively across boundaries. This challenge of working in complexity at a systemic level across health and social care was associated with increasing demands on services and having to make savings because of current financial pressures.

"The system becomes more under pressure as various bits of the system dwindle in their resilience."

System pressures made leadership difficult from the point of view of generating and harnessing positive energy in people – as one participant put it: "leading staff in a time when their backs are up against the wall". Moving into more systems leadership roles could also mean individuals having to take on the challenges of a more extensive range of accountabilities and a more external-facing role:

"making more of a difference to some of the bigger areas of challenge in the organisation, trying to shore up the governance around, particularly, medicines management, voluntary sector organisations, and their associations with ambulance services, and some of the specialist paramedic roles, so primary care and trauma care specialist paramedic roles."

"I suppose being in a substantive leadership role has brought new challenges in that previously where I've been advising people that had to make a difference, I'm now the one making the difference. I think also, working as a doctor in a non-doctor organisation, brings challenges, so not only of having to understand another professional group, but maybe having to break down some barriers,

There was felt to be a need to acknowledge the role and ownership of others (partners) in delivering on collaborative ventures. This was thought to take more time; in order to build trust in working relationships. In some cases, old structures and ways of working and the old problem of departments working in their own 'silos' were militating against new ways of working.

"So your ability to deliver at pace while remembering all of the key stakeholders and not completely p****g them off basically, 'cause you're, you know, you're just railroading across whatever it is they're doing".

"There's quite a resistance to doing things differently and people going back to the rule book and saying, well, hang on a minute, this isn't strictly in our area"

3.3.3 Reflections on Leadership

Participants were asked to reflect on their leadership and convey what their approaches to leadership were in their contexts. Responses were varied but some common themes emerged. Some participants, in particular, focused on the need to be visible and of having a collaborative approach, and in building effective relationships internally both with immediate colleagues and others in the wider system:

"I have a number of colleagues that I have very honest, open relationship with and I'm able to talk through things both in terms of how things have gone and also reflect on how I might approach a specific task. There's a couple of people, almost my confidentes, if you like, that I use and equally they use me"

"I like the face to face contact, I like to hear what people's problems and solutions are"

"Trying to encourage people's contributions rather than telling them what to do"

Others felt that their most effective approach to leadership was to be adaptive to contexts and people as the situation demands.

"You have to keep adapting and changing to the environment, the complexity."

One participant felt an important leadership skill was in influencing others where there might not be a clear power dynamic through resolving relationship issues between others, and the importance of supporting and enabling the leadership of others.

"I think I'm a huge connector and I think I am motivational and I think I'm visionary and supportive."

Linked to this was the positive function of reflexivity. One participant discussed the amount of churn and change facing NHS services/systems now, and the need to build resilience, and accept that people's experience of prior change might also still be 'playing out'; the participant described a sense of 'observing' her own reactions, which gives her the opportunity to change them, and retain a calm energy:

"In the onslaught of all of that and hopefully by maintaining a bit of calm and perspective as a leader that's something that, you know, I can share with other people."

However, this sense of stepping back and reflecting in the moment was supported by compassion and appreciation of others, and was not about being 'detached' from the situation:

"..maintaining appreciation and compassion towards the people... I think that's been an important sort of balance that I've gained in my role as a leader."

"I think it's a. important that members get accurate, objective information by which to make a decision but equally that it's done in a way that's caring. So that I'm not unsympathetic to the staff that'll be affected by this proposal, you know, and I'm trying to manage that alongside it, so there's a bit around, you know, yeah...expertise, integrity and then just valuing people and compromise"

3.3.4 Changes in Leadership since starting the Intersect Programme

All the interviewees felt that over time they had become increasingly confident in their own leadership, and now possessed a greater capacity for emotional self-regulation, manifesting as calmness, even in demanding situations:

"I think one of the main things is probably confidence in your own ability to trust your instincts and use your judgement, you know, and not be second-guessed or overly influenced, albeit, you've got to take into consideration other people's views. So you know that maturity and confidence, that calm confidence, I think is what you get over time."

So the thing that people appreciate is my ability to lead and stay calm and come up with solutions and broker relationships and, you know, all of that good stuff which was quite nice to hear."

The importance of self-confidence and its pivotal role for oneself, and therefore in relationships with others was explained by one participant for whom it was particularly significant:

"...give me confidence that what I'm doing is right and effective, and that actually I don't have to apologise for myself, which is probably right, if I reflect back, right from the beginning of Intersect, one of my big challenges, was actually often almost, it was the self-confidence, it was the belief that I could make a difference, and that I was making a difference. And that, for me, has been the biggest impact, and I suppose still stays with me today."

"...what it really built for me, was that emotional intelligence and then also there is a confidence element that's really hard to pin down, but confident in saying, you know, in addressing things and just in my own ability to be able to do things as well 'cause I think probably I'd...I mean, I'm still quite self-critical but I think that's just how I am and I don't necessarily think that's a bad thing anymore"

In addition to an increasing sense of confidence, there was a willingness to see others' perspectives and not to discount them. In other words, being able to 'step into others' shoes' and develop an understanding from their position, whilst also having the confidence to tackle difficulties in working relationships, where these are clearly inhibiting progress. This was highlighted as important in both setting the conditions for collaboration, and actively collaborating:

"And I think probably I have shifted, my leadership has shifted into a place where I kind of have definitely understood that it's not just connecting with other people but really deeply getting into understanding their perspectives, understanding some of the really entrenched issues that you get in change of programmes in terms of facing resistance and understanding some of those different levels of resistance."

"So I think my leadership has developed to whereby I'm able to sort of slightly step back a little bit, occasionally just try and take my own personal ego out of that to try and understand other perspectives."

"Before I knew I could do the job, I knew I could do any job you gave me, but could I build the relationships and influence and lead in the way that I saw some other people doing? I do think that that's changed. And so I'm a much more confident leader than...now than I was then. And a lot of that has resulted in building better relationships and maybe is because of building better relationships."

"Trying to encourage people's contributions rather than telling them what to do"

Collaboration was characterised by developing more 'authentic' alliances on joint issues and problems to enable more effective decision making and therefore more effective outcomes. Participants reported they were more likely to seek collaboration and compromise.

"Having to meet people half-way, some of it from...you have to because they're politicians and they actually have the call, but some of it's around actually, how do you bring people with you on that journey?"

"How can we do things... How can we really do things together, rather than saying, we're doing them together but really just looking after our own interests?...I feel there is a lot more joint working, integrated working."

"So I suppose that's been one of the biggest influences, in thinking we don't have to do things the way they've always been done in that kind of paternalistic risk-led approach that I think the NHS and Social Care so often delivers."

This increased sense of confidence was also coupled with an increased willingness to let go of the reins and enable others to take up leadership roles. This was a function of trust on the part of the leader in enabling greater autonomy and leadership from others.

"...So I feel it's about my change and my enabling other people to change as well. And that's a work in progress but I do really feel a big difference in that, that other people are just making decisions and making things happen, where they would have come to me before."

Often coupled with a sense of greater self-confidence was also a greater sense of self awareness, particularly in terms of their effect on others. For some, it was clear that the main and most immediate change was in a greater propensity and ability to reflect, particularly on their own impact on others:

"In very broad terms, I think more thoughtful, more understanding of impact of what I do, I think that's important to me, more, you know, thoughtful about myself, about how I am in particular meetings, about how I am with people, so I think those things have stayed with me from the programme."

"But probably someone who works with more self-confidence, I'm probably somebody as a leader who is more aware of the impact that I have on others and they have on me, I'm probably naturally quite an emotionally reactive person."

"And so I, kind of, yes, I probably have learnt more about knowing when to moderate my kind of, when to moderate and when to let loose my particular brand of leadership I suppose."

"In the onslaught of all of that and hopefully by maintaining a bit of calm and perspective as a leader that's something that, you know, I can share with other people."

In one case this self-awareness and emotional self-regulation manifested as recognising and valuing self-care, ensuring she was looking after her own well-being as well as those around her:

"So I will now think to myself, no, I'm going to go to the gym or do exercise at home or whatever before I come to work. And even if that means I'm getting to work 40

minutes later than I would have done otherwise, that's what I'm going to do because that makes me feel better all day. And yeah, I just think, well, you know, you're a long time dead, aren't you? If I don't book this holiday in the Rockies then I'll... If I don't do it now I might never do it, so just do it."

Another way in which some of the participants felt they had changed and grown in their leadership was in having developed a more strategic focus and in being better able to appreciate the 'bigger picture' at a systems level:

"And it's getting over people's vested interests and protectionism and all the rest of it. So yeah, it's a work in progress. But at least I'm in the right room to say, why aren't we looking across the whole system? Which I wasn't before."

3.3.5 The Impact of Intersect

Many of the changes that participants reported in the previous section, such as confidence, calmness, self-awareness and thinking in wider systemic ways were key expectations of the Intersect programme. It is therefore plausible that the programme had produced these changes. Here we report what participants said when we asked them explicitly what role they felt Intersect had played in changing their approach to leadership.

The value of reflection

The majority of participants had come to realise the value of 'reflection' in their roles, and how this was valuable, particularly in dealing with difficult situations:

"I think, in some ways, almost calmer in the way this ideal with things, which may sound strange, because I've always been quite a calm person, but I think I'm capable of thinking, you know, I think through in difficult situations, I'm relaxed and I'm able to use some of the techniques from the programme, so it's still with me, I still actually think about, now, how would I have tackled this situation? You know, the things I learned on the programme, what's relevant in this situation? So I still do think about that."

"I think the process of reflecting, and my conversations with you and the interview I did particularly for the Academy, have been really helpful. Because to be brought back again to what was it you did on the Programme, what were you aiming to achieve, what have you achieved? It's helpful, isn't it? Because I don't think you take enough opportunities to stop and think about where we are, what we're doing and where we're going. So I have found it a really helpful part of the Programme. The evaluation I think in itself has got a lot of value."

Self awareness

All participants attributed a greater sense of self awareness, linked to reflective and reflexive capacity to the Intersect programme. This led to a greater awareness reflective methods within leadership practice, for one participant this prompted further research to know more, and practice more of these skills:

"There's a lot about the mindfulness, self-reflection, understanding yourself, in order to understand others and get the best out of people. So, I suppose, the interest in that aspect was triggered through Intersect and has continued."

Others also clearly linked their experience of the Intersect programme with awareness of self and others, in turn positively influencing a range of interpersonal relationships:

"I think it gives you an ability to engage with a wider group of people. I think that's probably what it is, and it's a bit of me and my understanding of myself. There's a bit of me not being quite so 'bull in a china shop' maybe as I might have been in the past and, you know, then it's just a bit more about the emotional intelligence"

Similarly, another felt that it was mainly a change in her self-awareness and particularly her reactions to situations and events in terms of being more thoughtful and listening and having a greater tolerance for other perspectives rather than reacting negatively:

"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 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."

Some participants felt that Intersect had had a direct influence on their ability to develop effective relationship with others

"I'm more aware of the position that even just the title gives me, you know, in terms of the influence that you can have. And I'm a bit more careful in how I use it. Probably a bit more considered. There's something about not always going in for everything, you know, but picking your battles ... So there are times when I'll concede on things because they're not as important as maybe achieving something else. And like I say, just building trust with people and building that open and honest relationship, but also I'm not afraid to tackle conflict. And I think that's a massive...and I think I wouldn't have coped this last couple of weeks actually if I hadn't felt more confident in just being able to tackle conflict head on."

This was characterised in some cases as a greater ability to work collaboratively with colleagues to come together to address 'wicked problems' which intrinsic to complex systems such as the health and social care system:

"Not solving problems by coming up with a, you know, a rulebook, a manual that tells you how to do things, but actually by drawing people together by opening it out, by, you know, getting the right people around the table, the right people able to take the responsibility to find a solution. So it's not my solution, whereas, in the past, I think I've tended to try and find solutions and that's been important to me, it's more...I try, ...to think about what happened on the course and that, sort of, you know, having a number of people together, working together, taking responsibility and empowerment, so, yeah, those sort of things are important to me.

Maintaining contact

An indication of the programme's impact is the extent to which their participants wish to maintain contact as a learning community and commit to continue to work together and develop further insights and knowledge through shared learning and experience. This continued networking with other Intersect participants was explicitly cited by two of the participants, but clearly more were involved:

"We are still staying in touch a bit; the people on the course, a number of us went to Bristol last year to see the new mayor who was on the course. So we did various sessions during the day and went out and visited various sites and then came together in the afternoon for our reflections and spent some time with the new

mayor, so I think we're still doing that. So it's got a bit of lasting legacy at least in those...at least in our minds, the people who attended, which is good."

Another participant said they really valued that opportunity to re-engage with others and also valued the sustaining of connections and also cited the recent trip to Bristol and "coming in with outside eyes to see their system" and "time to step back again". She felt it was a valuable experience because:

"....they've been through what I've been through and there's something about that understanding and I do think we've got a supportive but honest as well, and it's just the dynamics are really interesting"

3.3.6 The Future

Participants were asked to give their impressions of what they felt the future would look like for them and the systems they operated within. Some felt that in the future systems would not be so bounded by traditional structures and greater emphasis would be placed on person-centred care through collaboration and cross boundary working. The introduction of Sustainability and Transformation Partnerships (STPs)⁶ is evidence of the need to focus on 'place' and 'person'; a local plan requiring collaboration across health and social care which puts the person at the centre of plans. As one participant described it:

"And I think the only way to do that is somehow to become less... I've used this word a few times. But less protective of our own organisations and more willing to look at, you know, the good of the patients...the population, which is why health and social care services are here in the first place. But I do think that's a real challenge because people will always want to protect their own organisation, want to protect their own role, and think that they know best. I think that quite a lot of that goes on. I know best because I'm the professional and you're not, and I'm not sure that's always true."

Some participants focused on where they would like to be in the future. All had ambitions to develop:

"So I think in three to five years' time, I'd be looking at moving on to either in a different organisation, in a different context, or moving to a director role rather than a deputy role"

"I want to build my networks, I want to build agents of change, so that we're, you know, I have a group of people who are together working on how things can be improved."

_

⁶ See https://www.england.nhs.uk/stps/ for more information

4 Discussion

In this section we consider the impact of the Intersect programme by looking across the evaluation as a whole – comparing findings from the different methods used in this part of the evaluation with each other, and also with the findings contained in our previous report. We also consider how the impacts relate to the aims of the programme, to the outcomes that might be expected from theory, and to the current demand for system leadership in healthcare. Finally, we consider what we have learned about evaluating leadership development programmes such as Intersect.

4.1 Impact of the Intersect programme

Almost two years after completing the Intersect programme, the participants in our interviews and survey describe the development of a more collaborative approach to leadership that emphasises building relationships and enabling others to contribute their relevant skills and experience. This approach is underpinned by learning about the strengths and weaknesses of self and others through engaged action and reflection. This greater awareness of self and others has enabled them to develop and maintain more productive relationships across the systems they work in. Participants attribute this reflective approach to their participation in the Intersect programme, along with enabling others to make best use of their capabilities and establishing more productive relationships.

Participants report having gained the confidence to "let go" and work with others in a genuinely collaborative way, rather than feel threatened by them. They are also more confident to put themselves forward, and are more assertive, seeking 'win-win' outcomes. Furthermore, participants believe that it is their participation in the Intersect programme that has given them more confidence to engage with difficult issues and address them, rather than avoiding them.

Statistical analysis suggests that the Intersect programme has typically engendered sustained increases in emotional intelligence among participants. Qualitatively they describe better emotional self-regulation – being able to stay calm in demanding situations and being more resilient in the face of difficulties.

Participants also report being better able to see the 'bigger picture' and attribute clarity of focus on key goals to Intersect, along with being better able to take account of the complex range of factors at play across systems. They believe that Intersect has helped them to make a difference, and has been more beneficial than other development opportunities.

The above outcomes are very similar to those identified in our previous report as being produced by the programme, where we noted improved confidence and self-belief; greater empathy which improved the quality of interactions and led to better relationships; and feelings of calm and patience. This additional evaluation work provides further evidence that this is indeed the case, evidence that these benefits have been sustained, and some insights into the causal chain of impact. Participants reported a greater capacity for reflection and reflexivity (reflection in the moment and adapting behaviour), and this led to feelings of calm and improved confidence, thereby improving their leadership practice.

Our first report also identified that Intersect participants had developed a sense of being on a learning journey. This was also the case in the more recent survey and interviews – participants wanted to continue to develop and learn. Based on the academic literature we had suggested that there might be a need for ongoing peer coaching. It is interesting that Intersect participants have themselves organised meetings and activities. Those who have attended have found them valuable, and suggestions for future support from others emphasised networking with other participants, based on shared experience and trust. The

NHS Leadership Academy may be able to enhance these activities by providing a small amount of additional support and facilitating networking between different cohorts.

Intersect participants have been taking on more responsibilities, either in their current or new posts, and again attribute these changes to the Intersect programme and the confidence and aspiration it has engendered. Making a difference can be challenging however against a backdrop where although systems leadership is needed more than ever, it is arguably increasingly difficult to achieve, on account of resource constraints and pressures on staff. Advancement may help participants to overcome the departmental silos and hierarchical management practices that continue to exist and have limited some. For those participants who were interested in promotion, access to advice about career development and applying for senior posts in the NHS and elsewhere may have been helpful.

Our findings suggest that the Intersect programme largely achieved its desired outcomes of emotional literacy, emotional intelligence, and social intelligence. All of these may be associated with greater self-awareness, confidence to establish productive relationships and deliver change, and understanding of behaviours, practices and processes in other organisations, and cross-sector inter-organisational dynamics. Furthermore, the development of emotional and social intelligence are related to the generation of 'social capital', thus,

"Through building social capital, the organization's capacity for enacting leadership tasks needed for collective work comes to be realized (McCauley and van Velsor 2004)." (in Clarke, 2013)⁷

Current health policy promotes plurality of service forms⁸, and the devolution in Manchester (see commentary by Walshe et al, 2016⁹) and the development of Sustainability and Transformation Partnerships (Alderwick et al, 2016¹⁰) highlight the scale and complexity of systems leadership challenges. The need to develop, harness and realise emotional and social capital of leaders may well be critical to achieve and perhaps define, what characterises success in these contexts. This evaluation suggests that programmes like Intersect could make a positive contribution to this endeavour.

⁷ Clarke N (2013) Model of complexity leadership development, Human Resource Development International, 16:2, 135-150, DOI: 10.1080/13678868.2012.756155

⁸ NHS England (2014) Five Year Forward View. London: The Stationery Office

⁹ Walshe K, Coleman A, McDonald R, Lorne C and Munford L (2016) 'Health and Social Care Devolution: the Greater Manchester experiment, British Medical Journal 22(352): i1495. doi: 10.1136/bmj.i1495. http://www.bmj.com/content/352/bmj.i1495

¹⁰ Alderwick H, Dunn P, McKenna H, Walsh N, Ham C (2016) Sustainability and transformation plans in the NHS: How are they being developed in practice? London: The King's Fund

4.2 Reflections on the evaluation process

The evaluation process for this part of the evaluation has been relatively straightforward, as it was largely a continuation of survey and interview processes used previously. In our previous report we highlighted that response rates had limited what we could conclude from our statistical analyses. In view of declining response rates and burden on participants we decided to only measure emotional intelligence and not transformational leadership or civic capacity. This enabled us to conduct a final survey which focused more directly on the impacts of the programme and provided space for participants to provide comments and explanations. This final survey provided much useful information.

With hindsight we would not rule out using quantitative survey measures in evaluations of programmes of this size (about 40 participants), but would suggest that they need to be relatively short in order to maintain high response rates. The same considerations apply to comparison group and observer surveys, although here we would also caution that administration of such surveys can be complicated and time consuming for the evaluators.

In previous interviews participants had found it difficult to attribute personal change to specific programme components, so we did not pursue this in the most recent interviews. Instead we sought to directly assess outcomes suggested by the programme theory we had developed at the start of the evaluation and by our qualitative findings from the first part of the evaluation. This provided useful additional evidence, indicating the value of an iterative mixed methods approach to longitudinal evaluation.

We were not however able to make a rigorous assessment of the organisational and system impact of the programme, although we did gather some examples and were able to identify some barriers to impact. Our initial attempts to assess wider impact through considering participants' workplace projects were limited because participation in the programme changed participants' ideas for action. Case studies could have provided more coherent explanations of pathways to impact, but an overall assessment of value would have been very difficult on account of the widely varying situations of participants, a flavour of which is provided by our analysis of career progression above.

5 Conclusion

It can be difficult to evaluate leadership programmes in general, due to absence of empirical data, inability to implement pre-intervention and post-intervention tools/methods, compounded by the potential for self-selection to bias results, giving an overly positive picture of the leadership programme. Moreover, Abrell et al (2011)¹¹ comment that the impact of leadership development can only accurately understood with reference to and inclusion of the context that participants function in. Whilst some parts of the evaluation framework have sought contextual insights, these have been somewhat limited.

Notwithstanding this, it is evident from the last phase of qualitative data 12-18 months post-programme completion, that the Intersect experience resulted in significant shifts in perceived capabilities in interpersonal processes and practices, which was highly valued by the participants. The reports about the changes in role, characterised by career progression, extended networks, new aspects to existing roles, acquisition of new skills and knowledge, and an overall positivity about the leadership challenges they experience, suggest that Intersect has led to a sustained change in leadership behaviour.

Our overall conclusion is that the first Intersect Programme provided substantial and sustained value to many of the programme participants, enabling them to gain insights into their leadership behaviours and giving them the confidence to engage more in the leadership of systems.

"Brilliant program, which allowed my 'internal being' to connect to the 'sectoral being'. I now look at every challenge in my daily routine as an opportunity to test what I learned at INTERSECT."

The NHS Leadership Academy may be able to help enhance and sustain impact from all 3 cohorts of the Intersect programme by supporting ongoing networking within and between the cohorts. Consideration should also be given to providing access to career development advice for cohort 3 participants, and possibly retrospectively to previous participants. Going forward, this evaluation suggests that programmes like Intersect could make a positive contribution to needed improvements in systems leadership across health and social care.

Our evaluation will continue in order to better understand how it is that Intersect brings about changes in the leadership of participants. We will consider how the programme has developed from cohort 1 through to cohort 3, and compare the experiences and impacts of cohorts 1 and 3. In doing this we will take account of changes of faculty and of any changes in delivery methods. The results will provide evidence about how consistently the programme can deliver results, the contribution of the facilitators and of the delivery methods, and how the characteristics of each cohort affect the outcomes. This part of the evaluation will be solely qualitative, using a phenomenological perspective to understand the experience of Intersect, and its impact on self, others and the wider context. We plan to produce a further evaluation report in 2018.

¹¹ Abrell, C., Rowold, J., Weibler, J., Moenninghoff, M., (2011): Evaluation of a long-term transformational leadership development program, Zeitschrift für Personalforschung (ZfP), ISSN 1862-0000, Rainer Hampp Verlag, Mering, Vol. 25, Iss. 3, pp. 205-224,





www.mbs.ac.uk

Alliance Manchester Business School Booth Street West Manchester M15 6PB United Kingdom