a study of the work of middle and front line healthcare management

### Setup meetings agenda

### logistics

1. Who should we ask to help us to identify the middle and front line management population of the Trust so that we can distribute information about this project? And the key categories and/or groups to whom we should be speaking? (Job titles vary, and this project extends to those who describe themselves as clinical and managerial leads.) And who should we ask about room availability and booking? We would like to use small meeting rooms for focus groups with up to 10 participants.

#### background

- 2. What would you say are the main issues on the management agenda right now?
- 3. In your opinion, what are the main pressures and demands (-s), and motives and rewards (+s), for the middle and front line management roles in this trust?
- 4. Can you describe briefly the Trust's current approach to the further development of clinical leadership the issues, the challenges, the benefits?
- 5. Can you give me a couple of examples that illustrate the role that middle and front line managers have played in this Trust to improve clinical outcomes and quality of care?
- 6. Implementing change after serious untoward incidents or 'never events' what in your view are three things the Trust does well, three things the Trust does not do so well?
- 7. What do you think has to change in this Trust to allow middle and front line managers to make an even stronger contribution to patient care and organizational performance?

outputs

- 8. What outcomes and benefits would you like to get from this project from a personal perspective, a Trust perspective, from the perspective of the service as a whole?
- 9. What other issues would you advise us to be aware of and to look out for in this study of middle and front line management work?

a study of the realities of middle and front line management work in healthcare

How do *you* manage? Can you help us to understand how management work is changing and why? This will lead to new management development approaches, and also to new practices, tools, diagnostics and frameworks which will help you to implement change, improve patient safety, and influence care quality, clinical outcomes, and organizational performance.

### **Focus Group Participant Information Sheet**

How are middle and front line management roles in healthcare changing? What are the challenges and rewards, the pressures and the satisfactions? And what are the implications? We would like to ask you to help us to answer these questions. This will improve our understanding of management roles, and of management support and development needs, and will contribute to improvements in management practice. The focus groups will be held on Trust premises, involve around eight managers on each occasion, and will last about an hour.

### 1. What is the purpose of this study?

The aim of this project is to improve our understanding of how healthcare managers handle the demands and challenges, the motivations and rewards, of a changing service. We know very little about the work experience and attitudes of healthcare managers, but when things go wrong, this group often takes the blame. We will explore the impact managers have on the quality and outcomes of patient care, and we also want to find out how changes to working practices are managed after serious or 'extreme' incidents. This can be a problem, as the recommendations of enquiries, in health and elsewhere, often sit on the shelf.

### 2. Who else is involved in this study?

Organizations collaborating in this work include six acute trusts and one primary care trust. Members of the research team will meet with senior managers at each location before data collection begins, to answer questions, and to make appropriate logistical arrangements. We have an advisory group including senior healthcare managers in national, regional, and local roles, to ensure that our work is up to date with current trends and developments, and to help with clarifying the practical implications and dissemination of findings. At each participating trust, our focus lies with middle and front line managers, and some senior (board level) managers may also be involved. There is no patient involvement in this study.

### 3. What will be involved if I decide to take part?

We expect a lively focus group discussion of the main motivations and rewards of middle and front line management work in healthcare, how management roles are evolving with current pressures, and what would have to change in order to strengthen the contribution that you make to quality of patient care, clinical outcomes, and overall organizational effectiveness.

#### 4. Will the information obtained in the study be confidential?

We guarantee that your participation in this study, and all information that you provide, will be treated confidentially. We will abide by all relevant sections of the Data Protection Act 1998, and guarantee conformity with its principles. Interview transcripts will be coded anonymously and stored on secure digital media. All original data (computer files, hard copy) will be destroyed five years after the end of the study. Information gathered will be used only for the purposes of this study and the dissemination of results. Information from different sources will be aggregated for the presentation of findings in reports and academic publications: individuals, departments and Trusts will not be identifiable. If, for illustrative purposes, verbatim quotations from focus and briefing groups and interviews are used, individual and organizational identity cues will be removed, and quotes will not be attributed. If you would like a copy of the final report of this study, this will be provided free of charge on request. The research team members are covered by professional indemnity insurance which provides remedies for breach of confidentiality.

### 5. If I have concerns about this study, or if I change my mind about taking part?

If you have any concerns either during or after the study, please contact the Principal Investigator. Your decision to take part in this study, or not, will be confidential. If you choose to be involved and then withdraw, your decision will be respected without question, and will be treated as confidential.

### 6. What if I would like further information about this study?

If you would like to discuss this study in more detail, please contact either the Principal Investigator, or the designated member of the research team at your Trust who will be happy to answer questions. They can be reached through the Cranfield switchboard: 01234 751122.

Professor David Buchanan (Principal Investigator)		
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### **Survey Respondent Information Sheet**

How are middle and front line management roles in healthcare changing? What are the challenges and rewards, the pressures and the satisfactions? And what are the implications? We would like to ask you to help us to answer these questions. This will improve our understanding of management roles, and of management support and development needs, and will contribute to improvements in management practice. The survey questionnaire has been designed to be easy to complete, and should take you no more than half an hour.

### 1. What is the purpose of this study?

The aim of this project is to improve our understanding of how healthcare managers handle the demands and challenges, the motivations and rewards, of a changing service. We know very little about the work experience and attitudes of healthcare managers, but when things go wrong, this group often takes the blame. We will explore the impact managers have on the quality and outcomes of patient care, and we also want to find out how changes to working practices are managed after serious or 'extreme' incidents. This can be a problem, as the recommendations of enquiries, in health and elsewhere, often sit on the shelf.

### 2. Who else is involved in this study?

Organizations collaborating in this work include six acute trusts and one primary care trust. Members of the research team will meet with senior managers at each location before data collection begins, to answer questions, and to make appropriate logistical arrangements. We have an advisory group including senior healthcare managers in national, regional, and local roles, to ensure that our work is up to date with current trends and developments, and to help with clarifying the practical implications and dissemination of findings. At each participating trust, our focus lies with middle and front line managers, and some senior (board level) managers may also be involved. There is no patient involvement in this study.

### 3. What will be involved if I decide to take part?

We will ask you to complete a survey questionnaire, which will take about half an hour to complete. Questions will be about the realities of the healthcare management role, the implementation of changes to working practices, and how managers contribute to quality of patient care, clinical outcomes, and organizational effectiveness. You will not be asked to put your name on the questionnaire, which we will ask you to place in an unmarked envelope, which will then be returned directly to, or personally collected by a member of the research team, so that your responses remain anonymous.

#### 4. Will the information obtained in the study be confidential?

We guarantee that your participation in this study, and any information that you provide, will be treated confidentially. We will abide by all relevant sections of the Data Protection Act 1998, and guarantee conformity with its principles. Survey responses are anonymous, and interview transcripts will be coded anonymously and stored on secure digital media. All original data (computer files, hard copy) will be destroyed five years after the end of the study. Information gathered will be used only for the purposes of this study and the dissemination of results. Information from different sources will be aggregated for the presentation of findings in reports and academic publications: individuals, departments and Trusts will not be identifiable. If, for illustrative purposes, verbatim quotations from focus groups and interviews are used, individual and organizational identity cues will be removed, and quotes will not be attributed. If you would like a copy of the final report of this study, this will be provided free of charge on request. The research team members are covered by professional indemnity insurance which provides remedies for breach of confidentiality.

#### 5. If I have concerns about this study, or if I change my mind about taking part?

If you have any concerns either during or after the study, please contact the Principal Investigator. Your decision to take part in this study, or not, will be confidential. If you choose to be involved and then withdraw, your decision will be respected without question, and will be treated as confidential.

#### 6. What if I would like further information about this study?

If you would like to discuss this study in more detail, please contact either the Principal Investigator, or the designated member of the research team at your Trust who will be happy to answer questions. They can be reached through the Cranfield switchboard: 01234 751122.

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If you have any other concerns or questions about this study, at any stage, please contact the Principal Investigator, or a member of the management board of your trust.

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a study of the realities of middle and front line management work in healthcare

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### **Briefing Group Participant Information Sheet**

We would like to tell you about the findings of this research project so far - from focus groups and a management survey - and to ask you for your assessment of our results, and what you feel are the implications for management practice. We would also like to ask you to help us to generate novel practical ideas with regard to the wider dissemination of these findings to the management community across the service. The next stage of this project will involve a small number of cases examining how change is managed following serious incidents. We would like your help to identify appropriate cases to explore.

### 1. What is the purpose of this study?

The aim of this project is to improve our understanding of how healthcare managers handle the demands and challenges, the motivations and rewards, of a changing service. We know very little about the work experience and attitudes of healthcare managers, but when things go wrong, this group often takes the blame. We will explore the impact managers have on the quality and outcomes of patient care, and we also want to find out how changes to working practices are managed after serious or 'extreme' incidents. This can be a problem, as the recommendations of enquiries, in health and elsewhere, often sit on the shelf.

### 2. Who else is involved in this study?

Organizations collaborating in this work include six acute trusts and one primary care trust. Members of the research team met with senior managers at each location before data collection began, to answer questions, and to make appropriate logistical arrangements. We have an advisory group including senior healthcare managers in national, regional, and local roles, to ensure that our work is up to date with current trends and developments, and to help with clarifying the practical implications and dissemination of findings. At each participating trust, our focus lies with middle and front line managers, and some senior (board level) managers may also be involved. There is no patient involvement in this study.

### 3. What will be involved if I decide to take part?

At this briefing, we will present an overview of what we believe to be the findings of this study so far. We will ask for your assessment of our analysis, leading to a discussion of the implications for management practice. We will also ask for your advice on creative ways to disseminate these findings (that is, 'not another report'). Finally, we will ask you to help choose case incidents for the next stage of the project, which will involve interviews with 'key informants' who have been involved with the changes following those events.

#### 4. Will the information obtained in the study be confidential?

We guarantee that your participation in this study, and all information that you provide, will be treated confidentially. We will abide by all relevant sections of the Data Protection Act 1998, and guarantee conformity with its principles. Interview transcripts will be coded anonymously and stored on secure digital media. All original data (computer files, hard copy) will be destroyed five years after the end of the study. Information gathered will be used only for the purposes of this study and the dissemination of results. Information from different sources will be aggregated for the presentation of findings in reports and academic publications: individuals, departments and Trusts will not be identifiable. If, for illustrative purposes, verbatim quotations from focus and briefing groups and interviews are used, individual and organizational identity cues will be removed, and quotes will not be attributed. If you would like a copy of the final report of this study, this will be provided free of charge on request. The research team members are covered by professional indemnity insurance which provides remedies for breach of confidentiality.

#### 5. If I have concerns about this study, or if I change my mind about taking part?

If you have any concerns either during or after the study, please contact the Principal Investigator. Your decision to take part in this study, or not, will be confidential. If you choose to be involved and then withdraw, your decision will be respected without question, and will be treated as confidential.

#### 6. What if I would like further information about this study?

If you would like to discuss this study in more detail, please contact either the Principal Investigator, or the designated member of the research team at your Trust who will be happy to answer questions. They can be reached through the Cranfield switchboard: 01234 751122.

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### **Case Study Interviewee Information Sheet**

We would like to explore your experience of the conditions in which change after a serious event can be either straightforward, or challenging. This will improve our understanding of the processes involved in such circumstances, and develop guidelines for improved practice which will in turn contribute to patient safety. The interview will be held on Trust premises, at a time convenient for you, and will last about an hour.

### 1. What is the purpose of this study?

The aim of this project is to improve our understanding of how healthcare managers handle the demands and challenges, the motivations and rewards, of a changing service. We know very little about the work experience and attitudes of healthcare managers, but when things go wrong, this group often takes the blame. We will explore the impact managers have on the quality and outcomes of patient care, and we also want to find out how changes to working practices are managed after serious or 'extreme' incidents. This can be a problem, as the recommendations of enquiries, in health and elsewhere, often sit on the shelf.

### 2. Who else is involved in this study?

Organizations collaborating in this work include six acute trusts and one primary care trust. Members of the research team met with senior managers at each location before data collection began, to answer questions, and to make appropriate logistical arrangements. We have an advisory group including senior healthcare managers in national, regional, and local roles, to ensure that our work is up to date with current trends and developments, and to help with clarifying the practical implications and dissemination of findings. At each participating trust, our focus lies with middle and front line managers, and some senior (board level) managers may also be involved. There is no patient involvement in this study.

### 3. What will be involved if I decide to take part?

This interview will take about an hour, focusing on an incident with which you have experience, and in particular on the implications for organizational change. Although it will be based on a topic guide, we will rely on your judgement and preferences with regard to the information that you disclose, and the sequence in which topics are covered. We wish to record interviews so that we can produce accurate accounts, and we will give you a copy of the transcript on request. However, we will ask your permission before recording,

and we will respect without question your right to withhold that permission. Depending on how this case study develops, we may ask if we can interview you again, under the same conditions. Your consent to that request will of course be voluntary, and we will respect without question your decision regarding whether or not to contribute further.

In exploring how change was managed following a serious incident, it is possible that you may find yourself sharing information about work experiences that you found difficult or distressing. If you are unwilling to share such information, please consider this when making your decision to be interviewed. If you feel uncomfortable during the interview, simply inform the research team member who will then terminate the discussion, and who will offer to discuss the experience in private, off the record, if you would find that helpful.

### 4. Will the information obtained in the study be confidential?

We guarantee that your participation in this study, and all information that you provide, will be treated confidentially. We will abide by all relevant sections of the Data Protection Act 1998, and guarantee conformity with its principles. Interview transcripts will be coded anonymously and stored on secure digital media. All original data (computer files, hard copy) will be destroyed five years after the end of the study. Information gathered will be used only for the purposes of this study and the dissemination of results. Information from different sources will be aggregated for the presentation of findings in reports and academic publications: individuals, departments and Trusts will not be identifiable. If, for illustrative purposes, verbatim quotations from focus and briefing groups and interviews are used, individual and organizational identity cues will be removed, and quotes will not be attributed. If you would like a copy of the final report of this study, this will be provided free of charge on request. The research team members are covered by professional indemnity insurance which provides remedies for breach of confidentiality.

### 5. If I have concerns about this study, or if I change my mind about taking part?

If you have any concerns either during or after the study, please contact the Principal Investigator. Your decision to take part in this study, or not, will be confidential. If you choose to be involved and then withdraw, your decision will be respected without question, and will be treated as confidential.

### 6. What if I would like further information about this study?

If you would like to discuss this study in more detail, please contact either the Principal Investigator, or the designated member of the research team at your Trust who will be happy to answer questions. They can be reached through the Cranfield switchboard: 01234 751122.

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### Management focus group topic guide

How are middle and front line management roles in healthcare changing? And what are the implications? We would like to ask you to help us to answer these questions. This information will be valuable in its own right, and will help us with the design of the survey in the next stage of this project. That survey will have common items that we will use in other trusts taking part in this study. But we also want to tailor the questions to local needs and priorities.

Can we address any questions or concerns that you have before we start?

#### **Individual brief: 5 minutes**

From your experience:

- 1. what are the main motivations and rewards in your current role?
- 2. how is your management role in this Trust changing?
- 3. what would have to change in order to strengthen the contribution that you as a manager can make to improve the quality of patient care and clinical outcomes?
- 4. what would have to change in order to strengthen the contribution that you as a manager can make to improve overall organizational effectiveness?

#### **Table brief: 25 minutes**

In groups of three to five, share your answers to those questions, and collate the results on the flipcharts provided. Nominate a spokesperson (or two) to feed back to the whole group.

#### **Plenary: 20 minutes**

Feedback from spokespersons and open discussion.

#### **Close: 5 minutes**

Final questions, issues, how this information will be used.

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### Management briefing group topic guide

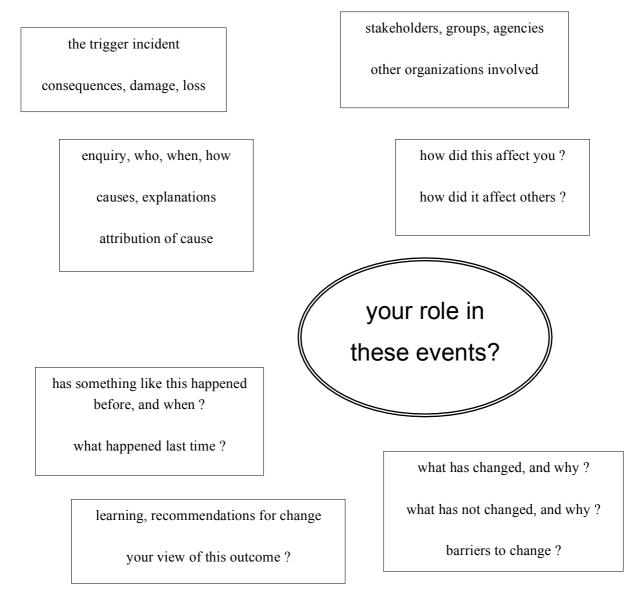
In this briefing group, we would like to explain the main findings of this project so far, from focus groups and our management survey. In making this presentation, we would like to ask for your comments, advice and suggestions in the following areas:

- 1. Are these findings what you would have expected, or not, and why?
- 2. Is our interpretation of these results consistent with your own experience?
- 3. What in your view are the practical management implications of these findings?
- 4. We would like to develop innovative ways to disseminate these findings, so that they have a rapid and significant impact on management practice; what would you recommend?
- 5. For the next stage of this project, we want to explore the management of changes following serious or adverse incidents. This will include instances where changes were successful, as well as situations where change was problematic. These examples do not have to be current or recent. The main criterion in choosing cases to study is the opportunity to learn about the change processes that follow such events. We would like to ask you to help us to identify potentially suitable cases.

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### Case incident interview topic guide

We would like to cover these topics, if they are relevant to you and to the incident that we are studying. We will rely on your judgement and preferences with regard to the information that you wish to disclose. We don't have to cover these topics in sequence, and we will leave it up to you to decide where best to start. Are there any questions or concerns before we begin?



This project is funded by the NHS National Institute for Health Research Service Delivery and Organization Research & Development Programme

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### **Research Focus Group Consent Form**

I agree to take part in this study as described in the *Participant Information Sheet* (version 1 dated 09.02.09) which I have read. I have had the opportunity to discuss details with a member of the research team, and to ask questions. The nature and purpose of this study have been explained to me, and I understand what will be required if I decide to take part. I understand that my participation is voluntary and confidential, and that I may withdraw at any time, before or during the focus group meeting, without justifying my decision. I consent to the arrangements for data storage and the use to which the information that I provide may be put. I understand that the information that I disclose will be treated in confidence, and that my comments if cited will be presented in an anonymous manner that does not identify the source. I understand that the transcript of this focus group meeting will only be seen by members of the research team.

Signature of participant \_\_\_\_\_

Name in BLOCK LETTERS \_\_\_\_\_

Date \_\_\_/ \_\_/ 2011

I confirm that I have explained the nature of the study as detailed in the Participant Information Sheet, in terms which in my judgement are suited to the understanding of the participant.

Signature of research team member \_\_\_\_\_

Name in BLOCK LETTERS\_\_\_\_\_

Date / / 20011

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### **Research Briefing Group Consent Form**

I agree to take part in this study as described in the *Participant Information Sheet* (version 1 dated 09.02.09) which I have read. I have had the opportunity to discuss details with a member of the research team, and to ask questions. The nature and purpose of this study have been explained to me, and I understand what will be required if I decide to take part. I understand that my participation is voluntary and confidential, and that I may withdraw at any time, before or during the briefing group meeting, without justifying my decision. I consent to the arrangements for data storage and the use to which the information that I provide may be put. I understand that the information that I disclose will be treated in confidence, and that my comments if cited will be presented in an anonymous manner that does not identify the source.

I understand that the transcript of this briefing group meeting will only be seen by members of the research team.

Signature of participant \_\_\_\_\_

Name in BLOCK LETTERS

Date	/	/	2011

I confirm that I have explained the nature of the study as detailed in the Participant Information Sheet, in terms which in my judgement are suited to the understanding of the participant.

Signature of research team member

Name in BLOCK LETTERS \_\_\_\_\_

Date / / 2011

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### **Research Interview Consent Form**

I agree to take part in this study as described in the *Participant Information Sheet*, which I have read. I have had the opportunity to discuss details with a member of the research team, and to ask questions. The nature and purpose of this study have been explained to me, and I understand what will be required if I decide to take part. I understand that my participation is voluntary and confidential, and that I may withdraw at any time, before or during the interview, without justifying my decision. I consent to the arrangements for data storage and the use to which the information that I provide may be put. I understand that the information that I disclose will be treated in confidence, and that my comments if cited will be presented in an anonymous manner that does not identify the source.

Please initial one of the following options

I consent to an audio recording being made of this interview

I understand that the transcript will only be seen by myself, and by members of the research team, and that the recording will be deleted once the transcript has been made.

I do not consent to an audio recording being made of this interview

Signature of participant

Name in BLOCK LETTERS

Date / / 2011

I confirm that I have explained the nature of the study as detailed in the Participant Information Sheet, in terms which in my judgement are suited to the understanding of the participant.

Signature of research team member	_
Name in BLOCK LETTERS	

Date / \_ / \_2011

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## **Advisory Group**

David Grantham	Director of Human Resources and Organization & Development	Kingston Hospital NHS Trust
Kathleen Hunter	Research and Development Manager	Milton Keynes Hospital
Valerie Iles	Director	Really Learning
Simone Jordan	Director of Workforce and Human Resources	NHS East Midlands Strategic Health Authority
Susan Lawrence	Operations Manager, Surgical Services	Cambridge University Hospitals Addenbrooke's
Cíara Moore	Operations Manager, Medicine, and SDO Management Fellow	Cambridge University Hospitals Addenbrooke's
Neil Offley	Director	Neil Offley Consulting Ltd
Graeme Currie	Professor of Public Management	Warwick Business School
Jacky Holloway	Head, Centre for Public Leadership and Social Enterprise	Open University Business School

The advisory group will meet regularly over the life of the project, 2009 to 2011. Meetings will coincide with events and outputs, ensuring a substantive agenda on each occasion.

The principle aims of the advisory group are:

- to provide the project team with a critical and creative sounding board, with regard to ideas and findings, and also with regard to project progress against aims and deadlines
- > to highlight trends, developments, issues, and themes that deserve our closer attention
- > to help us to identify the practical managerial implications of the study
- > to direct us to stakeholder groups with whom we should be engaging
- > to help us to identify innovative forms and channels of communication for the findings
- > potentially contribute to the development of joint publications arising from this study

.... and any other issues that arise ....