Florence Nightingale Foundation Leadership Scholarships Programme. Evaluation Report.¹

V2.3
2 February 2016

Prepared for the Florence Nightingale Foundation by Dr Richard W Giordano, Senior Lecturer, Leadership and Management in Health and Social Care, Faculty of Health Sciences, University of Southampton, Southampton SO17 1BJ
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>BACKGROUND</td>
<td>3</td>
</tr>
<tr>
<td>METHODOLOGY</td>
<td>3</td>
</tr>
<tr>
<td>RESULTS</td>
<td>7</td>
</tr>
<tr>
<td>PART I: IMPACT</td>
<td>7</td>
</tr>
<tr>
<td>Scholars’ careers</td>
<td>7</td>
</tr>
<tr>
<td>Impact on Leadership Styles and Behaviours</td>
<td>11</td>
</tr>
<tr>
<td>Mindsets and Behaviours</td>
<td>12</td>
</tr>
<tr>
<td>Confidence</td>
<td>15</td>
</tr>
<tr>
<td>Impact on colleagues and the profession</td>
<td>16</td>
</tr>
<tr>
<td>Patient Care, Safety, Experience</td>
<td>20</td>
</tr>
<tr>
<td>Publishing and Dissemination</td>
<td>23</td>
</tr>
<tr>
<td>PART II: SCHOLARS’ AND SPONSORS’ VIEWS OF VIEWS AND PERCEPTIONS OF THE</td>
<td>26</td>
</tr>
<tr>
<td>CONDUCT AND PROCESS OF THE SCHOLARSHIPS, ITS STRENGTHS, AND HOW IT</td>
<td></td>
</tr>
<tr>
<td>MIGHT BE IMPROVED.</td>
<td></td>
</tr>
<tr>
<td>Scholars’ expectations of the programme</td>
<td>26</td>
</tr>
<tr>
<td>Support from the Foundation</td>
<td>29</td>
</tr>
<tr>
<td>Elements of the programme with the greatest impact</td>
<td>31</td>
</tr>
<tr>
<td>Additional support identified by Scholars</td>
<td>32</td>
</tr>
<tr>
<td>Scholars’ views on improving the programme</td>
<td>33</td>
</tr>
<tr>
<td>Timing of Scholarship in Careers of Scholars</td>
<td>34</td>
</tr>
<tr>
<td>Promoting the Scholarship Programme</td>
<td>36</td>
</tr>
<tr>
<td>CONCLUSIONS AND RECOMMENDATIONS</td>
<td>38</td>
</tr>
<tr>
<td>APPENDIX 1: INTERVIEW PROTOCOLS</td>
<td>41</td>
</tr>
<tr>
<td>Protocol of telephone interview of Scholars. 03NOV2015</td>
<td>41</td>
</tr>
<tr>
<td>Protocol of telephone interview of Sponsors. 03NOV2015</td>
<td>45</td>
</tr>
<tr>
<td>APPENDIX 2: ONLINE SURVEY PROTOCOLS AND RESPONSES</td>
<td>48</td>
</tr>
</tbody>
</table>
Background

The Florence Nightingale Foundation offers scholarships to nurses, midwives and, for leadership scholarships only, other healthcare professionals who want to become leaders with the skills and self-confidence to contribute positively and with some significance to the rapidly changing world of healthcare. Recipients of a Florence Nightingale Foundation Leadership Scholarship undertake a bespoke programme geared to their individual needs. Each Scholarship provides funds of up to £15,000, and the majority include an additional 10% employer contribution.

While the principles underpinning the Scholarships endure, the profile of Scholars has been changing. From 2012/13 to 2014/15 62 nurses, midwives and other healthcare professionals completed Florence Nightingale Foundation Leadership Scholarships. The design, focus of and support offered were informed by insights gained from two previous evaluations of these Scholarships.¹

The Florence Nightingale Foundation is committed to evaluating its work and therefore contracted the University of Southampton Faculty of Health Sciences to design and write an evaluation of the scholarship programme for the 2012/2013 through the 2014/2015 cohorts of scholars. This comprises three cohorts and is the third such evaluation.

The Leadership Scholarship evaluation builds on previous evaluations and in particular aims to:

- Demonstrate the impact of the Scholarship on the Scholars’ personal practice as leaders, their leadership qualities and behaviours;
- Ask specific questions on the impact of the Scholarship on their careers and in particular any promotions achieved;
- Explore the impact of the Scholarship on patient care, safety and experience as outlined in their improvement project.

The evaluation will also contribute to our understanding of the expectations of Scholars and whether the scholarship met their expectations; collecting information on outputs such as publications, presentations etc., and provide insights into the strengths of the scholarships and how they might be improved and developed further.

Methodology

The evaluation consisted of an online survey of twenty-two closed and free text questions to sixty-four scholars from the 2012/2013 through to the 2014/2015 intakes. Survey questions explored Scholars’ expectations of the scholarships programme, its impact on their careers, personal professional

practice, and patient care/safety/experience. Fifty-nine scholars completed the online survey. The survey also asked Scholars to outline the strengths of the programme, and how the programme could be improved. The online survey and results are reproduced in Appendix 2.

Forty Scholars then took part in a telephone interview that focused on themes that emerged from the online survey that we wanted to explore further, as well as open questions that were best answered through an interview. The telephone interviews consisted of eleven open-ended questions, and lasted, on average, about 45 minutes each. They were not recorded, and notes were taken by hand.

Scholars were asked to supply the names of their sponsors, heads of services, or someone else (these are “Sponsors”) who could comment further on the effects of the scholarship on both the Scholar and their organisations. Sponsor interviews consisted of seven open-ended questions, and generally lasted about 25 minutes each. At the start of the Sponsor interview, we explained that we were evaluating the effects of the scholarship programme; we were not evaluating the individual. Twenty-nine sponsors were interviewed. These were not recorded, and notes were taken by hand. Because some sponsored more than one scholar, thirty-nine scholars had their sponsors interviewed. In total, sixty-nine individuals were interviewed. Interview protocols are reproduced in Appendix 1.

For both interviews, as well as free text gathered from the online surveys, notes were categorised to assist in uncovering themes and patterns. Interview protocols were supplied in advance to all respondents so that they could organise their thoughts before the interview took place.

The following tables depict our study questions and sources of information, as well as overall demographic information of the Scholar respondents in both the online survey and telephone interviews.
<table>
<thead>
<tr>
<th>Study Question and Source of Information.</th>
<th>Online Survey</th>
<th>Scholar telephone interview</th>
<th>Sponsor telephone interview</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Study Question.</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Impact on career.</td>
<td></td>
<td></td>
<td>?</td>
</tr>
<tr>
<td>Impact on colleagues, organisation, profession</td>
<td></td>
<td></td>
<td>!</td>
</tr>
<tr>
<td>Impact on leadership quality/leadership potential.</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td>Impact on mindset and thinking.</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td>Impact on patient care/safety/experience.</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td>Impact on personal practice.</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td>Impact on self confidence</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td>Plans to publish findings or experience.</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td>Expectations of Scholarship, and have they been met.</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td>How to improve the structure of the Programme</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td>Overall experience of the Programme</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td>Timing of the Scholarship</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td>Support from the Foundation.</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td>What generally can be improved</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td>Willingness to recommend to colleague/sponsor participant.</td>
<td></td>
<td>?</td>
<td>!</td>
</tr>
<tr>
<td><strong>Key</strong></td>
<td>! = Asked directly</td>
<td>? = Answered indirectly</td>
<td></td>
</tr>
</tbody>
</table>
### Evaluation population

<table>
<thead>
<tr>
<th>Number of Scholars by cohort</th>
<th>Number completing online survey</th>
<th>Number of Scholars interviewed</th>
<th>Number of Sponsors interviewed</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012-2013</td>
<td>16</td>
<td>11</td>
<td>10</td>
</tr>
<tr>
<td>2013-2014</td>
<td>16</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>2014-2015</td>
<td>27</td>
<td>18</td>
<td>18</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>58 (+1 partial)</strong></td>
<td><strong>40</strong></td>
<td><strong>39</strong></td>
</tr>
</tbody>
</table>

### Professional Roles Identified by Online Survey Respondents $n=58$

<table>
<thead>
<tr>
<th>Role</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educationalist</td>
<td>8</td>
</tr>
<tr>
<td>Midwife</td>
<td>5</td>
</tr>
<tr>
<td>Nurse</td>
<td>44</td>
</tr>
<tr>
<td>Practitioner</td>
<td>6</td>
</tr>
<tr>
<td>Researcher</td>
<td>7</td>
</tr>
<tr>
<td>Senior leader/Manager</td>
<td>28</td>
</tr>
<tr>
<td><strong>Total (some respondents indicated two or more roles)</strong></td>
<td><strong>98</strong></td>
</tr>
</tbody>
</table>

### Years since professional registration

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Average</td>
<td>11.2</td>
</tr>
<tr>
<td>Median</td>
<td>11.0</td>
</tr>
<tr>
<td>Minimum</td>
<td>1.0</td>
</tr>
<tr>
<td>Mode</td>
<td>15.0</td>
</tr>
<tr>
<td>Maximum</td>
<td>26.0</td>
</tr>
<tr>
<td>Range</td>
<td>25.0</td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>06.6</td>
</tr>
</tbody>
</table>

### Highest academic qualification of survey respondents

<table>
<thead>
<tr>
<th></th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>First degree</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Postgraduate/Masters</td>
<td>42</td>
<td>72</td>
</tr>
<tr>
<td>Doctorate</td>
<td>12</td>
<td>21</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>58</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
Results

Results are presented in two parts. Part 1 outlines the views and perceptions of Scholars and their Sponsors on the impacts of the Scholarship (see the shaded cells on page 4); Part 2 focuses on Scholars’ and their Sponsors’ views and perceptions of the conduct and process of the Scholarships, what its strengths were, and how it might be improved.

Part I: Impact

Scholars’ careers

The scholarships have had a significant effect on the respondents' careers by creating the conditions that have helped them to move into senior-level positions in the NHS. Of fifty-eight respondents, thirty-three had changed jobs or roles. The changes reported by respondents include

- Promotions to Dean, Head of School, and Professor
- Promotions to Clinical Director
- Promotions to Director, Assistant or Deputy Director, and Head of Nursing
- Promotions to Chief Operating Officer

The following table displays Scholars’ roles at the beginning of their scholarships, compared to the roles they held at the time of the survey.

<table>
<thead>
<tr>
<th>Role at Start of Scholarship</th>
<th>Role at date of survey</th>
<th>Years since Professional Registration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director of nursing</td>
<td>No change</td>
<td>27</td>
</tr>
<tr>
<td>Head of nursing and Midwifery Research</td>
<td>Florence Nightingale Professor of Nursing and Midwifery Research</td>
<td>31</td>
</tr>
<tr>
<td>Deputy Director of Nursing</td>
<td>Executive Director of Nursing</td>
<td>28</td>
</tr>
<tr>
<td>Director of Nursing</td>
<td>Executive Director of Quality, Nursing and Allied Health Professionals</td>
<td>29</td>
</tr>
<tr>
<td>Director of Nursing</td>
<td>Deputy chief nurse London</td>
<td>28</td>
</tr>
<tr>
<td>Head of School of Nursing</td>
<td>No change</td>
<td>29</td>
</tr>
<tr>
<td>Nurse consultant and associate director of nursing</td>
<td>No change</td>
<td>30</td>
</tr>
<tr>
<td>Consultant midwife</td>
<td>No change</td>
<td>14</td>
</tr>
<tr>
<td>Head of School / Associate Dean</td>
<td>No change</td>
<td>32</td>
</tr>
<tr>
<td>Clinical matron</td>
<td>Head of nursing</td>
<td>25</td>
</tr>
<tr>
<td>Assistant Director Of Nursing (3 months in post)</td>
<td>No change</td>
<td>21</td>
</tr>
<tr>
<td>Director of Nursing and Patient Safety</td>
<td>No change</td>
<td>25</td>
</tr>
<tr>
<td>Associate chief nurse</td>
<td>Deputy chief nurse</td>
<td>28</td>
</tr>
<tr>
<td>Nurse Consultant</td>
<td>No change</td>
<td>23</td>
</tr>
<tr>
<td>Regional Deputy Director of Nursing</td>
<td>Regional Deputy Chief Nurse</td>
<td>34</td>
</tr>
<tr>
<td>Neighbourhood Manager</td>
<td>Area Manager</td>
<td>18</td>
</tr>
<tr>
<td>Deputy Director of Nursing</td>
<td>Director of Nursing</td>
<td>14</td>
</tr>
<tr>
<td>Programme Director (Nursing Excellence)</td>
<td>Director of Nursing and Quality</td>
<td>25</td>
</tr>
<tr>
<td>Director of Nursing</td>
<td>No change</td>
<td>24</td>
</tr>
<tr>
<td>Divisional Director of Nursing and Clinical Implementation Lead for NHS 111</td>
<td>Senior Manager Commissioning</td>
<td>26</td>
</tr>
<tr>
<td>Role at Start of Scholarship</td>
<td>Role at date of survey</td>
<td>Years since Professional Registration</td>
</tr>
<tr>
<td>-------------------------------------------------------</td>
<td>-------------------------------------------------</td>
<td>---------------------------------------</td>
</tr>
<tr>
<td>Executive Director of Nursing and Quality</td>
<td>No change</td>
<td>21</td>
</tr>
<tr>
<td>Deputy Director of Nursing</td>
<td>Director of Nursing &amp; Quality</td>
<td>24</td>
</tr>
<tr>
<td>Director of Nursing and Midwifery</td>
<td>Chief Nurse and Chief operating Officer</td>
<td>25</td>
</tr>
<tr>
<td>Clinical Professor</td>
<td>Dean</td>
<td>18</td>
</tr>
<tr>
<td>Professional officer - policy lead</td>
<td>Lead nurse - children, young people and families</td>
<td>34</td>
</tr>
<tr>
<td>Head of Midwifery and Assistant Director of Nursing</td>
<td>No change</td>
<td>14</td>
</tr>
<tr>
<td>Head of School (University)</td>
<td>No change</td>
<td>26</td>
</tr>
<tr>
<td>Director of Nursing</td>
<td>No change</td>
<td>32</td>
</tr>
<tr>
<td>Interim Divisional Director of Nursing</td>
<td>Divisional Director of Nursing</td>
<td>31</td>
</tr>
<tr>
<td>Clinical informatics lead</td>
<td>No change</td>
<td>27</td>
</tr>
<tr>
<td>Consultant Nurse</td>
<td>Community Nurse</td>
<td>32</td>
</tr>
<tr>
<td>Clinical Lead in informatics</td>
<td>Deputy Director</td>
<td>30</td>
</tr>
<tr>
<td>Head of Clinical Education</td>
<td>No change</td>
<td>29</td>
</tr>
<tr>
<td>Executive Director of Nursing &amp; Quality</td>
<td>No change</td>
<td>30</td>
</tr>
<tr>
<td>Head of Nursing (North)</td>
<td>Head of Nursing and Clinical Services (UK wide)</td>
<td>18</td>
</tr>
<tr>
<td>Director of Nursing</td>
<td>AA</td>
<td>33</td>
</tr>
<tr>
<td>Head of Department</td>
<td>No change</td>
<td>35</td>
</tr>
<tr>
<td>Regional Chief Nurse M&amp;E NHSE</td>
<td>Nurse Director Monitor</td>
<td>26</td>
</tr>
<tr>
<td>Director of Nursing</td>
<td>No change</td>
<td>28</td>
</tr>
<tr>
<td>Director of Quality and Clinical Excellence</td>
<td>No change</td>
<td>29</td>
</tr>
<tr>
<td>Lead Pharmacist</td>
<td>No change</td>
<td>30</td>
</tr>
<tr>
<td>Lead Nurse Governance and Patient Experience</td>
<td>Practice Education Facilitator and Associate</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>Lecturer for Open University</td>
<td></td>
</tr>
<tr>
<td>Director of Rehabilitation &amp; Therapies</td>
<td>No change</td>
<td>20</td>
</tr>
<tr>
<td>Director of Nursing, South London, NHS England</td>
<td>No change</td>
<td>34</td>
</tr>
<tr>
<td>Academic Director</td>
<td>Executive Dean</td>
<td>35</td>
</tr>
<tr>
<td>Analyst &amp; RN</td>
<td>Chair</td>
<td>17</td>
</tr>
<tr>
<td>Clinical Nurse Specialist / Day Therapy Manager</td>
<td>Head of Clinical Effectiveness</td>
<td>28</td>
</tr>
<tr>
<td>Director of nursing</td>
<td>No change</td>
<td>32</td>
</tr>
<tr>
<td>Associate Director of Nursing</td>
<td>Deputy Chief Nurse</td>
<td>27</td>
</tr>
<tr>
<td>Pro vice chancellor</td>
<td>No change</td>
<td></td>
</tr>
<tr>
<td>Lecturer and Honorary Nurse Consultant for</td>
<td>Senior lecturer! CNO Clinical Academic Research</td>
<td>25</td>
</tr>
<tr>
<td>Alcohol Policy &amp; Research, Alcohol Policy Team,</td>
<td>Fellow</td>
<td></td>
</tr>
<tr>
<td>Scottish Government</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Executive Director</td>
<td>Executive Director and Deputy CEO</td>
<td>22</td>
</tr>
<tr>
<td>Nursing Officer at Department of Health and Social</td>
<td>Deputy Chief Nursing Officer DHSSPSNI</td>
<td>27</td>
</tr>
<tr>
<td>Services Northern Ireland (DHSSPSNI)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assistant Nurse Director</td>
<td>No change</td>
<td>25</td>
</tr>
<tr>
<td>Deputy Chief Nurse</td>
<td>Chief Nurse</td>
<td>16</td>
</tr>
<tr>
<td>Advanced Neonatal Nurse Practitioner</td>
<td>Clinical Director Neonatal Services</td>
<td>31</td>
</tr>
<tr>
<td>Matron</td>
<td>No change</td>
<td>25</td>
</tr>
<tr>
<td>Assistant Director of Nursing</td>
<td>Deputy Director of Nursing and Quality</td>
<td>19</td>
</tr>
</tbody>
</table>
Whether or not a Scholar changed roles does not seem to depend on their length of service since professional registration. Those who did change roles were in service, on average, for 25.27 years ($\text{std}=5.95$), compared to 26.48 ($\text{std}=5.47$) for those who remained in their roles. This tends to suggest that length of service alone does not explain a change in role, but instead other factors came into play.

Those who suggest that their scholarship had resulted in promotions said in the telephone interviews that they acquired skills, tools, and leadership behaviours that were directly relevant to their new positions, that they were encouraged to apply for positions by people they met during the course of their scholarships, and, most importantly, that they gained the confidence to apply for those posts. Some scholars suggested that they did not think that these promotions were the direct result of the scholarship, but included other factors such as past experience, unpredicted opportunities, etc. Despite this, they reported that their increase in confidence was critical in their decision to seek a promotion, and that they believed themselves to be both “ready” for a new challenge and to have a larger effect at both the institutional and national levels.

Almost all Scholars believe that the Scholarship has had a positive effect on their careers, whether or not their roles have changed. Fifty-two of fifty-six (93%) respondents to the online survey strongly or moderately believe that the scholarship had a positive impact on their career. Scholars provided free-text responses to an item asking them how the Scholarships might have contributed to changes in their career. The general themes that emerge from this text include:

- Increased Self Awareness
- Increased Self-Confidence
- Increased Influence
- More Positive About the Future
- Belief in Their Ability to Seek Promotion, and
- Use of Peer/Professional Networks.

A respondent wrote,

*Two aims (aspirations) I identified when I applied for the Scholarship were: 1. I became an Executive Dean 2. I gained a Chair in Child Health. I achieved both. The programme helped me to develop my personal insight and my skills as a leader. This enhanced my self confidence and the way I present myself. The Scholarship was a real change agent that helped me to grow and develop as an individual and as a leader in ways that I didn't even know I needed when I started the programme.*

Regarding the effect of increased confidence, one added,

*I would not have applied and prepared for my current post in the same way. I would not have been as prepared for interview and may not have got the job. Now I am in post, the positive effect that the Scholarship has had on my confidence, knowledge and understanding has made an immeasurable effect on my impact.*
Many asserted that the increase in confidence had increased their influence, both locally and nationally.

_I have had the opportunity to talk to senior leaders and this has grown both my understanding of the environment in which I work, the 'fit' of my skills to that environment but also and importantly my confidence to step into the next level._

Another wrote,

_I have been able to develop the strategic skills necessary to work across the health economy and take forward services that benefit patients._

The telephone interviews suggested some further insights into factors that have affected Scholars’ careers. Two that stand out are the perception among scholars that they have the _confidence and ability to influence upwards_; and, a _clearer sense of self-awareness_ that translates into (1) better career choices, and (2) how they conduct themselves at their work. For example, one said,

_My increased confidence has resulted, for me, with an increased internal critical inquiry. ... that leads me to better things, and I now speak nationally, and I promote policy at the national level. And I got a promotion—maybe this would have happened anyway, but it is clear that my profile in nursing has increased._

Another argued that her increase in confidence has resulted in her being connected “to a huge pool of influential people” where she can test ideas, and where she expects criticism of her ideas. “I’m no longer afraid of criticism, and I use it to improve my work. To have someone in a national position take you seriously—that’s what matters”.

Another said, “I can interact with leaders around me. I don’t hesitate. I know and use the power of communication”.

Others noted that their self-awareness has enabled them to behave in ways that had not in the past. For example, one said,

_I now know when I go to a meeting that the first 15 seconds after you enter the room matter. Do you look confident? What are you saying to a board without uttering a word?_

_Sponsors reported that there has been a marked increase in Scholar’s confidence and a widening of their vision._ For example, one said,

_We can see a growth in her confidence, and a willingness to look beyond her clinical area. She has a wider field of vision. I think these have contributed, no doubt, to her taking up this substantial position._
Another identified a change in personal style because of her increased leadership skill set and her increased confidence.

_Her main area of change is in her approach... She’s very enthusiastic and bright. In the past, she showed frustration when people lagged behind her. She now steps back and listens, and she has vastly increased patience. She knows how to work with others and let them work in their own time. She has an increased ability to listen, and an increased ability to step back. She genuinely steps back and listens, and she wasn’t good at that previously. She recognizes this, too. In addition, she’s just not a listener, but an active listener._

**Not everyone changed roles, and some decided to stay in their current roles because of the Scholarship.** Instead, they developed innovative programmes in their current role. For example, one said that she had intended to be a CEO, but after taking a course at Harvard Business School, she decided that she wanted to improve on her current work, and to take organisational risks (and risks to her own reputation). Therefore, she developed a national programme in maternity care while in her current role. Another, aged in her fifties, said that in the last decade of work she wants to consolidate and improve what she is doing. She does not want to move up, but instead at this stage she wants to improve quality, and, most importantly, to influence a younger generation of nurses. Finally, some have already reached senior levels, and they do not plan to move further up the career chain. Instead, the scholarship has helped them improve in their current position. For example, one senior leader said,

_Career progression is not an issue because I’m already a Head. My difficulty before the scholarship was that I couldn’t understand the difference between leadership and administration/management. I was bogged down in operations. The scholarship made it clearer for me the moves that I should make, and wanted to make. ... the Scholarship made me realize that I wasn’t being strategic. I became attuned to strategy and strategic thinking, and how to influence both inside and outside my organisation. So I sit on a regional steering group for people who have learning disabilities, and we agree on national resources across the country. We represent hospitals across the country. At my own institution, I used to do things piecemeal. But the Scholarship has helped me see the bigger picture. I see embedded value in the staff, and I can use it. I wouldn’t even think like that before._

**Impact on Leadership Styles and Behaviours**

The preceding quote suggests that the scholarships have had an effect on Scholars’ leadership styles, practices and behaviours, and that their mindsets or habits of thinking have been either changed or reinforced. The results of the telephone interviews suggest that Scholars’ leadership styles and practice have changed in the following ways:
• They are far calmer, patient, and reflective
• They believe that they are more assertive and proactive
• They have improved listening skills
• They have improved self awareness and understanding of self and others
• They have increased influence on others
• They have vastly improved self-confidence
• They seek the broad perspective
• They understand the impact they have on others

These qualities are not mutually exclusive. For example, a Scholar can be calm and patient, yet also be assertive and proactive—the key is to lead, not micro-manage, and to have the self-confidence to resist a fear of failure or, as many said, overcoming the fear of being seen “as an imposter”.

A representative quote from a nurse,

*I’ve been a senior nurse for a long time, and there was almost no NHS investment in nursing leadership. The Scholarship’s MBTI, Belbin, helped me to understand how I behaved, and now I’ve changed my behaviours. I would railroad things through, but now I know how to negotiate. For example, in the past, I pushed to get a project through. Now I lead nurses and I put them into a team-building programme. This has affected the ethos on the unit. There’s an ethos of respect and change on the unit.*

Another said,

*In my personal development, I’m a completely different person. I do have the skills, and I know where to get the ones that I don’t, and I’m not afraid to fail. It’s not about me, anymore.*

Another pointed to her staff’s responses to changes in her style of leading,

*Staff tell me that I’m far more objective than I used to be, and that I’m more assertive and responsive to challenges. They tell me that I’m more strategic in my thinking. I used to meddle in everything, but now I leave it to those whose job it is, and who know how to do it. I have more time for strategy and for leading.*

Mindsets and Behaviours

**Sponsors** are in broad agreement with Scholars on the **effects of the scholarship on Scholars’ leadership styles and behaviours**. In general terms, Sponsors said that Scholars are more,

• Aware of the external environment, and have a broader vision
• Confident
• Politically astute
• Proactive
• Reflective and patient
• Supportive of staff

Almost every Sponsor said that their sponsored scholar had increased confidence and the ability to reflect. For example, one said,

She has had an ongoing difficulty with managing. Now I think she has a better understanding of herself, and more confidence in herself, and, most important, she understands others. She’s found a better way of working. She can give and receive critical feedback, and she knows how to influence others. … She’s community-based, and champions low intervention. This has created friction with doctors in the past, but I think she can manage them now.

A Sponsor related a story of how a Scholar, before his Scholarship, had both drive and ambition—and in the process succeeded in alienating those whose support was critical. His sponsor said, “Now he’s ‘got it’. He leads an organisational change, and he was seen to be fair to everyone. His drive is still there, but he’s not getting people’s back up.”

Regarding a Scholar who was once seen to be shy and unassertive, a Sponsor said,

Her confidence has increased, and you can see it on display at national meetings. Some of these meetings have very senior people who play national roles. She talks with them as a peer or equal. The Scholarship has broadened out her expertise. She has come out of her niche. It has broadened out and increased her confidence to be part of things that are outside her niche. She has the confidence to talk about other things, and to participate in areas outside her normal scope. Before, she was hesitant to speak on broader issues.

A plurality of Sponsors noted that Scholars have an increased capacity to understand others, and to develop others. For example,

She’s gregarious and always had a great capacity to recognise people’s strengths and setting them up for success. Now she’s reflective in how she does that. She understands people better, and she channels them in avenues that they will be successful. She can develop people, and I’ve seen for myself her develop in the role she has. Before she could be direct, and not have an insight into how people work. She understands now the personality types in different teams, and she sees their drivers. She can now work with someone and say, ‘Yes, I understand how that person works’. I don’t think she could have done this before.
Sponsors suggest that the scholarships have affected Scholars’ mindsets and habits of thinking by either reinforcing existing mindsets, or setting a Scholar in a new direction. When Sponsors report that the Scholarship had reinforced an existing mindset, they mean that an existing strength had been further strengthened. For example,

*She was mature before she started, and the Scholarship has reinforced her values. I wouldn’t want her values to change.*

Sponsors suggest that the scholarship has given Scholars the tools to influence others with values that they had when they entered the programme. For example, a Sponsor said,

*The Scholarship has reinforced her views. Her interest in improving quality has always been there, and she subscribed to the patient safety view. She’s used the tools she developed at Ashridge here. She sometimes didn’t speak up, but now she does and she brings people with her. In board-level meetings, she describes a vision, and she has an understanding that everyone has a piece of this vision. She influences the board.*

Sponsors also suggest that while a Scholar’s mindset had not changed (but was instead reinforced), they have a broader perspective than they had before their participation in the Scholarship programme.

*The Scholarship has certainly reinforced her mindset. Now she has a broader view of the issues. She would always work within a structure before she went on the Scholarship. She would look locally when looking for collaboration. Now she thinks more broadly, and has a broader perspective even before she begins planning. The benefit of the programme was that she went to Harvard and mixed with people with different backgrounds, and this really broadened her outlook. She can see through the eyes of others.*

For others, however, Sponsors said that the Scholarship had changed their mindsets.

*Yes, it has changed profoundly. She saw leadership development as “fluffy”. Now she sees the effects on her own development, and she has time and perspective to see things that she couldn’t before. She has increased confidence. Some personal light bulbs went off for her to see how she behaves as she does.*

Another said,

*She has changed dramatically. She came from a military background, and she does what she is told to do—and she*
expected that from others. But midwives are often autonomous, and they are protective of their mothers. You can’t for long just tell them what to do. The reality is that you not only want things to happen, you want change to stick. So you have to motivate, and you have to persuade. The Florence Nightingale Scholarship gave her the tools and methods for this.

One Scholar who had worked outside of nursing returned to it. Her sponsor said,

*I think the Scholarship helped change her mindset because through it all she became more patient focused. It brought her back to nursing, closer to nursing than she was. She says now that she’s a nurse first.*

Confidence

Related to the effects on mindset, Scholars were clear about the effects of the Scholarship on their confidence. Every scholar interviewed said one general effect of the Scholarship on them was that it increased their levels of confidence, and this, in turn, affected the conduct of their work, and the way that they interacted with others. When asked to identify what confidence meant for them, Scholars said that it means

- Articulating what you want
- Challenging your imposter syndrome
- Feeling comfortable in uncertainty
- Finding your voice and using it with senior-level people
- Interacting with others at different levels
- Seeking ideas and views that are different from your own

Some Scholars said that in the past they felt like a fraud when around senior people, especially at the national level. What many Scholars had not realised before their participation in the programme is that senior-level people face the same uncertainties and have many of the same anxieties that they have. Some inwardly lacked confidence, but would not admit it to others. One Scholar explains this,

*Before the Scholarship, my colleagues thought that I was confident. But my husband knows me, and my husband knew that I didn’t have confidence.*

And then she goes on to explain why confidence is important for leaders,

*In addition, you need to have confidence to be a good leader. It’s not to get to the top—that buys success, but not fulfilment. To be a good leader, you have to operate at different levels and zones, and this is what changed for me. You have to speak to*
directors of nursing, vice chancellors, politicians, and feel that you have something valid to say, that you’re a legitimate member of society. ... You have to know how to deal with conflict and areas of disharmony.

For many, their exposure to senior managers and leaders in the programme broke a personal logjam.

I felt like I was a young person among adults, among senior people. Inwardly I am a fraud, and I’ll be found out. Then I had a conversation with someone from the DH after being invited there. And after a time, he came to me for help! This was a light bulb moment, and the tables had completely turned. We’re all on an equal footing. We’re all here for the same purpose, and I’m more relaxed, and I can have my own personality.

Another said,

Everybody feels as much of an idiot as I do. You think you’re the only person who’s struggling. You’re not. There’s a realisation that others are thinking like you... It was my first realisation that other people, confident people, are struggling like me—worried about public meetings, worried about influencing people.

Most respondents said that RADA had a significant effect on increasing their levels of confidence. The experience showed them that they could do something they thought would be personally impossible. As one said, “There I was singing in front of others. Singing! I hated it, but by the third day I was a convert.” Many Scholars argued that the elements of the programme worked together as a whole to increase confidence. The Diagnostics helped Scholars understand their strengths and behaviours; their mentors provided them with insights and guidance; the Westminster Experience helped them to understand politics, large and small; and their taking courses with senior executives outside of health care helped them to see that they were not alone, and to learn outside their normal work domains. As one Scholar said,

It’s difficult to put your finger on one single influence. The Scholarship didn’t work in discrete units—it was a package.

Impact on colleagues and the profession

Most Scholars report that the Scholarships have had an impact on their colleagues, and on their profession as a whole. The results of the online survey shows that about 70% Strongly Agree or Agree that the Scholarship has had a positive impact on the profession as a whole, and 89% Strongly Agree or Agree that the Scholarship had a positive impact on their
The written comments to the online survey and the telephone interviews suggest that the Scholarship has affected Scholars’ colleagues and their professions by

- Building increased staff confidence, motivation, engagement, and opportunities
- Encouraging a leadership vision in their organisations
- Encouraging shared learning locally, regionally, and nationally
- Injecting visible nursing leadership locally, regionally, and nationally, including at the Parliamentary level.

Some representative comments from the online survey include,

*I am more effective in working both externally with colleagues in my profession and other professions. I am also now better at managing local relationship with peers and senior colleagues, though this is a work in progress, facilitated by the scholarship structure allowing the bespoke design following the diagnostic and coaching sessions. I am not convinced I would have got this specific insight in a less bespoke programme or one that happened in a shorter time frame.*

*There may be no direct correlation, but when I look at the majority of inspirational leaders within the NHS, the majority of them have undertaken a leadership scholarship.*

*The ethos of the FNF Leadership Scholarship and the messages that this brings in terms of the value of the nursing profession and its contribution to the NHS… I believe being a personal scholar and sharing my experience and pride in this has had an impact on the wider profession I come into contact with and my*

2 It appears that this response does not accurately represent the views of the two respondents. One writes, “I have been promoted whilst on scholarship and I believe that the scholarship helped by increasing my self confidence and ability to influence and lead others.” The other wrote, “Not sure I follow question 19 re whole of nursing being influenced by my undertaking the LS [Leadership Scholarship]. But the LS has influenced how peers view me as the scholarship is well regarded so it casts its own sphere of influence and expectation, which encourages success and positivity”.
I believe it has changed the way I lead and influence. Other colleagues have said they have noticed a change in me particularly in how I lead complex stakeholder engagement and my leadership approach.

The telephone interviews with Sponsors suggest that scholars have had a positive effect on staff and their organisations.

A Sponsor of two scholars said,

*Having two people at the same time is a logistical challenge. But one knock-on effect was that it made the team around them step up. Both [scholars] are much more considered in thinking around problems. They help others come up with solutions, and they share their learning. They have positive effects both locally and regionally. [Scholar1] drives a project at the community level. [Scholar2] influences how we do strategic services around London.*

When asked if the scholar had any effect on their organisation, the Sponsor replied,

*Absolutely! Time and again. We are now out of special measures. She’s raised the nursing voice around the organisation and elsewhere. She meets regularly with frontline staff, and takes people along with her. And, as a result, we have seen a significant improvement in harm: pressure ulcers, falls, increased staffing levels—due to her. We saw her qualities before the Scholarship, and they have now come to the fore.*

A consistent theme that emerged from the interviews is that the Scholar had become a role model to staff, and they have empowered staff. For instance, one common practice that was uncovered during the interviews was that Scholars wanted their staff to grow and develop along the same lines that they had. To do this, they empowered staff to make decisions, and to take the lead in projects and initiatives, providing help, encouragement, and assistance when needed. When the time came to report on a project or help take a strategic decision, many scholars brought their teams to board meetings to represent a project or help in making a strategic decision. One sponsor said of this, “That gives ownership back to us all. It has allowed me and others to promote innovation.” The idea, also, was to diffuse leadership thinking and behaviours from the Scholar to her direct reports, and in doing so to encourage nurses to think about their own development needs. A sponsor related,

*She has empowered staff to think about their own personal development, and one of them has moved to Head of Nursing.*
There was widespread agreement among Sponsors that Scholars had an almost immediate positive effect on their home organisations. Examples include reducing patient harm, improving clinical services, and providing a patient-focused voice in clinical and organisational decisions. For example, a Sponsor said,

*She has had an impact on the board. Now at every board meeting, they include patient stories. They’ve developed a national strategy for nursing and midwifery, and the organisation now has a sense of what a nurse can bring.*

In many instances, sponsors said that Scholars had promoted a nursing profile and the value of nursing leadership. A Trust chief executive related a quote that exemplifies this,

*There was an immediate impact on services. ... She helped promote a nursing profile. Nursing hasn't had the leadership light shone on it like doctors have. This gives a different level of opportunity to the nurses, and well as increasing their skill sets and impact. We have a little cohort of nursing leaders, but collectively their impact is tremendous.*

In one instance, the nurse is providing leadership to doctors.

*Her personality is infectious and positive. But beyond that, she understands individuals and their drivers—their personality types. This is important to us now. There are consultants that she has to motivate. With all the changes to the NHS, they lost their motivation—they lost their mojo. The problem is [pause] she’s alone in this as a director. But she is motivating them.*
We asked Scholars the **focus of their improvement projects and the impact on patient care, patient safety, and patient experience.** We received open text responses in the online survey, which was categorized in the table to the left (which is organised by frequency). We also asked sponsors their views on the impacts that the projects had on safety, experience, and care. It should be noted that Sponsors’ responses to these questions are impressions only; we did not ask for independent evidence, nor did we expect that Scholars or Sponsors would provide numbers.

Given the resource constraints that the National Health Service has faced over the past few years, it comes as no surprise that the most common focus of the projects concerns staffing. Some outcomes of staffing projects include the implementation of electronic support in how staffing is measured, standardizing roles and job descriptions across the Trust, reduction of staff illness to below the national average, and a national district nursing workload and workforce calculation tool. One scholar wrote that the project altered her views regarding the introduction of mandated staffing levels:

> [My project analysed] evidence to support the introduction of mandated staffing levels. I altered my thinking as a result of my study and would not support mandated staffing ratios. There is little evidence to support the positive impact of mandated staffing ratios and it would be my assertion from I learnt through my study that registered nurses are best placed to determine safe staffing ratios based on patient need and acuity.

Another project examined how staffing is determined abroad, and affected hospital practice.

> My project was looking at levels of nurse and
midwifery staffing to provide safe and quality care. Looking at the evidence available it has allowed me to inform my Board in more detail about how staffing is carried out in other parts of the world. It has also allowed me to successfully secure a business case to purchase an electronic system to support how we measure and record safe nurse staffing figures.

A project focused on digital communications developed Skype clinics.

The project was to implement the use of digital technologies to improve patient care and experience. I established a multi professional steering group. The group has supported and developed Skype clinics for head and neck cancer patients, video conferencing for renal patients, successful bids for over a million pounds from nurse tech funds one and two has led to the development of the open source e-observations product. A further successful bid for transformation funds of over £100,000 to support teenage and young adults with diabetes with an app and youth support worker. Shortlisted for two national programmes for digital technologies: test beds, health foundation.

And another project, focused on patient-reported experience measures (PREMS), has resulted in a new set of PREMS, and a mechanism for reporting them.

My project is related to the expansion of the Trust’s Clinical Strategy, with increased focus on patient experience outcome measures (PREMS). This includes exploring the concepts of ‘relieving suffering and promoting peace of mind’. I, in partnership with the Medical Director, have overseen the refresh of the Trust’s Clinical Strategy in the light of the NHS Five Year Review. This was signed off at Trust Board in May 2015, after involvement of our senior leadership team. It has a set of objectives for 15/16, one of which is the focus for my scholarship patient care improvement project. A set of PREMS have been agreed with the Trust’s Clinical Outcomes Group, I have worked with our IT Department to develop an electronic data capture APP that can be used on computers and mobile devices such as iPads and smartphones. This has been presented to the group and we are the process of agreeing some pilot site for testing in Q3 of this year.
Some examples of outcomes of projects include:

- 50% reduction in violence in mental health services
- Action Plan for work over the next two years with the Northern Ireland Public Health Agency that will result in the development of several regional resources to improve care for those with learning difficulties
- Homebirth service that encourages low risk multiparous women to birth at home as outcomes are known to be significantly better than hospital births (Results published in BJM April 2015)
- Implementation of an e-Observation and e-Handover system
- Improvements in caring for patients with dementia, including finger food boxes, acute frailty unit, memory boxes, end of life care, memory clinics, drop-in clinics, dementia FAIR (Finding people with dementia, Assessing and Investigating their symptoms and Referring for support).
- Improvements and a new post for Lead Nurse for Dementia
- Increased awareness at the board level of patient experience through the introduction of patient stories at the beginning of every Board meeting

Some sponsors point to clear evidence of improvement, including

- Better management of complaints by concerned care-givers,
- Effective and efficient preparation for CQC visits,
- Working directly with the Department of Health (DH) to reprioritize ‘Prevent’ funding for asylum-seeking children that resulted in additional DH support to help asylum seekers from Africa who have been abused before and/or during their journey to England

Many Sponsors, however, were at pains to point to hard evidence of improvement because most projects were still in the planning stage, were recently implemented, or had not yet been independently evaluated. But Sponsors’ overall impressions was that the Scholars were successfully building the conditions, both locally and nationally, that would have a direct positive impact on patient care, patient experience, and patient safety. Most of those who expressed this view suggest that the Scholar is consultative, works collaboratively with outside organisations (such as CCGs), and is visionary, organised, and credible. One Sponsor referred to her Scholar as “a values-driven leader”. Sponsors, who thought that it was too soon to tell if the Scholar would make a measurable difference, nonetheless believe that the nature of the Scholars work, and how they work, will improve patient care over time.

---

3 Scholar-reported projects and outcomes can be found in Appendix 2 under the question heading: “A fundamental part of the Leadership Scholarship is your patient care improvement project. Please outline below the focus of your project, the impact it had on patient care/quality/safety and how you have demonstrated/know this:”
Publishing and Dissemination

Most Scholars plan to disseminate their work in the form of publications, conferences, workshops, further travel, or further research.⁴

<table>
<thead>
<tr>
<th>Scholars’ plan to disseminate their work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very likely</td>
</tr>
<tr>
<td>-------------</td>
</tr>
<tr>
<td>Number</td>
</tr>
<tr>
<td>Percentage</td>
</tr>
</tbody>
</table>

The following tables indicate where Scholars have published or plan to publish. The telephone interviews reveal that in addition to publishing their work formally, Scholars share their knowledge through regular face-to-face local workshops and seminars related to their topic areas, blogging (one reports “500 reads, easily”), and tweeting. Others have appeared on local television, have chaired national meetings, and present at national and international conferences. One reported that she has published and given conference papers in Italy, London and Australia. Two report that they have constructed regional interest groups that meet regularly in their topic areas.

<table>
<thead>
<tr>
<th>Places Where Scholars Report Plan to Publish Their Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have Published</td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td>Organisation’s newsletter/website</td>
</tr>
<tr>
<td>Professional journal</td>
</tr>
<tr>
<td>Academic Journal</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

⁴ Of those who responded “Not Very Likely” or “Don’t Know”, one wrote that they are focused on their current role (presumably they no longer have the time to develop their work further), one is in a new role, and one sees the work as still in progress.
The three preceding tables suggest that Scholars have published, or plan to publish, in a variety of publications and conference venues, including both peer-reviewed academic journals and international conferences. The tables also suggest, however, that most dissemination takes place at home institutions informally. This does not necessarily suggest that Scholars are not having either a national or international impact. For instance, of fifty-eight Scholars who responded to the survey, thirty-eight have published or plan to publish in a professional journal, and twenty have or plan to present at a national conference, and fourteen in an international conference.

When asked what support Scholars need in order to publish or present their

---

5 ‘Total respondents’ may exceed or fall below row totals because some Scholars have indicated that they have presented and plan to present.

---
work, most report that they need more writing/editing guidance, free time, or that their work was not yet ready for publication. We explored this further with Scholars during the telephone interviews. As one might expect, Scholars who work in higher education institutions voiced no problems with publishing, although a few of them said that their work must meet very high standard in order to be acceptable in any Research Excellence Framework (REF) submission. As one of them said,

*If it isn’t REF-able, it doesn’t exist, and you don’t spend time writing something that does not exist. You can’t really write about leadership, which is my passion, because the REF is a barrier.*

One Scholar, who did not work in a higher education institution, had a unique view on writing for a peer-reviewed publication.

*You have to understand the intense time pressures that most of us are under. If we take the time to do something, you want to see a result for it. You want to be assured that your time and work will result in something. But when you write for a peer-reviewed journal, there’s no guarantee. You could spend weeks writing something, submit it, and then it’s rejected. Where does that leave you?*

For the majority of others, time to write is a very real problem. One said, “We work twelve hour days, and when we come home, we’re exhausted.” Another said, “You’re expected to write just when the NHS reaches its annual winter stress.”

The proportion of Scholars who asked for explicit writing guidance has declined since the previous two evaluations. This might be due to the relationship that the Foundation has built with the *British Journal of Nursing* and the *International Journal of Practice Development* who support scholars through the writing process. The Foundation also supports a workshop run by Council of Deans Scholars to help other scholars who are novice publishers.

Scholars did offer some guidance on how to encourage writing and formal dissemination. Some suggested that Scholars choose a mentor who is skilled in writing, and who could guide the Scholar through the process. A few, who may be unaware of the Foundation’s activities to support writing, suggested that the Foundation work closely with publishers, such as *Nursing Times* or the Royal College of Nursing, and ask or even require Scholars to prepare final reports that could be published in those venues. Some suggested that an editor or staff member from a publication becomes aware of the Scholar’s project in advance, and works with the Scholar to publish it when it is complete, much as academic publishers now do with PhD students.
Part II: Scholars’ and Sponsors’ Views of views and perceptions of the conduct and process of the Scholarships, its strengths, and how it might be improved.

Scholars’ expectations of the programme

Applicants to the programme welcomed the opportunity to design a bespoke, self-directed learning and development programme that met their individual learning needs. Both the online survey responses and the telephone interviews strongly suggest that overall, respondents wanted a flexible development programme that they could tailor to suit their own learning and development needs, learning styles and both organisational circumstances and needs.

<table>
<thead>
<tr>
<th>Expectation</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opportunity for network access</td>
<td>20</td>
<td>19</td>
</tr>
<tr>
<td>Increase self-awareness</td>
<td>19</td>
<td>18</td>
</tr>
<tr>
<td>Improve career prospects</td>
<td>13</td>
<td>13</td>
</tr>
<tr>
<td>Learn/use new tools</td>
<td>13</td>
<td>13</td>
</tr>
<tr>
<td>Increase personal influence</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td>Increase political awareness</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>More challenges</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Increase confidence</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Improve patient care</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Increase emotional intelligence</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Overseas experience</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Shadowing opportunity</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Don’t know</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>103</td>
<td>100</td>
</tr>
</tbody>
</table>

Total exceeds 58 Scholars because many Scholars had more than one expectation.
As in past surveys, most respondents said that the scholarship exceeded or surpassed their expectations, with many believing that it was a life-changing experience for them. All believe that they have grown profoundly both personally and professionally, and many say that members of their teams note a positive change in their behaviour. Indeed, almost all Sponsors suggested that the Scholarship has helped to enable Scholars to grow both personally and professionally. In telephone interviews, almost all expressed deep gratitude to the Florence Nightingale Foundation for giving them the opportunity to become Nightingale Scholars.

<table>
<thead>
<tr>
<th>Please indicate your agreement with the statement: 'The Leadership Scholarship met my expectations'</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agreement Level</td>
</tr>
<tr>
<td>-----------------</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

All but two comments were very positive; some representative comments include:

*I have found the Scholarship the most positive experience I have been through in my 30 years as a Registered Nurse. It provided a great opportunity to meet with other people and focused discussion. It was great to learn from what other people knew and shared in the Scholarship as nurses and colleagues. It really helped me move to take a much wider perspective on challenges which has paid many dividends in my work since.*

*Until you have been through a FNF scholarship, you can't truly understand the impact it has, personally and professionally. It is undoubtedly the most useful and productive thing I've ever done. It absolutely helped me to develop into a board member and to cope with being new to that role. Without the FNF scholarship, I would not have achieved so much in such a short time. It enabled me to have self-confidence, self-belief to network nationally. It also facilitated me to move within my own organisation and take on a Clinical Director role, which is usually undertaken by consultant doctors.*

The one respondent who selected 'Agree slightly' did not leave a written comment; the respondent who selected 'Agree Moderately' wrote,

*I liked the flexibility of the scholarship and the support and advice from my mentor and Liz [Prof Elizabeth Robb]. The biggest issue I had was the fact that my job was so busy I found it difficult to get away to do some of the things that I had expected to be able to do.*
Another scholar, who ‘Strongly Agrees’ with the statement, warned scholars to consider any potential future changes in their work arrangements that might affect the benefits they may get from the scholarship.

*I think the opportunities offered within the programme were exceptional and the experience I gained was invaluable. I do feel, however, that my circumstances transpired against me in terms of my ability to gain the maximum benefit from the scholarship. Looking back, the move to another role at a significantly challenged Trust set up conflicting demands which meant that the latter part of my scholarship opportunity were not as positive as they could have been. My advice to future scholars, for what it's worth, would be to consider extremely carefully the potential changes they might face which would conflict with the benefits the scholarship brings.*

**A manifest expectation of scholars was their ability to network,** and we explored with scholars during telephone interviews why networking was important to them. Many said that this gave them an opportunity to gain perspectives from outside their workplace, to broaden their knowledge, and to get a fix on how others perceived of and addressed problems and challenges. A few said that day-to-day work was both isolating and lonely and that they were stale and in need of being refreshed. For such respondents, networking with business leaders outside the NHS was particularly valuable. For example,

*I felt like I was stale in my organisation—I had been there for more than twenty years. The Scholarship gave me the opportunity to network with leaders from outside of the NHS—this is why I chose to go to Cranfield. If you move outside the NHS, you can get ideas and peer support from a completely different group of people, but who have similar experiences to you. Their approach is different.*

Others, however, were eager to share experiences, to give and get support, and use networking as a means of delineating their own personal values and beliefs. For example,

*Before the Scholarship, I saw networking as something that others did—it was meeting people you didn’t like, but you wanted something. But my experience is different now. With other Scholars, you get informal support. You can be with them without having to explain why. You have a shared experience. I thought I might have to give up my values by talking with others. Nevertheless, the experience has led me to being clear about my compass. You don’t have to give something up.*

Some felt shy and introverted, but they “forced” themselves to take advantage of networking opportunities, and are now glad that they did. One
said, “I am rubbish at networking, but you find that so many people are helpful, and you’re not alone.” Another said, “It was hard to do because I’m shy—but it brings you great opportunities, both here and overseas.”

Support from the Foundation

Scholars were asked in the online survey what types of support they received from the Foundation.

<table>
<thead>
<tr>
<th>Support received by Scholars From the Foundation</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal development advice/coaching</td>
<td>52</td>
<td>34</td>
</tr>
<tr>
<td>Scholarship planning advice from Foundation staff, such as contacts, locations.</td>
<td>37</td>
<td>24</td>
</tr>
<tr>
<td>Advice on career development</td>
<td>32</td>
<td>21</td>
</tr>
<tr>
<td>Support with writing</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Access to developmental opportunities such as representing the Foundation at events, meetings, etc.</td>
<td>26</td>
<td>17</td>
</tr>
<tr>
<td>Other</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>152</td>
<td>100</td>
</tr>
</tbody>
</table>

Scholars were then asked of the support they received, which has the greatest impact on their development. These free text answers are categorized in the table on the following page.

---

7 Total exceeds 58 Scholars because many Scholars had more than one type of support.
As we can see, coaching and personal advice from both Prof Elizabeth Robb and Scholars’ mentors and coaches were seen to be most important elements, along with the personal leadership development and diagnostics elements of the programme. The online survey responses do not give much of an indication as to why these are important, but the telephone responses suggest that the experience of the scholarship is seen as a complex journey, and that advice, coaching, and mentoring are critical during that journey. For example, some scholars mentioned that they received results of their diagnostics, and that their coaches helped them to understand the meaning of those results, and how that could translate into action. Others said that they could ascertain a new leadership style emerging in them as their self-awareness grew, and that their coaches and mentors helped them to develop their thoughts, and what these might manifest in action. Some believed that they lacked confidence at the beginning of their scholarships, and mentors and coaches helped them overcome this. Many said that the personal leadership diagnostics were particularly valuable because they shed a light on how they behaved and, most important, how others perceived them.

When asked which specific element of the programme had the greatest impact on them personally, most chose the diagnostics and the RADA experience. For example, one Scholar wrote,

*I believe that all of the above have had an impact in my development as an effective leader. However, RADA in my opinion had the most impact. It appears that 50% of the way we communicate is non-verbal in nature which is the key part of influencing process in leading a successful organisation. Previously I hadn't given this much attention and this may have compromised a 100% chance of influencing*

---

8 Total exceeds 58 Scholars because many Scholars named more than one element.
successfully. RADA focused on the human factor and the importance of focusing on people as well as the service particularly when under pressure. Learning about ourselves was a real eye-opener to hear other people's perception of you. Using real life scenarios and learning how to deal with difficult situations was an amazing life long learning. One of RADA’s learning was to get into the habit of not delaying difficult conversations with people in order to engage and find some common grounds.

Elements of the programme with the greatest impact

RADA was seen to be particularly important to Scholars for two principal reasons: first, it gave them an acute awareness of how others perceive them in public and social situations, and what they need to do in order to influence others by getting your message across; and, second, the RADA experienced forced them to perform in public (singing was often mentioned by Scholars) which, in turn, forced them out of their comfort zones. Many expressed both astonishment and amusement that they performed in public, and how this helped them to overcome the fear and anxiety of speaking up in public settings, such as Board meetings. Moreover, some expressed the view that they came to know ‘the real me’.

[RADA] was highly enjoyable, provided insight, skills development and gave me the opportunity to practice feedback and challenge. The programme works with the ‘real me’ (possibly more evident because of the diagnostic) rather than the me I think I should be.

The telephone responses on those elements of the programme that had the greatest impact are categorised in the following table.

<table>
<thead>
<tr>
<th>Scholar report from telephone interviews of those elements that had the greatest impact on them.9</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Element</td>
<td>Number</td>
<td>Percentage</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Diagnostics</td>
<td>12</td>
<td>29</td>
</tr>
<tr>
<td>RADA</td>
<td>11</td>
<td>26</td>
</tr>
<tr>
<td>Coaching</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td>Mentoring</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td>Going to Cranfield</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td>LCOR</td>
<td>3</td>
<td>7</td>
</tr>
<tr>
<td>Westminster experience</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Going to Harvard</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Going to Ashridge</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>42</td>
<td>100</td>
</tr>
</tbody>
</table>

9 Total exceeds forty because some Scholars identified more than one element.
The interviews also suggest that it was difficult for Scholars to identify only one element that had an impact, and the table above represents those responses where a Scholar said, in effect, “Well, if I had to choose, then it would be...”

Additional support identified by Scholars

When asked in both the online survey and the telephone interviews if there were any support that they would have liked that they did not receive, most suggested that nothing else was needed. When asked during

<table>
<thead>
<tr>
<th>Element</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nothing else</td>
<td>37</td>
<td>63</td>
</tr>
<tr>
<td>More time with cohorts/scholars</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>More peer coaching</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>More Structured Scholarship Support</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Uncategorized</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Local mentor/coach</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>More time on programme</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Budging/Financial support</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>More career development</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>59</td>
<td>100</td>
</tr>
</tbody>
</table>

the telephone interviews if there were any constraints that may have somehow led scholars to not get as much from the scholarship as they had hoped, most identified said that they knew how to obtain resources, and that the experience of the scholarship itself gave them the tools to overcome any constraints. They named a number of factors that helped them through the Scholarship, including help from mentors, support from Prof Elizabeth Robb, collegial support, CEO support and family support. A few scholars said that getting through the scholarship can be challenging at times, especially when one is balancing time on scholarship work and time and workload pressures in their jobs. As one might expect, a plurality of Scholars said that time was the most severe constraint, especially the demanding nature of their jobs. A few said that they faced both professional and personal resentment and jealousy from both their line managers and peers regarding their being named as Florence Nightingale Foundation Scholars, and the freedom such scholars enjoy. (This was mentioned, without prodding, by a couple of Sponsors, as well.) While not a constraint, per se, Scholars who mentioned

---

10 Total exceeds fifty eight because some of the fifty-six Scholars who responded to this question identified more than one element.
this inferred that it made their professional lives unnecessarily difficult at times, and some talked this through with their coaches.

Scholars’ views on improving the programme

<table>
<thead>
<tr>
<th>Element</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do not make LCOR mandatory</td>
<td>18</td>
<td>31</td>
</tr>
<tr>
<td>No changes needed</td>
<td>13</td>
<td>22</td>
</tr>
<tr>
<td>More group meetings/activities</td>
<td>11</td>
<td>19</td>
</tr>
<tr>
<td>Other/uncategorized</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td>Increase co-consulting</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Delete Westminster Experience</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Pre-meeting of Scholars</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Add coaching as a mandatory element</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Change sequence of core</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Encourage regional cohorts</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Make core less English-centric</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Mentor should be chosen by Scholar</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>More space between activities</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>59</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Scholars seemed to be split on the value of LCOR. In both the online survey and telephone interviews, scholars questioned both the usefulness and cost of the LCOR element; with a plurality arguing that the delivery and the content seemed pre-packaged (one Scholar said, “Every word of it was in the book.”) and not particularly relevant to their needs. As one put it, “They didn’t scratch where it itched.” Another believed that the delivery was “all male and all dated”. The most common reason why Scholars thought that LCOR should not be part of the mandatory programme was that it was relatively expensive and did not provide value for money.

One positive aspect of LCOR was that it brought Scholars together, and Scholars valued this. One Scholar wrote,

11 Total exceeds fifty eight because some of the fifty-six Scholars who responded to this question identified more than one element.
LCOR was the least useful aspect. The content felt rather dated and at times not relevant. The two positive aspects were it brought us all together as a group, in fact the dissatisfaction aided that bonding. Secondly when we challenged the team they did listen and tried to change things. They could have been more engaged with us outside the organised sessions from the beginning. Initially they were rather aloof but they shared more with us towards the end.

On the other hand, some saw value in LCOR because it provided a non-healthcare-centric view, the presenters actively listened to participants, and were flexible in the content and emphases of their presentations. The written comments suggest that LCOR helped participants with developing new strategies and, in particular, helped with the design and conduct of their projects. Of those who held favourable views of LCOR, most appreciated that Scholars spent time together, and participated as a coherent cohort.

Scholars wanted more time together as a group. Scholars see themselves as part of a special group of people who share similar concerns and who have similar talents, and one of the major strengths of the programme is their knowing that they belong to such a group. One wrote,

Being a FNF Scholar is more than just the scholarship itself, it’s like joining a professional family and community.

It would not be a stretch to argue that they have bonded as a group, and consider other Scholars as peers. In this regard, Scholars may sometimes feel a tension in the programme where, on the one hand, the strength of the programme is that it is individualised and bespoke Scholarship, but on the other they seek time to be with others to share experiences, and to learn collaboratively. As one Scholar wrote, “I would really have liked regular scholarship meetings across the year so that we could all meet and share experiences, knowledge and support.” A couple of Scholars suggested that the programme be bookended by plenary meetings. For example,

It would be great to bookend the scholarship with another activity, LCOR at the start and another towards the end. The other elements were undertaken in part-groups and I feel a coming together of the full group in some activity would add to cementing relationships and creating a strong fellowship of scholars.

Timing of Scholarship in Careers of Scholars

Most Scholars said that the Scholarship came at the right point in their professional lives. They pointed out that timing of the Scholarship depended not only on a Scholar’s personal career history, but also on the confluence of job role, career trajectory, personal outlook, and organisational
needs. Sponsors were particularly attuned to this confluence, especially when asked if they would, in principle, support Scholars in the future. A Sponsor said that the cost of one Scholarship alone would consume about 20% of the organisation’s development budget, and one had to weigh carefully the needs of the individual, their outlook and promise, and the potential contribution they would make on the organisation and profession. Both this Sponsor and another both said that the most important element in deciding who to sponsor was that the person was “ready for it”.

Scholars generally agree with this Sponsor, especially with the notion that they personally and professionally needed to ready to take full advantage of the Scholarship. Indeed, the few Scholars who said that they would have welcomed the Scholarship earlier in their career argued that they probably would not have got as much out of it if it did come earlier. One said,

*It depends... It could have come earlier, but then it wouldn’t have the impact it had. You need the diagnostics, the ability to understand yourself as a leader, and this takes time—takes years to absorb it. The Scholarship came at a time when I was just ready to move, and meeting people at a similar level—that’s the value. This built on previous experiences, and it helps you to get to the last, most difficult, bit.*

**Of the Scholars interviewed, only three were certain that the Scholarship should have come earlier in their careers.** One said that for organisational reasons, she waited three years; another said she could see the benefit that the Scholarship would have had in her career had it come earlier. One said,

*I definitely would have done this earlier. My career was slow, and progressing in small, incremental steps. Those steps could have been larger, rather than small and slow. I have ten, fifteen years left in my career, and my contribution is less than it could be otherwise seven, eight years ago.*

**What all Scholars agree on is that the Scholarship should not come later in their careers.** Many said that they were at the right frame of mind and had the right experience, and that it set them up for the next phase of their career, particular for those who wanted to ‘consolidate’ their careers and have an impact.

**All Scholars surveyed were enthusiastic about the Scholarship and their experience of it, and that they would recommend their peers to apply for it.** Many said that they had done this already. All Sponsors said that they would in principle support Scholars in the future; with most of them saying that the organisational gains are manifest and obvious. One Sponsor volunteered a scenario where a Scholar gets another job after the Scholarship.
So what if that happens? Did we squander our money? I think not. If a Scholar can improve health care anywhere, that’s a good outcome. You have to remember that we’re all in this together.

Promoting the Scholarship Programme

**Scholars provided a range of ideas on how best to promote the Scholarships**, including publishing case studies, profiles and testimonials of Scholars and the effects of their work, maintaining close contact and alliances with Directors of Nursing, using the Royal Colleges as a means of promoting the Scholarships, making good use of social media (which may appeal to younger potential candidates), making use of alumni in their organisations, and working with Health Education England and Higher Education Institutions to identify potential candidates early in their careers. Free text comments were categorized, where possible, and are presented in the following table.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scholar Alumni</td>
<td>14</td>
<td>24</td>
</tr>
<tr>
<td>Social media</td>
<td>9</td>
<td>15</td>
</tr>
<tr>
<td>Case Studies/Profiles/Testimonials</td>
<td>8</td>
<td>14</td>
</tr>
<tr>
<td>Alliances with Royal Colleges</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td>Alliances with Nurse Directors</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>HEE/HEI to identify candidates</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Other</td>
<td>15</td>
<td>25</td>
</tr>
<tr>
<td>Total</td>
<td>59</td>
<td>100</td>
</tr>
</tbody>
</table>

**Scholars were very clear that they value their overall experience in the programme**—there was not a single neutral or critical statement in any of the comments written by Scholars about their overall experience of the programme. On the contrary, as in previous evaluations of this programme, all of them provided heartfelt thanks that they were chosen to be Scholars, and related stories of how it affected them both professionally and personally.

**Overall, how would you rate your experience of the Florence Nightingale Foundation Leadership Scholarship Programme?**

<table>
<thead>
<tr>
<th></th>
<th>Excellent</th>
<th>Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very Poor</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>55</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>56</td>
</tr>
<tr>
<td>Percentage</td>
<td>98%</td>
<td>2%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>100%</td>
</tr>
</tbody>
</table>
Some representative comments include,

This was an incredibly wonderful experience that enabled me to learn more about myself and understand how to become the leader that I aspire to be and not be afraid. I have worked in a very successful and energetic organisation that has an excellent track record of achievement. As a senior manager in this organisation, I feel more equipped to deliver quality, efficiency and growth through staff/patient engagement and on par with its leadership excellence. The skills I have learnt through the FNF leadership programme have enabled me to understand clearly how to make a positive contribution. I have developed more confidence in thinking more strategically, and be taken more seriously to have a greater focus on national agenda and wider picture through sharper engagement with senior colleagues. I look more confidently forward to my next career challenge in the current tough climate. I remain passionate about improving maternity care and health outcomes and the scholarship has given me opportunities to be recognised as a midwifery leader who can make a stronger contribution to making a case for change as well as quality improvements.

It has allowed me to understand who I am, and this has meant I have been able to reflect on my relationships and how I build and maintain rapport. It has been truly transformational personally and professionally. Without the Scholarship, I would not have had the opportunity to allow the time to self reflect, learn, assess and implement some of the approaches I have taken. I am unlikely to have changed organisation, I am confident the organisation will recognise the contribution I have had to transforming care delivery and formalise my role to be a Chief Clinical Information Officer (Nursing). I am accepted externally in this role.

It's unique - globally. It needs to be treasured - and together the alumni and FNF friends need to ensure it can continue in its special, idiosyncratic manner - so those nurse (and the AHP leaders - this deserves more exploration in this survey to differentiate too) who take part can make a difference as a result of the opportunity a scholarship affords.

It was great and I am sad it is over!
Conclusions and Recommendations

The Florence Nightingale Foundation Leadership Scholarships continue to be seen by Scholars and Sponsors alike as the most effective leadership programme available to healthcare professionals. As in past evaluations, the Scholarships have both supported projects and engendered leadership behaviours.

- The Scholars’ projects have significant positive direct and indirect effects on patient care, patient safety and, patient experience locally, regionally, and nationally.
- The Scholarships have enabled significant personal and leadership development of Scholars. Most Scholars see the scholarships as the single most important development programme in their working life.
- Scholars made important and lasting contributions to their sponsoring organisations. Every Sponsor could identify a direct benefit to the organisation.
- Sponsors see clear value for their organisations from the scholarships, and are enthusiastic about sponsoring Scholars in the future.
- The Scholarships are viewed by both Sponsor and Scholar alike as becoming an increasingly important path for the leadership development of nurses and allied health professionals in the United Kingdom.
- One important outcome in this evaluation is the sense that Scholars are spreading their knowledge and modeling leadership behaviours in their home organisations. Generally speaking, Scholars see their personal development as an opportunity to develop others around them, and to build leadership capacity in their home institutions. By building such capacity locally, it is fair to say that the overall national outcome of the Scholarships is greater than the sum of its parts.

As in previous evaluations, Scholars and Sponsors alike from all cohorts show great enthusiasm, indeed real passion, for this programme. Both the Scholars and their Sponsors believe that the programme has not only encouraged individuals to grow professionally and personally, but that the learning gained by Scholars has had unambiguous and tangible benefits for their sponsoring organisations. Scholars have been instrumental in either building or influencing local, regional and national organisational structures to improve patient care, patient safety and patient experience. There is marked evidence that Scholars influence local, regional, and national policy in neonatal and maternity care, treating alcohol and substance abuse, improving service user experience nationally in Wales, developing regional resources to support those with learning differences in Northern Ireland, reducing violence among mental health patients regionally, implementing digital technologies to improve patient care and experience, and building closer and more productive links between higher education and healthcare organisations.

The survey results and follow-up interviews reveal that Florence Nightingale
Scholars are self-motivated, have a large capacity to think laterally, and, most of all, and are reflective practitioners and leaders. **Scholars are not merely motivated by the opportunities that the Scholarships might have on career progression.** Instead, they believe that they can make a real difference in health care, and are driven toward excellence in patient care, patient safety and patient experience, and they view the Scholarships as a means toward that end. Career progression for Scholars appears to be simply a by-product, not a goal. Moreover, many Scholars suggest that they can demonstrate to the larger clinical and policy arenas the value that nurse leadership—that is, the values of nursing manifested in leadership behaviours—can have on improving all aspects of patient care.

One important product of the Scholarships is that it exposes participants to new ways of thinking and working, and brings them into contact with peers and others who have experiences that are different from their own—this is especially true of Scholars who have encountered senior executives outside healthcare at Ashridge, Cranfield, and Harvard. This is highly valued by Scholars, and they, in turn, introduce new perspectives and practices in their workplaces. Moreover, the literature on organisational innovation strongly suggests that such cognitive diversity is critical to introducing and embracing innovative practices at organisations.12

The aspects of the Scholarships that Scholars value most are:

- The flexibility, independence, and freedom that the scholarship affords Scholars
- The ability to make real change in their sponsoring organisation
- The close relationships Scholars have built with their mentors
- RADA, the Westminster Experience, and their personal leadership assessment and diagnostics
- Support from Prof Elizabeth Robb, her vision of nurse leadership, and the ongoing personal attention that she gave to individuals throughout their scholarships. As in past evaluations, the interviews strongly suggest that the Florence Nightingale Foundation is far more than an organisation that administers the Scholarships. Instead, respondents are not only effusive in their praise of the efforts of the Foundation to support them, but they say that the Foundation, and Prof Robb specifically, embody the values that they so cherish as nursing and health professionals.

We have made recommendations in past evaluations on improving the Scholarships, and these seem to have had an effect. Scholars’ requests for support for publishing have decreased since the last evaluation, and those that did say that they needed help were possibly unaware of the help that that Foundation already has in place. Scholars have said that they know and understand

have been in contact with Scholarship alumni, and feel a lifelong identity as a Florence Nightingale Scholar.

Scholars had very few suggestions on how to improve the Scholarships with the exception of providing more opportunities for Scholars to meet as a group. It should be noted that the Foundation has increased contact among Scholars since the first evaluation in 2010. Given that Scholars must travel considerable distances to meet in London, perhaps some thought should be given to encouraging regional networks of Scholars. In addition, the suggestion that the Foundation “bookend” the Scholarships with plenary meetings at the beginning and end should be considered by the Foundation.

Scholars value the mandatory elements in the Scholarship, and are especially positive about RADA, the Westminster Experience, and the personal diagnostics. They were split regarding the value of LCOR, with many Scholars outwardly questioning its value to them given its cost. The Foundation has already, for the 2015/16 cohort reviewed and updated LCOR. It is no longer mandatory, includes new material and NHS case studies and an increased and more gender diverse Faculty from the UK and the USA. This has been well received.

In sum, the overall central message from both Scholars and their Sponsors is that the Florence Nightingale Scholarship Programme is the most effective leadership development programme of its kind for nurses and professions related to nursing in the United Kingdom, and that it is a model for other such programmes.
Appendix 1: Interview Protocols

Protocol of telephone interview of Scholars. 03NOV2015

Interview Questions for Florence Nightingale Scholars.

Background for Interviewee.
The University of Southampton is conducting an evaluation on behalf of the Florence Nightingale Foundation of its Leadership Development Scholarship programme.

I will ask you seven open-ended questions that will cover

- Your views on the impact of the scholarships on your leadership practice and your organisation/the system/the profession
- Publishing and dissemination more generally
- Confidence
- Networking and meeting other scholars
- Any constraints you might have experienced in making the most of your scholarship
- The timing of the scholarship in career and life terms

These will be followed by a couple of housekeeping questions, and a chance for you to add anything that wasn’t covered in the interview.

You will not be tape-recorded. I will keep handwritten notes as you talk with me.

You are under no obligation to participate in this survey, and you can decide to end this conversation at any time. No one will be identified by name in any report written report, and your responses will remain confidential. Any notes taken from this conversation will be protected, and not shared with anyone other than those who are conducting the survey. Any machine-readable notes will be encrypted, and all participants will be identified in those notes through an ID number only.

Do you have any questions?
Do you agree to be interviewed by me today?

Are you ready for the first question?
1. Many responses from scholars who completed the online survey suggest that they’ve become better leaders or better managers. We’re interested in your views of how your leadership practice has changed as a consequence of the scholarship. We’d like to know specific behaviours that have changed, or some examples.
   a. **Probe:** <Depending on the nature of the response> How do you know? For example, have you received feedback from staff?

2. In very general terms, most scholars report that the scholarships have had a positive outcome for them personally. We may think of an impact as some personal and/or organisational success as a result of the scholarship.
   Looking at your own experience, what impacts have resulted, either directly or indirectly, from the scholarship?
   a. **Probe:** This might be difficult to answer, but if you hadn’t had this experience, would anything be different for you?
   b. **Probe:** Career progression?
   c. **Probe:** Influencing your organisation?
   d. **Probe:** Change in perspective and outlook that affect your practice?
   e. **Probe:** How do you know—feedback from others?

3. We’d like to know if the experience of the scholarship has affected or has had some impact on your colleagues, local policy and practices etc.
   a. **Probe:** <Try to get some specifics about colleagues because most of the survey answers to this question discuss only changes in their personal attributes.>

4. Many of the respondents to our online survey said that the experience of the award has increased their confidence. In fact, scholars from the two previous survey cohorts from 2010 and 2013 also highlighted the effects of the scholarship on their confidence. We would like to explore this in this today, and we have a few questions about this.
   a. Confidence can have many meanings across individuals.
      i. 2.1.1 Can you give an example?
   b. Looking back on your experience in the programme, what has happened to increase your confidence?
   c. Can you give an example of how your increased confidence resulted in your doing now that you haven’t done before?
d. Were there particular elements of the programme, such as the diagnostics, RADA, coaching, that seem were helpful in increasing your confidence?
e. One final question about confidence. We might take for granted that we are more confident leaders. But did your increased confidence affect you in other ways?

5. As you know, the Foundation would like to see the work of the Scholars published, and they are eager to know what the barriers and facilitators for publishing and dissemination more generally are. Looking at your own experience, can you identify some barriers and facilitators for publishing your work?
   What can the Foundation do to help?

6. Let’s talk a bit about dissemination of more generally. Aside from publishing, have you done other things to spread or share what you have learned, such as running workshops or seminars, developing new policies, affecting practices...?
   a. <Depending on the nature of the response> Was this local? Regional? National?
   b. Many scholars reported that one of the most important aspects of the programme was their ability to “network” and meet others outside their normal social orbit. What was missing from these responses is why this is important. We’d like to explore this with you.
      Why was networking and meeting other scholars important to you?
   c. **Probe:** Influence of new ideas and perspectives?
   d. **Probe:** Building a less local and more national/global outlook?
   e. **Probe:** Access to helpful expertise?
   f. **Probe:** Increase in peer support?

7. Many of us see our careers as both a personal and professional journey that occurs over a span of years. Sometimes important events happen in that journey at the right time, and sometimes they don’t. Looking back on your career and the timing of the scholarship, was the timing of the scholarship right for you?
   a. **Probe:** At what juncture in your career would the timing have been better?
   b. **Probe:** *If the respondent says that now is the best time, then probe* What is happening now in your career that leads you to say this?
8. Were there any constraints that you experienced that somehow resulted in your not getting as much from the scholarship as you had hoped?
   a. What could the Foundation do to help others overcome such constraints?

9. One final question about your experience of the scholarship. Looking back on the elements of the scholarship—the diagnostics, coaching, the people you’ve encountered, for example—were there some that you now see as important in your personal or professional development, or which had a significant impact on your leadership behaviours?

10. We're finished with the interview. Is there anything you’d like to say before we hang up?
Interview Questions for Florence Nightingale Scholars' Sponsors.

Background for Interviewee.

The Faculty of Health Sciences at the University of Southampton has been asked to conduct an evaluation of the Florence Nightingale Leadership Development Scholarship programme. Our interviews with scholars discussed their views on

- The impact of the scholarships on their leadership practice and both the healthcare system and profession
- Publishing and dissemination
- Their feelings of confidence as a result of the scholarship, and what this means to them
- The effects of networking and meeting other scholars
- Any constraints they might have experienced in making the most of their scholarship, and
- The timing of the scholarship in career and life terms

We asked each scholar to name someone who can discuss with some of the effects that the scholarship had on the individual’s and the organisation.

I will ask you four open-ended questions that will cover

- The effect of the scholarship on the scholar’s leadership behaviours
- How, or if, in your view, the scholarship has affected patient care, safety and experience
- The effect of the Scholarship on the organisation
- The effect of the Scholarship on the Scholar’s mindset or thinking

After this, I will ask you two housekeeping questions.

Keep in mind that we are not attempting to verify what the scholar said to us; instead, we are talking with you to provide us with a higher-level perspective of the effects of the Scholarship.

I want to mention that we are not evaluating the individual, but instead we are looking at the impacts of the programme. Your comments will not be shared with the scholar. You will not be tape recorded. I will keep handwritten notes as you talk with me.

You are under no obligation to participate in this survey, and you can decide to end this conversation at any time. No one will be identified by name in any written report, and your responses will remain confidential.
Any notes taken from this conversation will be protected, and not shared with anyone other than those who are conducting the survey. Any typewritten notes will be encrypted, and all participants will be identified in those notes through an ID number only.

Do you have any questions?
Do you agree to be interviewed by me today?

Are you ready for the first question?

1. The first question will concern how, or if, the Scholarship has affected the Scholar’s leadership style, quality, or behaviours. In your view, has there been a demonstrable change in the Scholar’s leadership capacities or behaviours?
   a. Can you give an example?

2. We are interested in the possible effects that the Scholarships had on patient care, patient safety, and patient experience. In your view, did the Scholarship have an effect in those areas? We understand that you won’t have numbers in front of you, and we don’t expect a rigorous cause-and-effect response. We are interested only in your impressions.

3. We are interested in knowing if the Scholar has had any effect on the organisation. When we speak of the organisation, that can take on two dimensions: First, affecting the way things are done (such as changing local policies and practices); Second, affecting other colleagues (such as increasing motivation, empowering individuals, increasing morale, etc.). From your perspective, has the Scholar had some effect or influence on how things are done?
   a. Can you give an example?
   b. Have they affected their colleagues?
   c. Again, can you give an example?

4. We are also interested to know if the Scholarship has an impact on the Scholar’s mindset or way of thinking. For example, one might have a mindset that always puts quality first. Would you be able to say that the Scholar’s mindset or thinking have changed (or perhaps been reinforced) as a result of their experience of the Scholarship programme?

I am finished with my questions, but am wondering if there is anything you’d like to add before we move on.
5. Given what you know and have experienced of the Florence Nightingale Foundation Leadership Scholarship, *in principle* would you support another scholarship?

6. Would you recommend to your peers that they encourage their staff to apply for this scholarship?

7. Is there anything else you’d like to say before we hang up?

<Thank the respondent.>
Appendix 2 : Online Survey Protocols and Responses

TEXT REPRESENT VERBATIM RESPONSES, BUT SPELLING CORRECTIONS HAVE BEEN NAME.

Question 1.
About you: (Please tick any of the following that apply to you)

<table>
<thead>
<tr>
<th>ProfessionalRoles Identified by Online Survey Respondents n=58</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Role</td>
<td>Number</td>
</tr>
<tr>
<td>Educationalist</td>
<td>8</td>
</tr>
<tr>
<td>Midwife</td>
<td>5</td>
</tr>
<tr>
<td>Nurse</td>
<td>44</td>
</tr>
<tr>
<td>Practitioner</td>
<td>6</td>
</tr>
<tr>
<td>Researcher</td>
<td>7</td>
</tr>
<tr>
<td>Senior leader/Manager</td>
<td>28</td>
</tr>
<tr>
<td><strong>Total</strong> (some respondents indicated two or more roles)</td>
<td><strong>98</strong></td>
</tr>
</tbody>
</table>

Question 2.
What was your professional role when you began your scholarship?

1. Director of nursing
2. Head of nursing and Midwifery Research
3. Deputy Director of Nursing
4. Director of Nursing
5. Director of Nursing
6. Head of School of Nursing
7. Nurse consultant and associate director of nursing
8. Consultant midwife
9. Head of School / Associate Dean
10. clinical matron
11. Assistant Director Of Nursing ( 3 months in post)
12. Director of Nursing and Patient Safety
13. associate chief nurse
14. Nurse Consultant
15. Regional Deputy Director of Nursing
16. Neighbourhood Manager
17. Deputy Director of Nursing
18. Programme Director (Nursing Excellence)
19. Director of Nursing
20. Divisional Director of Nursing and Clinical Implementation Lead for NHS 111
21. Executive Director of Nursing and Quality
22. Deputy Director of Nursing
23. Director of Nursing and Midwifery
24. Clinical Professor
25. professional officer - policy lead
26. Head of Midwifery and Assistant Director of Nursing
<table>
<thead>
<tr>
<th>No.</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>27.</td>
<td>Head of School (University)</td>
</tr>
<tr>
<td>28.</td>
<td>Director of Nursing</td>
</tr>
<tr>
<td>29.</td>
<td>Interim Divisional Director of Nursing</td>
</tr>
<tr>
<td>30.</td>
<td>Clinical informatics lead</td>
</tr>
<tr>
<td>31.</td>
<td>Consultant Nurse</td>
</tr>
<tr>
<td>32.</td>
<td>Clinical Lead in informatics</td>
</tr>
<tr>
<td>33.</td>
<td>Head of Clinical Education</td>
</tr>
<tr>
<td>34.</td>
<td>Executive Director of Nursing &amp; Quality</td>
</tr>
<tr>
<td>35.</td>
<td>Head of Nursing (North)</td>
</tr>
<tr>
<td>36.</td>
<td>Director of Nursing</td>
</tr>
<tr>
<td>37.</td>
<td>Head of Department</td>
</tr>
<tr>
<td>38.</td>
<td>Regional Chief Nurse M&amp;E NHSE</td>
</tr>
<tr>
<td>39.</td>
<td>Director of Nursing</td>
</tr>
<tr>
<td>40.</td>
<td>Director of Quality and Clinical Excellence</td>
</tr>
<tr>
<td>41.</td>
<td>Lead Pharmacist</td>
</tr>
<tr>
<td>42.</td>
<td>Lead Nurse Governance and Patient Experience</td>
</tr>
<tr>
<td>43.</td>
<td>Director of Rehabilitation &amp; Therapies</td>
</tr>
<tr>
<td>44.</td>
<td>Director of Nursing, South London, NHS England</td>
</tr>
<tr>
<td>45.</td>
<td>Academic Director</td>
</tr>
<tr>
<td>46.</td>
<td>Analyst &amp; RN</td>
</tr>
<tr>
<td>47.</td>
<td>Clinical Nurse Specialist / Day Therapy Manager</td>
</tr>
<tr>
<td>48.</td>
<td>Director of nursing</td>
</tr>
<tr>
<td>49.</td>
<td>Associate Director of Nursing</td>
</tr>
<tr>
<td>50.</td>
<td>Pro vice chancellor</td>
</tr>
<tr>
<td>51.</td>
<td>Lecturer and Honorary Nurse Consultant for Alcohol Policy &amp; Research, Alcohol Policy Team, Scottish Government</td>
</tr>
<tr>
<td>52.</td>
<td>Executive Director</td>
</tr>
<tr>
<td>53.</td>
<td>Nursing Officer at Department of Health and Social Services Northern Ireland (DHSSPSNI)</td>
</tr>
<tr>
<td>54.</td>
<td>Assistant Nurse Director</td>
</tr>
<tr>
<td>55.</td>
<td>Deputy Chief Nurse</td>
</tr>
<tr>
<td>56.</td>
<td>Advanced Neonatal Nurse Practitioner</td>
</tr>
<tr>
<td>57.</td>
<td>Matron</td>
</tr>
<tr>
<td>58.</td>
<td>Assistant Director of Nursing</td>
</tr>
</tbody>
</table>
Question 3.
What is your professional role now? (If it is the same, please write 'As above')

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>As above</td>
</tr>
<tr>
<td>2</td>
<td>Florence Nightingale Professor of Nursing and Midwifery Research</td>
</tr>
<tr>
<td>3</td>
<td>Executive Director of Nursing</td>
</tr>
<tr>
<td>4</td>
<td>Executive Director of Quality, Nursing and Allied Health Professionals</td>
</tr>
<tr>
<td>5</td>
<td>Deputy chief nurse London</td>
</tr>
<tr>
<td>6</td>
<td>Head of School of Nursing</td>
</tr>
<tr>
<td>7</td>
<td>As above</td>
</tr>
<tr>
<td>8</td>
<td>As above</td>
</tr>
<tr>
<td>9</td>
<td>As above</td>
</tr>
<tr>
<td>10</td>
<td>Head of nursing</td>
</tr>
<tr>
<td>11</td>
<td>as above</td>
</tr>
<tr>
<td>12</td>
<td>As above</td>
</tr>
<tr>
<td>13</td>
<td>deputy chief nurse</td>
</tr>
<tr>
<td>14</td>
<td>As above</td>
</tr>
<tr>
<td>15</td>
<td>Regional Deputy Chief Nurse</td>
</tr>
<tr>
<td>16</td>
<td>Area Manager</td>
</tr>
<tr>
<td>17</td>
<td>Director of Nursing</td>
</tr>
<tr>
<td>18</td>
<td>Director of Nursing and Quality</td>
</tr>
<tr>
<td>19</td>
<td>Director of Nursing</td>
</tr>
<tr>
<td>20</td>
<td>Senior Manager Commissioning</td>
</tr>
<tr>
<td>21</td>
<td>As above</td>
</tr>
<tr>
<td>22</td>
<td>Director of Nursing &amp; Quality</td>
</tr>
<tr>
<td>23</td>
<td>Chief nurse and Chief operating Officer</td>
</tr>
<tr>
<td>24</td>
<td>Dean</td>
</tr>
<tr>
<td>25</td>
<td>lead nurse - children, young people and families PHE</td>
</tr>
<tr>
<td>26</td>
<td>As Above</td>
</tr>
<tr>
<td>27</td>
<td>as above</td>
</tr>
<tr>
<td>28</td>
<td>as above</td>
</tr>
<tr>
<td>29</td>
<td>Divisional Director of Nursing</td>
</tr>
<tr>
<td>30</td>
<td>As above</td>
</tr>
<tr>
<td>31</td>
<td>Community Nurse</td>
</tr>
<tr>
<td>32</td>
<td>Deputy Director</td>
</tr>
<tr>
<td>33</td>
<td>As above</td>
</tr>
<tr>
<td>34</td>
<td>As above</td>
</tr>
<tr>
<td>35</td>
<td>Head of Nursing and Clinical Services (UK wide)</td>
</tr>
<tr>
<td>36</td>
<td>AA</td>
</tr>
<tr>
<td>37</td>
<td>as above</td>
</tr>
<tr>
<td>38</td>
<td>Nurse Director Monitor</td>
</tr>
<tr>
<td>39</td>
<td>Director of Nursing</td>
</tr>
<tr>
<td>40</td>
<td>As above</td>
</tr>
<tr>
<td>41</td>
<td>As above</td>
</tr>
<tr>
<td>42</td>
<td>Practice Education Facilitator and Associate Lecturer for Open University</td>
</tr>
<tr>
<td>43</td>
<td>As above</td>
</tr>
<tr>
<td>44</td>
<td>As above</td>
</tr>
<tr>
<td>45</td>
<td>Executive Dean</td>
</tr>
<tr>
<td>46</td>
<td>Chair</td>
</tr>
<tr>
<td>47</td>
<td>Head of Clinical Effectiveness</td>
</tr>
<tr>
<td>48</td>
<td>As above</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>49.</td>
<td>Deputy Chief Nurse</td>
</tr>
<tr>
<td>50.</td>
<td>Yes</td>
</tr>
<tr>
<td>51.</td>
<td>Senior lecturer! CNO Clinical Academic Research Fellow</td>
</tr>
<tr>
<td>52.</td>
<td>Executive Director and Deputy CEO</td>
</tr>
<tr>
<td>53.</td>
<td>Deputy Chief Nursing Officer DHSSPSNI</td>
</tr>
<tr>
<td>54.</td>
<td>As above</td>
</tr>
<tr>
<td>55.</td>
<td>Chief Nurse</td>
</tr>
<tr>
<td>56.</td>
<td>Clinical Director Neonatal Services</td>
</tr>
<tr>
<td>57.</td>
<td>Matron</td>
</tr>
<tr>
<td>58.</td>
<td>Deputy Director of Nursing and Quality</td>
</tr>
</tbody>
</table>
**Question 4.**
When you began your scholarship, how many years was it since your initial professional registration?

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>31 years</td>
<td>28 years</td>
</tr>
<tr>
<td>28 years</td>
<td>29 years</td>
<td>29 years</td>
</tr>
<tr>
<td>29 years</td>
<td>30</td>
<td>14</td>
</tr>
<tr>
<td>14</td>
<td>25</td>
<td>21 years</td>
</tr>
<tr>
<td>21 years</td>
<td>25 years</td>
<td>28</td>
</tr>
<tr>
<td>28</td>
<td>23 years</td>
<td>34</td>
</tr>
<tr>
<td>34</td>
<td>18</td>
<td>14</td>
</tr>
<tr>
<td>14</td>
<td>25</td>
<td>24 years</td>
</tr>
<tr>
<td>24 years</td>
<td>26 yrs</td>
<td>21</td>
</tr>
<tr>
<td>21</td>
<td>24 years</td>
<td>25</td>
</tr>
<tr>
<td>25</td>
<td>18 years</td>
<td>34 yrs</td>
</tr>
<tr>
<td>34 yrs</td>
<td>14</td>
<td>26 years</td>
</tr>
<tr>
<td>26 years</td>
<td>32 years</td>
<td>31 years</td>
</tr>
<tr>
<td>32 years</td>
<td>27</td>
<td>32 years</td>
</tr>
<tr>
<td>32 years</td>
<td>30</td>
<td>29 years</td>
</tr>
<tr>
<td>29 years</td>
<td>30 years</td>
<td>18</td>
</tr>
<tr>
<td>18</td>
<td>33 years</td>
<td>35</td>
</tr>
<tr>
<td>35</td>
<td>1988 to 2014</td>
<td>28</td>
</tr>
<tr>
<td>28</td>
<td>29</td>
<td>30 years plus</td>
</tr>
<tr>
<td>30 years plus</td>
<td>16 years</td>
<td>20 years</td>
</tr>
<tr>
<td>20 years</td>
<td>34 years</td>
<td>35</td>
</tr>
<tr>
<td>35</td>
<td>17</td>
<td>28</td>
</tr>
<tr>
<td>28</td>
<td>32</td>
<td>27 years</td>
</tr>
<tr>
<td>27 years</td>
<td>12/30/2014</td>
<td></td>
</tr>
</tbody>
</table>
25 years
22
27 YEARS
25 Years
16
31
25 years as a nurse and 23 years as a midwife
19 years

**Question 5.**
What is your highest level academic qualification?

<table>
<thead>
<tr>
<th>Highest academic qualification of survey respondents</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>First degree</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Postgraduate/Masters</td>
<td>42</td>
<td>72</td>
</tr>
<tr>
<td>Doctorate</td>
<td>12</td>
<td>21</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>58</td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

**Question 6.**

The Florence Nightingale Foundation Evaluation 2015 - Leadership Scholarship Programme

The Florence Nightingale Foundation Leadership Scholarships include core and recommended/bespoke elements. Please select the elements your scholarship included from the list below:

<table>
<thead>
<tr>
<th>Answer Options</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Co-consulting</td>
<td>98.2%</td>
<td>55</td>
</tr>
<tr>
<td>LCOR</td>
<td>98.2%</td>
<td>55</td>
</tr>
<tr>
<td>Leadership Skills Diagnostic</td>
<td>92.9%</td>
<td>52</td>
</tr>
<tr>
<td>Mentorship</td>
<td>92.9%</td>
<td>52</td>
</tr>
<tr>
<td>RADA</td>
<td>80.4%</td>
<td>45</td>
</tr>
<tr>
<td>Westminster Experience</td>
<td>80.4%</td>
<td>45</td>
</tr>
</tbody>
</table>

*answered question 56
skipped question 2*
Question 7.
Which elements of your scholarship had the most impact on you and why?

I believe that all of the above have had an impact in my development as an effective leader. However RADA in my opinion had the most impact. It appears that 50% of the way we communicate is Non verbal in nature which is the key part of influencing process in leading a successful organisation. Previously I hadn't given this much attention and this may have compromised a 100% chance of influencing successfully. RADA focused on the human factor and the importance of focusing on people as well as the service particularly when under pressure. Learning about ourselves was a real eye-opener to hear other people's perception of you. using real life scenarios and learning how to deal with difficult situations was an amazing life long learning. One of RADA's learning was to get in to the habit of not delaying difficult conversations with people in order to engage and find some common grounds.

Leadership diagnostics
The leadership skills diagnostic had the most impact on me as it allowed me time to focus on me as an individual and then receiving the feedback it enabled me to focus on the areas of my development that would create the most impact in my professional life.

The leadership skills and diagnostics - it provided time for in depth reflection and follow up action planning

The professional dialogue was incredible exhilarating

The l-cor was very inspiring and refreshed concepts I had explored before but allowed me to revisit with fresh eyes

Co-consulting - an opportunity to develop new techniques in a safe environment

rada - improved confidence impact and style

Westminster experience......I found this learning on understanding the pace and approach in the political context profoundly valuable. The experiential learning felt very very real.

LCOR - I found this a very useful programme and I have used it several times

LCOR and RADA were very important to me on a personal level as these provided very important new insights into my behaviour and presentation. I also found the Westminster experience illuminating and very helpful in my work since.

All elements were valuable in my development for different reasons. The diagnostic work provided a framework for me to consider my needs in more detail. LCOR provided the opportunity to meet with the other scholars and tapped into my interest in culture. I especially enjoyed RADA as this opportunity has impacted on my personal power and influencing style. Understanding the importance of non-verbal communication and that we leak 'signals' was very powerful.

The opportunity to be with other scholars during various elements of the programme was something that I really enjoyed. The relationships I have developed will be long lasting and provide additional 'mentorship' and support. My mentor Trish has been very responsive and offered me some new insights into my skill set. Liz has been so approachable and helpful. I have had much value from having such knowledgeable, supportive and interested people available to me.

Writing regular evaluation reports has enabled me to reflect and plan my development.

Several. At this moment in time, the external mentor that I have through the scholarship is absolutely invaluable. I have been experiencing bullying from my immediate line manager and it has come to a head this week and I am considering how to progress from here. Being able to get impartial independent advice has been practically useful and provided much need emotional support.

The Westminster for the opportunity it led to, being selected to be on NHS England National Maternity Review by Baroness Cumberlege
| RADA for practical presentation skills - will be the most memorable course because it was great fun. |
| Peer support |
| Independent projects, this scholarship has enabled me to go and look at a model of care in the Netherlands that the NHS would have been unlikely to pay for. I am hoping that my plan for a new model of maternity care may secure a Vanguard through the review. |
| The LCOR was a huge impact as it made me focus on the project in hand. RADA helped me to get my confidence back and gave me easy tools to use in the workplace when I need it. The leadership diagnostics were used during mentorship to help me to concentrate on the areas needed. |
| RADA, a revelation in how we all come across to each other and the importance of being aware of that. |
| Mentorship. A very good fit with my mentor. |
| RADA had a profound impact on how I saw myself, present myself and really increased my self-confidence |
| LCOR to create relationships and networks with other Scholars |
| RADA personal impact |
| Leadership diagnostics |
| I gained some things from each of the elements, the ones that had most impact has been the leadership skills diagnostic. I say so because I value 360 feedback, and the facilitated session that resulted in a personal development plan for the scholarship programme and beyond has been invaluable. |
| The Westminster Experience has made me look more closely at how nurses in national roles influence Ministers and the Department of Health. |
| The SEP programme at Ashridge has been very valuable - having the flexibility identify what was most suitable for my needs has been appreciated |
| RADA and Westminster Exp |
| From a theoretical perspective I found the LCOR programme to be incredibly interesting, with strong elements I have been able to bring into my professional life. In terms of what had the most practically applicable impact, the RADA course was brilliant. |
| Attending leadership course at Cranfield - this was the most challenging course ever, but has resulted in changes to the fundamentals of how I am. |
| LCOR - due to the ability to network and really think outside the box. |
| RADA and Westminster Experience - both addressed personal impact and getting your message across |
| I have experienced impact on all of the core elements, but found the Leadership Skills Diagnostic the most impactful because it provided a really good overview of my skills and experience to date, my career aspirations and set the foundation for the decisions made in using my scholarship. |
| Mentorship has been invaluable. I met with my mentor regularly and talked openly and honestly. |
| LCOR, a fabulous foundation to start the scholarship |
| RADA, uncomfortable at times but still practicing what I learned |
| All impacted and I use all every day. |
| The RADA and diagnostic very useful and LCOR was excellent foundation theoretically |
| RADA as it really focused on a new way of communicating towards being more influential and was nothing I had ever done before. |
| Westminster Experience - Gave an insight and greater understanding of the macro political |
world and encouraged me to consider this at a micro level.

RADA - Gave me a greater understanding of my personal impact and tools and tips to improve. Also gave me more confidence as a leader

I actually feel that it is the combination of the elements that are so impactful. Being planned and well thought through (with the help of the mentor and Sue) each element builds on the previous and this is what is so unique about the scholarship. it is a personalised menu of development.

leadership skills diagnostic - thorough assessment and useful advice

LCOR due to the team work and the understanding of the different strands of leadership including the history of effective leaders and leadership in industry. The transferable skills of lean methodology and how this is successfully used in the NHS.

Mentoring as it allowed me to have that one on one time and discuss my issues with someone. Wry experienced and anole to support yet challenge my thinking

Leadership Skills Diagnostic and attendance at the Ashridge Leadership Programme

Co-consulting Group

Leadership skills diagnostic - It was the right time for me to take a good hard look at myself in the context of my ambition for the last leg of my professional career.

Leadership skills diagnostic - offered new perspectives on specific work issues

Westminster experience - better understanding of political arena

RADA- practical advice and feedback on personal style and influencing

Leading organisational change with colleagues coming from Stanford. This encouraged me to further corporate leadership programme at Harvard and the learning from this was invaluable

Leadership Programme at Ashridge and subsequent coaching sessions

The experience at Ashridge allowed for in depth personal analysis regarding self, work life, home and family and allowed head space to really think about the future and what's important

I used part of my scholarship for travel and networking and these networks have been very beneficial in my current role and projects

mentor - hugely skilled individual able to be blunt with humour

co consulting - good group dynamic created by Sue Machell who makes everything fun as her hall mark

Westminster Experience, mentorship and RADA. All 3 pushed me outside of my comfort zone and have given me the confidence to take on new challenges

RADA the vest three days study I've done in thirty years.. Amazing impact

Dianoistic, mentoring which has helped me make decisions to access Cranfield.

RADA was amazing - supported me consider my leadership and communication/ behaviours to gain best impact.

Leadership skills diagnosis because of the follow up discussions and options discussed.

Mentorsip-practical experience from mentor

The Leadership skills diagnostic, mentorship and Westminster Experience because I found out things about myself in the diagnostic that I didn’t know, my mentor nurtured and guided me to develop these and I was able to use the Westminster experience to act out my newly acquired skills so my experience flowed well

Personal Transformation for Leaders Programme at Cranfield University. Provided me with great personal insight. Helped me to understand others and not to make assumptions
Leadership skills diagnostic. The range of assessments included in this made the diagnostic all encompassing - different from previous single assessments I have completed - and has enabled me to view my development in the round.

RADA. This was highly enjoyable, provided insight, skills development and gave me the opportunity to practice feedback and challenge. The programme works with the 'real me' (possibly more evident because of the diagnostic) rather than the me I think I should be.

Mentorship has given me invaluable advice and encouragement. LCOR as a model of change and outline for my project. Co-consulting as excellent peer discussions and evaluations. Leadership skills diagnostic for giving an insight re areas of development. All excellent.

Networking, travel & Mentorship. Entirely changed the way I thought about value of profession RADA for giving me insight into my strengths and areas where I could improve impact

Westminster Experience for developing understanding

Mentorship for support and encouragement

Leadership diagnostic which confirmed my MBTI and areas to work on and the LCOR. I enjoyed the Westminster Experience and this is extremely beneficial but for me it was the second opportunity and so it wasn't as beneficial as the other two events but it would have been if it had been my first experience of it.

Every aspect had a huge impact on me professionally - the order of the recommended/bespoke elements was perfect

Leadership skill diagnostic mad me self aware and able to make my own PDP

LCOR helped me define my pt care project

Diagnostic - chance to reflect with an expert

Westminster - presentation skills and enhanced knowledge

I have to say all of them equally, if I had to pick one it would be the. Mentorship with Sir Keith Pearson

RADA; developing existing skills and gaining new skills using a method that was very dynamic and exiting. Mentorship; consolidation

Co Consulting and RADA had the biggest impact. I very much enjoyed working with new people and seeing things from different perspectives. I learnt as much from my colleagues and from those leading the groups (the leaders were excellent)

My personal development through MBTI, Thomas Kilman, Belbin etc & Kings Fund personal influence and impact & networking with the FNF scholarship cohort.

LCOR as it was the main opportunity to meet with and get to know other scholars and build crucial networks. The style and rigour of the program was excellent and a great foundation for learning throughout the scholarship.
**Question 8.**
**How might we improve or change the construction of the scholarship?**

I am not sure if I can suggest any change. In my experience there was a balance between all mandatory and optional part of the program well supported and guided by mentors and assessors. The only comment is perhaps Co-consulting was a duplication of the learning from various other pregames and the objectives of the day could have been achieved by a mentor session.

It's excellent as it is.

I felt the structure was well organised. I did prefer meeting my mentor face to face and sometimes geography can have an impact on making that happen consistently. I would like to see more co-consulting groups facilitated.

The only thing perhaps would be a pre meet for scholars but otherwise I wouldn't change it.

It's fantastic.

It would be good to have more time when scholars come back together to share their leadership experiences and what was working well and not so well...but to do this more formally together with a facilitator, similar to those used on the LCOR programme.

I liked the freedom and flexibility of the scholarship.

I think the extra time our group had in comparison to previous scholarship was very helpful. I think more opportunities to meet as a group and discuss what we have learnt / are learning would be very helpful.

The desired construction of the programme is likely to vary due to individual needs. For me it was important to: Meet the other scholars and make connections at the start of the programme Have a full diagnostic assessment and coaching opportunity plan my programme I would welcome an opportunity to meet with the scholars at the end of the programme. This would also provide some sense of closure. The duration of the scholarship did not feel right to me, maybe because I was slow to start. This may be remedied by having a final event.

I did not think the LCOR was worth the money.

I would really have liked regular scholarship meetings across the year so that we could all meet and share experiences, knowledge and support.

LCOR was the least useful aspect. The content felt rather dated and at times not relevant. The two positive aspects were it brought us all together as a group, in fact the dissatisfaction aided that bonding. Secondly when we challenged the team they did listen and tried to change things. They could have been more engaged with outside the organised sessions from the beginning. Initially they were rather aloof but they shared more with us towards the end.

LCOR was not as helpful as other elements: felt less relevant.

I don't feel the LCOR course was value for money. it was too American based and not enough examples and case studies used from the UK including female leadership. The value was meeting fellow scholars.

I have valued the complete programme so I can't immediately think of an obvious way of improving the scholarship.

Some elements of the programme fortuitously brought the group together - it would be good to have more opportunity for that through the year.

Opportunity to get back together towards the back end of the scholarship for joint development - maybe writing workshop (to promote the completion of a paper??).

I think the balance of core and bespoke is good and the LCOR programme provides an excellent introduction/grounding from which to build. If I were being critical, the element which I gained the least from was probably the Westminster Experience, which gave an interesting insight into the machinations of political life, but didn't, for me, add much to my understanding of the health political debate.

The only aspect I would have liked more of was more opportunities to work as a cohort, or in regionally based cohort groups. We managed to do regional groups about three times, and these were very grounding.

Greater spacing between the activities - ie across the year.

LCOR was mandatory but was for many a repeat of things we had done previously however the benefit was bringing everyone together in a joint learning experience at the outset of the
I think a day of reflection/celebration for the whole group to come together towards the end of the scholarship would add something to the experience.

I genuinely enjoyed every aspect and wouldn't like to see any removed.

Mentor ship could be more co negotiated so both get best out of it.

Be less English centric and more flexible about when scholars engage. Most have very busy roles and it can feel a bit forced and an extra stress sometimes to fit it in.

Maybe have RADA at the beginning of the scholarship after the diagnostics to provide a greater understanding of strengths and areas for personal/professional development.

It is very intense and I feel to allow it to be ‘formally’ 18 months in duration may help

I am not sure the LCOR was the most ‘contemporary’ or useful leadership program to start the experience. Bringing the scholars together was very powerful but perhaps LCOR needs reconsidering remove LCOR as mandatory attendance.

I think you have it ‘spot on’, perhaps a list of the available leadership courses available and what they offer would be valuable.

I wonder should there be a coaching aspect as well to help draw out resources people have to use in another way.

I would also include a wrap up event at the end where people get 15 mins to present their projects / learning to each other as I don’t know what others are doing.

Re-look at the LCOR course. I personally did not gain as much from this course as I would have liked to.

More structured contact with fellow scholars. I feel LCOR was not worth the money compared to other stuff I have done. Westminster experience was excellent.

Would be worth reviewing the relevance of LCOR. Whilst good to start the programme with a residential to meet other scholars, the content of the programme wasn’t helpful. It was very USA/ male /business model orientated and could be offered as an option rather than compulsory.

I am sure it is what many would say but it is about the seniority of the cohort. I personally was on a cohort with someone who had recently been a nurse in my own organisation.

I found all aspects of the scholarship relevant and the fact it can be tailor made for each individual is invaluable.

More clarity about what is involved and the different elements in lit/website – you undersell it, as it is a unique programme, the information would also make it clear it’s not an easy journey. State that it is 3 part, personal development, project, Leadership programme – and fourth, taking part in a network and alumni - this was not clear to me.

The LCOR was a curate’s egg experience - hugely articulate male academics were engaging and the programme was coherent but I’m not at all sure it had any sustainable value, although it did get me back into thinking after years of coasting.

LCOR...maybe not make this compulsory...it was expensive and for me was of limited value (except in terms of networking with group)

Don’t make LCOR mandatory.

LCOR - very expensive mandatory component should be reduced in days e.g. 2 days mandatory with optional additional modules.

No suggestions - it’s been excellent.

Scholarship excellent but organisation still expects full delivery of my JD, which makes it very stressful for me. I have to justify “time out” and then catch up.

To be honest I don’t know that it could be any better for me it was just perfect and I enjoyed it so much.

When you start the programme you feel like a ‘kid in a sweet shop’ and it is therefore hard to navigate through the endless options open to you. I think there needs to be more time dedicated to guiding scholars through the options to help them make informed choices that will truly help them in their leadership roles.
There are specific people and programmes who offer services within the scholarship - I think their role and contribution needs to be thoroughly evaluated in terms of meeting the needs of individual students and value for money.

I am not convinced of the value, and expense, of the LCOR programme. Time spent with other scholars was very useful and has led to a useful network developing, but the benefits of the course did not meet expectations.

I really think it is excellent! Very useful to have the LCOR early on so that everyone can meet and network. It would be good to have a formalised ‘check-in’ later through the year (although we have a very good email network and regularly contact each other through email or twitter). It's a fantastic balance of independence and support/guidance. As leaders it's good not to be spoon-fed and it makes us do things for ourselves.

It worked really well for me so would not have charged anything. It was very inclusive.

Personally I didn't find the leadership skills diagnostic that helpful because I had only recently completed a very similar, but more extensive, exercise at work. It would have been valuable had I not just undertaken this. I would suggest that the leadership skills diagnostic is individualised to take into account previous diagnostics and to build on these where appropriate rather than start at the same point for everyone.

The project has been challenging because of the timing. Changing roles part way through meant a change in project and this has been difficult and has forced me to compromise on the size and scope of the project. I would have preferred the scholarship to be longer with the project done in the latter part.

Less mandated elements, or more individualised. I had already had some exposure to the LCOR and Westminster Experience via the EoE aspiring directors programme.

The only struggle I had was navigating and understanding how the year looked until I attended the LCOR.

More meeting up time together as a group and follow up meetings once scholarship completed otherwise it's perfect.

The LCOR was of limited value - dated information and not enough reflection on real experiences.

Towards the end of the scholarship I would have liked to have some planned meetings with the cohort. Feel it was very well constructed.

A bit more time spent with the cohort. Some really talented people on the programme and not enough time to get to know the individuals.

I found LCOR difficult, it was a brilliant opportunity to meet the other scholars something which is really important as we have built strong links between each other now however the format, the venue and the format of LCOR could be improved.

Personally the scholarship for me was perfect.

It would be great to bookend the scholarship with another activity, LCOR at the start and another towards the end. The other elements were undertaken in part groups and I feel a coming together of the full group in some activity would add to cementing relationships and creating a strong fellowship of scholars.
Question 9.
We are interested in knowing what your expectations were when you applied to the Florence Nightingale Foundation for a Leadership Scholarship. Briefly outline your expectations here:

I applied for the scholarship to improve confidence in my ability to be recognised as a more influential leader and further progress in my career. I recognised that whilst passion and clinical expertise are vital elements of improving clinical practice and outcome but effective leadership was also about improving emotional intelligence and political awareness to understand the bigger picture. I was quite concerned that there is so much pressure on managers and leaders to cope with strain of current NHS that I felt it necessary to engage in a programme that enables learning a more structured process to become a 21st century leader that can continue to improve healthcare as well as driving efficiency.

I also felt that I needed to broaden my horizon and use other opportunities across a wider nursing and midwifery profession to develop through valuable networks and learn from leaders who I have always aspired to.

I also felt that I could influence maternity services in a positive way and could make a difference but needed new ideas and methodology to fulfill my ambitions.

Increased confidence
Increased self awareness
Increased ability to network and influence

My expectation was develop and grow as an individual and allow me to identify areas that I needed to develop to reach my career aspirations.

I wanted to combine personal development with professional development and to find the support to bring about a change in some project that would bring about a change in nursing.

An opportunity for time for me to reflect, take stock and reflect - thinking about my next career phase and how I might move forward

I wanted to use the experience to take the time for me and re assess my values and direction - to challenge myself and to explore new concepts individually and with peers

I needed an opportunity to refresh my batteries and reassessment my leadership role

To be a better leader who can influence others to deliver high standards of care and patient experience. To understand me and the impact I have on others how to exploit my strengths and adapt areas that I need to strengthen. To understand others and how to use my newly developed toolkit to ensure we deliver. Career progression

My expectations were that I would be given exposure and insights to experiences, tools, support, networks and learning in a way that was different than those provided within the context of my organisation. It is one of the only leadership events I have undertaken with people from the same profession and that was a positive experience.

In many ways I really did not know what I would be getting but the discussions I had with the foundation and with previous scholars.....it did sound really good.....and it has been.

Enhanced networking
Raise my profile
Meet role models
Shadow senior leaders
Greater self insight and awareness

I expected to meet a wide range of other people and be able to focus very much on my development as a leader. I see the Scholarship opportunities as very different form previous training courses as it provided the opportunity to really focus on personal development. I also expected a solid opportunity to focus on the patient care project and have new insights brought to this area of work.

I expected that the scholarship would provide me with an opportunity to focus on my personal and professional development in a way that is tailored to my needs.

I anticipated that this journey would help me recognise the skills and abilities that I already have as well as enhancing the areas for development. This would help me refine my career focus I hoped that the programme would provide me with a source of energy and motivation. This would be from the foundation itself, the elements of the programme and fellow scholars.
I understood that there would be opportunities open to me that I would never have availed of if I wasn't a scholar.
I expected to be 'transformed' personally and as a result to be a more effective leader professionally

My director of nursing was a scholar in 2014 and so I had some idea of what opportunities were available, but because a lot of it is bespoke it is not until you do your own that you truly feel the benefit.

**Personal Development** - increase my leadership knowledge and experience
Service change - Research and develop a service change that will impact my area of work
Mentorship - support from expert to support my growth, development and expertise

To gain insight into myself, in particular within the context of my leadership role but also generally.
To use the insight to change where it became apparent this would be helpful.
For both these expectations to then facilitate my career progression within Higher Education Healthcare leadership and delivery.

Liz visited my trust and spoke at our internal conference about the scholarship and I was encouraged by my Director of nursing to apply. My expectations were to have a structured programme of leadership development with opportunities to go abroad for a visit to another health care system and to participate in a leadership programme.

My expectations were

1. A bespoke programme for personal development
2. Skills and training to support in current senior role and equipping for future roles
3. Opportunity to move outside own organisation to challenge thinking
4. Networking and sharing good practice
5. Focusing on a project of interest and making a difference

1. To turn my 360 into an achievable personal development plan for which I would take responsibility to complete.
2. To gain from having a mentor and coach
3. To learn and develop with and from fellow scholars
4. To unlock doors to leaders, organisations and ways of working that would help me progress my future aspirations and achieve my scholarship objectives
5. To complete the leadership project I signed up to at the beginning of the scholarship
6. To utilise the scholarship as a launchpad for continuous learning and development beyond the programme
7. Ultimately to improve patient care through developing as a nurse leader.

I wasn't entirely sure what to expect. I knew we would have a leadership diagnostic, a mentor allocated, and the opportunity to undertake some bespoke programmes

**Mentorship in Leadership development**
Focus on my future pathway
Build leadership expertise

I had had a number of conversations with previous scholars prior to applying for the scholarship, all of who spoke very highly of the experience and opportunity it brought. As such I came into it with high expectations in terms of the opportunities for personal and professional development, but also for the ability to establish a network with co-scholars which would extend well beyond the end of the programme.
I saw it as a unique opportunity to gain experience which would make a material difference to my leadership style and personal development and to become a more effective leader within the NHS.

**Development of my leadership style and tools, including the opportunity to take some risks in safe environments.**
Developing political awareness, and ability to operate in a Board environment.
Having time to work on a project that would have a direct, positive impact on service users and staff.
Help me to make decisions about my career.
Develop networks to improve my effectiveness as a leader.

To be able to review my emotional intelligence and personal impact on my role and on others.
To broaden my understanding of the way in which the role I currently do fits into others and How to make the greatest change whilst ensuring my own personal resilience. How to increase my political awareness and power of persuasion.

<table>
<thead>
<tr>
<th>To grow personally as a leader, widen my network and work on my personal impact, sphere of influence</th>
</tr>
</thead>
<tbody>
<tr>
<td>My expectations centred around: Having a personal leadership development programme that supported me to undertake a wide range of development opportunities for personal benefit, but also for the benefit of patients and the NHS. Giving focus to a patient centred project. Developing a new network of fellows through the Foundation for the duration of the scholarship and beyond. Sustained personal impact on my abilities as a leader and supporting future career goals/development.</td>
</tr>
</tbody>
</table>

I had heard a lot about the scholarships and it had been highly recommended by colleagues. I was at a point in my career where I wanted to progress to a board position, broaden my horizons and challenge myself in order to be the best I can be in order to advocate properly for patients and staff. I expected to learn theory and practice, meet a varied group of people and to come away feeling confident and enriched.

| Wanted to widen my understanding of the best nursing leadership worldwide and have space to study in my busy working life. Wanted overseas leaning experience Wanted to widen my uk and European network |

<table>
<thead>
<tr>
<th>High hopes for being very focused on political astuteness.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide an opportunity to learn from other leaders nationally Gain a greater understanding of personal /professional strengths and areas for development To tailor a development programme to address areas of development To lead an improvement project which will impact positively on patient outcomes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1. Personal leadership development including the opportunity to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>* Specifically looking at my communication styles and abilities to develop effectiveness in one to one, group and ‘external’ situations. * Developing my political acumen including ‘reading’ situations and people, and improving my presentation of self, communicating my ideas more ‘intelligently’ and ‘politically’ * build further resilience in order to deal more easily with both the making and outcomes of difficult decisions especially when required to compromise on deeply held positions.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Career development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Whilst improving leadership skill contributes to my ability to develop my career further I would also value the opportunity to:</td>
</tr>
<tr>
<td>* Meet and shadow influential leaders across the Health and Social care agenda * Develop further networks and strategic alliances into key stakeholder organisations/ groups such as the LETB and Council of Deans</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Professional</th>
</tr>
</thead>
<tbody>
<tr>
<td>* I would like to explore the opportunity of examining more closely Community Campus partnership models as used in the US and those developing in the UK * Develop further my understanding and involvement in the work of Integration pioneers by understanding both the national and local (Leeds) agenda</td>
</tr>
</tbody>
</table>

| opportunity to have bespoke leadership development based on assessment opportunity to travel opportunity to be part of the Florence scholars group and networking |

I did not have many expectations other than I knew that you offered bespoke leadership support for nurses. The Florence Nightingale ‘brand’ has a marvelous reputation and anyone that you talk to is aware of the bursaries that you offer. The annual conference is also well known in the nursing arena and that the Scholars play a part in that. I was of course ‘blown away’ by the extremely generous bursary that the Foundation offers and I would not have had the chance to have this invested in me for me in any other way. I am truly grateful for this opportunity and have never taken this opportunity for granted.
I expected to have challenge and that I've received. I was hoping to discover who I am and why I am and between the assessments and the modules I have done this has occurred. What it has meant is I am now both more confident and effective in my leadership. I am consulted more and find myself more integral to the organisational leadership.

Look at my personal skills and identify my strengths and weaknesses. Look at myself as a leader and what the next steps in my career pathway could be. Develop and gain new leadership skills. Network and meet other leaders. Have the opportunity to shadow and be mentored by more senior leaders.

I wanted to refresh my career plans, learn new skills and create new networks. My project was to explore and publish in an area of interest that would not have been possible without the scholarship and I am just about to be published for the second time. I achieved all of them :)

To develop networks across the NHS and beyond, particularly with senior nurses. To have the opportunity for personal feedback on style and skills and look to develop and strengthen these. Have the capacity to look at leadership from a more strategic level and beyond the NHS.

To be exposed to leadership development and management to enable me to bring new ideas back to my role and for the benefit of patients and nurses/nursing.

I wanted to be challenged to develop to the next level. Improve networks and contacts. Improve on political and emotional intelligence. Equip me with skills to take on a more senior role.

The opportunity to pursue a highly individual leadership programme, while being part of a stimulating and vibrant network of other fellows. The chance to expose and explore what I could still achieve as a MH nurse leader. An intellectually challenging programme with able peers. Faith in the CEO who is an accomplished leader and who is passionate about promoting what a scholarship can achieve - if you let it, her confidence in my ability meant a lot in advance of applying. Transition route to a next career phase using the taught component of the leadership programme, in my case coaching expertise.

To act as a catalyst in my development as a leader and to offer a means of authenticating my skills and abilities (to me, my employing organisation, external stakeholders and potential employers).

It is a badge of honour, a great opportunity to have. I had expected it to be a bit tedious to be honest but I have loved it. It's been extremely rewarding and something I've enjoyed and benefitted hugely.


I knew that it was high profile and would give me an opportunity to use the scholarship to address my area of passion. I had heard about the scholarship from other scholars and senior leaders. My expectations was that it would enable me to contact senior people and organise shadowing opportunities and access to people and services that would support my area of interest but also to people who might support my future job prospects and consideration.

I wanted to gain practical experience and more confidence. I wanted to improve my network and work alongside similar minded professionals. I wanted to use the experience to promote excellent patient care. I am ambitious and need to move on from my current role to use my new gained skills. I have previously completed academic leadership courses and the scholarship was to gain the practical side.

I wanted to learn new things about myself. I wanted to be meet new people and do things that would challenge me and take me out of my comfort Zone.
I wanted to influence practice in my own Trust at a local level and be furnished with the skills that would allow me to break through the hierarchy of management. I wanted to learn the skills that would allow me to be listened to. I wanted to see what was outside of my own trust as I felt I was going nowhere in my career and felt stifled.

I am not fully sure what my expectations were when embarking on the programme. I hoped it would provide me with an opportunity to grow and develop as a leader and would enable me to expand my network at a more strategic level. I was dealing with many pressure within my work and I hoped the programme would help me to navigate a way through the situation I was facing. I was also hoping the programme would provide me with the skills to move me up the career ladder. I can confirm that the programme helped me achieve all of the above.

I expected to:
1. Use the Scholarship to find time to think about me and my development
2. Meet a group of leaders with the same intention
3. As part of my development, step outside my usual work experience to gain views and insight about different ways of doing things.

My expectations were to have leadership opportunities and to maximise these opportunities helping me develop further as a leader and with a resulting positive impact on both patient care, outcomes and how I lead and develop others. Although being an AHP and in the minority compared to those with nursing backgrounds, I have developed some very good networks with the other scholars on my group. Initially I was concerned the scholarship would be too NHS based and too structured but the freedom to explore leadership programmes and experiences as far and wide as possible has been fantastic. My expectations also focussed around my development in a senior role in my organisation, and fulfilling my potential.

I thought (hoped) it would give me a reason to stay in nursing. I was leaving the profession & had just been offered a job in the commercial banking sector.

I wanted to develop my knowledge base, improve my impact as a leader, better understand who I am and what my skill set is. I also wanted to develop and understanding of the roles that would suit me in the future.

I didn't want to undertake a purely academic course. I was inquisitive and wanted to explore different ways of learning and developing.

I hoped to develop leadership and strategic skills relevant to my first Board role

I had a number of expectations:
I was aware of the opportunity to understand self more through all of the diagnostics with Sue M, I also had an expectation that from this I would be advised in making the right elective decision for my leadership development, I also expected to meet with a wide variety of peers and senior leaders who would be likely to be long term contacts and influencers in my career. All of my expectations were met.

To network with more senior experienced people
To gain self confidence
To understand how to be the nursing voice at board and beyond
Help me develop skills to become a chief nurse in the future
Obtain important feedback about myself

- skills development
- explore options for future career development

I was at a cross roads in my career and had returned from maternity leave (4 years) relocated with husbands job and was nearing 40. I felt I was a little lost and just couldn't break through - outwardly I was confident but deep down I was not confident at all. I'm not sure I had expectations. I always thought applying for it was for people more senior but a previous scholar suggested I apply she told me it would change me and I was sure I couldn't change and didn't want to look at myself and my 'safe' behaviour which I now know I had a pattern of. Deep down I needed direction, help to understand where I wanted to go, how I needed to get there and what skills I needed to do this. I had no expectations that I was possible to meet all of these, I was wrong!

Build on existing skills
<table>
<thead>
<tr>
<th>Objectives</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gain an insight into policy making</td>
<td></td>
</tr>
<tr>
<td>Develop more strategic thinking skills</td>
<td></td>
</tr>
<tr>
<td>Networking</td>
<td></td>
</tr>
<tr>
<td>Develop a relationship with a high profile mentor and gain some insight</td>
<td>I wanted to expand my contacts in health and improve my political awareness as NI is a very small place and I already know all the leaders here and their views on things. I wanted to learn from new people and gain new perspectives on my work. I was just ready for something new I have studied throughout my career - diploma, degree, masters and a post grad and I didn't think that I needed more of that but I knew that I needed something. The scholarship has re-energised me and opened up a whole new arena of people from many backgrounds that I am now talking to and learning from.</td>
</tr>
<tr>
<td>Networking</td>
<td></td>
</tr>
<tr>
<td>Networking</td>
<td></td>
</tr>
<tr>
<td>Do some personal reflection on my career journey and reflect through</td>
<td>Honestly I did not know what to expect, however pre scholarship I felt disgruntled and felt I had little impact to improve patient care nationally for the sick &amp; preterm infant population that I care for. As an Advanced Neonatal Nurse Practitioner (ANNP) my remit for applying was to raise the profile of advanced neonatal nursing in the UK among the nursing hierarchy and consequently re-brand ANNP.</td>
</tr>
<tr>
<td>coaching</td>
<td></td>
</tr>
<tr>
<td>International travel</td>
<td>My expectations were to be exposed to the best that can be offered in the development of my leadership style and personal development. I also expected to have access to a much wider network and opportunities than I would though my immediate networks.</td>
</tr>
<tr>
<td>Reflect on what I wanted to do in the future</td>
<td></td>
</tr>
</tbody>
</table>
Question 10.
Please indicate your agreement with the statement below: 'The Leadership Scholarship met my expectations.'

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree Moderately</th>
<th>Agree Slightly</th>
<th>Disagree Slightly</th>
<th>Disagree Moderately</th>
<th>Disagree Strongly</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>54</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>56</td>
</tr>
<tr>
<td>(96%)</td>
<td>(2%)</td>
<td>(2%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

COMMENTS:
- The program has made a massive difference in my ability to improve as a person as well as a professional. This has also had an impact on my ability to build stronger teams and develop staff in my department.

- I believe that very early on I felt supported to develop and I achieved my career aspiration of Executive Director of Nursing before I completed the scholarship.

- The scholarship surpassed my expectations - the fellowship and learning was excellence plus the organisation. The matching and allocation of a mentor was very important to me - my mentor has proved invaluable and linking with him has been inspiring. I would wholeheartedly recommend. The whole process has been so useful at this time - I was tired and floundering about my leadership and my future direction.

- The balance of the core programme and the funding for personal development is fantastic. Having access to an amazing resource such as Florence Team was incredible. I really appreciated the guidance of my mentor.

- It has been a really really positive experience and has lifted by eyes and my head up to see the world through a different lens. That has to be a good thing. The world is actually full of learning opportunities which we don't always have chance to stop and consider.

- I liked the flexibility of the scholarship and the support and advice from my mentor and Liz. The biggest issue I had was the fact that my job was so busy I found it difficult to get away to do some of the things that I had expected to be able to do.

- I have found the Scholarship the most positive experience I have been through in my 30 years as a Registered Nurse. It provided a great opportunity to meet with other people and focused discussion. It was great to learn from what other people knew and shared in the Scholarship as nurses and colleagues. It really helped me move to take a much wider perspective on challenges which has paid many dividends in my work since.

- I feel privileged to have been invested in as a scholar. My journey this year has been transformational. I believe that the full impact of the experience will be apparent in the next year as I continue to develop and refine my learning.

- Wow, this has exceeded my expectations at every turn. Although at the moment I am still in the same job, this scholarship through the exposure I have had...
(being on a national review), will set my career on a very different course. This year has been the best in my career due to the opportunities I have had.

- I was very privileged to be accepted onto the scholarship and I have grown, learnt and developed significantly over the year and continue to do so.

- It has and continues to exceed my expectations. For me in particular it has been good to spread the scholarship as I learn by reflection. So Liz has been accommodating to the stretch into year 2 which I appreciate, though the negotiation has been tough. I genuinely believe that will enhance the gains from the scholarship both for me and those I engage with in my organisation and in the wider sector. It has been good to work with both my mentor and coach to manage this negotiation process, and learn from it. I fully understand why the drive is there and in fact it is another piece of learning. I suppose I am saying there are things I have learned that I didn't expect to, which have been just as beneficial, including into my life outside work. That's good!

- The scholarship has actually exceeded my expectations as I would not have foreseen so many opportunities such as RADA

- It has exceeded my expectations. The range of opportunities offered has been excellent, and have all had relevance to my role. I am much more energised about my contribution at work, as a result

- Over and above

- I think the opportunities offered within the programme were exceptional and the experience I gained was invaluable. I do feel, however, that my circumstances transpired against me in terms of my ability to gain the maximum benefit from the scholarship. Looking back, the move to another role at a significantly challenged Trust set up conflicting demands which meant that the latter part of my scholarship opportunity were not as positive as they could have been. My advice to future scholars, for what it's worth, would be to consider extremely carefully the potential changes they might face which would conflict with the benefits the scholarship brings.

- All my objectives were met, and although I might regret the career choice I made, the course was the sustaining influence through this.

- I have developed my thinking and creativity beyond that which I expected. My Emotional resilience ahs been tested and so far stood the test of time. I believe the network of people on my course has supported me to achieve this.

- I had colleagues who had been on an earlier program and had shared the benefits of the experience so I feel I knew what a I could expect and the experience did match the expectation

- I feel very privileged to have become a member of the FNF scholar learning community and having received the investment of time from my organisation combined with the scholarship funding to undertake my development programme. I have found my mentor Chris Butler a very valuable part of the programme, and really appreciate the careful and skillful choice for me. A big part of my scholarship is the programme I am currently undertaking is the NTL Organisation Development Certificate Programme. This was discussed with me as an option as part of my Leadership Skills Diagnostic, which I decided to attend following exploration of its content and suitability. I would have never had this development identified for me through other means, not obtained the funding. I
am half way through the programme and it has already had significant impact on my way of being as an NHS leader and current and short term future career aspirations, as well as longer term ones.

- Until you have been through a FNF scholarship you can't truly understand the impact it has, personally and professionally. It is undoubtedly the most useful and productive thing I've ever done. it absolutely helped me to develop into a board member and to cope with being new to that role.

- It by far exceeded my expectations. The Scholarship challenged and stretched me as an individual. It provided me with a unique opportunity to address my development needs in multiple ways.

- Time constraints are difficult and it has been very important to prioritise

- many additional benefits not understood at the time, support from other scholars, credibility of the scholarship, opened many doors, support from the Florence central team and Liz Robb personally

- I was overwhelmed regarding the support and investment in me for me. I enjoyed very much being part of a team of inspirational nurses who offered so much support and advise when it was required. I felt humbled by the fact that I was able to secure the expertise of a Floer to support a service review, this was made easy as she was an inspirational leader and nurse who was on the same cohort as myself.

- While I had expectations I wasn't sure how they would occur. The scholarship helped me find the right path to personal transformation.

- Undertaking this leadership scholarship has completely changed my life and way of thinking. It has given me the opportunity and time to reflect and really think about what I want and where I am going. I have ended up taking a completely different path and have probably not met all my original objectives but I have grown personally and had the opportunity to really reflect and develop my personal skills.

- Being a FNF Scholar is more than just the scholarship itself its like joining a professional family and community. The alumni is trying to keep this sense going although I know how hard it is to network nurses in any virtual sense.

- I've particularly valued the support from the FNF team, in particular Liz Robb, my mentor Peter Siddall and Sue Machell who have been great at offering opportunities, constructive challenge and support to help maximise the opportunity.

- You get out of the scholarship what you put into it and you absolutely need to commit time out of an already busy job to achieve this

- Career and life changing!!

- I am confident about my development and therefore portray this to others.

- I had under estimated the personal impact it has had

- I have recommended applying for the next scholarship to approx 20 colleagues across the Kent, Surrey and Sussex nursing leadership.
It has exceeded my expectations.

Excellent programmes and all relevant. each had specifics for individual scholars to review and reflect upon.

It was a wonderful life changing experience. The Scholarship gave me everything I wanted and my mentor nurtured me towards taking the steps to grow in my life and my career. I was also able to see past the NHS as an employer and envisage how I could use my skills to help patients and carers outside of the system and also what my life would look like pot NHS

I can confirm that the programme helped me achieve all that I hoped it would and I thoroughly enjoyed most of my experience. I am a strong advocate for the programme and constantly encourage individuals to apply. But in terms of the total package there were areas that I felt could have been improved, for example I felt the coaching was quite limited. The initial assessment was helpful but the rest of the process wasn't. However, the support I received from Liz (CEO) and my Mentor was first class. I would even go as far as to say they were both truly inspirational. The Creative Leadership programme was a complete and utter waste of my precious scholarship funds. Everything else was 'spot on'.

So far, the Scholarship has met my expectations, although finding the time to focus - on myself as well as my patient improvement initiative - has been a challenge. I am lucky in that I work in a team with a current and 3 past scholars - so I have encouragement to do this, otherwise, arrangements may have slipped. The Scholarship offers an amazing opportunity to develop but in getting it, this is not just offered on a plate.

It has far exceeded my expectations and has truly given me the most valuable experiences of my career to date.

Exceeded

The leadership has more than met my expectations. I have pushed and challenged myself to go out of my comfort zone. As a result I have met people I would never have met before who have given me ideas, furthered my inquisitiveness and my creativity. As an introvert, networking is not my preference - however I can truly see the value now. The taught parts of the scholarship have added to my 'toolkit' and I have met many people from non health backgrounds who have made me think in an entirely different way. I had not really considered the impact of peer support which has been invaluable for sharing ideas and challenging preconceptions. I have no idea how my mentor was chosen but she has been ideal for me. The perfect balance of support and challenge.

As it is a bespoke programme (with mandated elements) it allows you to identify your needs and relevant opportunities

The scholarship exceeded my expectations

The scholarship was truly a vehicle that aided my development and networks. I gained promotion to Deputy Chief Nurse during this time and I believe the scholarship experience assisted me with this directly

An invaluable opportunity to take stock and reflect
· It was life-changing, I had to explore my whole being, who I was from childhood through to current day. It was challenging and often painful but necessary because I was stopping myself from moving forward. I needed someone to believe in me and getting the scholarship in the first instance was the first step in feeling that someone (Liz and FNF) believed in me. I am a different person in many ways, most people who know me perhaps don't see the full transformation but what they do see now is someone who is moving forward, making a difference to nursing and is someone with purpose, confidence and is hopeful still true to the self.

· All of my expectations were met.

· My expectations were surpassed I have found the contacts I have made to be invaluable in my day to day work

· Without the FNF scholarship I would not have achieved so much in such a short time. It enabled me to have self-confidence, self-belief to network nationally. It also facilitated me to move within my own organisation and take on a Clinical Director role which is usually undertaken by consultant doctors.

· It was a real privilege to have been a Leadership Scholar and I really do hope that I can invest my learning in making nursing and Healthcare in the UK better.

**Question 11.**
Please indicate your agreement with the statement below: 'The Leadership Scholarship has had a positive impact on my career.'

<table>
<thead>
<tr>
<th>Agree Strongly</th>
<th>Agree Moderately</th>
<th>Agree Slightly</th>
<th>Disagree Slightly</th>
<th>Disagree Moderately</th>
<th>Disagree Strongly</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>38 (68%)</td>
<td>14 (25%)</td>
<td>3 (5%)</td>
<td>1 (2%)</td>
<td>0</td>
<td>0</td>
<td>38</td>
</tr>
</tbody>
</table>

**Question 12.**
Please outline below the changes in your career you think can be attributed to the Leadership Scholarship and why:

· Whilst I have not been able to secure a promotion, I feel more positive about what future holds and more optimistic about the direction I would like to take. The scholarship has given every opportunity to grow and it is entirely down to my personal courage to seek career development.

· My successful promotion to a chair was directly influenced by the scholarship

· I was successful in applying for a Executive Director of Nursing position.

· I feel revitalised and seem to be back on track to continue in my leadership role plus I have a desire to support others

· I am now a DCN and have greater confidence and a toolkit that I can pull on. The network of my peers is invaluable

· Mainly about growing my confidence and my voice ...
I think the widening of my networks has been useful. I also had a lot of support and direction while working through a difficult experience in my organisation. The people I met through the scholarship helped me regain my confidence and believe in myself enough to make a positive career move.

I am still a Head of School of Nursing, but I am so much more effective in my work and have been able to develop the work of the School and colleagues in a more positive direction than before the Scholarship. I can also safely say that I moved on my work the area of my patient care project more in the last year than I had managed to do in the previous 4 years, through what I learnt in the Scholarship.

The scholarship has helped me identify and develop my skill set. Whilst there are no local opportunities, I am confident about what I have to offer and how I can be more effective in my current role.

Too early to say yet, but I am hopeful that I will secure a Vanguard for BWNFT.

Excellent safe management of closure of the service. Increased exposure to trust executive board.

Better relationship management, key to progression and enjoying work.

My self-confidence has grown, how I present myself to others has changed, I have increased my reflection through the use of a reflective journal which has helped me develop a deeper awareness of myself. I have taken action to address the development needs in my diagnostic, utilising mentorship.

Confidence meeting other scholars from other organisations, and seeing what other practice is out there to take back to my organisation. Creating a network of colleagues to support my professional development. Only been in post a year however now thinking about next steps in my career development.

I feel it is a bit early to answer this question as I am still undertaking the Scholarship programme. At this stage I would say the programme is equipping me better to lead at Board level, to become more politically astute and in advancing my communication skills.

Although I am working in the same organisation, the scholarship opportunities contributed to my ability to come through a major internal reorganisation with an enhanced role (and a re-negotiated job title!)

Better able to articulate my own needs more conscious of my impact (both positive and negative) on working relationships.

Far greater confidence in my abilities, much better sense of 'self'.

It gave me confidence to take the step up to Board level, but not the guts to say what I really knew - that this isn't what floats my boat.

Managing many competing priorities and getting through the year!

I was made redundant due to service closure during my scholarship and being a leadership scholar I feel had a profoundly positive effect on my ability to enter the job market and compete successfully for senior posts within health.
At this present time, I am still working on and with the benefits of my programme (because I am half way through the NTL OD Cert Programme). I currently remain in the same role, however future roles will certainly be influenced by my scholarship as a whole.

The transition from deputy to director was much smoother than that of some of my counterparts due to the knowledge, mentorship and support I received through the scholarship.

My professorship My promotion to CN/COO

Leadership and communication skills

I have gained skills, knowledge and confidence throughout the Scholarship which has enabled me to gain a promotion to Deputy Director of Nursing and Quality within my organisation.

I have had the opportunity to talk to senior leaders and this has grown both my understanding of the environment in which I work, the 'fit' of my skills to that environment but also and importantly my confidence to step into the next level.

certainty increased ++ greater depth to opportunity to influence creating relationships with other scholars past and present.

The course enabled me to secure my current role from the interim to substantive.

Between the scholarship and the project I am starting a series of blogs and publications which have allowed me to profile myself and what I am doing in a way I wouldn't have done before.

I have realised that I want to return to direct patient care. This is the reason I went into nursing and what gives me the most personal satisfaction. My Consultant Nurse role has taken me further and further away from direct patient care and this is something I have come to realise is important to me. I have also worked very hard to gain my advanced nursing practitioner skills and would like to use these again in the clinical area.

Gave me confidence to apply for another senior role.

Difficult to evaluate this'll this stage as I've had to suspend my scholarship due to health issues. I've not changed roles but have had positive feedback from my manager since starting.

From the work I developed as part of my programme I have been awarded a NW leadership academy award for innovation and I have just been shortlisted for a HSJ award for compassionate patient care.

Assertiveness, ability to negotiate more effectively. Learned how to play politics.

Opened nursing doors through alumni Shared thinking allows for speedier negotiation of other deals once one is part of the programme Recognition at work and beyond because of the high status of the programme.

it is a little early to say yet as I have not completed my scholarship year but to date I have been invited by my organisation to apply for a promotion.
- I had the confidence to go for the monitor role, moving from a regional to a national role.
- The scholarship has enabled doors to be opened and meet amazing people who generously give their time to support. It had opened my approach.
- My organisation has not been supportive and therefore my desire to move on and out might not come to fruition but I have been able to raise my profile within work because do it.
- It has made me much more aware of me and the way I interact with colleagues.
- MY Trust unfortunately did not give the praise due to such an achievement and didn’t really take on board how good this was for their PR etc and in that respect I didn’t move on in my career within the Trust. However because of my mentor and the opportunities afforded to me during the scholarship I could see more clearly the direction in which I wanted to travel in terms of my own career and the scholarship opened doors for personal development and career development outside of the Trust and for that I am forever grateful. I am now getting a chance to influence patient care without the barriers of hierarchical management and structures.
- Two aims (aspirations) I identified when I applied for the Scholarship were: 1. I became an Executive Dean 2. I gained a Chair in Child Health I achieved both. The programme helped me to develop my personal insight and my skills as a leader. This enhanced my self confidence and the way I present myself. The Scholarship was a real change agent that helped me to grow and develop as an individual and as a leader in ways that I didn’t even know I needed when I started the programme.
- I was fairly new to my Director role when I started the scholarship (1 year), and whether it is the confidence or influence ability I have achieved so far with my scholarship I have received much positive feedback regarding my strong development and leadership ability.
- At this stage of the Scholarship and in my current role, I have used the opportunity to think about what I do and how I do it rather than looking for change.
- Becoming a professor area of research and interests network
- I would not have applied and prepared for my current post in the same way. I would not have been as prepared for interview and may not have got the job. Now I am in post the positive effect that the Scholarship has had on my confidence, knowledge and understanding has made an immeasurable effect on my impact.
- I have been able to develop the strategic skills necessary to work across the health economy and take forward services that benefit patients.
- truly understanding self to enable development resilience building mentorship that was so valuable
- It has the potential to open new doors and opportunities alongside providing practical examples of how to develop your portfolio
- Too early to say as I have not finished yet.
• Promotion to Senior Lecturer; CNO Clinical Academic Research Fellowship, both were as a result of my Scholarship. Also appt to the RCNi Board as NED. It has opened so many doors.

• Understanding of national policy development assisted me to change jobs to gain a wider experience.

• I think the wider perspective the scholarship has given me has greatly enhanced my role in Northern Ireland.

• Being appointed clinical director for the neonatal service - a first in my organisation / hospital trust. Having a national profile in neonatal nursing & sitting on executive boards in the South West and Nationally.

• My approach and ability to communicate has definitely been refined and has enabled me to be more influential in my work across Wales.

**Question 13**
**How likely are you to develop your scholarship work further? (e.g. publications, presentations, further travel, further research or research modules)**

<table>
<thead>
<tr>
<th>Scholars’ plan to disseminate their work</th>
<th>Very likely</th>
<th>Quite likely</th>
<th>Not very likely</th>
<th>Not likely</th>
<th>Not sure</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>38</td>
<td>14</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>56</td>
</tr>
<tr>
<td>Percentage</td>
<td>68%</td>
<td>25%</td>
<td>4%</td>
<td>0%</td>
<td>4%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Comments.

• I would like to publish once my personal development project has completed. I also would like to share my experience as a FNF Scholar.

• UK adoption of Magnet Collaborate with other FNF chairs.

• I am still completing work on my project area of safe nurse staffing and would like to carry out further work in this area.

• Further work with WHO to look at collaboration -. Journal articles re info graphics.

• I would like to publish my leadership experience and have been looking into this. I still have a study tour left to undertake which will be to Cuba.....to learn about how they have achieved such positive health outcomes in a challenging economic backdrop. I am keen to raise the profile of nurses from Wales at the next Global Public Health nursing conference also. I have now become involved in the Wales For Africa programs and have been working with the Ugandan Health Ministry.

• I am continuing to focus on workforce in my current role I plan to publish work on my experience of the scholarship and on workforce in the next few months. I have had my first publication (although not related to my scholarship study) in the past few weeks which has boosted my confidence to publish further.

• Through the learning from the Scholarship I expect to have developed and have accepted the first regionally agreed Hospital Passport for people with learning
disabilities in Northern Ireland. This will have been endorsed by the Public Health Agency and the DHSSPS. I have published a Nursing Standard article during the Scholarship and have just agreed a further article on Best Interest Decision making with them. I have also become more focused on my leadership within the area of nursing for people with learning disabilities. The experience of the Scholarship has also given me the confidence to consider applying for new jobs and I feel I will become increasingly focused on leadership, rather than management, even when I am no longer Head of School.

- Publications 2. Vanguard for new model of care

- Publications - New Zealand model - hope to link with Lesley Page Publication - Success of closing a service - already in draft Am interested in looking at Dutch model of home midwifery care Further media training

- Probably, it will depend on how my career progresses and the outcomes of the project trip to Australia.

- Complete and publish, as well as present the scholarship project I am undertaking (by September 2016)

- Speaking at two conferences in the next few months. Preparing to undertake PhD

- At present I need to focus on my current role.

- I plan to publish the findings from my project, but am really still trying to implement the findings - mainly due to a change of job part way through the scholarship.

- I am encouraging others to take ownership for projects and have presented our success at the local patient safety conference.

- Not directly because of the area of work I have now entered however I am absolutely sure that what I gained through my scholarship influences and shapes me as a clinical leader and therefore positively impacts patients

- My patient focussed project is centred around the development of Patient Reported Experience Measures in the Trust, this work will continue beyond the life of the scholarship as part of the Trusts Clinical Strategy. This will include presentations of the work. The NTL OD Cert Programme learning and practice is being and will be incorporated into the Trust’s approach to OD, and I will be taking my practice into any new roles I have. I am also incorporating this learning into my research work.

- Have presented at conferences monthly since completion Am preparing article for nursing press

- I would be doing this as part of my time anyway - not due to scholarship

- Will publicise and present locally and nationally on my scholarship project.

- I am planning to publish a book on applied leadership edited by myself and 2 of the scholars with case studies form the FNF alumni projects I Am running a writing workshop for other scholars I plan to attend a conference next year related to my project one of the strengths of the scholarship is that the project is completely embedded in my role and so it would be impossible to answer this question in the negative!!
• my ambition to write has started and will increase both with the practical help and the confidence to do so RADA excellent in helping with presentations and influencing

• I am about to prepare for a publication for a nursing journal regarding the planning, implementation and evaluation of a roll out of my trusts new nursing documentation which I was project lead for.

• I intend to build on the work through publications and potentially working with entities who are affiliated with the work I have done. This may mean further travel opportunities which I would take in my own time / resources but would share with and associate the Foundation I would like to give back something in my skills set to the Foundation for future scholars

• Second publication in the pipeline. I did a video with NHSIQ and plan to continue with the work.

• Unfortunately I’ve not been able to progress my project at this stage due to health issues. However it did form part of an overall strategy to develop an integrated approach to multiprofessional education which is being promoted via conference presentations and journal articles are planned.

• Have rolled out the work of my quality mark across Greater Manchester and I am encouraging other cancer centres to use this

• Publications currently being written Invited speaker at numerous international conferences

• I will certainly use the course I’m undertaking, which is the Tavistock executive coaching programme to offer support and development to others, particularly aspiring leaders Possibility of a presentation through the project - if it goes well

• No specific plans yet beyond the scholarship

• Stop the pressure now absolutely going global and I’m sure this will continue. Also the economic work will continue and therefore the publications

• I expect to publish the focus of my project regarding effective nursing leadership networks. I am exploring travel options but expect to have this firmed up soon.

• I will be using this year’s work to further expand the service across both Boroughs. I intend to get published.

• I need to review my current role and at the end of the scholarship I will start to look at other work options

• I am already undertaking my advanced research modules and hope to complete my MSc in June 2017 I have been to a masterclass re: Writing for Publication and hope to publish the results of my research proposal which I am currently writing up (approx completion June 2017) I am working very closely with the Open University to further develop my academic career. My future plans include full time appointment to one of the Universities here in NI as a lecturer and completion of my PHD.
• Through publications, presentations and research. There are a number of projects I have developed which includes writing a book on leadership in nursing. Writing for publication on nursing insights. I have delivered numerous presentations on the future of health professions and new ways of working. The scholarship has had a direct positive impact on the way I support and manage and lead my staff.

• I still have some travel visits to complete on my scholarship which take place in December (Cleveland Clinic and Virginia Mason Institute) and to complete my project which will be written up for publication. I see leadership as a continual process so I will continue to look to develop my experience and extend my practice which may include further study, presentations etc.

• My scholarship is ongoing, with some key milestones yet to pass, and I will make decisions on this nearer its' conclusion.

• Have continued to research teach and speak on the subject.

• I have not undertaken any travel in my scholarship because I chose to focus my learning in the UK. However having seen the impact that travel has had on other scholars in the future I would like to undertake some travel to broaden my ideas.

• I have taken forward a respiratory test bed bid which is shortlisted to final stage, final submission due by end October 2015. The bid includes use of digital technologies to support patients across an integrated respiratory service. I am the supporting director for a shortlisted health foundation bid to support renal patients with telehealth. Including teenagers and young adults. I am the trust lead for the implementation of an open source electronic observation tool funded by a successful nurse tech fund bid of £750,000.

• My initial area of interest was to develop an understanding into the applicability of the US magnet hospital accreditation, during and since the scholarship I have published my interest in this, undertaken work with my local high education provider and plan to visit the states this year with a fellow scholar, Florence Nightingale chair and colleagues to the international magnet conference.

• During the scholarship I identified that I needed to develop a stronger research programme so needed to secure a research scholarship but also wanted to develop clinical element also. During the scholarship I applied for a clinical academic research fellowship (the fact I had a FNF leadership scholarship strengthened my application, the interview panel were impressed by my PPD) it also game me confidence at the interview. In the future I wish to secure a Chair, preferably a FNF Clinical Academic Chair. It is also a wish for me to apply for a Harkness Fellowship. Currently I am continuing to develop the political leadership element of my work nationally. Not only in terms of my profession but also my area of alcohol research. I will travel to USA next Spring to develop international alcohol research collaborations. Likewise I am developing my national profile here in the UK, I have recently been asked by the Deputy Director of PHE to advise her in her role as part of a newly formed Alcohol Group set up in England. I will represent her at the meeting in October, this has been approved by the Alcohol Lead at PHE. Currently I have managed to secure a PHIND-MRC research grant as PI of £150k to start work on early phase alcohol intervention work for male remand prisoners as part of my fellowship, this involves a two site study (England and Scotland) with PHE and Scottish Government aware and supportive of the work, they provided letters of support for the initial bid and identified that this work will provide essential evidence for future policy development in this area. I will publish from this and continue to present. I am delivering a keynote speech at forthcoming FNF conference in Scotland. I have recently had meetings with the
Scottish CNO and also the CSO raising awareness with both regarding the lack of nurse representation on the CSO research funding committees (there is currently no nurse). These meetings took place whilst there was a suspension of research funding in Scotland via the CSO and as a direct result of my raising this issue with the CNO she investigated this and raised this at a recent senior meeting at Government - the review process is now looking at this issue.

- I have presented my project to two other NHS organisations and also to a hospital in China. I have published an article in the BJN in relation to my project. I nominated my project and my organisation for a national compassion award and was awarded finalist in the organisations category. I am now developing my work further following completion of my scholarship.

- Possible publications Further research.

- I have a real interest in travel and it's an area I enjoy. I am planning to write some more articles but time is a factor.

- I am in the early stages of developing a Patient Experience Framework for NI.

- Through my scholarship I have been invited on the National Neonatal Nurses Executive Board and am involved in developing and commissioning neonatal care including holistic/support for parents of babies who require neonatal intensive care. I have been presenting at national conferences and have enabled neonatal nurses to present at an established (21 years) international medical conference this year which was so well received that the conference organisers plan to have a nursing form each year. The FNF scholarship has rewarded me with tools that I am able to support the nursing team and develop them to aspire to develop themselves too - the unit where I work has benefited from the scholarship too.

- My improvement project has developed further due to the lack of an evidence base within District Nursing Workload and Workforce Tools. This had lead to some setbacks but from these we are now looking to test some prototypes to develop the evidence base to support the final tool. I am looking at commencing a portfolio PhD to support this work and further work I am undertaking within this area.
Question 14.
We are interested in whether you have published any work relating to the Leadership Scholarship, or have plans to do so. Please tick any options below that appropriately complete the following statement: 'I have published, or plan to publish, work relating to my Leadership Scholarship through...'

<table>
<thead>
<tr>
<th>Places Where Scholars Report Plan to Publish Their Work</th>
<th>Have Published</th>
<th>Plan to Publish</th>
<th>Total respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organisation’s newsletter/website</td>
<td>16</td>
<td>25</td>
<td>41</td>
</tr>
<tr>
<td></td>
<td>39%</td>
<td>61%</td>
<td></td>
</tr>
<tr>
<td>Professional journal</td>
<td>5</td>
<td>33</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>14%</td>
<td>89%</td>
<td></td>
</tr>
<tr>
<td>Academic Journal</td>
<td>1</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>8%</td>
<td>92%</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>7</td>
<td>10</td>
<td>17</td>
</tr>
<tr>
<td></td>
<td>41%</td>
<td>59%</td>
<td></td>
</tr>
</tbody>
</table>

Comments.

- RCN did an interview and published in Nursing Standard
- I plan to publish the outcome of the project
- I will publish yet to confirm where
- Leadership Nursing journal
- I am currently working on a piece for publication
- I have published an article and have plans for a second one. I will not publishing the development of a Hospital passport until the project is completed. Barr O (2015) Why its good to talk. Nursing Standard. 29, 29, 26-27
- Possible collaboration with other scholars to publish scholarship experiences
- Either Nursing Management or a mental health journal
- Conferences presentation monthly
- I have published a blog for the Council of Deans regarding the scholarship I plan to co edit a applied leadership text I will be supporting other scholars to publish their work through a writing workshop
• attending "writing for publication course" next month had one article with my quotes in published in "practice nurse" planning webinars, twitterchat, blogs and articles discussed book or chapter with fellow scholar - early days

• I am currently working with one of the Consultants from my previous place of employment to write an article regarding the establishment of an end of treatment clinic. Due to the fact that I left this job recently, I have not finalised details of this publication or where we are planning to publish. I intend to continue this via email and will submit an article in the future for publication

• http://www.leadershipacademy.nhs.uk/blog/professional-presence-and-social-media-research/

• Award winning and published in Florence Nightingale Scholars magazine

• Published the RCN Career and nursing Competency Framework in teenage and young adult cancer nursing 2014

• NT and European wound care journal

• HSJ

• Still on scholarship and so not yet sure.

• Share my Self administration Project within and outside the organisation-Pharmacy Networks

• As part of the At a Glance publications: Nurse Leadership: At a Glance

• Have featured in Burdett case studies and FNF newsletter

• I have published on the FNF website. I have also proactively promoted the scholarship within the organisation at the nursing midwifery executive committee and also matrons and sisters committee. I have also published a blog as part of the DHVA scoping trip to Washington

• BJN


• British Journal of Nursing April 2015 Do we really know about compassion

• In draft as yet

• I PLAN TO PUBLISH MY WORK AS A GOVERNMENT POLICY

• 'The ANNP investigated' an editorial in INFANT neonatal journal VOLUM E 9 I S S U E 6 2 0 1 3 infant. PHNT CASCADE Autumn 2013 Part of working party for RCN 2014 publication 'Career, education and competence framework for neonatal nursing in the UK' BAPM working group 2014 - publication 'Optimal Arrangements for Neonatal Intensive Care Units in the UK including guidance on their Medical Staffing A Framework for Practice' June 2014
Question 15.
If you have not published, nor plan to publish any work related to your Leadership Scholarship, what support would you need to meet this requirement?

- No actual data so difficult and would be an opinion publication
- I just need time carved out of my schedule so not something Florence can help me with
- I would be interested in any support which might be available to achieve this.
- Guidance on how to write for publication or the offer of someone used to publishing to do a joint publication
- Reluctant to publish without adding something of value either around leadership or my project which is ongoing. So maybe some early examination of possible publications from the work might be useful.
- I plan to publish when I have completed scholarship
- At present don't feel I am ready to publish outside the organisation as the work I am doing has only just started
- I need support in writing for publication, as I have not done this for a number of years
- Time, time, time.
- Currently working on this and hope that my writing skills will stand up to scrutiny!
- Writing to publish is very different from writing reports, I have sought advice on style etc
- How to write an article sessions Examples of other articles
- Recently changed jobs and am working with a Consultant from my previous job to enable this article to be completed in due course
- This will depend on when I return to work in the New Year. My project is being progressed by colleagues in my absence
- Editing
- I want to submit an article for publication to a journal however to support me doing this I need: allocated time recognition within Trust that it is an important and essential part of nursing contacts within the world of writing
- A 'writing for publication' course may be of use to those of us who have not published (me included)
My role and project changed part way through the scholarship meaning I had to compromise on the scope of my project. I am not sure how relevant my project is for publication as it is organisational specific and is implementing known ideas / work and not adding to the knowledge base.

More time within my current role

Question 16.
We are also interested in whether you have presented any work relating to the Leadership Scholarship, or have plans to do so. Please tick any options below that appropriately complete the following statement: 'I have presented, or plan to present, work relating to my Research/Travel Scholarship through...'

<table>
<thead>
<tr>
<th>Places Where Scholars Plan to Present Their Work</th>
<th>Have presented</th>
<th>Plan to present</th>
<th>Total respondents&lt;sup&gt;13&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home organisation</td>
<td>27</td>
<td>15</td>
<td>42</td>
</tr>
<tr>
<td>National conference</td>
<td>11</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>Local conference</td>
<td>7</td>
<td>13</td>
<td>18</td>
</tr>
<tr>
<td>International conference</td>
<td>4</td>
<td>10</td>
<td>14</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>3</td>
<td>6</td>
</tr>
</tbody>
</table>

Comments.

- I have alluded to it on a substantial number of presentations both in the UK and China
- We presented at the Florence Nightingale Conference
- I presented at the safety forum in Manchester
- I have presented to various groups and also led a fringe event at the Florence Nightingale Foundation in March 2015
- Have presented to our Nursing leadership Professional Practice Committee and linking a documentation improvement work with the project at Imperial College eHealthcare NHS Trust. I am hoping once project is completed to present at conferences, through RCN and hopefully the Foundation.
- I am intending to present my work at the IASSID Conference in Melbourne Australia, August 2015
- I am interested in exploring opportunities to present and will discuss further

<sup>13</sup> 'Total respondents’ may exceed or fall below row totals because some Scholars have indicated that they have presented and plan to present.
- I have discussed with my senior nursing colleagues and plan to deliver seminar at our local conference when completed

- I plan to present more widely to colleagues. I have already been talking informally about the scholarship, and referencing it in the programmes of work I have been leading

- Mental Health and Learning Disability Ward Manager/Team Leader conference - 2015

- through the university of Brighton Occupational Therapy workshop on Leadership Kent Surry Sussex Patient Safety Conference

- Lecture monthly at healthcare conferences on a variety of issues each month and always describe my scholarship in my introductions Some sessions are in my findings from my sabbaticals

- We have spoken about the scholarships at council of deans and I have written blog to promote them

- through my project (FGM) having many opportunities to present and add my international travel experience into this national safeguarding conference regional FGM workshops/conferences been asked to speak at other disciplines conferences (Medical and LGA)

- I presented my leadership work to a group of Matrons at the Trust. I also fed back my experience from the Florence Nightingale conference to my senior nurse colleagues including my Chief and Deputy Chief Nurse.

- Various national conferences including PHE Nursing conference 2014

- Inaugural Australian International Conference 2015 European Cancer Congress Vienna Sept 2015

- Belgium wound care conf sept 2015 posters London commonwealth conference on STP 2016

- I am presenting at a conference in Australia in October 2015

- I would like to present to a large Pharmacy audience

- I am organising a Conference to be delivered in March 2016. The focus of conference is on changing leadership. The conference looks at new models of care delivery and how this will be managed and led. The conference is based on the work I am doing with the local city council on integrated care packages.

- I plan to present more but do not know details at present.

- About the scholarship experience or the subject of the scholarship?

- I have been invited to present at Scottish Government by the Director of Health Workforce at a Leadership Group in October 2015 Intend to present to my own organisation

- Wirral Trust and Heart of England Trust 2014/5 International Chief Nurse Conference China 2015 Kate Granger Compassion in Practice Awards Expo 2105
- I plan to carry out a series of regional workshops to collate evidence for my framework and will then collate that work and test it again through workshops before publishing.


- A Showcase Conference on Community Nursing Research 5/11/14

Question 17.
If you have not presented, nor plan to present any work related to your Leadership Scholarship, what support would you need to help you do this?

- We have recently got a new chief nurse and am in discussion about presenting to the professional nurse forum.

- To present work outside my organisation I would need support, Some of this may come from my own organisation and I would envisage that this would start locally as a first step.

- Some support to write/develop a credible paper and agree deadlines!

- Due to the fact that I have changed jobs, I will not now have the opportunity to present the original plan or project that I started working on. I have been invited to return to London to present the initial findings at the audit day. Date for this to be confirmed.

- Content and editing

- I have not yet presented because I have not completed my Scholarship
Question 18.
A fundamental part of the Leadership Scholarship is your patient care improvement project. Please outline below the focus of your project, the impact it had on patient care/quality/safety and how you have demonstrated/know this:

- on going project: improving access to personalised care that achieves better continuity for service users in line with recommendations from NHS mandate for maternity services.

- My improvement project focused on the development of clinical academic careers. In October 2015 DH are hosting a workshop and in March 2016 we plan to release a NHS implementation toolkit and a virtual implementation network.

- My project was looking at levels of nurse and midwifery staffing to provide safe and quality care. Looking at the evidence available it has allowed me to inform my Board in more detail about how staffing is carried out in other parts of the world. It has also allowed me to successfully secure a business case to purchase an electronic system to support how we measure and record safe nurse staffing figures.

- The toolkit / info graphics - will ensure school nurses can assess need more readily. Therefore ensuring increased access to early help

- I left my organisation in April - I succeeded in gaining a 2.2 m from DOH To continue work that I started

- The project was about improving the focus on Service User experience in the context of Public Health Wales. We now have much more developed systems in place within the organisation to ensure we focus appropriately on this agenda. This is evidenced by our Quality and Safety Committee and Board agenda's and minutes which have much more reference to Service User experience now than before.

- Workforce - evidence to support the introduction of mandated staffing levels. I altered my thinking as a result of my study and would not support mandated staffing ratios. There is little evidence to support the positive impact of mandated staffing ratios and it would be my assertion from I learnt through my study that registered nurses are best placed to determine safe staffing ratios based on patient need and acuity

- Leadership of the quality improvement project in Deteriorating Patient. We have successfully implemented an e-Obs and e-Handover system, which is beginning to show real patient outcome benefit. The project has really challenged my belief in setting outcome measures and how we truly realise these

- As electronic patient records become accessible to patients, carers and their families, the project looks at what this means to the nursing practice implications. What nursing practice needs to change in regards their documentation? What can we learn from others, benefits and other learning? How do we equip people in use of technology

- As I have mentioned earlier I feel I have made major strides on this area. I have been trying to lead work to improve the care of people with learning disabilities within General Hospitals for several years and have had some local success, but
often limited to standalone projects. From the knowledge and skills learnt during the Scholarship I have nominated myself to sit on a regional group, now chair a regional subgroup focusing on hospital care, as chair I have sought and obtained updates on work this area form all Chief Executives of the HSC Trusts in Northern Ireland. I have now presented and have agreed an Action Plan for work over the next two years with the Public Health Agency and this will result in the development of several regional resources and possible introduction to Acute Liaison Nurses to Northern Ireland.

- The aim of my work is to create positive workplace environments as staff wellbeing and engagement is known to correlate with patient safety and experience. My project focuses on strands of work to deliver this aim. (1) visible nursing leadership within the organisation. The role of the band 8am nurse is being reviewed across the organisation to standardise the role and job description and wearing of uniform. This has been supported by the DNS and senior nursing / management team. There is some challenge from the individuals whom this affects

- Two projects running simultaneously: Using MSW's (maternity support workers) as second birth attendants. first in the country to do so. Training through Foundation Degree. Internal evaluation to be published. External evaluation funding secured to start 2016. Homebirth service, encouraging low risk multiparous women to birth at home as outcomes are known to be significantly better. Met first year target. Internal and external evaluation being conducted. Published in BJM April 2015, happy to send article if would like to read

- My patient care improvement was to research the possibilities of a stand alone birth centre being left at the site following closure of the service. During the scholarship I was able to learn more about the different available models and wrote a business plan. Unfortunately the CCG were adamant that they did not support a birth centre and the idea did not come to fruition.

- Facilitating better partnership working between HEIs and practice partners around practice education, particularly in pre-registration Professional programmes. The impact is building as I build a visible presence for practice education within my HEI and regional area. The aim is to enhance this by expanding the work to greater and more effective partnership working generally.

- discharge before midday is my project and we have developed measurements and SOPs in the trust (is now a CQUIN)

- Project is about staff wellbeing and the impact this has on patient experience. At present set up engagement sessions with staff to talk about what staff wellbeing looks like and ideas to how it can be improved. Feedback positive from the sessions, further sessions planned to review actions and the impact of the actions

- I am currently undertaking my patient improvement project (I will be a scholar until March 16). The programme aims to facilitate frontline clinical managers to deliver impactful leadership for quality and safety.

- I plan to look at the impact of commissioning on patient safety. This work is not yet completed.

- The focus of my improvement project centres around how we develop and embed the values of organisations into the daily life of health professionals. Every
organisation has a set of values and these are often relatively meaningless to the individuals who work in that organisation. By bringing these to life and making them meaningful to the individual I believe this can make a material difference to the care of patients within the service. I am developing this in my current role and hope to demonstrate the effectiveness of the project through direct feedback from both patients and staff.

- Refocussing of the Ward Manager role to enhance clinical leadership - currently piloting three different approaches to implement findings.

- Schwarz rounds - improving staff well being - still in its infancy but sickness across the trust is for the first month below national average. Staff talking more to each other about patient care issues.

- N/A due to my service closing during the scholarship my original plan had to change and therefore my scholarship became focused on closing down my service safely and successfully and securing suitable employment that would utilise my skills to benefit of patients

- My project is related to the expansion of the Trust’s Clinical Strategy, with increased focus on patient experience outcome measures (PREMS). This includes exploring the concepts of ‘relieving suffering and promoting peace of mind’. I, in partnership with the Medical Director, have overseen the refresh of the Trusts Clinical Strategy in the light of the NHS Five Year Review. This was signed off at Trust Board in May 2015, after involvement of our senior leadership team. It has a set of objectives for 15/16, one of which is the focus for my scholarship patient care improvement project. A set of PREMS have been agreed with the Trust’s Clinical Outcomes Group, I have worked with our IT Department to develop an electronic data capture APP that can be used on computers and mobile devices such as ipads and smartphones. This has been presented to the group and we are the process of agreeing some pilot site for testing in Q3 of this year.

- Improvements in caring for patients with dementia, including finger food boxes, acute frailty unit, memory boxes, end of life care, memory clinics, drop in clinics, dementia FAIR improvements, Lead Nurse for Dementia post

- Looked at improving pt experience and reducing incidents of harm So many examples and changes they are too numerous to mention but main ones were learning how best safest organisations work in the states and we relocated their human factors training and their customer care training. We based OD strategy on my work and joined Sign up To Safety national campaign outlining projects to reduce harm based in working with Virginia mason and magnet hospitals in the USA.

- Organisational restructure and indirect benefit to or care

- My project aimed to reduce violent incidents in inpatient mental health settings. By testing out a number of interventions and measuring the impact we have seen a 50% reduction in violence on the test sites. We have also been successful in obtaining funding from the Health Foundation as part of the scaling up improvement programme and therefore have resources to roll this programme out to all inpatient wards in my organisation as well as spread this to Devon Partnership Trust. The project is being formally evaluated by service user researchers at Kings.

- My improvement project is aimed a increasing the impact of the university as an asset to our local communities in order to improve health and wellbeing. there
are four levels: 1. student facing activities so examples are increasing volunteering, increasing the number of students undertaking research and evaluation projects in 'live' situations with third sector organisations. 2. research element is about increasing the number of academic Third sector collaborations to 'co produce' evidence. the university strategic element is raising the level of community engagement that is happening across the university though inclusion in the strategic plan and operational working of the universities departments. 4. impact at Leeds city region involves how the university works strategically with its partners to facilitate community engagement as a key tenant in PH Approaches. My report will outline its impact!

- project is around eradication of FGM - mostly policy to practice
- The project was to review the skill mix of a busy outpatient department in order to offer the right care, right time with the right nursing team.
- I established an end of treatment clinic with teenagers and young adults who had completed treatment for a cancer diagnosis. Initial data has been collected and findings will be correlated and presented as a report to the team at the hospital. This clinic has now been taken over by the Clinical Nurse Specialist team since I have left this employment
- I do not work closely to patients but my work on digital professionalism and its importance in nursing has been debated and discussed widely. I have presented at 10 or more conferences and continue to do so. I have had discussions with the NMC on social media and nursing too and hopefully in doing so influenced their approach.
- This was the development of a patient centred quality Mark. The outcome has been to deliver quality patient centred effective care which is recognised and assessed by patients at chemotherapy delivery departments across Greater Manchester and Cheshire of which some of the delivery is not done by nurses employed at the cancer centre
- My plan was to support NHS providers to develop a multiprofessional approach to education that would support an integrated Patient care pathway approach. this work is being progressed whilst I am on long term sick but I am not involved with it directly until I return to work in early 2016.
- Career and competence framework will influence knowledge and competence of nurses working with TYA cancer patients. Currently undergoing an independent research evaluation in the West Midlands (12 month project)
- Its not complete so no impact It is about whistleblowers and Directors of Nursing who topple from their positions as a result of organisational failure, often through high profile quality concerns and the impact their experience has had on them, their colleagues and the profession, not least on aspiring nurse leaders.
- Developing patient information for improved access to specialized nursing care. Still in progress but I anticipate a snowball effect from this work
- Economic impact of pressure ulcers. Working on this now.
- My project is a review of nursing leadership networks the focus is on effectiveness. Part of the art in roles like mine is how to see and evidence demonstrable impact on patient care. I am a commissioner with accountability for quality and safety and system professional leader.
• My project focusses on meeting the unmet needs of people with dementia and their carers. I have created two new bespoke roles to work with patients which are quality driven and measured by quality key performance indicators.

• I undertook to implement Self administration medication on the ward. We had the tools but staff were not using the tools. I wanted to take implementation forward as change management and patient empowerment.

• My project involved the design of a proforma for the NI region working with the DOH in NI that would assess the fundamentals of Care at the bedside at ward level. It was part of the Regional Q2020 piece. I designed the proforma, carried out a lit review, presented to the region, ran workshops and carried out a pilot across the five Trust within NI. The Q2020 piece of work is currently being taken forward by the DOH.

• This changed as I moved jobs and location. I am now working with the local regional hospital to develop an educational package for their neonatal nurses. The programme has been written is currently going through the validation process.

• My project is the implementation of 7-day services for therapy services. I am currently mid-way in this and about to enter the staff consultation phase. We have currently collected baseline patient and staff opinions, reviewed models of care, evaluated service and patient needs.

• I am still developing this. My focus is on community based support and care of older people and I will be travelling to the US and Japan to see initiatives there in the coming months.

• Safe staffing was subject if project now research in this area and about to publish.

• Unexpectedly this has been the most challenging area of the scholarship. Whilst I had clear ideas at the start of the scholarship about the ideas I wanted to implement a change in role meant that I was unable to further this work. In my new role I had to decide on a project that met with the organisational requirements. As I had undertaken a number of compliance visits across the organisation I was aware that nursing documentation was in need of improvement. Existing documentation was of varying standards but predominantly ad hoc, chaotic, not used (except at the end of a shift to detail care given), not reflective of person centred care. there was little evidence of nursing assessment that then resulted in care plans agreed with the patient. I have been working with a group of nurses across the organisation to improve the documentation. This is work in progress and will include sharing good practice, developing a set of principles for nursing documentation, measuring against these principles, PDSA cycles and then further measure / monitoring. I am not yet at the stage of being able to demonstrate any impact that this work has had.

• The project was to implement the use of digital technologies to improve patient care and experience. I established a multi professional steering group. The group has supported and developed Skype clinics for head and neck cancer patients, video conferencing for renal patients, successful bids for over a million pounds from nurse tech funds one and two has led to the development of the open source eobservations product. A further successful bid for transformation funds of over £100,000 to support teenage and young adults with diabetes with an app and youth support worker. Short listed for two national programmes for digital technologies: test beds, health foundation.
Focus of the project was to develop my own political leadership skills in order that I could shape and influence aspects of patient care (particular focus on alcohol) and also in terms of our profession itself. I have been successful in ensuring political leadership development and my alcohol work has been presented at Scottish Parliament, I met with the First Minister and was also mentioned several times in a parliamentary debate on alcohol. I am currently working with the alcohol policy team at Scottish Government regarding their current review on the National Alcohol Strategy. Likewise I organised a Think Tank Event to identify research and practice priorities for Scotland, this report is about to be published and will be presented at a private meeting with the alcohol policy team. I am also planning a trip to Brussels to meet with key European Alcohol lobbyists, organisations in early 2016. Together my research work is impacting at policy level. Likewise the forthcoming prisoner work will also impact as a result of the engagement I have undertaken at a political level as well as on a clinical level. I still hope to develop further my relationship and profile as a key nurse leader with a focus on political leadership development. This would involve an advisory role at government level, this is a longer term goal.

As previously understanding of magnet accreditation - this has progressed in a number of areas in my trust - we have launched compassion awards, schwartz rounds, a draft strategy, and are looking at shared governance.

See previous answer. Compassion cards are now in use in wirral and Heart of England. Staff and patients nominate staff who can evidence kindness and caring from the heart. Compassion award ceremonies happen twice a year and are attended by hundreds of staff. Early indication is greater patient satisfaction and improved FFSt.

The focus is on enhancing leadership for nursing and creating networks to help this.

My project was focused on integrated care and I have completed work within the Western Isles and continued within my new role in East of England.

My project is the development of a Patient Experience Framework. There is currently a lot of work in this area however it is disparate and does not always inform the regional agenda. The Framework intends to provide a coherent direction on Patient Experience for the next 5 years to ensure cohesion and best value for scare resources.

Focus was to raise the profile of neonatal care / nursing and to re-brand/direct ANNPs nationally who are senior nurses and can impact on direct neonatal patient/family care. Evidence locally is from our recent CQC inspection when my NICU unit was awarded ‘outstanding’ for patient care. Nationally, I have been instrumental in working with stakeholders (BAPM / RCN/ NNA) / commissioners involved in neonatal care to standardise care, eg developing: 1. Transitional Care Wards - areas where sick newborn infants can be cared for alongside their mothers. 2 Neonatal outreach services enabling early / safe discharge home of preterm infants supported by specialist nursing teams. These changes are now evident in national CQUINs (reducing term admissions to NICUs) & in commissioning papers which now for the first time include TCW.

All Wales District Nursing Workload and Workforce Calculation Tool. The tool has not been rolled out nationally yet as the national data collection system is in its design phase. I workable tool has been developed and an evidence base to support it is being gathered. I am currently seconded to Welsh Government to support in workforce tools.
Question 19.  
We are interested in knowing whether you feel that undertaking the Leadership Scholarship has in any way affected or influenced your profession as a whole or your colleagues. We understand that these are your subjective ratings, but they are helpful to us nonetheless.

| The Leadership Scholarship has affected or influenced your profession as a whole or your colleagues |
|--------------------------------------------------|--------------------------------------------------|--------------------------------------------------|--------------------------------------------------|--------------------------------------------------|--------------------------------------------------|--------------------------------------------------|------------------|
| Here to class | Agree Strongly | Agree Slightly | Disagree Slightly | Disagree | Disagree Strongly | N/A | Total |
| Impact on profession | 36% (20) | 34% (19) | 21% (12) | 4% (2)  | 0 | 0 | 5% (3) | 56 |
| Impact on Colleagues | 48% (27) | 41% (23) | 9% (5) | 0 | 0 | 2% (1) | 56 |

Question 20.  
Briefly describe how the Leadership Scholarship has had an impact on your profession as a whole or your colleagues in your profession. If it had no effect, briefly explain why:

- There are a vast number of leaders in the NHS that are facing tough challenges and are under huge scrutiny to find solutions to improve services, maintain high standards, improve operational inefficiencies and save money. To succeed leaders need to learn how to focus on people, engage their staff as well as the service. The leadership scholarship helps the service by helping leaders develop influencing skills, seeking new solutions to challenging situations, and have more confidence in being more innovative. There are a number of managers in the NHS that have never been through a leadership program and simply are out of their depth trying to cope with today’s NHS landscape. The service benefits from this program to support NHS leaders in their personal development and to evolve in a fast-changing NHS.
- Bringing in clinical academic careers will help to strengthen the profession and improve patient care and outcome.
- The learning has supported the development of safe nursing numbers.
- I have tweeted about the scholarship and raised the profile of my own develop and opportunities for other Recognising leadership for nurses is essential and peers / others can see the benefit
- I am supporting others, building their confidence - also I have spoken to several new FN scholars and promoted the organisation

14 It appears that this response does not accurately represent the views of the two respondents. One writes, “I have been promoted whilst on scholarship and I believe that the scholarship helped by increasing my self confidence and ability to influence and lead others.” The other wrote, “Not sure I follow question 19 re whole of nursing being influenced by my undertaking the LS [Leadership Scholarship]. But the LS has influenced how peers view me as the scholarship is well regarded so it casts its own sphere of influence and expectation, which encourages success and positivity.”
The opportunities out there for nurses etc....to apply for themselves to the foundation having heard about my experiences and another colleagues who has benefited from a travel scholarship is really important to inspire nurses to reach out and stretch beyond their current perceived limitations. Feeling motivated and inspired is really important for the profession as a whole and for us as individuals.

I believe the scholarship is held in very high regard by the profession and others. Many of my colleagues were unaware of the scholarship prior to me winning it. I was able to use the scholarship funding to good effect and colleagues noticed and commented on the impact.

The identification and development of leaders in the profession through a programme balanced between strategic, political and personal needs will continue to deliver the leading nurses of the future. At home the programme has enabled others to see and access opportunities that otherwise they might not have seen.

With the project work and focus on sharing the learning, I am working with NMC, RCN and others to share and effect change in professional practice to enable improved the nurse patient relationship as nurses improve their documentation which will be accessible by patients.

In relation to the profession I have during the time of the Scholarship applied for a position on the NMC Council, although unsuccessful this time I am more hopeful when an opportunity arises again in 2017. However I have taken a much more proactive approach to engaging with NMC and seeking their engagements with Northern Ireland. Through this I have been invited to more meetings to discuss future education standards and I hope to be directly involved in revising these across the UK. In relation to colleagues the learning from the Scholarship has resulted in my encouraging in a coaching manner colleagues to put themselves forward to learning opportunities and apply for fund to promote their teaching. During the past year 3 successful applications have been made, only one successful application had been made in the previous 3 years.

The scholarship project has recognised the lack of visible nursing leadership in the organisation. This has reinforced the importance and necessity of professional nursing leadership within the healthcare setting. This is good for nursing and already exists in other parts of the UK.

I think I am a better leader, I have had had time to reflect, high level support through coaching and my mentor. new strategies to try. I have Built more resilience which has come largely through peer to peer support.

Since completing the scholarship my colleagues have seen a difference in my management and leadership. As a profession as a whole I don't think I have had an impact but hope that if I manage to publish my service innovation, this will make an impact.

I am more effective in working both externally with colleagues in my profession and other professions. I am also now better at managing local relationship with peers and senior colleagues, though this is a work in progress, facilitated by the scholarship structure allowing the bespoke design following the diagnostic and coaching sessions. I am not convinced I would have got this specific insight in a less bespoke programme or one that happened in a shorter time frame.

I have been promoted whilst on scholarship and I believe that the scholarship helped by increasing my self confidence and ability to influence and lead others.
Feel more confident in decision making and standing by my professional judgement. Realising more and more that the contribution that nurses make is pivotal to the work the NHS does. In the current climate the ideas and solutions to the challenges are coming from our clinical staff and I very much see my role in listening and representing/supporting these ideas.

Again, I feel it is a bit early to answer this question as I am currently undertaking the scholarship - however, I’m am sufficiently confident in the development I am undergoing and the experiences the programme is offering to say that my leadership around the board table and on the front line is benefitting.

The scholarship has enabled me to change and reflect on the way I lead programmes of work. It has made me more assertive in stepping forward to contribute

There may be no direct correlation, but when I look at the majority of inspirational leaders within the NHS, the majority of them have undertaken a leadership scholarship.

Through the enhancement of leadership skills in nursing as a whole, and by the impact of my enhanced leadership skills.

I am more confident as a person, proud to be a nurse and inspired by others have inspired others. I was able to bring with me 5 staff to the service in Westminster which was a real moment of absolute pride in whom we are and what we have and will achieve.

It has changed me as a professional person by developing my leadership abilities, my ability to see things in a more holistic and strategic way. the support I have gained as also enabled me to support others in a similar way

The ethos of the FNF Leadership Scholarship and the messages that this brings in terms of the value of the nursing profession and its contribution to the NHS. I believe being a personal scholar and sharing my experience and pride in this has had an impact on the wider profession I come into contact with and my colleagues.

I believe that through the FNF scholarships nursing becomes stronger, is more credible and can take nursing to the next level. I see things differently now, and those who have also undertaken a scholarship say the same, As the scholars are nation wide we are spreading the word and the skill

Added to my ability to role model nationally and internationally and many colleagues have gone on to apply including three if my own senior nurses. All my senior managers have gone on to do leadership initiatives and we have put senior nurses through the assessment I had as part of the scholarship.

It has highlighted to others need for development at all stages of career

I think the scholarship impacts on my profession and my colleagues as it raises the profile of nurses and nursing. It also provides nurses with a voice and a vehicle to gain senior leadership positions.

I was self employed at the time so it’s a bit tricky.

It helps to strengthen leadership capacity and capability in the profession. Strengthens voice and impact
• too early (I am in current cohort) to entirely say I am having influence on my profession other than via normal channels - with colleagues I come into contact with and in my team feel is having a bigger impact.

• I believe that they can see the difference in my transformational leadership style. Having studied Covey as a leadership guru I have a clearer drive for looking at the skills in the team around me and enabling them to develop and grow in what they do to support patient care and the team vision.

• I think that developing nurse leaders with the right skills is very important. I feel that undertaking this scholarship has enabled me to develop skills that could be used in the future to take nursing forward. However, for personal reasons, I have chosen to leave the leadership and management role for the time being to take another role. I have yet to fully meet my new colleagues and develop a new working relationship and therefore am not able to influence them or my new work environment at the present time.

• FNF scholars as a collective provide a cohort of role model leaders that are accessible to other professionals. The new Chair positions are also very important as their work tends to bridge practice and academia in a useful and practical way.

• The work has attracted attention within the North West and it is always a great pleasure to advise how it was funded and the impact the scholarship has had.

• Hard to evaluate full impact as I’ve not been at work. Prior to my sick leave I feel it impacted on how I supported my team, and how I conducted their appraisals and planned their personal development with them. I also feel my impact and role at meetings improved following the RaDA programme. Following the Westminster experience I contacted local MPs about nursing issues in the run up to the election and was disappointed to only receive one reply!

• Production of a national nursing framework Other colleagues have also now undertaken scholarships.

• Not sure I follow question 19 re whole of nursing being influenced by my undertaking the LS. But the LS has influenced how peers view me as the scholarship is well regarded so it casts its own sphere of influence and expectation, which encourages success and positivity.

• As a whole by demonstrating through my work with other disciplines that nursing has an important and intelligent contribution to make to the improvement of patient care.

• I’m hoping the economic analysis of pressure ulcers will mean that the new NHSI will back STP.

• I believe it has changed the way I lead and influence. Other colleagues have said they have noticed a change in me particularly in how I lead complex stakeholder engagement and my leadership approach.

• I have used my scholarship to raise the voice of nursing and under represented patients.

• My interaction with colleagues has improved. I have more confidence.

• The impact on the profession within my organisation has been slight in that it has raised the profile of the scholarships provided by the FNF but not the profession.
as a whole which is very disappointing targets and business are more important. The impact on colleagues however has been much different and I have been asked so much about my experience on a personal level and you can see the impact on younger nurses especially who really want to do something like I have done.

- As a whole: The programme changes ones understanding of nursing to a much higher level and helps develop an appreciation of the wider political context. Developing senior nurses in this way has a direct impact on the profession and the way nursing is represented. On colleagues: The scholarship changed the way I view the world and the people in it. This has had a major impact on the way I interact with my colleagues. Through me new insights I also feel that I am a much better manager and leader.

- My colleagues tell me I have expanded my influence and that I now reflect more. Through my opportunities I have encouraged my colleagues to explore leadership experiences and we have done a few schemes together which has had a wider impact on our Directorate, Trust, staff and patients. It has stimulated a lot of people to consider leadership programmes.

- People from other professional groups that I have met since being awarded a Scholarship are genuinely interested in what I'm doing and are impressed that the opportunity is open to nurses to explore patient improvement initiatives. This reflects well on the profession as a whole. Through informal feedback on what have been doing, colleagues are interested in what I’ve been doing and learning and may have plans to apply themselves as well as take my experiences into their work.

- I feel that undertaking the scholarship has had an impact on my profession as a whole. My increased confidence an impact has improved the contribution I make in National, Pan London and cross organisational meetings. As I am often the only nurse at these meetings, or one of a very few in a multidisciplinary group, to have greater impact increases the voice of nursing. I think that the same can be said in relation to my colleagues. However additionally in my new role I am 'a bridge' between the clinical areas and head office. My increased knowledge on organisational development, self awareness and the ideas that I have developed through peer support and networking have increased the impact that I have.

- I work closely with members of MDT, including consultant colleagues, as well as across health economy in taking forward digital solutions to improve patient care.

- This relates to my answer in q18 really. The Leadership Scholarship is now developing a critical mass across the UK which is palpable I feel. The experiences I have shared with colleagues has opened their minds to what is possible and I am currently mentoring a nurse who has recently applied for a FNF travel Scholarship. I have also met with the Cabinet Secretary for Health in Scotland to discuss with her the FNF, I hope to meet with her again.

- I have shared so many elements of learning, but a key area has been to duplicate the diagnostics with Sue M to all of my senior nursing and midwifery team.

- Self confidence and greater in depth nursing knowledge along with coaching and mentoring nursing colleagues.

- Too early to say as still doing it.
I was disappointed during my time within Scotland the general view was a lack of understanding or benefit from the FNI.

I think the very fact that a member of the profession can be awarded such and opportunity is hugely encouraging for the individual themselves but also for the wider profession as the opportunity to apply is open to everyone.

I am now in a position to advise nationally on policy and lead on taking forward professional issues such as cross boundary delegation by nursing.

Through the FNF I developed my leadership skills culminating in undertaking a clinical director role, historically the remit of a consultant doctor. This recognition of my leadership skills by my hospital trust organisation has had a beneficial effect on other nurses in the team who now feel ambitious to develop and feel more professional than previously. I am a huge advocate for nursing and try to inspire junior colleagues.

**Question 21.**
**What support did you get from the Foundation during your scholarship?**

<table>
<thead>
<tr>
<th>Support received by Scholars From the Foundation</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal development advice/coaching</td>
<td>52</td>
<td>34</td>
</tr>
<tr>
<td>Scholarship planning advice from Foundation staff, such as contacts, locations.</td>
<td>37</td>
<td>24</td>
</tr>
<tr>
<td>Advice on career development</td>
<td>32</td>
<td>21</td>
</tr>
<tr>
<td>Support with writing</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Access to developmental opportunities such as representing the Foundation at events, meetings, etc.</td>
<td>26</td>
<td>17</td>
</tr>
<tr>
<td>Other</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>152</td>
<td>100</td>
</tr>
</tbody>
</table>

15 Total exceeds 58 Scholars because many Scholars had more than one type of support.
Question 22.
With respect to the support you received from the Foundation for the scholarship, what had the most impact on you and your development?

- The most impact was developing networks, mentor ship, shadowing influential leaders as well as personal leadership programs abroad to learn new skills and share different business experiences.

- All of it - career advice, shadowing and coaching

- The personal development and access to the advice.

- The personal development. - I often down get time or support from my manager so this provided an opportunity I wouldn’t have had and I was given time for me rather than thinking of the bigger picture

- NTL OD Course

- I think it was really beneficial to have the assessment using the psychometric tools and more general advice. I thought the co consulting tool was really worth while and have used this a lot since. Initially I got a fair bit from my coaching sessions.....but they did tail off a bit.....they were always by Skype and in hindsight I wish we had made more effort to meet face to face.

- Personal development advice and coaching and advice on career development

- I had minimal contact with the Foundation directly but the team were really helpful whenever I needed them. I didn’t really know I could approach them for the above.

- The ability to choose which modules to do as part of my scholarship. The effect of this is renewed confidence to work in a fast moving environment and large organisation.

- Personal development and coaching

- Having personal support and advice has been superb. This includes networking, contacts and of course funding to undertake bespoke programmes. I cannot express how much this has meant to me

- All of the above

- Personal development advice and coaching

- The bespoke nature of the programmes. Unique in my experience and invaluable.

- Advice form Liz

- The financial support and the permission to use this for bespoke learning has been amazing. Fellow scholar support has also been really good and the fact that the level of staff on the scholarship programme have influence and experience has for me been exceptional

- In equal measures, access to development opportunities and guidance on career development
• The coaching and mentoring has been very helpful in enabling me to reflect on the potential for my future career, and look at how I make the most of the opportunities within my organisation.

• Probably the direct contact with Liz Robb in terms of sound advice and support.

• Advice on career development.

• The personal advice and coaching

• Personal support and guidance at a particularly challenging time enabled me to maintain perspective and therefore support staff better which in turn ensured that patient care was not adversely affected

• As previously mentioned, the leadership assessment and plan out of that with Sue Mitchell, and my one-to one conversations with Liz Robb. My mentor relationship with Chris Butler has also been invaluable re networking/career development.

• Personal development/coaching and the experts we met from across the world

• Access to opportunities and learning events

• Coaching

• Advice on career development Personal development

• Network has been amazing. Mentor helped me change the way I think about the work and its purpose.

• personal development and advice

• unsure at this point

• Opportunity to meet with Liz Robb. She has a wealth of advice and contacts which she is willing to share.

• It has given me the confidence and self belief around my leadership skills and ability. I have a better, more efficient 'tool kit' to manage and cope with a very dynamic changing health service, where cuts and efficiencies are constantly required. It is currently a stressful and challenging environment with decisions needing to me made that do not affect patient experience.

• Personal development with a coach

• The personal and career advice/coaching was facilitated in 4 sessions with David Naylor and ex-Kings Fund fellow and was really excellent. I went with a question to be answered and this was achieved. Would commend using scholarship money to pay for personal coaching.

• diagnostic work and coaching from Sue Machell. mentor support from Peter Siddall

• One to one coaching
the mentorship and the support from Sue Machell, along with responses to leadership submissions from Liz.

Although it is not complete yet, I anticipate that the mentorship that I receive will open the most doors for future opportunities.

Bryan my mentor was challenging and inspiring. He pushed me to go further and I did. Liz was a great nag bag.. In a nice way! She wanted to know we had done each quarter and the discipline this gave us meant I was able to regularly reflect how much I had done and also to chase up contacts where necessary.

All has been a super experience.

The coaching has been fabulous and come just at a time where I needed it most. Advice on tactics and ways to self reflect and learn has also been marvelous.

Personal development

I just loved my coaching and my support from my mentor. She was so experienced, we had a good relationship, she was honest, open and transparent with me always and I could go to her with any queries and it was never any bother for her to help me. This allowed me to grow in confidence, see things more clearly, be my own person with my own views and I was taught how to articulate those views. I was a totally different person at the end of the scholarship and I have had that commented to me many times since. I still have that contact with my mentor if I need it.

My Mentor

All of Liz (CEO), Sue (leadership evaluation) and my mentor (Caroline) have provided excellent support, advice and guidance. Their experience of leadership programmes, or contacts, or places to visit has been fantastic. I feel I would definitely not have had the opportunities or met the people I have without the Foundation.

I have managed to find the resources I need thus far but know I can contact the Foundation if I need to.

Scholarship planning advice was invaluable. I was given contacts for people who had previously undertaken courses so that I could get first hand experience. This altered my choice of course. Advice about the direction to take made me consider courses that I would not have thought about before and made me avoid bad use of my scholarship money.

Support with the scholarship and identifying opportunities. The networking opportunities.

Again every element impacted in a unique and significant way. The opportunities given and contacts and networks that the FNF has probably has had the most impact, it opens many doors.

Advice and coaching from Liz Robb and Liz Fradd Advice and coaching from Sue M around all areas but key was advising on Ashridge programme Networking opportunities and contacts

Leadership diagnostic LCOR RADA
• Personal support and opportunities that I would not have known about

• Mentorship and coaching

• My session with Sue Machell was invaluable - the best few hours I have ever spent on me as a person and as a professional. She was very insightful and pointed in in a very clear direction for my development

• The leadership diagnostics and the mentorship

• The most impact personally was being invited to Westminster Abbey and included in the 2014 commemoration service for Florence Nightingale. Development - being offered the scholarship in the first instance was inspirational for me as my work involves undertaking what was historically a medical role and as an ANNP I was often not seen by junior nurses as part of their team, however being awarded the scholarship clarified that I was a nurse (if you know what I mean) and I embraced every aspect of the scholarship to develop as a leader.

Question 23.
Is there any other support you would have liked? If so, please give details:

• I would have liked to benefit more from engaging with my fellow scholars but it was not possible due to work pressures and vocations.

• No

• I can't say there was.

• No

• More business training - budget and finance

• I would have liked an opportunity to explore career development more towards the end of the programme.

• None that I can think of

• None, the programme was amazing. If there is anything I can support the Foundation with, I am happy to do so.

• I would have liked coaching with a peer, but timings didn’t allow for this

• no

• There are opportunities I haven't taken and this is more about me than anyone else. I have not been used to having such opportunities available and have found it hard to ask for help

• No. I am confident that whatever anybody asked for the network of the foundation would be able to support.

• None

• A bit more flexibility around the main programme (LCOR)
• support has been good
• not that I can think of at present
• No
• I would have liked more structured support on planning my scholarship activities.
  • maybe a more local mentor
• More support for cohort working. The co-counselling day gave us the techniques, but implementation was hard.
• career development
• None
• No, the support I have had has been fantastic.
• regarding article writing only
  • No
• No
• No
• not that I can think of
• can’t think of anything
• more formal coaching career review
• No
• I am well supported.
• No
• No I had sufficient support
• No
• No
• no
• No...the scholarship is flexible and enables us to seek relevant support
• Another six months,. Hard to do in a year when I have a very busy full time job
• No
• No
• I would like support on career development
• Personally I didn’t need any other support the supportive framework put in by Liz and her team for me was exceptional. I couldn’t have asked for more.

• I would have like more navigation rather than support

• None that I can think of.

• I have felt fully supported

• No

• None, I had so much support particularly from my mentor.

• no

• No very happy with support I had

• None

• As, described earlier, more time with the other scholars.

• I think a second co consulting would be good - there is great learning from the wider group and I am very much looking forward to facilitating a study visit for them here in NI

• Career Management, CV, application, job hunting and due diligence processes, interview preparation and performance, going through selection processes. Some of these have been sourced externally to the scholarship but it would have been excellent as a structured activity encompassing all of this to help coach you in your success.

• No
Question 24.  
How might we improve the Florence Nightingale Foundation Leadership Scholarship Programme?

- The programme in my opinion was excellent. My only suggestion is to encourage more opportunities for scholars to spend time together as part of shared learning.

- It’s excellent none

- I think the nature of the scholarship programme not being too structured allows you to explore all options. I can’t think of any other things that require improvements.

- I don’t think you can

- Some money kept to ensure FN scholars get to the initial FN conference and the one after

- It really was an excellent programme and I am very grateful. I do think it would be really good to share the learning from the other scholars both half way through and at the end.....in a facilitated way which would be part of the programme rather than arranged by the scholars themselves. That way more importance may be placed on how the participants had applied their learning each step of the way.

- I think the only thing I would change would be the selection/choice of mentor - while my mentor was good I only got to see him on two occasions as his own organisation was going through major change

- As previous, maybe an opportunity to get back together formally towards the back end of the programme. We were so inspired when together it would have been a great chance to build our combined influence.

- I think there are two areas which could improve the Scholarship: - Change the LCOR to include the RADA as this was one of the most effective parts of the programme. I think the LCOR had limitations however the bringing the participants together was very effective _ Bring the scholars together to share their learning/projects.

- As mentioned earlier, more opportunities to meet as a group of scholars being required during the Scholarship.

- As mentioned previously the scholars are a great resource and meeting togetherness at the beginning is essential. A closure event at the end would help signal the end and provide a sense of achievement.

- Different introduction? I think it is fantastic. I don’t want it to come to an end. Could you develop the alumni opportunities?

- I would really have liked the opportunity to meet as a scholarship group more often. Media training as part of the core offer - until you do it you do not realise the benefits

- I am not convinced LCOR is worth the cost. Freeing up some extra finance might have allowed different programmes/experiences to be built in. RADA should be mandatory. Outstanding.
• the upfront information should be more explicit on the mandatory courses for information. I did not become aware of them until interview

• it would be good to have an event a the end of the scholarship to meet up with all the scholars

• Previously answered I can’t think of an obvious way to improve the programme, apart from considering value the LCOR programme - for me it didn’t create a highly valuable learning and development opportunity, but was very expensive. I feel this aspect of the programme could be delivered by local leaders, with a stronger NHS focus.

• I think it would be helpful to have support on structuring scholarship activities during the year. it can be challenging to fit everything in, and make decisions about where to focus. I would also welcome a supported network, to enable scholars to meet together during the year (undertaking the LCOR programme at the start of the year was really helpful in bringing us together)

• In terms of content and support I would struggle to think of how to improve it.

• As before, more opportunities for cohort support/development.

• This is a first class programme that has enabled me to develop and grow. I am proud to tell people I am a Florence Scholar and have been impressed by the organisation of the programme and the enthusiasm with which it has been facilitated. This team should be proud of this.

• Just continue to do what you do. Use technology to keep in touch more - maybe a live chat facility for scholars past and present

• My only comment is as previous, a networking/celebration for the whole scholarship group towards the end of the scholarship.

• I really find this difficult as I truly enjoyed every aspect. I particularly likes how some parts were mandatory and the rest was tailor made, I managed to do things that I could never have done normally, but I also did RADA etc. which I may not have chosen to do without FNF. The scholarship is extremely well run and organised with excellent material, venues and regular prompts which is great. I guess if there was a tiny thing it would be a little more guidance on what is required for the final report and the publishing aspect.

• We bonded well as a group and naturally formed learning circles and action learning sets but the follow up and sustaining momentum is always hard and hope we receive support with this.

• Be more flexible

• It was very useful meeting up regularly with fellow scholars. I would have liked to have taken more opportunity to visit other organisations and shadow other scholars. I may do this going forward. It might be useful for the scholarship to offer some support/coaching/simulation on being interviewed at Director level.

• I really enjoyed it hard to think of any improvements.

• Perhaps mid cycle whole cohort meetings?
• greater opportunities for networking between scholars and cohorts

• This is a very good programme and I am not sure how it could be improved. It relies on scholars being self directed and self motivated which can be difficult when one is caught up in a busy job, but there are certainly many opportunities available and it is up to each scholar to take these and utilise the wealth of knowledge and experience available to them during the programme.

• I am not sure you can, I think the ingredients of the Foundation work well and I know they are always there for me if I need them.

• Greater sense of community across groups of scholars - the groups meet infrequently. LCOR should be non-mandatory.

• As described earlier I think more senior leaders board/sib-board level Would be best.

• Review LCOR as a compulsory module.

• More support to enable Co-consulting groups to function and move forward as a group. Although this was facilitated during the scholarship it has since "dropped" off and the foundation could improve the effectiveness of these groups.

• This is similar to an earlier question and so my answer would be broadly the same. I do think that its not generally realised how all encompassing a scholarship is, with so many facets to the total experience, which are hugely beneficial and so thoughtfully put together. I’ve not seen this drawn out in the rather earnest pieces which I’ve seen published about the projects scholars have undertaken, some of which look like an excuse to go to Australia or Eastern US but don’t truly do more than report back that system. Nursing badly needs tougher, stronger Nurse Directors, the scholarship allows you to create your own development through the taught leadership programme and must surely be making a difference to nursing leaders of the future as well as refreshing those like me who have been in senior roles for a good while - but that has not been the focus of this survey at all. This is rather curious to me. It seems unrealistic to expect research projects to be undertaken by busy NDs or those in Regional roles - their projects will be small but elegant - but not hugely influential. If that is what the FNF wants to achieve then it needs to shift its axis to be more like Burdett or to focus on a generation of R&D or clinical academic post holders. How you use the FN experience is richer than just the project, although I see for the foundation that this is what brings citation and so more ROI.

• I think more cohorting of the group would help to fast track the mutual support that we could potentially offer each other.

• RADA a must! An opportunity to have more some international mentors too.

• As stated before - to have the flexibility regarding the LCOR component. Only consider it should be a condensed 2 days.

• Difficult for me to answer whilst I’m still on it. I’m a little disappointed that the group haven’t had another opportunity to come together but we are planning our own reunion and visit to one scholars workplace as a group.

• I found it quite intense with working as well. Perhaps a longer duration as the Project data collection has taken 4 months, then I go to Sweden as the overseas element and then the write up.
• Perhaps 'buddy' new scholars with old in addition to mentors?

• Honestly I don’t know how you could: Everyone is so experienced and it opens a world for people like me to develop and grow. I would only say that the sponsoring Trust should take more notice of the Scholarship and what they are getting at the end of it but perhaps that’s something that only happens in NI and also something that needs sorted at a local level.

• I have full evaluation of the core elements within the programme. Consider using other people/agents for the core delivery

• Difficult, I think it is excellent.

• As previously stated: 1. A longer timeframe so that the project could be undertaken towards the end of the course after the courses were completed 2. Individualised approach to the tools used for diagnostics at the beginning to build on work already done.

• Review flexibility of mandated elements

• Offer internships with MPs/MSPs Established alumni and alumni events to keep in touch Very little room for improvement!

• It cannot be improved! maybe a planned re-group at 6 and 12 months

• Encourage group to meet annually after scholarship

• Review the LCOR

• As described in the previous question. More time with the Scholar group

• The only thing I could suggest is to possibly review the LCOR. It is essential that the group as a whole get together early on as the group become very supportive of each other however I am not convinced that the LCOR is the best vehicle to do that

• It was great, a good mix and opportunities.

• I accessed leadership programmes in the Kings Fund during my scholarship and found them invaluable eg Kings Fund Personal Impact & Influence (KFPii) and would suggest that this would enhance the leadership scholarship. I attended the KFPii along with a multidisciplinary group including nurses, physiotherapists, managers, doctors and people from charitable organisations. Some of the content of the KFPii was included in the RADA course but for me it was superior.
Question 25.

### Overall, how would you rate your experience of the Florence Nightingale Foundation Leadership Scholarship Programme?

<table>
<thead>
<tr>
<th></th>
<th>Excellent</th>
<th>Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very Poor</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>55</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>56</td>
</tr>
<tr>
<td>Percentage</td>
<td>98%</td>
<td>2%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Comments.

- This was an incredibly wonderful experience that enabled me to learn more about myself and understand how to become the leader that I aspire to be and not be afraid. I have worked in a very successful and energetic organisation that has an excellent track record of achievement. As a senior manager in this organisation, I feel more equipped to deliver quality, efficiency and growth through staff/patient engagement and on par with its leadership excellence. The skills I have learnt through the FNF leadership programme have enabled me to understand clearly how to make a positive contribution. I have developed more confidence in thinking more strategically, and be taken more seriously to have a greater focus on national agenda and wider picture through sharper engagement with senior colleagues. I look more confidently forward to my next career challenge in the current tough climate. I remain passionate about improving maternity care and health outcomes and the scholarship has given me opportunities to be recognised as a midwifery leader who can make a stronger contribution to making a case for change as well as quality improvements.

- I met some amazing people and made some really good friends. I learnt so much from the programmes on offer. Most of all I found me, developed my confidence and achieved my life long career ambition. What more can I say.

- Thank you for opportunity

- Really really pleased I applied and was successful.

- This was a very special opportunity that I will always be grateful for

- An amazing chance to experience leadership development. Thank you.

- It has allowed me to understand who I am, and this has meant I have been able to reflect on my relationships and how I build and maintain rapport. It has been truly transformational personally and professionally. Without the Scholarship I would not have had the opportunity to allow the time to self reflect, learn, assess and implement some of the approaches I have taken. I am unlikely to have changed organisation, I am confident the organisation will recognise the contribution I have had to transforming care delivery and formalise my role to be a Chief Clinical Information Officer (Nursing). I am accepted externally in this role.

- For all of the reasons I have already provided, for me it was a massive personal learning and professional development. I have for the first time a very clear idea of the role of leadership as it applies to me and the understanding of how this differs from management. I feel totally enthused as I completed the Scholarship and since.
At this time I am finding it difficult to summarise as I am still working on various aspects of the programme. I can't stress enough how privileged I am and wish I could articulate this.

This has exceeded my expectations in every way.

I loved the scholarship. I really enjoyed meeting the cohort and the bond made and I am sure they will be life long work friends. The opportunity to go to Cranfield was absolutely amazing. I learnt so much and the private sector knowledge and experience that I have gained has been so valuable, I am still in contact with the group and they are regular sources of support and advice.

I have loved every minute of it. I believe that it has changed me as a person and improved me as a leader.

I was delighted to have this opportunity and in a year or two from now I will be more definitive in being able to state how this has impacted on my personal and career development.

But my personal situation meant that the latter part was not maximised.

What a fantastic, once in a career opportunity to have an individualised leadership development programme, with great coordination and support, and excellent contacts.

I cannot recommend this programme enough.

the whole experience was positive and also the prestige of it has a positive impact and I feel really helps open doors.

the opportunities have been excellent.

really enjoying don't want it to come to an end!!

I am truly grateful for the opportunity to obtain the grant and become a delegate and life member of the Florence Nightingale Foundation. Even now I have colleagues that call me 'Flo'!

All the staff at the foundation were fab.

It's unique - globally. It needs to be treasured - and together the alumni and FNF friends need to ensure it can continue in its special, idiosyncratic manner - so those nurse (and the AHM leaders - this deserves more exploration in this survey to differentiate too) who take part can make a difference as a result of the opportunity a scholarship affords.

TO date this is proving to be an outstanding opportunity for me.

I am amazed how beneficial it has been... I now we ask why a don hasn't done it when they apply for a senior nursing leadership post.

As previously stated I have recommended it to other colleagues.

This has been a really energising opportunity and came at just the right time for me. It has brought back my enthusiasm and energy to the fore.

Great opportunity to network, exchange ideas, overseas, etc. Opportunity to use the learnt skills to improve patient care.
• The opportunities I have had this year have been great and have helped me improve how I lead

• I truly appreciate all the scholarship did for me and think that it is wonderful. I feel incredibly lucky and privileged to have been given this great opportunity. The only problem was the Creative Leadership Programme.

• As I mentioned before, it has been the most important, powerful and influential experience I have had in my career to date.

• I have benefitted so much from this programme. I am very different (in a positive way) to the person I was at the start, both in my thinking and my behaviour. I have self belief and confidence that can be measured by improved impact.

• I cannot begin to start here, I would refer you to my Final Report, please feel free to use any of the content for your data as I feel my report provides a true account of what this has meant to me. My life, career and future have been transformed, I am a changed individual in terms of my inner self, my belief in what I can achieve and feel blessed to have been given such an opportunity. It has been a major 'Crucible' in my life and I have found my True North.

• I feel very privileged to have experienced all elements of the scholarship. I believe it has opened many new doors for me and has improved my knowledge and confidence in a huge way. I have encouraged senior colleagues to apply as it is such an invaluable experience.

• Opportunities to reflect and meet other great nurse leaders

• Fantastic

• One of the best experiences I have ever had

• The FNF leadership scholarship has changed my professional and personal life. I have been given 'tools' to enhance patient care by leading a MDT. The scholarship also afforded me the opportunity to travel abroad to see neonatal health care in New Zealand which was invaluable for me to both present / discuss the service I lead and to network / share practices with other neonatal teams.

• It was great and I am sad it is over!
Question 26.
Please indicate your agreement with the following statement: ‘I would encourage others to apply for a Florence Nightingale Foundation Scholarship.’

<table>
<thead>
<tr>
<th>Agree Strongly</th>
<th>Agree Moderately</th>
<th>Agree Slightly</th>
<th>Disagree Slightly</th>
<th>Disagree Moderately</th>
<th>Disagree Strongly</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>55 (98%)</td>
<td>1 (2%)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>56</td>
</tr>
</tbody>
</table>

Comments.
- I have done already and continue to do so.
- Go for it, it's an amazing journey and one that is unique to you.
- I have supported 3 people to apply for this next
- Already have
- Absolutely......and already have and would continue to do so.
- I have encouraged several people to apply for the scholarship
- I can only highly recommend and promote the Scholarship because it gives a unique opportunity to allow individual leaders be themselves and develop under guidance and support of mentors and the Scholarship leadership. I would hope I can in turn support others scholars in the future
- I already have and they have been successful in their application. I have also encouraged a colleagues to apply for a travel scholarship which they have an interview for next week.
- A powerful experience for the right people
- I do not think any other leadership development programme compares to this.
- I have already encouraged people to apply
- I have already encouraged a number of people to apply, and a member of our trust staff has been given a research scholarship
- Yes I would recommend the scholarship to other colleagues particularly if they are at the point of their career in a senior role or moving into a senior role .
- I have encouraged and persuaded my current Deputy to apply and two of our team have applied for the Emerging Leaders programme with FNF.
- I have actively been encouraging colleagues to apply this year
- I think it's a fantastic opportunity to help NHS leaders develop and grow.
- Yes, have done already, and all continue to do so.
- And have done so!
i have and will continue to do so

I am already encouraging others to apply for a scholarship and would do so in the future.

Have five if my own going through or have applied

I regularly discuss the FNF scholarship opportunities with colleagues and strongly recommend them to apply.

have already encouraged many to apply

This is not a programme for everyone but I think the interview process is very good and very fair and identifies the right people to undertake this programme. It is so important to have good nurse leaders for the future of nursing

I have encouraged staff to consider the opportunity of taking up this wonderful opportunity.

I actively promote the scholarship on social media and with others I coach

particularly aspiring academic leaders who with the right mentorship could gain a great deal form the programme

I am discussing the scholarship with a couple of colleagues who are considering applying for roles.

I have already been promoting the Scholarship with colleagues. As resources for development become more scarce, the FNF Scholarship becomes more valuable for the profession, for individuals and for employing organisations who also benefit.

I have spoken to and encouraged others to apply for the Scholarship already and I promote it every chance I get.

I am constantly encouraging people to apply for this scholarship

I already have!

I already have encouraged others!

I regularly promote the foundation and the scholarship throughout the health economy

I am continuously identifying those with potential to apply!

This is truly the programme that has by far had the most impact through my whole nursing career - the order in which we progressed through the programme - met peers- and were coached to think so critically to apply all of the theory, experience and models to our day jobs has enable me not only to e promoted to a board director role, but also has enabled me to build personal resilience to deliver over a very difficult year in my trust. I would not have been able to survive this year in my first board position without the crucial support and guidance from the foundation.

See previous comments
• I have already done so
• I do almost every day.
• Since being awarded the FNF scholarship I have encouraged nursing and midwifery colleagues to apply, which they did!

**Question 28.**
'I would be interested in taking part in a telephone interview to discuss my experiences further if required.'

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>48</td>
</tr>
<tr>
<td>No</td>
<td>8</td>
</tr>
</tbody>
</table>