

Leading by Example: The HEE/CILIP Leadership Development Programme – A Final Round Up

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It has been a few months since the programme officially finished in September so we have had some time to look back and reflect on the experience. It has been a packed year with many experiences to learn from and knowledge to add to our armoury of skills.

It feels appropriate to start this article by talking about the finished product created out of the project that we were tasked to do; namely the Statistics Toolbox. The toolbox (or toolkit – we had many conversations about which word to use!) is now available on the Knowledge for Health website under the Quality and Impact tab:

<https://kfh.libraryservices.nhs.uk/statistics-toolbox/>

Regular readers may remember that we outlined our project brief in our original articles in that the project is less about collecting statistics, and more about how to use what we collect as they have the power to be

more useful to us than a once a year collection for national purposes. To flesh this out further I quote directly from our project brief:

The main output will be the development of a toolbox to help LKS staff collect local staffing, financial and activity data. The contents will be informed through engagement, by listening to and consulting with LKS staff at all levels to address their concerns and needs, identify good practice, and enable them to see the value in collecting this data.

We were also asked to come up with a minimum dataset that could be collected; and as you can see from the toolbox we have called that a supplementary dataset as we felt quite strongly that supplementary did not suggest that LKS staff had to collect the bare minimum or was prescriptive as to statistics collection.

But to go back to the main aim of the project – the toolbox that we came up with has six elements to it:

- Case studies
- Infographics
- Dashboard
- Supplementary Dataset
- Dashboard Templates
- Frequently Asked Questions

Each project member took ownership of an element and worked on it to the satisfaction of the whole group. This necessitated many teleconferences and even a face to face meeting in Birmingham as, despite the wonders of telecommunications. Indeed Sam feels that face to face works better and I think that her fellow colleagues would agree.

As a group we chose to share the responsibility for chairing our meetings so that we each had the opportunity to experience it. We rotated Chair for each meeting and all did it at least once. Heather felt this gave us all chance to get out of our comfort zones if we had little experience of acting as Chair and also shared the burden of keeping to time and the agenda.

The toolbox is now live and we hope that it will be of use to library staff around the country, but we also had nine recommendations that we made to our project sponsors. Those recommendations include the future of the toolbox as it should not be a static toolbox but one that evolves with the library community and is updated to reflect the questions and feedback that we may receive as to the usefulness of the toolbox.

We also recommended that there needs to be an exploration of national dashboards or other software that would allow for rapid collection and analysis of statistical data. The other recommendation that we would like to highlight is with regards benchmarking. It was a clear theme throughout our communications with library staff, whether via focus groups, the survey or at the Health Libraries Group Conference. The emerging phrase was “sensitive benchmarking” as we acknowledge that while people like to be able to benchmark, it *must* be done with sensitivity to allow for true comparison (i.e. there is no point benchmarking a small community Trust against a large university Trust.)

As for the HEE/CILIP course itself, we were challenged and stretched in many ways, not least by working with colleagues from across the country that we may not have met prior to starting. Sam’s stand out points are using the positional conversation tool to reflect on (or prepare for) conversations, and the action learning sets. The action learning sets

took up a large part of the course as we met several times through the year long course for a whole day of these sets. They are exhausting and draining, but also very powerful and really make you think deeply about the issue that you have chosen to bring to the action learning set. Although we are unlikely to continue using the Action Learning Sets between us a group for various reasons, a new Action Learning Set is currently being set up for library managers in the Wessex patch for those that were on this cohort or the last one as well as bringing more local people into the fold!

Heather's highlights were the communication workshop in Bristol as it was engaging and informative. She still does the Power Pose before presentations! The Action Learning Sets were invaluable and Heather is exploring using them in her wider organisation.

As to the future, Sam is already feeling more confident when it comes to talking with the Director of Workforce and is rolling out plans to use the knowledge self-assessment tool and is starting other avenues of work such as diversity and inclusion as not only is this much needed work within the NHS but also has the potential for raising the profile of library services.

The course was highly useful and engaging, and even transformative. We would definitely recommend it to anyone who is interested. You will be challenged, pushed, and encouraged while being highly supported and the benefits of this can be immense.