

**Paired Learning Toolkit  
  
Part 1 - Implementation Guide  
  
  
Version 1.4**

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**Acknowledgements**

We would like to acknowledge the assistance and support of the following individuals and their respective organisations who have contributed to the development of this implementation guide and toolkit for paired learning.

*Bob Klaber Imperial Healthcare NHS Trust*

*John Lee Imperial Healthcare NHS Trust*

*Rachel Abraham Imperial Healthcare NHS Trust*

*Lizzie Smith Barts and the London NHS Trust*

*Claire Lemer North Middlesex University Hospital NHS Trust  
Carolyn Johnston Kingston Hospital NHS Trust  
Lucy Davies Royal Brompton & Harefield NHS Foundation Trust  
John Rutter Knowledge Management & Transfer*

*Martin Fischer Centre for Innovation in Health Management  
Nathalie Wraith London Ambulance Service*

**Introduction**

# Paired Learning and the London Leading for Health Partnership

The London’s Leading for Health Partnership team, based at Stewart House, 32 Russell Square, London WC1B 5DN, is working to promote both paired and shared learning programmes in London. It is hoped that this ‘Paired Learning’ toolkit, together with the ‘Paired Learning’ report, published in February 2012, will further stimulate and facilitate the uptake of new programmes in the London region.

The toolkit draws extensively on the feedback and best practice gathered from earlier paired learning pilot programmes which were held at Imperial College Healthcare and North Middlesex University Hospital NHS Trusts, as well as on the feedback from a number of toolkit design workshops.

**Introduction to the Toolkit**

The ‘Paired Learning’ toolkit will provide you with a range of advice, best practice, and suggestions on how you might implement a paired learning leadership development programme in your organisation. For usability purposes, the toolkit has been divided into two documents, namely Part 1, the Implementation Guide which comprises 12 sections, representing the 12 steps in implementation. Part 2 contains the supporting appendices including a number of templates.

We compare our toolkit to a ‘Smörgåsbord’ in that it is NOT prescriptive and allows you to tailor a paired learning programme for your organisation, so that the most appropriate programme can be delivered based on local needs and resources. The toolkit provides key guidance on how you can ensure effective evaluation of your programme as well as allowing sharing and learning with other similar leadership development programmes in the London region.

The toolkit has been written for a number of different audiences, specifically those who are responsible for leadership development and looking for a cost-effective and easily implementable leadership development programme e.g. Medical Directors, Senior Managers, Deans, etc. as well as those who are tasked with its local implementation.

# Getting acquainted with the Toolkit in 10 minutes

To get familiar with using the toolkit, please refer to the table of contents on the following pages which provides a summary of the recommended tasks and/or actions required for each of the 12 steps in implementing a paired learning programme, as well as including a reference to the individual section where the step is discussed in more detail.

# Accessing Support

Once your have decided to establish your own paired learning programme, you should contact the London Leading for Health Partnership (LLfHP) based at Stewart House, 32 Russell Square, London WC1B 5DN who can provide support and guidance. They can be contacted at the following email address: [LD.LeadingforHealth@nhs.net](mailto:LD.LeadingforHealth@nhs.net)

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| **Steps** | **Actions required / Considerations** | **Section** |
| **COMMITMENT  to PROCEED** | **Understanding it then deciding what you want from it!**  What problem are you looking to address with a paired learning programme? Need to understand the concept of paired learning – what it is and isn’t.  Need to be familiar with the evidence from the paired learning report. Will it fit in with our existing leadership development strategy and how? How might we implement our own paired learning programme?  Which professional staff groups should we target for the programme? Who do I need to consult and convince? Can I sell the benefits?  Can I create a robust outline business case if required?  What needs to happen before the nest stage i.e. planning? Who can deliver the programme? Who should be the Programme Lead? How and when can I get the commitment to proceed? | **1** |
| **PLANNING** | **Building momentum and securing local support via selling benefits**  Recruiting the Programme Lead Hold informal conversations at different levels in your organisation  Building core support for the concept;  Use of published report on paired learning to stimulate ideas and promote;  Help folk answer the questions i.e. whether we should do it and how?  Letting others know about it – and sell the benefits – building momentum. | **2** |
| **PROMOTING** | **Set up the ‘team’ & infrastructure to drive it**  Decide the most appropriate way to promote & advertise your programme locally so that you will specifically target the pair types that you are most interested in seeing collaborating in your organisation. Use the Programme Flyer and Programme Briefing to stimulate interest in local networks etc. | **3** |
| **RECRUITING** | **Getting the right participants on the programme!**  Deciding how you will recruit to the programme? What is best time to recruit and timeframe required? What networks etc. can be utilised? Best way of targeting the pair types you want? Handling the ‘how much time’ question by line managers? What application process will you use e.g. interviews Use of the ‘preparedness to lead’ questionnaire | **4** |
| **DESIGNING** | **What’s the best programme to offer that will benefit the participants and the organisation?**  Decide the type of programme you want to deliver i.e. which components you want to include e.g. design surgeries, shadowing, workshops, etc. that will make up your programme. Most pairs will undertake a jointly-owned local improvement project that should benefit the organisation as well as improve patient care. | **5** |
| **WORKSHOPS** | **Supplementing existing knowledge & skills where necessary**  Decide both the number and content of the programme’s workshop tailored to your pairs development needs in terms of both personal and project-related. A number of examples are provided in the appendices based on the experiences of previous programmes as well as feedback from users. | **6** |
| **Steps** | **Actions required / Considerations** | **Section** |
| **LAUNCHING** | **‘Kicking off’ your programme**  Decide how you want to launch your paired learning programme – low-key or high-profile e.g. including it as part of the first workshop if you have a large number of pairs involved locally. Encourage senior management attendance at the launch to demonstrate support for this flexible, low-cost and high-impact leadership development programme. | **7** |
| **JOINNGTHE COMMUNITY** | **Link into external support that is available and develop networks.**  Register your programme with the central London leadership team (located in NHS London until March 2013) to avail of support and access to a community of users where lessons learned & your improvement project outcomes can be shared with other programmes and organisations. Look for regional recognition for your programme and share your lessons learned and outcomes locally. | **8** |
| **SUPPORTING THE LEARNING** | **Keeping the pairs and their improvement projects on track.**  Agree the level of support needed to support the pairs e.g. design surgeries, coaching and the level of progress reporting that is required on both their progress and projects. Try to use existing local networks in providing support where possible. | **9** |
| **EVALUATING** | **Provide lots of evidence to demonstrate that it works!**  At the outset, agree the evaluation strategy/framework so that robust data can be collected and provide evidence in terms of measurable project outcomes etc. Using the standard model provided will allow regional comparison, sharing of best practice and lessons learned. | **10** |
| **CELEBRATING** | **Broadcast the success of the programme via its participants & projects**  Plan to hold an organisation-wide celebratory event, which showcases the participants and their improvement projects to their colleagues and senior management. Ensure their projects’ progress and benefits are highlighted; and provide participants with an opportunity to share their reflections on their own experiences of taking part in a paired learning programme including any new skills or knowledge acquired as well as ant behavioural changes. | **11** |
| **SUSTAINING** | **Ensure procedures in place to sustain ongoing projects & changes**  Ensure that any improvement projects that are underway and which are likely to continue beyond the programme’s duration, are sufficiently well developed, supported and documented e.g. a business case exists showing benefits etc., so as to allow them to be handed-over to a new pair and/or sustained by the organisation. | **12** |

Section 1: Commitment to Proceed

Firstly you must know what problem you are looking to address with a paired learning programme for local leadership development and the particular professional staff groups that will form the various pairs i.e. your target audience.

For example, you might chose specific professional groups such as nurse managers; clinicians e.g. newly qualified consultants; managers; nurses; therapists; pharmacists, allied health professionals, scientists, etc.

However, you need to understand the concept of paired learning – essentially a work-based peer-learning approach to leadership development that relies on the development of professional and positive relationships within a pair – and also be familiar with the evidence from the paired learning report.

You also need to be familiar with your organisation’s existing leadership development strategy and how might paired learning be accommodated so that it complements your existing strategy rather than competes against it.

As or any new programme, the identification of key stakeholder is paramount and their engagement at this easily stage essential. Depending on the size of your organisation, the number of stakeholders may vary e.g. Human Resources, Education Department, Clinical Leads, Senior Managers, etc. but they should at least include the Leads/Heads of the various professional staff groups that you would like to target for the programme.

One of a paired learning programmes key benefits to an organisation is that it is a low-cost but high-impact and flexible way of delivering leadership development in a work-based environment. It requires just 2 individuals to come together as a pair who can then work on delivering a service improvement as part of their jointly-owned project.

Since a lot of the learning is informal e.g. shadowing, and individuals will use some of their personal time for pair meetings, project work, etc. apart from formal events such as workshops which provide opportunities for broadening their knowledge or learning new skills, it might be relatively simple to demonstrate potential cost savings and benefits in an outline business case if required.

Once commitment to proceed has been secured in the organisation, the next step is to put someone in charge of implementing your programme i.e. you need to identify an individual for perhaps the most important role in any implementation i.e. the Programme Lead. The next section discusses this role in more detail. However, a role outline for the Programme Lead may be found in the appendices.

# Section 2: Planning

# Introduction

# In the planning of a new paired learning programme, there are three key questions to which you need to be able to provide robust and comprehensive answers. These are as follows:

# What problem am I looking to address with a paired learning programme?

# Who is it for? Which professional groups?

# Which implementation model is most appropriate for my organisation?

The first two of these you should have already answered in the previous section on ‘commitment’, i.e. the commitment to proceed with the implementation of your paired learning programme, prior to discussions with your organisation’s senior management.

However, the most appropriate implementation model for your organisation requires some thought, depending on a range of factors including:

# Size of your organisation

# Type of organisation

# Given the non-prescriptive nature of the toolkit, you have complete flexibility in how you tailor the paired learning programme for your organisation, e.g. workshop content can be chosen based on local needs, etc.

# On the following page, we have provided you with a number of sample models that you might consider exploring for local implementation. Note that they are presented on a continuum using organisational size as the variable.

# Selecting the most appropriate implementation model for your organisation

|  |  |
| --- | --- |
| **Type** | **Paired Learning Programme Model – Main Characteristics** |
| **“LARGE” .** Department  (Large Hospital)  **.**  **.** **. .**  DGH  Mental Health Trust  **.**  **.**  **.** Community Service Providers (CSPs) **.**  **.**  Clinical Commissioning Groups (CCGs)  **“SMALL”** | * More likely to developed from the bottom up * Able to draw on broader group of managers * Pairing within a clinical department * Volume of participants sufficient to have large learning events with external speakers/presenters * Less involvement from senior managers * Can be driven either bottom up or top down * Likely have less managers at senior level so smaller programme size * Smaller volume of participants lends itself to different joint learning events e.g. more action learning set than big lecture style * Possibility to present at Board as fewer participants * As with CCGs we need to think about location issues * Potentially better than CCG to carry out quality improvement project * Similar to CCG smaller size influences type of learning * Potentially to run learning sets in association with CCGs * Need to consider location issues as not all participants co-located * Potentially harder to carry out quality improvement projects so may have to adjust project size, scope, etc. * Size likely to mean joint learning as it’s more similar to a DGH than to a Large Hospital. * Potential to run learning sets in association with CSPs |

# Programme Lead

# The first step is to identify an enthusiastic member of your staff who might be interested in leading the programme in your organisation. Alternatively, you might decide to share this role amongst a small but informal steering group. Whichever you choose, they’ll be responsible for driving the programme from the outset, through initial planning, design, recruitment, support, and evaluation phases. This includes maintaining a register on the various improvement projects as well as monitoring them regularly

# The Programme Lead is also responsible for ensuring that senior management and the organisation as a whole are kept appraised of the paired learning programme - via e.g. local newsletters, web bulletins, leadership development forum, staff notice boards, etc. This should not only keep paired learning on the agenda but also generate interest for future programmes and encourage a wider range of professional groups to get involved.

# An outline role description for a programme lead can be found in the Appendices.

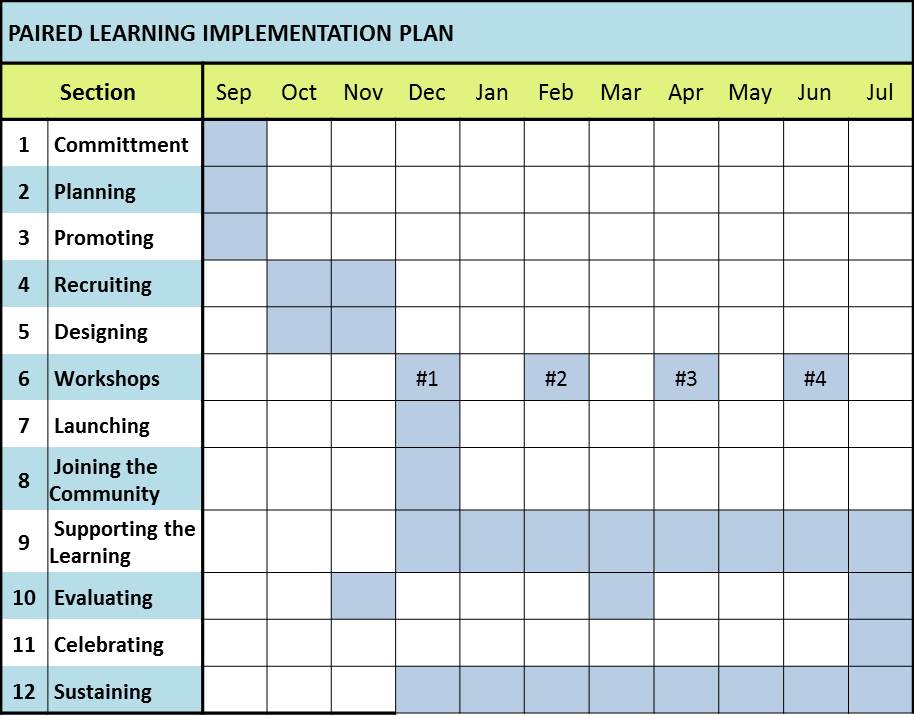
# Dealing with larger organisations

In larger organisations, your steering group might consist of a lead for each professional group that makes up your pairs. It might be also beneficial to have assistance from either your education/human resources departments as this will provide a link with those who have overarching responsibility for leadership development within your organisation.

Evidence has also shown that when a large number of pairs are involved, a ‘shared’ programme lead was a good model e.g. a senior manager and a clinician sharing the programme lead role for pairs which comprise of managers and clinicians.

# Implementation Plan

# The implementation plan below illustrates the key phases of a typical paired learning programme. Monthly units have been chosen in this case for convenience, but it’s the local organisation’s responsibility to set their own timeframe based on local needs and available resources.



A blank copy of the above implementation plan can be found in the Appendices.

# Evaluation strategy

# In order to provide evidence to senior management on your paired learning programme, you should aim ideally to collect both qualitative and quantitative programme data. This will allow you to compare and contrast the outcomes obtained from your pairs with other similar pairs from other organisations across the London region.

# For example, you might compare the increase in leadership preparedness for clinicians versus senior managers; or for nurses versus managers; etc. To perform this specific comparison, you might wish to use the ‘preparedness to lead’ scale in the recruitment phase to establish a baseline measure, and after completion of the programme as part of your post-programme evaluation. The ‘preparedness to lead’ scale can be found in the Appendices.

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| Planning checklist  * Appropriate Paired Learning programme format selected * Programme Lead identified and appointed * High-Level Programme Implementation Plan including phases agreed * Evaluation strategy agreed |

**Section 3: Promoting**

**Effective promotion**

A range of different mechanisms can be used to target those specific professional groups you want to attract onto the programme e.g. nurse managers via the Head of Nursing, HR, newsletters, notice boards, email, announcements at departmental or divisional meetings, and especially via your key contacts for that professional group.

A sample ‘Programme Flyer’ is included in the Appendices, containing sufficient detail on the programme that allows any prospective participants to make an informed choice.

**Tips on Promotion & Advertising**

* Seek support from senior management (if you think it is needed)
* Decide the professional group pairs you will recruit
* Consider doing a few short lunchtime presentations to raise awareness
* Programme Lead to act as the local champion for the programme
* Programme Lead to proactively promote concept to get people talking about it
* Use posters in prominent areas to generate interest e.g. staff rooms, canteen, etc
* Handout a copy of the ‘Paired Learning’ report to interested parties
* Ensure plan has enough time for advertising and recruiting to the programme
* Emphasize the positive benefits and refer to successful case studies
* Sell its flexibility, it usefulness to the organisation and contribution to patient care

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| **Promotion & Advertising checklist**   * Key professional groups identified and agreed * Senior management support confirmed * Local advertisement prepared and approved * Application form prepared and approved * Key advertising routes inc. contacts identified per professional group * Advertising completed and lessons learned recorded |

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**Section 4: Recruiting**

**Application form**

A sample application form for your paired learning programme, which also includes a detailed self-assessment questionnaire, can be found in the Appendices.

**To interview or not to interview**

Experience has shown from one pilot programme that allowing pairs to match themselves up at a single event was not very successful and was considered to be ineffective by those involved and regarded as being more akin to ‘speed dating’!

However, another pilot programme used interviews in conjunction with a detailed application form which probed issues such as participants’ reasons for wanting to join the programme, specific interests, etc. Whilst it took more time to arrange etc., it was found to be much more successful in matching pairs and this method is recommended if resources are available locally.

If it’s your first programme, another option to consider might be to ‘select’ a number of participants in your organisation who either might have been already identified for, or are new, to leadership roles via e.g. a talent management process, and then allocate them in pairs.

**Tips when setting up Paired or Shared Learning groups**

If your organisation is dispersed over a number of different sites, one of the key tips from earlier pilots was to ensure that both participants in any pair come from the same site, else the logistics in organising regular meetings, conversations, etc. is very challenging.

Line managers also need to fully support their staff that join the programme in terms of e.g. protected time to attend the workshops. Therefore, to aid planning, a workshop schedule should be made available at the outset by the Programme Lead, and used to seek engagement from the consultants, educational supervisors and line managers who may be releasing their staff to take part in the programme.

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| **Recruitment checklist**   * Application form prepared and approved * Application forms from potential participants received and reviewed * Participant pairing criteria agreed * Local interview panel identified * Local interviews held and participants selected * Participants & their line managers advised of results and commitments * Participants paired as per criteria and advised. * Programme information pack issued (if not already done). |

**Section 4: Designing**

**A ‘Smörgåsbord’ approach!**

Designing an effective paired learning programme is critical to both promoting the initial concept to senior management as well as ensuring that it will viewed as a high quality and valuable learning experience by its participants. To design a programme for your organisation, you can use a ‘Smörgåsbord’ approach i.e. the toolkit is NOT prescriptive as to the type of components that constitute a paired learning programme. However, we would encourage you to try and select as many of the components, as illustrated below, as we’ve found that this helps to provide a very rich and interactive learning environment for all those involved.

**Changing perspectives through conversations**

**Opening up experiences through shadowing**

**Workshops**

**Improvement Project**

**Design Surgeries**

**Conversations**

Pairs are encouraged to find opportunities to meet up and talk to each other. The aim is simply for each participant to find out a little more about their partner; to understand their role within the organisation; and to explore their personal perspectives on a wide range of healthcare-related issues.

The conversations are designed to stimulate learning but also to provide a foundation on which both shadowing and project work, if selected, could flourish. It has been found that the learning from each other’s training, experience and perspective on healthcare issues through pair conversations was clearly identified as offering the most value.

**Design Surgeries**  
A pair’s project work can be supported by the availability of regular drop-in sessions, or ‘design surgeries’. These can be facilitated by a programme lead and gives pairs the opportunity to informally discuss their project work within the context of a small group of supportive colleagues. The design surgeries also gives the programme lead an opportunity to catch-up with participants to find out how they are getting on, and provide coaching support where necessary.

**Improvement Projects**  
One of the most valuable components of a paired learning programme can come from the collaboration and joint working on a project related to improving services for patients. Participants should be encouraged to choose a project that is relevant to their role within the organisation e.g. something that the pair could tackle together, or alternatively some aspect of their work where they are able to use each other as a ‘sounding board’ or a ‘critical friend’ to develop and improve. The Programme Lead can provide support on the pair’s project via design surgeries, coaching, etc. or utilise existing in-house networks.

Registering and monitoring of improvement projects is useful as well as keeping a central London leadership team informed.

It is also important to understand that the chosen project might not necessarily be fully completed within the time-frame of the overall programme. However, it is important that key project milestones are achieved, and that there is clarity about the project’s next steps including handover to ensure its transfer and/or sustainability.

**Shadowing+ (Shadowing-Plus)**  
Pairs should be encouraged to provide shadowing opportunities for each other with the aim of expanding perspectives through exposure to real work-based situations e.g. in a clinician-manager pair, this could include a manager experiencing the clinical aspects of theatres, out-patients, wards or Emergency Departments, and could involve attending out-of-hours shifts and having direct conversations with patients. And clinicians could have the opportunity to sit in on meetings about operational and strategic issues with their manager pair. This could include exposure to e.g. discussions around finance and performance which might be entirely novel for most clinicians.

Underpinning all of this shadowing is the possibility for pairs to come together to discuss expectations and potential learning in advance of a planned shadowing experience, and then to come back together to reflect and debrief on it afterwards. The opportunity, i.e. to pre-brief and debrief, is generated through the emerging pair’s relationship and is likely to mean the shadowing is not just ‘interesting’ but provides a deep learning experience, hence we use the term ‘Shadowing+’ to describe this enhanced version of shadowing.

**Workshops**  
Alongside learning through conversation and shadowing, the design of your programme might well be underpinned by a series of facilitated workshops where the emphasis is on the development of skills and behaviours to lead change. Further details on workshop can be found in a separate section of this toolkit.

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| **Design checklist**   * Local organisation’s programme’s objectives and outcomes agreed * Programme Lead familiar with programme design including components * Programme components selected and agreed * Number and content of workshops to support local programme agreed * Programme Lead designs outline programme * Programme registered * Final programme design completed and agreed by Programme Lead * Information pack for participants completed with content, schedules, etc. |

**Section 6: Workshops**

**Overview**

Alongside learning through conversation and shadowing, the design of your programme might be underpinned by a series of facilitated workshops, involving the pairs learning alongside each other. The workshops can focus on different topics such as building self-awareness, leadership and improvement skills, etc.

Whilst acknowledging potential differences in a pairs’ learning needs, the emphasis in the original pilot was placed on developing both the skills and behaviours to lead change and drive real improvements across many different contexts. In cases where managers are involved, they may have attended similar training before but not in a heterogeneous environment or even to the same level.

**Designing effective workshops**

For example at a communications workshop, with clinician-manager pairs, you might use strands within the workshop e.g. while clinicians look at say business case development, the managers might have an opportunity to learn about medical hierarchy and influence. Consequently, with pairs from many different groups, you have an opportunity to use this “strand” approach to tailor the programme for the benefit of all participants.

A list of possible topic suggestions for your workshops can be found in the Appendices.

**Workshops Tips**

* Ensure the 1st workshop is on core communications skills that some may inadvertently take for granted
* Never assume that someone who has done a course will not learn anything new
* Consider use of strands in design of certain workshops to maximise learning
* Use the heterogeneous workshop group as an opportunity to promote debate

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| **Workshops checklist**   * Number and scheduling of workshops agreed * Workshop contents agreed * Collaboration opportunities to share workshops via the London Leading for Health Partnership team explored * Programme workshop schedule distributed to all pairs in advance * Workshop speakers & venues sourced and booked * Workshop feedback collected and analysed * Workshop lessons learned recorded |

**Section 7: Launching**

**Why launch?**

With the launch of any new leadership development programme in an organisation there is a sense of heightened anticipation as to how it will be perceived as well as received by its commissioners and participants. As it is delivered mainly using a peer-learning model, it relies hugely on a successful relationship developing between the participants in each ‘pair’. Consequently, we recommend that during the planning phase the participants are allocated via a combined interview and questionnaire process thus giving each pair a greater chance for success. Also, it is crucial that the programme lead engages with senior management to secure support.

Both of these elements i.e. senior management support and the optimal selection of pairs, can then be brought together at a single launch event e.g. at the first workshop, which we recommend should focus on perhaps the single most important criterion for success i.e. communicating effectively - to create a sustainable work-based relationship.

**Tips on launching**

* Integrate the launch of your programme with the 1st workshop
* Look at providing a highly-interactive and stimulating collaborative workshop
* Ensure your Programme Lead attends – as both a role model and facilitator
* Invite senior management which will demonstrate support for the programme
* Focus on ensuring there is maximum opportunity for interaction between pairs
* Highlight the importance of personal responsibility and the learner contract

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| **Launch checklist**   * Pairs representing a number of different professional groups selected * Programme aligned to organisation’s overarching leadership development plan * Programme has support of senior management * Senior management confirmed to attend launch * Programme Lead confirmed to attend launch * A central London leadership team advised of programme launch * Launch workshop venue/date/time agreed inc. content * Feedback on launch workshop collected and disseminated * Launch workshop programme distributed |

**Section 8: Joining the Community**

**Q. Why register?**

**A.** We strongly encourage you to register your paired learning programme with a central London leadership team, who will provide you with central support throughout the lifetime of your programme. This support will assist you when you are establishing your evaluation strategy so that the ‘variables’ you select will allow comparison and benchmarking between different programmes across London.

The resulting data can then be fed into and contribute to the knowledge base on paired-shared learning held by the central London leadership team. This team wants to be able to provide robust evidence of how the various programmes fare. Therefore, they also request that your organisation submit key relevant data on the various improvement projects including the objective, deliverables, outcomes and benefits, with specific reference to their impact etc. on participants and/or on patient care.

**Q. Are there eligibility criteria for registering my programme?**

**A.** No, there are no eligibility criteria as we want to encourage sharing of data as much as possible. However, the London Leading for Health Partnership team (based in Stewart House, 32 Russell Square, London WC1B 5DN), do strongly encourage each organisation to get their pairs to collaborate on a jointly-owned local improvement project. This is an important component of any paired learning programme which will hopefully provide some tangible benefits for you organisation.

**Q. How do I register my programme?**

**A.** Just provide the information below and email it to: [LD.LeadingforHealth@nhs.net](mailto:LD.LeadingforHealth@nhs.net)

* Organisation name
* Programme Lead - Name, Job Title & Email address

This will allow us to follow up and better understand your paired learning programme.

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| **Registration checklist**   * Programme Lead appointed * Number of pairs confirmed & Individual pair contact details available * Template completed & contact details to the email address above * Individual pair Improvement project data available * Improvement project details (when known) to the email address above |

# Section 9: Supporting the Learning

# Introduction

# Once the design, advertising, recruitment and launch of the paired learning programme has been completed, it is the responsibility of the Programme Lead to ensure that it is supported locally at an operational level, via a combination of regular design surgeries, workshops, etc.

# It is recommended to keep the organisation as a whole well informed of progress on the programme, using all key local communications channels to both raise and maintain its profile etc. This might include regular contact with e.g. all participants’ line managers to ensure their continued support of the programme throughout its lifetime and to feedback on overall progress of the programme itself.

# Design Surgeries/Mentoring/Coaching

# In an earlier section, design surgeries were described as regular drop-in sessions, that can be facilitated by a programme lead, and which gave participants the opportunity to informally discuss their project work etc. within the context of a small group of supportive colleagues. The surgeries also afford the programme lead an opportunity to provide e.g. coaching and mentoring support where necessary.

# Troubleshooting

# As the success of your programme depends to a large degree upon the development of a robust and trusted work and personal relationships between two individuals, some pairs for whatever reason may simply not work. Consequently, you need to be able to detect early on if a pair’s relationship is experiencing difficulties and starting to break down. Some of the warning signs include:

* Lack of regular contact between the pairs e.g. meet only infrequently
* Hostility from one participant towards the other in the pair
* Cancelled pairs meetings
* Poor attendance at workshops
* Poor participation at design surgeries
* Lack of progress on joint improvement project

# Whilst the use of interviews in the recruitment process, prior to pairs being established, recommended earlier in this toolkit, should go a long way towards significantly reducing the number of pairs failing, it will not eliminate them entirely.

# The Programme Lead then plays a key role in detection and hopefully resolution of any issues involving pairs. The Programme Lead might find it useful to refer to the ‘Learner Agreement’, as a guide to see which areas aren’t being adhered to and so can be used to guide a conversation with the participants to identify why the pair is not working. Full details on the ‘Learner Agreement’ can be found in the Appendices. Similarly, a ‘Line Manager’s Agreement’ is also provided.

Programme Leads should be aware that support is available from the London Leading for Health Partnership team (based in Stewart House, 32 Russell Square, London WC1B 5DN) who will be able to draw on their experience in this area and can provide advice in cases where the lead may simply be unsure how to proceed.

# Tips on Supporting Learning

* Consider the level of support required during programme design (it may be more than you initially think!) and how you might use different local resources.
* Ensure participants are honest in terms of their time commitments
* Programme Lead should acknowledge they are a role-model for participants
* Watch out for early warning signs that a pair is not working
* Hold regular design surgeries with all participants – maintain regular contact
* Ensure that facilitation at workshops should include the Programme Lead
* Register your programme to access regional support – this will be handled by the London Leading for Health Partnership team.

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| Supporting Learning checklist  * Design surgeries scheduled and all participants advised * Workshops have been designed to support the programme  (i.e. Leadership & Improvement as their main focus) * In-programme monitoring, but informal, performed regularly * Regular contact with participant’s line managers maintained * Improvement Projects register maintained and monitored regularly |

# Section 10: Evaluating

# Why Evaluate? To provide robust evidence that your programme is producing e.g. behavioural changes as well the acquisition of new skills and knowledge, creating an evaluation strategy from the outset is essential. It allows you identify and select your ‘measurement variables’ that will then allow later comparison and benchmarking between the different paired learning programmes across London. The resulting data can be feed into and contribute to the knowledge base on paired-shared learning that is held by the London Leading for Health Partnership team.

**Evaluation Methodology**

Both quantitative and qualitative data can be collected as part of the strategy to evaluate the impact of your paired learning programme. We recommend that you should collect data at the start and at the end of the programme. However, this may be supplemented by also collecting data at intervals throughout the programme.

**Pre-programme**

* Collect pre-intervention data by questionnaire, possibly as part of the application progress, prior to the start of the paired learning programme. This may comprise measures of preparedness for leadership along a five-point preparedness scale.
* This can also be supported by pre-programme interviews or focus groups to gain qualitative data on learning needs and expectations about the programme.

**During the programme**

* Programme leads may also wish to carry out further evaluation of the programme e.g. through evaluating individual workshops or carrying out interviews and focus groups at different stages in the programme. This can help in providing a more detailed view on the impact of different elements of the programme.
* For further detail on the way this evaluation methodology has been applied you should consult the case study in the ‘Paired Learning’ report (February 2012).

**Post-programme**

* Repeat the pre-programme questionnaire to measure preparedness in leadership along the five-point scale, and compare it against the pre-programme ratings.
* Statistical analyses should be used to compare both the pre and post programme findings. The type of statistical test used will depend on the specific questions being asked of the programme.   
  For example: comparing responses from two professional groups; comparing responses from more than two professional groups; comparing the significance in any change in the preparedness ratings within one group. Data analysis support might also be sought from workforce information or research teams/colleagues within your organisation.
* This can be further supported by post-programme interviews or focus groups where qualitative data can be gained to validate any changes in the quantitative findings. A suggested interview framework can be found in Part 2 - Appendices.

**Section 11: Celebrating**

**Why celebrate?**

To demonstrate the effectiveness and value for money of this innovative work-based learning programme, as well as raising its profile in your own organisation and getting it embedded in future local leadership development activity, you might consider holding a celebratory event upon the conclusion of the programme. This provides an opportunity to highlight the essence of the programme i.e. development of new working relationships alongside the visible and tangible benefits resulting from the joint and shared ownership of the improvement projects undertaken by the pairs.

**Tips on holding a celebration event:**

* Look at scheduling a celebration event during initial planning and communicate this to all of the pairs. This provides their improvement project with boundaries i.e. an end date as well as helping them focus on the project’s sustainability.
* Invite senior management and future potential sponsors to the event, as well as previous participants (even if they have moved on) in an ‘alumni-type’ model.
* Request pairs do a short poster presentation on their projects - a great way of summarising the key benefits & lessons learned from your programmes projects.
* Show how your organisation fits into the wider picture i.e. try and ensure the variables used to collect data during your programme evaluation can also be compared against similar type programmes in other organisations having the same professional groups. The London Leading for Health Partnership team   
  can provide support in this area.

**Mini-vignettes**

Examples of different improvement projects, i.e. around service and quality improvement, conducted as part of a paired learning programme which has yielded significant benefits to their organisations will be made available on the London Leading for Health Partnership website in the near future.

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| **Celebration checklist**   * Scope, size and format of celebration agreed * Celebration speakers & agenda agreed * Venue selected and booked in advance * Request to pairs to prepare their poster presentations issued * Invitee list agreed inc. senior management from professional groups represented * Celebration invitations including agenda issued * Poster Presentations on each pair’s improvement projects received * Celebration feedback collected and disseminated * Celebration highlights and poster presentations copies sent to LLfHP. * Call for Expression of interest in next programme announced (internal) |

**Section 12: Sustaining**

# Introduction

# Sustainability in this context refers to (a) ensuring the programme is seen as a success by the organisation and the participants involved and becomes embedded in any future leadership development activity, and (b) any improvement projects, that are undertaken, will be either continued or maintained if not completed within the programme’s lifetime.

# Programme Sustainability

# In the organisational context, building a link from past successes is an excellent way of evidencing the programme benefits as well as promoting the programme to all potential participants. Your evaluation should also provide further complementary evidence.

# Experience has shown that the most successful pairs had developed a personal connection and shared trust such that they felt able to call each other for advice and/or direction in the future. Therefore, these pairs should be ideally placed to influence an organisation’s culture and change the way it currently leads and delivers healthcare.

# Project Sustainability

# Similarly, it may not be always possible to ensure that a pair’s improvement project will be completed within the programme’s duration e.g. a clinician’s rotation comes to an end; project scope has grown significantly; extra time is required to evidence its benefits, etc. Consequently, pairs should ensure they consider their project’s sustainability from the outset, and review it regularly, to ensure that an effective handover plan is generated and the project is not left unfinished.

# Sustainability Tips

* Champion paired learning at all levels in your organisation
* Ensure strong senior management and stakeholder support exists
* Celebrate the success of the pairs’ projects at a special celebration event
* Use SMART objectives for your improvement projects
* Ensure handover of any unfinished projects is thorough
* Ensure your evaluation can provide evidence of benefits

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| Sustainability checklist – for Programme Lead  * Evidence exists that will demonstrate the success of the programme & projects * Pairs chosen reflect the different professional groups in my organisation * Projects’ register is up-to-date and regularly maintained. * All pairs’ project plans have well-defined objectives inc. a timeframe & milestones * Unfinished projects have adequate information for handover |

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| Sustainability checklist – for Pairs  * Project has a plan, a timeframe and key milestones defined * Project plan has been discussed with the Programme Lead * Learner Contract is being adhered to * Project is adequately documented to allow handover if required |

