DEVELOPMENT AND VALIDATION OF A WORKPLACE-BASED LEADERSHIP PROGRAMME FOR SENIOR RESIDENTS IN PSYCHIATRY

Anupam Thakur, Psychiatrist
CENTRE FOR ADDICTION AND MENTAL HEALTH, Toronto

Bryan O’Leary, Wendy Cowie
TEWV NHS FOUNDATION TRUST, UK
I have no financial disclosures that would be a potential conflict of interest with this presentation.
INTRODUCTION

- High-quality health care in 21st century needs physicians to be equipped with skills to practice in and lead in complex systems

- CanMEDS 2015: Manager to Leader

- Concept of ‘Shared leadership’
Tees, Esk & Wear Valleys NHS Foundation Trust, UK
BACKGROUND
Medical Leadership Competency Framework
‘Leadership and Management Programme’
[LAMP]

Goals

1. To help residents develop leadership skills relevant to clinical practice

2. To provide residents the opportunity to participate in change management initiatives as part of the ‘action-learning’ approach to the programme

3. To support residents with a mentoring programme during their leadership training journey
METHODS

Designing the leadership curriculum

• Working group of content experts
• Wider consultation [Northern Deanery, residents, clinical leaders in TEWV]
• Strong theoretical grounding [experiential learning]
• Workshop and workplace-based experiences
Kolb’s model of experiential learning
## Curriculum map for Workshop-based programme

<table>
<thead>
<tr>
<th>Competency [Medical Leadership Competency framework]</th>
<th>Educational content</th>
</tr>
</thead>
</table>
| Managing services  
Setting Direction | The challenges of doctors as leaders |
| Demonstrating personal qualities  
Improving services  
Setting Direction | Leadership – theory to practice  
The Medical Leadership Competency Framework |
| Setting Direction | Health systems leadership [National Health Service] |
| Demonstrating personal qualities | Awareness of self and others [Emotional Intelligence] |
| Working with others  
Demonstrating personal qualities | Collaborative leadership |
| Demonstrating personal qualities | Personality and leadership [MBTI] |
| Managing services | Planning and performance |
| Working with others | Working in teams |
| Working with others | Communication skills |
| Working with others | Dealing with Difficult Conversations |
| Setting Direction | Service improvement methodology, tools and techniques |
| Setting Direction | Leadership in a Changing Environment |
| Setting Direction | Change Management  
Quality Improvement Systems |
| Setting Direction  
Managing services | How to write a business case  
Handling complaints |
| Managing services | Managing Poor Performance |
| Improving services | Self-reflection, Appraisal, Revalidation  
Career development |
| Managing services  
Improving services | Leadership Power and Politics |
Leadership champions programme [Workplace-based]

• Leadership champions were senior leaders with operational management responsibility

• Mentoring role of champions ['skilled helper’ role]

• Change management project

• One year programme
Leadership champions programme for residents

- Applying to be a leadership Champion
- Recruitment of leadership champions
- Training and induction for champions and residents
- Leadership champions – trainees meetings for one year [Mentoring]
- Change management project
- Project write up [reflective exercise]
Implementation

• Twenty-three 4\textsuperscript{th} and 5\textsuperscript{th} year senior resident trainees in Psychiatry, 6 full days’ workshops
• Training and ongoing support arrangements
• Champions and trainees were matched by sub-specialty and geographical location
• Administrative support
Implementation [contd.]

Assessment of learners

- Reflective practice
- Direct observation of non-clinical skills [DONCS]

Program Evaluation

- Structured questionnaires
- Telephone interviews for residents and leadership champions
- Qualitative analysis of data
RESULTS

• Majority of the topics were rated as excellent or good
• Change management, MBTI, leadership skills, quality improvement systems and finance in NHS
• Residents reported enhanced understanding about their communication pattern, individual leadership styles and its impact on others in the team
Qualitative analysis

Sub-themes:
- Skill development
- Process related issues
- Scope for improvement

[operational issues]

“It does change your thinking and you kind of think beyond a particular patient or a particular clinical scenario and you start looking at the whole picture”

“coaching, mentoring and I could shadow the person as well, really helped a lot.”

“They can do some modules online to catch up?”
CONCLUSION

• Integrating work-place based learning with a scaffolding of workshop-based modules helped in consolidation of knowledge
• Mentorship should be an integral part of leadership training
• Involvement of key stakeholders and high level organizational support are key for successful implementation
• Low cost, high value venture
IMPLICATIONS

• Can be replicated in other specialties
• Competency measures of leadership skill acquisition following course completion
• Long term outcomes of the impact of the course on leadership behavior following residency
THANK YOU

Dr. Anupam Thakur
Email: anupam.thakur@camh.ca