

North West OD Competency Project

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NHS North West Leadership Academy



Working with

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Evidencing the progress and spread of the NHS North West Leadership Academy's work on **System level OD practice across the wider NHS in England**

Background

This paper outlines the current status of a wide-ranging project which began in the NHS North West Leadership Academy (NHS NWLA) in the summer of 2016, it brings up to date the progress of the work since the publication of our last paper in September 2016.

Since the initial work the project has developed into a series of national action research cycles focusing upon how we support OD practitioners to robustly evidence their capability to undertake system level OD support. This work is enabling the NHS nationally to create the talent pipeline for OD at the system level. This project is part of the national approach to supporting system transformation.

The history of the NHS NWLA work into OD

The North West region and the NHS NWLA have a long history of supporting and developing strategic OD capability building. In 2005, we began the work which resulted in the development of our OD tool kit <https://www.nwacademy.nhs.uk/.../DevelopingTogetherODToolkit-NHSNWLA.pdf>. This work continues to be, used widely across the country in both the NHS and other sectors.

As an organisation we have always focused upon strategic leadership, organisation and system level development. So, in the last few years as the focus on system level change and transformation came more to the fore, we began to consider more deeply the issues related to our OD talent pipeline.

We commenced our action research to consider the following questions:

- How does the NHS identify its OD talent?
- How do you assure system leaders, with any degree of certainty, of the capability of a practitioner at any given point in time?
- How do you assure the OD talent pipeline to ensure the availability of OD practitioners who are capable of supporting this most complex organisational and system level change and improvement work?

The field of practice from which OD practitioners emerge is wide and varied, this adds an interesting degree of complexity when one attempts to demonstrate, measure or assure competency. OD is not a single profession and there is no statutory body which licenses practitioners. Assuring the quality of OD practice is a subject which comes to the fore at regular intervals. As there is no one view of OD it can be difficult to ascertain the calibre of candidates wanting to progress in the field and also to assure clients that the practitioner has the necessary capability to support the work which is required. This was the interesting backdrop against which the NHS NWLA project developed.

Designing an intervention which would support the development of OD practitioners

From the very onset we decided that an assessment centre approach would not be appropriate. We wanted to focus upon the practitioner and enable them to demonstrate how their whole career and their life

skills and experience are part of their practice of OD. We decided that supporting the practitioner to review their whole career journey, and in some cases key critical life events, in relation to capability and competency development should be the basis of our intervention.

Key to the intervention design was which formal competency framework should be used. We were clear at that time that no single framework was considered best practice across the sector, the UK or globally. Many different competency frameworks are in existence and given the status of OD as a field of practice it was likely that this position would continue. We did not want to stall the project by getting trapped into a debate about which competency framework was the 'right one'. We took a pragmatic position and designed an intervention which we believed would be future proofed in that the competence framework could be interchangeable.

This interchangeability meant that candidates would be able to self-assess against a RECOGNISED and VALIDATED framework and produce their evidence against its standards. It ensured that clients would be clear of the validity and origins of the claim process. It also ensures that as the field of OD changes and new, validated competency frameworks emerge the intervention design remains fit for purpose.

However, for the purpose of our work in the North West of England in 2016 we agreed to deploy the NW Toolkit competencies. These had been previously developed in the NW with support from business psychology experts at OPP <https://www.opp.com/>. As our initial report (link on page one) outlines after further validation in the field, practitioners from the NHS and Local Government, we also added in the use of the CIPD <https://www.cipd.co.uk/> competencies for OD, which added in a clear focus upon higher level competencies at the executive level.

The intervention would focus upon the practitioner enabling them to review and reflect upon their competency development and produce solid evidence to support their claim of their capability.

A number of professional groups within the NHS over the last 15 years, have been required to maintain and develop a portfolio of evidence, which enabled their fitness to practice to be assessed. We wanted our intervention to mirror these professional processes.

It was felt that the OD practitioner could claim their practice using similar principles. The claim of practice would be the evidence of the candidate's body of work in OD, which evidenced the OD competencies.

The evidence would be robust, clear and capable of enabling a panel of peer reviewers to ascertain if the candidate was able to substantiate the claims they were making. This process of evidence presentation supported by a peer review and validation panel is designed to assure system leaders of the capability of the OD practitioners being deployed to support public sector system transformation.

Our intervention has 6 elements:

- a. A period of personal reflection against the competency framework with a review of the candidate's current career position, via reflection upon the CV
- b. Attendance at a one-day workshop (details of this can be found in the paper cited on page 1)
- c. A two-week period of further reflection regarding the next steps in the candidate's career journey and a decision whether to take forward a claim
- d. Support to develop the claim over a 6-month period
- e. Submission of the claim, review of evidence by a panel of peers and experts.
- f. Participation in a validation interview with the panel members to confirm claim and evidence

1. Supporting OD practitioners to evidence their capability and competency via the production of a claim.

Support to the practitioners who decided to prepare a claim of practice comprised both formative and summative stages.

During the formative stage participants were supported by a number of colleagues from the NHS NWLA. They were helped with reflection, advice and challenge with regard to their OD practice and how it could be solidly evidenced. Via conference calls we were able to learn by exploring the process, type of evidence required and OD practice examples.

An exemplar of a systems level intervention was developed. A template document was produced which supported the candidates to consider what was necessary to demonstrate a system level claim against the NWLA competencies.

1.1 The role of the formative supporters / reviewers

As this was a developmental approach we set out to provide as much support, encouragement and positive challenge as we could. Our philosophy was that if we could effectively challenge during the formative stage the candidates would have the best opportunity to create their portfolio of evidence. In order that the evidence could be validated it needed to be clear and robust, and the formative supporters provided a peer review element which challenged the candidates to be sure they were evidencing what they were claiming.

The formative reviewers received the drafts of evidence and provided in-depth feedback to the candidates on the strength and validity of their evidence.

This action research cycle proved to be a valuable learning exercise for both the formative reviewers and the candidates. The candidates received in depth feedback to support their final submission and the offer of personal coaching. The formative reviewers learned how the process was working in practice and gained the experience of the time required to provide this development support.

As an unintended positive outcome, the process enabled the formative reviewers to construct questions with the intent of stimulating 'system OD thinking'. The candidates reported that the questions were particularly helpful in stimulating them to think more deeply with regard to the complexity of their interventions and their 'Use of Self as an instrument' (Mee Yang Cheung,2001).⁽¹⁾

The intervention designer who is an external OD practitioner provided both mentor support for the formative review panel and important continuity and consistency in relation to the intervention design principles.

1.2 Ongoing support

Throughout the process candidates were able to access conference calls and individual coaching sessions in support of the development of their claim.

2. Preparing for the candidates formal meeting with the panel to discuss the outcomes of their claim. (The validation interview)

Once the candidates had finalised their claim and evidence portfolio the work was reviewed by a group of executive system peers. Their role was to validate (or not) the claim. Providing external scrutiny of the work and assuring that the claim of competency being made was valid and accurate.

This element of the intervention centred upon the developmental validation interview with the panel.

The intention was that the process was a developmental conversation. It was not an examination, it was not an assessment by others, it was an assessment of the EVIDENCE that the candidate had chosen to submit. The panel members would decide if the evidence supported the claim being made. Fundamentally it gave the candidates an opportunity to spend time with system and OD executives, exploring their capability, competency and experience at the system level.

2.1 Recruitment of the panel members

Representation to the panel reflected the broad nature of Organisational Development and comprised of external panel members who all worked nationally in the field of OD.

Colleagues were experienced in system development, experts in the theory & practice of OD and included the Chief Executive of Impact Consulting an Occupational Psychologist and OD practitioner, Deputy Chief Executive of the NHS Transformation unit, an independent external OD Director, and the Managing Director of the NHS NWLA.

All panel members were personally recruited and prepared by the NHS NWLA project lead. Full briefing information was provided in written format, to ensure a comprehensive understanding of both the role of panel members, role boundaries and also the anticipated time needed to fulfil the role successfully.

2.2 Critical learning from the panel members as they reviewed the claims and the presented evidence

This element of the work took place in September / October 2017, this was a new and novel approach and as such we were learning as we moved forward.

The scale of the analysis required by the panel members was extensive. As the scale of the task became clear a decision was made to focus the individual panel members' attention onto selected areas of competence within the framework to ensure they had time to constructively analyse the validity of the evidence. This resulted in all evidence being scrutinised by the panel overall, but no single panel member had the whole claim to review, this was a pragmatic decision taken to support panel members time allocated to the project.

All evidence was submitted in an electronic format to a secure document storage platform, which could be accessed by panel members and the candidates. This system worked effectively and eradicated the need for hard copy material.

As members reviewed the claims they drew up the questions they wanted to ask. All the questions were collated and provided to the candidates prior to the developmental interview. This action followed our philosophy of a developmental approach. We did not want the candidates to feel they were being examined, but that they were being supported to explore their work and the claims they were making. This ensured that the candidates had a full outline of the issues the claim had raised for the panel members, prior to the meeting.

3. Management of the validation interviews and the panel

The first panel took place on the 5th of October 2016.

The NHS NWLA took the decision to ask the Independent OD Director to chair the panel, she had been central to the design of the intervention and had supported the formative supporters and it was felt that she offered consistency at this point in our action research.

The tone of the panel interviews was set by the behaviour of the panel members. Panel members sought to be supportive and appropriately probing and challenging. Candidates were told as they began their interview the outcome of the panels assessment of evidence. They were told if their claim had been validated. This was an important step in setting the tone of the interview, it enabled the candidate to focus upon the development support being offered via the process.

Interviews were scheduled for 1.5 hours.

The outcome of the panel for the first 4 candidates was that 2 candidates provided evidence that they were working as system OD practitioners supporting system executives to design and develop transformation interventions (system OD leaders). Clearly the influencing and support and design of system level interventions, WITH system executives as the primary client is a key competency. Two candidates were clearly able to demonstrate their capability, competence and the outcomes of their OD practice in this area.

Two further candidates produced evidence that validated their claim that they were working as OD practitioners, but had not yet worked at the level to support, guide and advise system executives. (system OD practitioner). The remaining two practitioners were working at the system level and the focus on their work was on interventions which had been agreed and decided by others (i.e. not designed by them in conjunction with the system executives). They had not been in a position to work with system executives. Influencing and supporting the most senior leaders of the system is key to the full application of OD practices. Both candidates' self-assessed that they were yet to achieve this competency and their evidence supported their position.

This distinction between system OD leader and system OD practitioner had become important as the panel sought to clarify the evidence within the claims. The assurance required by system executives included the confidence that OD practitioners could work at a 'system level'.

The outcomes of the development interview included:

- The issuing of the 'Certificates of Endorsement' by the NHS NWLA
- The development of personalised development plans
- Support in development of their OD career

These outcomes meant our OD Systems level Talent pool had finally started to take shape and that all of the panel members and participants felt the Competency Validation process to be robust and rigorous. As postscript two candidates have now moved into their next OD roles to develop as they intended in their claim in practice.

In November 2017 the candidates (post validation) were invited to attend a morning event to review and critique the overall intervention. In relation to the validation interview part of the intervention, they advised that the panel and their questioning was "insightful" and "very supportive" to them, helping them focus on their strengths.

4. Evaluation of the experience by the pioneer candidates

We have had many conversations with regard to the experience of our pioneering participants who helped us develop an effective intervention, whilst at the same time undertaking the claim process.

The participants all fed-back that the experience of the OD Validation Process was a development experience although they recognised the need for it to be process driven to achieve the assurance aims. We undertook a half day evaluation workshop to explore in detail the process from a participant's perspective and also to dig deeply into their lived experience and wisdom of how to make the work better. They reported that:

- they felt excited to be part of the project as it gave them the opportunity to “be in it to shape it” and felt “grounded in their purpose.”
- the process had integrity, was robust and rigorous and they realised how much work and effort by all concerned went into it.
- they made valuable connections through the panel members which many of them followed up after the panel meeting which enriched their networks and experience.
- the process and the journey of reflective practice for them developed their confidence and competence as they confronted the full extent of their competence, developed throughout their life and their career
- the work had already started to open doors for them for new career opportunities and sharpened focus on strengthening and further developing their existing roles. At the time of writing this paper 2 (fifty percent) of the participants had secured their next OD role.
- they believed the panel experience was invaluable in supporting their thinking and confidence and would have liked more time for this.
- they felt this project was an opportunity to raise the awareness of colleagues and senior leaders of what OD means and to help colleagues to understand the trust value of OD and provide assurance around who their OD Systems leaders are in the System.

In an appropriately critical mode they fed back the need to focus earlier in the process on their ‘Self as Instrument’ as often what they find themselves doing is taking this for granted so needing to shift the emphasis to “not just doing OD but being OD in their place”, thereby bringing more of themselves to their conscious practice.

Finally, they advised that a key element of the whole process was the validation interview with the panel and the discussion and support to their continued development.

All were offered a coach to support them with their continued development and various development workshops and master classes were recommended. In addition, the Managing Director wrote to each of the line managers to appraise them of the project and outcome for their participant and request their support in seeking ongoing development opportunities for their member of staff.

A key feature of the evaluation was the need for continued professional development at the system level and did not, in the main, focus upon the need to increase knowledge and access to formal learning. It focused upon exposure to working and gaining experience at the system level. They required the opportunity to deploy their OD skills in different ways across they system and to learn alongside system executives .

5. Spread of the work across England – the National rollout work

As the work progressed in the North West of England other NHS Local Leadership Academies became interested in the work and the key questions the action research cycles sought to address. In December 2016 it was agreed to develop a further series of national roll out cycles to support the rest of England to explore how to identify and assure the practice of its OD practitioners working at the system level. This piece of work will be the subject of a secondary paper. In brief the national rollout programme is being developed as a co-ordinated piece of OD across all 10 local leadership academies. It is in itself an example of a cross country system piece of OD and much is being learned

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Reference

- (1) Mee Yang Cheung-Judge (2001) Self Instrument – A Cornerstone for the Future of OD; Vol 33. No. 3, OD Practitioner 2001