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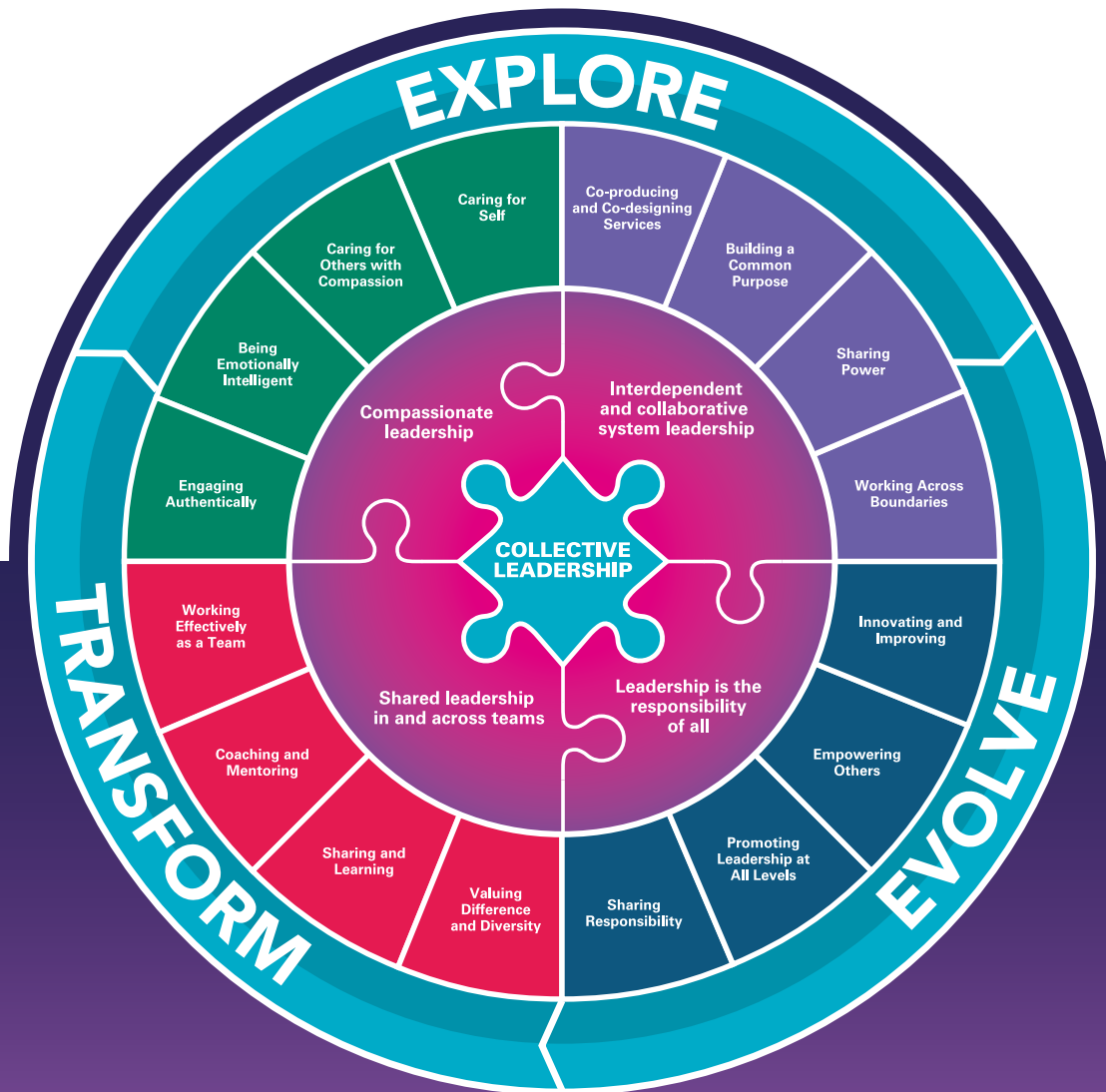
An Roinn Sláinte

Máinnystrie O Poustie

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A COLLECTIVE LEADERSHIP FRAMEWORK FOR NURSING AND MIDWIFERY



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FOREWORD

I would like to thank all those who have worked to produce this *Collective Leadership Framework* which will support and develop nurses and midwives at every level and within all settings and fields of practice across Northern Ireland.

There is no doubt that we face many challenges in terms of meeting the healthcare needs of our population, now and into the future. However, as nurses and midwives, we have the opportunity to make a real difference, in line with the ambitions of *Health and Wellbeing 2026: Delivering Together*.

We already have evidence of the high-quality and compassionate care that nursing and midwifery practice brings to those who use our services. I firmly believe that this framework will have a valuable impact in supporting and further developing capabilities and building collective leadership capacity among nurses and midwives working in both informal and formal leadership roles. This must be our ultimate goal.

Nurses and midwives can also make a real difference to the outcomes for people and populations who receive HSC services. I am therefore confident that further development of a culture of collective leadership among our nursing and midwifery professions, as highlighted within this document, will help to significantly enhance this.

I assure you of my continued commitment to support the development of a collective leadership culture across the HSC system to enhance the care and services provided to the people of Northern Ireland.



Maria McIlgorm

Chief Nursing Officer



EXECUTIVE SUMMARY

Health and Wellbeing 2026: Delivering Together provides a ten-year road map for the transformation of Health and Social Care (HSC) services in Northern Ireland (NI). To achieve this transformation, a new approach to collective and system leadership was identified, resulting in the launch of the *HSC Collective Leadership Strategy*. We want to build on the successes of the ongoing implementation of the Strategy, in particular, the efforts that have been made to create an HSC collective leadership community in which we all take responsibility for nurturing cultures of high quality, continually improving, compassionate care and support. Since its launch by the Department of Health (DoH), organisations have been using a range of strategies to implement and embed it across the HSC.

This *Collective Leadership Framework for Nursing and Midwifery* provides a consistent approach to the development of collective leadership capabilities for those staff working within the HSC system, regardless of their role. Fundamental to its development was a desire to build on existing leadership and other relevant frameworks, as well as engaging and consulting with a wide cross section of staff and stakeholders. This included feedback from a range of perspectives including nursing and midwifery, service users, professional and education organisations, regulators and policy makers.

Those who were consulted embraced the concept of collective leadership and how it is not restricted to people who hold designated or formal leadership roles. Indeed, this framework emphasises that acts of leadership can and should come from anyone within an organisation and it is the responsibility of all staff to share responsibility for the success of the organisation. This will include demonstrating appropriate capabilities required to develop and empower their leadership capacity as well as that of colleagues.

Our leadership culture will be the outcome of the collective actions of formal and informal leaders working together to deliver our common purpose of world class HSC services for the people of NI.

We recognise that the defining characteristics of a successful organisation is the calibre of its leaders. We are not all born to be leaders and neither do we all want to undertake formal leadership roles. Acquiring leadership skills and attributes are often gained through dedicated time, commitment and seeking opportunities to develop and strengthen our personal approach and build our capabilities.

However, while there is more work to be done, we are starting to build a strong foundation for collective leadership to flourish across the HSC.

To support and strengthen this among the nursing and midwifery professions, we present this *Collective Leadership Framework for Nursing and Midwifery*. It provides a structure and a tool that proposes actions and capabilities required to help build collective leadership talent across our wider HSC system.

Our framework also aims to support workforce planning and the recruitment and retention of nurses and midwives by ensuring that a large pool of appropriately developed informal leaders operating at all levels is available, as well as nurses and midwives with the competence to fill positions which require more formal leadership capabilities.

This will optimise outcomes and impact for service users, contributing to effectively and efficiently addressing population health needs now and into the future.

Finally, we would like to thank our colleagues who contributed to this project and have given a clear commitment to supporting further development of nursing and midwifery practice in NI. Their expertise, insight, judgement and tenacity has been invaluable.



Myra Weir

Chair of Project Task & Finish Group
Associate Consultant,
HSC Leadership Centre



Linda Kelly

Chief Executive
NIPEC

01

INTRODUCTION

INTRODUCTION

There are over 27,600 registered nurses and midwives employed in NI¹, mainly within HSC Trusts but also in General Practice and other Independent Health Care Provider settings. Whether employed in a formal or informal leadership role, each staff member, individually and collectively, plays a significant part in the provision of safe, high quality and person-centred healthcare.

It is well recognised that the HSC system faces unprecedented challenges due to an ageing population, complex and rapidly changing environments, increasing demand for services, long and growing waiting lists, workforce pressures, the emergence of new and more expensive treatments and ongoing budget constraints. These challenges, make safe, high-quality person-centred healthcare ever more difficult to deliver. Continuing to develop HSC cultures through person-centred practice and the associated underpinning values, such as respect, dignity and compassion, is therefore paramount.

A collective leadership culture “is a product of our collective actions and our formal and informal leaders must act together to achieve organisational goals.

This will require new levels of awareness of self and others, new mind-sets as well as new skills and may require personal changes in our individual behaviour.”

In response to the *HSC Collective Leadership Strategy*, the Chief Nursing Officer (CNO) asked NIPEC to develop a framework for nursing and midwifery aimed at increasing the collective leadership capacity across the HSC system at all levels.

The *Collective Leadership Framework for Nursing and Midwifery*, presented in this document, is the product of a dedicated and committed Project Task and Finish Group (Annex 1). Whilst it was primarily developed for nurses and midwives, it sets out the standard for collective leadership to which all staff working in the HSC system in NI should aspire.

It is based on the concept that acts of leadership can come from anyone in an organisation and are not restricted to people who hold designated or formal leadership roles. It emphasises the responsibility of all staff in demonstrating appropriate capabilities, in seeking to contribute to the development and empowerment of the leadership capacity of colleagues.

1 NMC (2023) www.nmc.org.uk/globalassets/sitedocuments/data-reports/may-2023/0110c-annual-data-report-ni-web.pdf

02

BACKGROUND

BACKGROUND

Health and Wellbeing 2026: Delivering Together² sets out a ten-year road map for the transformation and delivery of HSC services across NI. It also creates a real opportunity for maximising the contribution of nursing and midwifery to improve health outcomes for our population. Central to this is ensuring the collective voice of our staff is valued and listened to in all decision-making conversations.

Similarly, the nursing and midwifery response to *Delivering Together - the Nursing and Midwifery Task Group Report³* - set the direction for a new era of nursing and midwifery, putting people and population health and wellbeing at the heart of nursing and midwifery practice. Implementation of the report focuses on the importance of leadership and includes a specific recommendation to develop a new leadership framework along with investment in training for nurses and midwives at all levels.

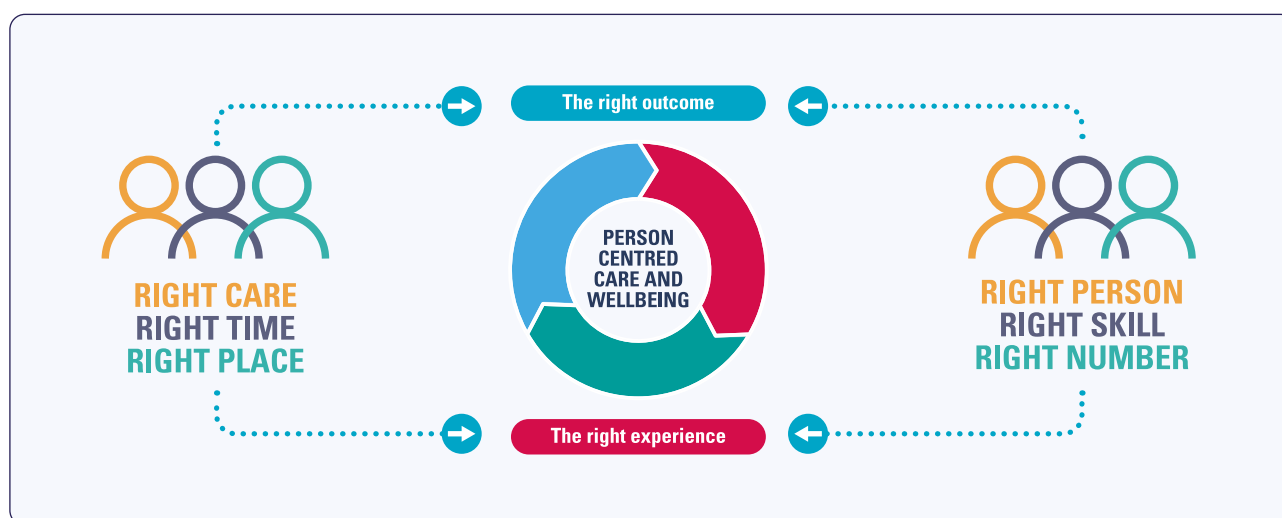
Strategic Theme 3 Recommendation:

“develop and prepare nurses and midwives for leadership positions. This will require investment in the development of a new nurse leadership framework and investment in leadership training for nurses and midwives.”

NMTG Report

Ultimately, it is the ambition of the Nursing and Midwifery Task Group that all nurses and midwives deliver the right evidence-based care, with the right numbers, at the right time, in the right place, by the right person with the right knowledge, delivering the right experience and outcomes for persons, families and communities (Figure 1):

Figure 1: Ambition of the Nursing and Midwifery Task Group



2 DoH (2016) www.health-ni.gov.uk/publications/health-and-wellbeing-2026-delivering-together

3 DoH (2020) www.health-ni.gov.uk/publications/nursing-and-midwifery-task-group-nmtg-report-and-recommendations

Furthermore, the NMC Code⁴ states “to promote professionalism and trust registrants should be a model of integrity and leadership for others to aspire to, resulting in trust and confidence in the profession. They should provide leadership to make sure people’s wellbeing is protected and to improve their experiences of the health and care system”.

“Throughout their career, registrants will have opportunities to demonstrate leadership qualities, regardless of whether or not they are in formal leadership roles.”

NMC

For safe, kind, effective care to be delivered, the NMC indicates that good leaders are crucial. Leadership behaviours and ways of working includes speaking up to advocate for patients or to raise concerns, supporting teams working in pressured environments and creating inclusive working environments for people from diverse backgrounds.

Moreover, the NMC highlights that being person-centred matters, which means thinking about what makes each person unique and doing everything you can to put their needs first. This is supported by the CNO’s vision to prepare and enable nurses and midwives to further strengthen the delivery of safe and effective person-centred care to meet the population needs of NI now and in the future, underpinned by a healthful culture.

Similarly, the *Person-Centred Practice Framework*⁵ enables the articulation of the dynamic nature of person-centredness, recognising complexity at different levels within

healthcare systems, but it offers a common language and a shared understanding of person-centred practice. The Framework identifies the attributes of staff, as a prerequisite to managing the practice environment, in order to engage effectively in the person-centred processes to achieve the ultimate outcome – healthful workplace cultures (Figure 2).

“A healthful culture is described as one in which decision making is shared, relationships are collaborative, leadership is transformational and innovative practices are supported. The ultimate outcome is to develop a workplace that enables human flourishing.”

Figure 2: The Person-Centred Practice Framework



4 Nursing and Midwifery Council (2018) www.org.uk/standards/code/

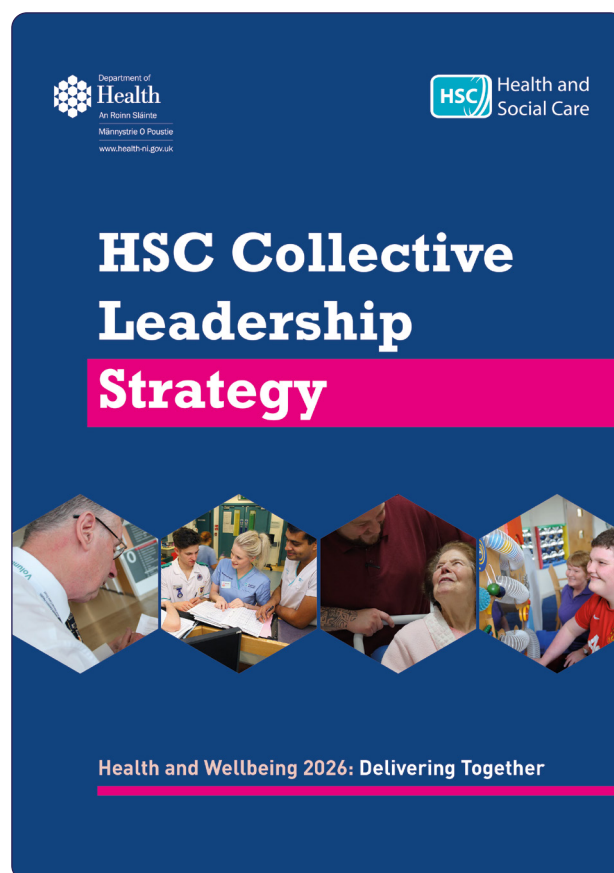
5 McCormack, B. & McCance, T. (2021) The Person-centred Practice Framework. In McCormack B, McCance T, Bulley C, Brown D, McMillan A & Martin S (Editors) Fundamentals of Person-Centred Healthcare Practice, pp.23-32. Oxford, Wiley-Blackwell

Nurses and midwives form the largest group of staff working in the HSC in NI. They are a crucial part of the HSC system, working in every sector and setting from emergency departments to patients' own homes, with people of all ages and backgrounds. Therefore, addressing the workforce challenges is strategically essential for the stabilisation of the nursing and midwifery workforce and delivery of high-quality healthcare.

To achieve this, work is underway to develop and implement workforce and leadership strategies, as recommended in *the Health and Social Care Workforce Strategy 2026: Delivering for Our People*⁶, to ensure the HSC has the right people and right leadership to deliver safe, high quality services now and meet the challenges of the future.

Furthermore, many examples exist of leadership models, frameworks and strategies which are being utilised within health and social care across the United Kingdom^{7, 8, 9, 10} (Annex 2).

Reviews and research show the importance of leadership within health and social care, linking it to patient mortality, quality of patient care and satisfaction and better staff wellbeing and morale. Following the increasing recognition that all employees need to be leaders at some level, healthcare organisations are now shifting a relentless focus onto improving and investing in strong and effective leadership within the services they provide.



In NI, *Health and Wellbeing 2026: Delivering Together* identified 18 key actions to deliver better outcomes for our population, one of which was to develop an HSC-wide leadership strategy, to plan for development of collective leadership behaviours across our system.

In response, the *HSC Collective Leadership Strategy*¹¹ was launched in 2017, highlighting the need for staff to work across traditional boundaries to address the ever-increasing complexity and demands on our services.

“for this transformation to be effective, we need to increase the prevalence of collective leadership and reduce or eliminate any silo-based leadership approaches, both within our organisations and across the wider HSC system.”

HSC Collective Leadership Strategy

6 DoH (2018) *The Health and Social Care Workforce Strategy 2026: Delivering for Our People*

7 NHS Academy (2013) www.leadershipacademy.nhs.uk/healthcare-leadership-model/

8 NHS Leadership Academy (2021) www.leadershipacademy.nhs.uk/organisational-resources/our-leadership-way/

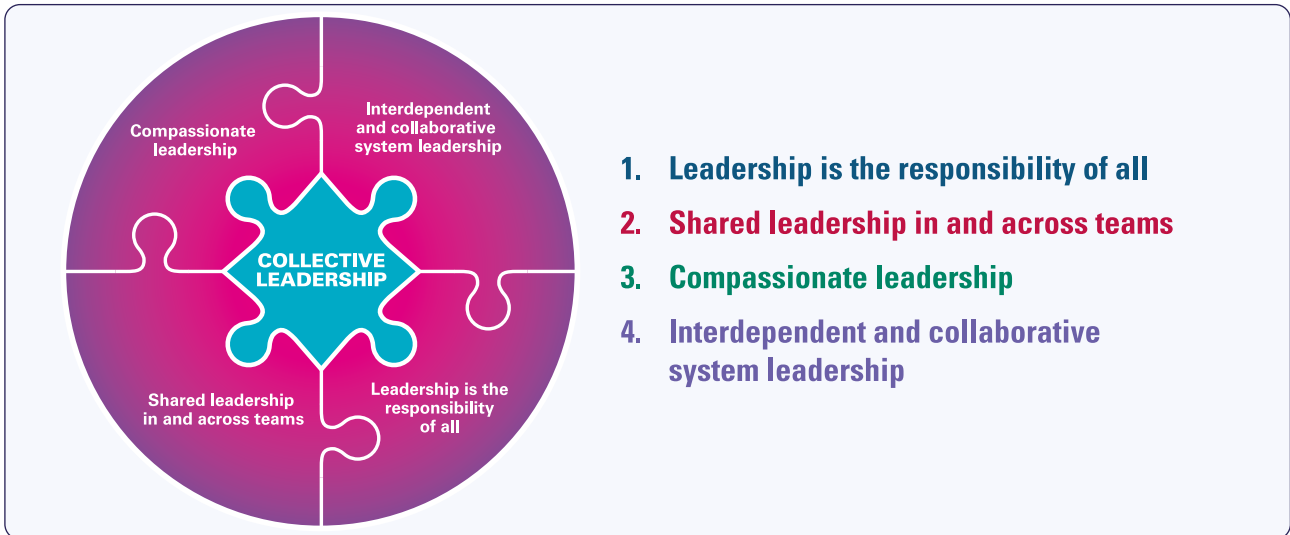
9 HEIW (2021) *Compassionate Leadership Principles for Health and Social Care* <https://leadershipportal.heiw.wales>

10 NHS Scotland (2010) www.gov.scot/publications/delivering-quality-through-leadership-nhscotland-leadership-development-strategy/

11 DoH (2017) HSC Collective Leadership Strategy www.health-ni.gov.uk/publications/hsc-collective-leadership-strategy

The *HSC Collective Leadership Strategy* identifies 4 components of collective leadership (Figure 3):

Figure 3: HSC Collective Leadership Components (DoH, 2017)



NI has been using the *NHS Leadership Framework*¹² (Figure 4) as the established model across the HSC system, mainly for workforce planning including recruitment, succession planning and appraisal processes:

Figure 4: NHS Leadership Framework



12 NHS Leadership Academy (2011) [www.leadershipacademy.nhs.uk/wpcontent/uploads/2012/11/NHS Leadership-Framework-LeadershipFramework.pdf](http://www.leadershipacademy.nhs.uk/wpcontent/uploads/2012/11/NHS_Leadership-Framework-LeadershipFramework.pdf)

In addition, a key action of the *HSC Collective Leadership Strategy* was to establish and embed a set of values and associated behaviours across HSC organisations: Working Together, Excellence, Compassion and Openness and Honesty.

Each value has a meaning and associated behaviours about what it looks like in practice (Annex 3).

A range of other strategic and professional frameworks and guidance exist to support nurses and midwives to develop and improve as leaders, including;

- *Quality 2020 Attributes Framework*, ten-year strategy designed to protect and improve quality across the HSC system in Northern Ireland¹³;
- *Co-Production Guidance*¹⁴ - a practical guide that supports the application of a co-production approach across our HSC system, developed as part of the DoH programme of work to transform HSC provision as envisaged in “*Delivering Together*”;
- Professional resources developed by NIPEC¹⁵:
 - *Northern Ireland Preceptorship Framework for Nursing and Midwifery*
 - *Reflective Supervision Framework to support Nursing and Midwifery Practice in NI*
 - *Deciding to Delegate: A Decision Support Framework for Nursing and Midwifery*
 - *Career pathways for Nursing and Midwifery*
- Resources produced by the Chartered Institute for Personnel Development¹⁶;
- Resources for coaching and mentoring skills for shared leadership in and across teams, such as, the *Mentoring Guide*¹⁷ and the *Coaching Manual*¹⁸;
- Emotional intelligence models to enable and support compassionate leadership, such as, *The Genos Model*¹⁹ which comprises six emotionally intelligent workplace competencies,
- Resources to support self-care and self-compassion that genuinely promote well-being and resilience, such as, the work of Dr Kristin Neff²⁰, *with self-compassion, we give ourselves the same kindness and support we’d give to a good friend.*



13 DoH (2019) www.health-ni.gov.uk/sites/default/files/publications/health/Q2020%20Key%20Principles.pdf

14 DoH (2018) www.health-ni.gov.uk/publications/co-production-guide-northern-ireland-connecting-and-realising-value-through-people

15 NIPEC (2024) <https://nipec.hscni.net>

16 Chartered Institute for Personnel Development (CIPD) www.cipd.org/en/

17 University of Cambridge (cam.ac.uk) www.ppd.admin.cam.ac.uk/professional-development/mentoring

18 Starr, J. (2016) *The Coaching Manual* 4th edition. Pearson: UK.

19 Genos International (2024) <https://www.genosinternational.com/emotional-intelligence/>

20 Neff, K (2024) Self-Compassion <https://www.self-compassion.org>

03

**APPROACH
AND AMBITION**

OUR APPROACH AND AMBITION FOR NURSING AND MIDWIFERY

A headline with a brief summary of our ambition, our values, our collective leadership capabilities and our desired outcomes are provided below.

It is important to remember that although these refer to the nursing and midwifery professions, for the purpose of this document, they are applicable to all staff working within the HSC system in Northern Ireland.

OUR AMBITION

For all nurses and midwives in NI to contribute to creating a health and social care leadership community in which we all take responsibility for developing a competent and confident workforce which will deliver high quality, continually improving, compassionate care and support.

OUR VALUES (HSC)

- Working Together
- Excellence
- Openness and Honesty
- Compassion

OUR COLLECTIVE LEADERSHIP CAPABILITIES

- Our Vision and Values in Action
- What you see - our behaviours
- What is expected of me

OUR DESIRED OUTCOME

A culture of collective leadership that delivers high quality, continuously improving, compassionate care, where nurses and midwives working across the HSC system, at all levels, are supported, equipped and encouraged to flourish and take pride and joy in their work.

A COLLECTIVE LEADERSHIP FRAMEWORK

FOR NURSING AND MIDWIFERY

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This *Collective Leadership Framework for Nursing and Midwifery* was developed in response to the *HSC Collective Leadership Strategy* which aims to address the ever-increasing complexity and demands on our services. As previously highlighted, it is underpinned by a number of international, national and regional documents relative to leadership and nursing and midwifery practice. It has been aligned to relevant local policies, strategies and frameworks as set out in the background section and in Annex 2.

Implementation of the framework will involve building on the excellent examples already in our system in order to develop collective leadership capabilities at all levels and ensure everyone is prepared to lead, regardless of position or practice area. In addition, realising the ambition will require a change in behaviours and mind-sets.

WHAT IS COLLECTIVE LEADERSHIP?

For the purpose of this framework, the following quote provides an operational definition of Collective Leadership:

“to continually improve health and social care, we must design collective leadership into NHS strategy – encouraging the participation and involvement of all NHS staff. Collective leadership is a leadership in which all staff take responsibility for ensuring high quality patient care and all are accountable, for example, by speaking up when they see unsafe or inappropriate behaviour, regardless of the seniority of the staff concerned”²¹.

21 West, M. (2014) *Collective leadership for cultural change* www.kingsfund.org.uk/insight-and-analysis/videos/michael-west-collective-leadership-culture-change



PURPOSE OF THE FRAMEWORK

A summary of the Framework's purpose and who it is intended to support is presented in Figure 5:

Figure 5: Purpose of the *Collective Leadership Framework for Nursing and Midwifery*

WHAT IS THE COLLECTIVE LEADERSHIP FRAMEWORK?

The Framework comprises a set of four components that outline the expected characteristics and behaviours required to successfully create and develop a culture where leadership is everyone's responsibility. It highlights the HSC's commitment to building collective leadership capacity and capability across the system at all levels.

HOW WAS THE FRAMEWORK DEVELOPED?

The Framework was developed by a Task and Finish Group and included engagement with stakeholders across the HSC system, guided by literature, research and practice. It is built on a solid understanding of our strategic priorities, strengths and challenges, whilst capturing those behaviours that are required to meet the health care needs of our citizens.

WHO IS THE FRAMEWORK FOR?

The Framework provides a consistent approach to collective leadership for all nurses and midwives and is not limited to those who manage others or who are in formal leadership roles, or who are in designated leadership roles. Leadership can be exercised by anyone with the capacity and desire to make real improvements, regardless of their position.

HOW WILL THE FRAMEWORK BE USED?

Seeking to utilise the full value of this Collective Leadership Framework by embedding it within established workforce processes and practices.

This Framework and associated assessment tool are designed to be used as part of a range of activities and processes, as outlined in Figure 6:

Figure 6: Examples of Workforce Development Activities and Processes



04

**FRAMEWORK
DESIGN
AND STRUCTURE**

THE COLLECTIVE LEADERSHIP FRAMEWORK DESIGN AND STRUCTURE

Delivering services to people, carers and communities is at the heart of this framework. To ensure the best care, experience and outcomes, our vision is for a culture which values acts of leadership from all staff, regardless of hierarchy, experience, location, discipline or level. It is one in which all nurses and midwives strive for continuous improvement, are enabled to be innovative and take some risks along the way.

The design of the framework builds on the 4 components of collective leadership identified in the *HSC Collective Leadership Strategy*, previously presented at Figure 7. These components aim to maximise positive impact on the delivery of quality and compassionate care and support.

A number of associated enablers and outcomes to each component have been presented at Figure 7:



Figure 7: Collective Leadership Components: Associated Enablers and Outcomes

Leadership is the Responsibility of All	
Enabler: I will achieve this by...	Outcome: we will achieve a culture where everyone...
Innovating and Improving	Improves safety and contributes to quality improvement
Empowering others	Enjoys being at work and is encouraged to use their expertise
Promoting leadership at all levels	Is a leader, even if not a formal leadership position, and develops leadership capabilities.
Sharing responsibility	Can influence, make decisions and take action where appropriate

Compassionate Leadership	
Enabler: I will achieve this by...	Outcome: we will achieve a culture where everyone...
Caring for self	Looks after their own physical, psychological and social wellbeing.
Caring for others with compassion	Shows kindness and listens to others, to understand their needs and help improve their wellbeing.
Being emotionally intelligent	Knows how their attitudes, feelings and behaviours can impact on relationships.
Engaging authentically	Is real, genuine, open and honest

Shared Leadership in and Across Teams	
Enabler: I will achieve this by...	Outcome: we will achieve a culture where everyone...
Working effectively as a team	Works together and recognises the contributions of all the team
Coaching and Mentoring	Helps others achieve their goals and reach their full potential through supportive conversations
Sharing and Learning	Shares their experiences for learning and improvement and feels safe to be open and honest
Valuing Difference and Diversity	Values the contributions of people from diverse backgrounds and with different perspectives

Interdependent and Collaborative System Leadership	
Enabler: I will achieve this by...	Outcome: we will achieve a culture where everyone...
Co-producing & co-designing services	Works together as equals to design and deliver health and social care services
Building a common purpose	Shares the same goal of delivering high-quality, continually improving, compassionate care and support
Sharing Power	Connects and combines their strengths, knowledge and expertise
Working Across Boundaries	Shares resources and knowledge across professions, agencies and sectors

LEADERSHIP CAPABILITIES

Alongside each enabler there are a number of capabilities which are sets of key behaviours and attributes to help individuals achieve the desired outcomes, presented in Table 2. These capabilities provide a common language and focus for all nurses and midwives, not only to develop their own collective leadership capabilities, but to role model as good leadership practice in an attempt to develop others' leadership capability. Individuals can use these capabilities to assess and identify their learning and development needs to build capacity and strengthen a culture of collective leadership across the HSC system.

This framework does not attempt to provide a comprehensive list of every capability necessary for nurses and midwives working across the HSC system. Many roles will have specialised skill sets that are unique to that role, and these should also be considered alongside this Collective Leadership Framework.



Table 2: Collective Leadership Framework for Nursing and Midwifery – Components, Enablers, Capabilities and Outcomes

Leadership Components	Enablers: I will achieve this by...	Capabilities: I can demonstrate or evidence this by...	Outcomes: We will achieve a culture where everyone...
Leadership is the responsibility of all	Innovating and improving	accepting and assisting in developing new ideas to improve safety and quality of services reviewing practice and putting forward ideas to improve quality of services and minimise risk taking action when I notice shortfalls in patient safety and am not afraid to try new things routinely seeking feedback from people to improve services working with others to constructively improve our services using systematic quality improvement approaches	...improves safety and contributes to quality improvement.
	Empowering others	respecting, valuing and acknowledging the roles, contributions and expertise of others creating a supportive environment which actively seeks and encourages others' contributions providing opportunities to give and receive feedback recognising the need for open and honest communication encouraging people to engage in decision-making and to challenge constructively	...enjoys being at work and is encouraged to use their expertise.
	Promoting leadership at all levels	accepting that I have a leadership role in ensuring safe, high quality, compassionate care and support acting as a leader using a range of collective leadership capabilities recognising that leadership within the team is shared and not the responsibility of only one person actively communicating with others using effective methods seeking opportunities to develop and improve own leadership capabilities	...is a leader, even if not a formal leadership position, and develops leadership capabilities.
	Sharing responsibility	involving key people in formal and informal decision-making processes about the future of services remaining accountable for making timely decisions in complex situations modifying decisions & flexing direction when faced with new information or changing circumstances participating in decision-making making unpopular decisions when in the best interests of service users and staff	...can influence, make decisions and take action where appropriate.

A COLLECTIVE LEADERSHIP FRAMEWORK

FOR NURSING AND MIDWIFERY

Leadership Components	Enablers: <i>I will achieve this by...</i>	Capabilities: <i>I can demonstrate or evidence this by...</i>	Outcomes: <i>We will achieve a culture where everyone...</i>
Shared Leadership in and Across Teams	Working effectively as a team	<p>understanding roles, responsibilities and purpose within the team</p> <p>being aware of team dynamics and acting to promote effective team working</p> <p>seeking opportunities to support and help people in both my own and other teams</p> <p>helping others towards common goals, providing clear objectives and offering appropriate support</p> <p>seeking feedback and examples of good practice, aiming to improve where possible</p>	...works together and recognises contributions of all team members.
	Coaching and mentoring	<p>identifying situations when coaching and mentoring could be used</p> <p>actively listening during the mentoring/coaching session</p> <p>being realistic about mentoring/coaching expectations and recognising when additional support may be needed</p> <p>building rapport, using intuition to ask appropriate questions and giving constructive feedback and support</p> <p>using effective techniques to foster the long-term learning or development of others</p>	... helps others to achieve their goals and reach their full potential through supportive conversations.
	Sharing and learning	<p>respecting the psychological safety provided within my team to share learning and improve the quality of my work</p> <p>interacting with team members to develop mutual understanding, empathy and caring to practically support each other, in an open and honest way.</p> <p>actively seeking opportunities to learn and share with other colleagues</p> <p>applying learning to practical work</p> <p>building learning from experience into future plans</p>	...shares their experiences for learning and improvement, and feels safe to be open and honest.
	Valuing difference and diversity	<p>valuing diversity and challenging discrimination within the team and across the organisation</p> <p>speaking up if behaviours exist that aren't inclusive or don't promote diversity and equality</p> <p>learning from the lived experience of the people around us and work to promote equality, diversity and inclusion</p> <p>seeking diverse views when making decisions to ensure the best possible outcomes for others</p> <p>upholding personal and professional ethics and values, taking into account the values of the organisation and respecting the culture, beliefs and abilities of others</p>	...values the contributions of people from diverse backgrounds and with different perspectives.

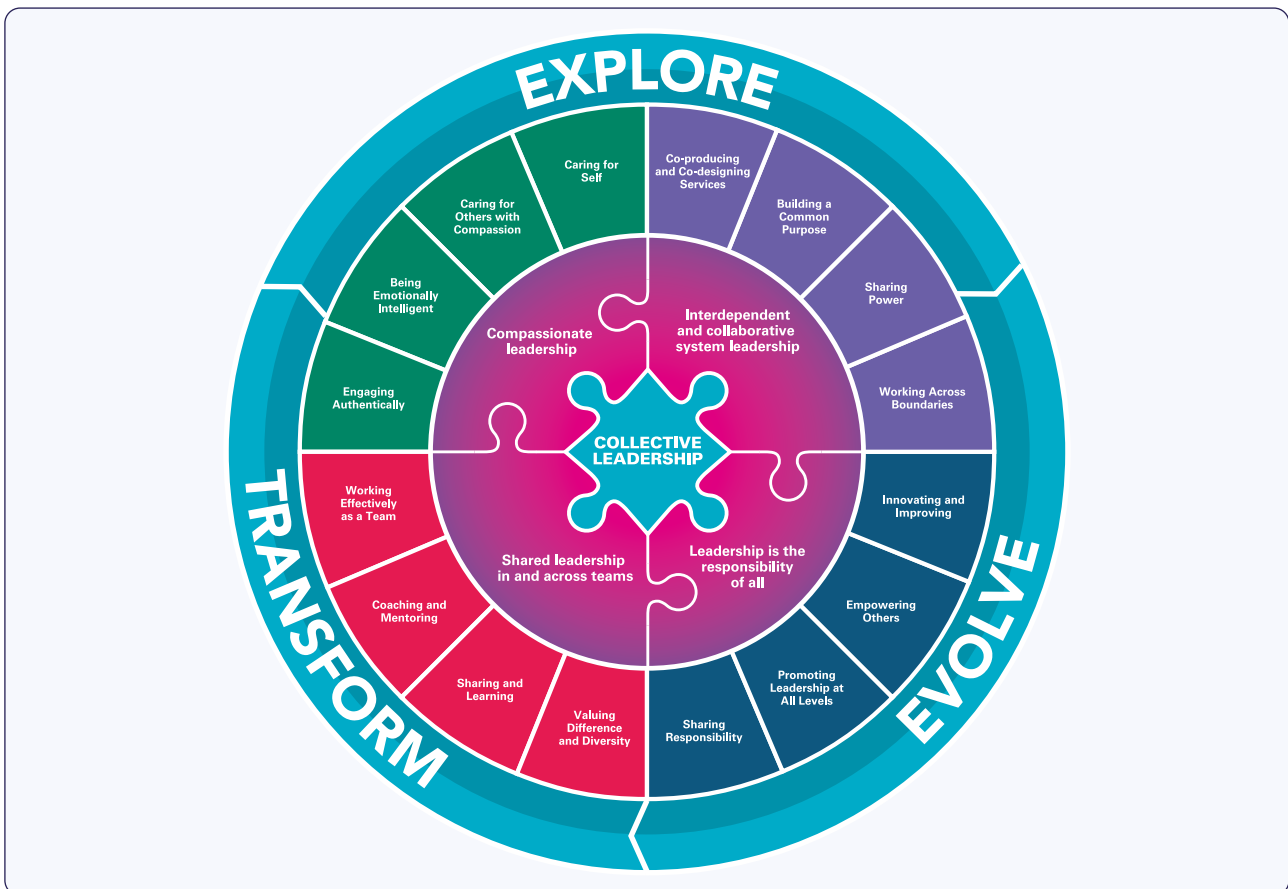
Leadership Components	Enablers: <i>I will achieve this by...</i>	Capabilities: <i>I can demonstrate or evidence this by...</i>	Outcomes: <i>We will achieve a culture where everyone...</i>
Compassionate Leadership	Caring for self	<p>Understanding my own emotions, values and sense of purpose and their effect on my performance</p> <p>Managing my own time effectively and completing work requirements and commitments to a high standard, without compromising my own health and wellbeing.</p> <p>Practicing taking care of the physical, mental and emotional aspects of my life to promote health and wellbeing.</p> <p>Remaining calm and focused under pressure.</p> <p>Recognising when I am struggling/overwhelmed and seek timely support</p>	<p>...looks after their own physical, psychological and social wellbeing.</p>
	Caring for others with compassion	<p>Being kind, valuing people as individuals, treating them with compassion, courtesy, respect and dignity.</p> <p>Providing support and taking effective action to improve the health and wellbeing of others, focusing on what matters</p> <p>Listening, showing empathy, advocating and working in partnership when dealing with people</p> <p>Creating psychologically safe environments that enable open, honest and fearless conversations.</p> <p>Appreciating the physical and emotional impact of working in HSC, offering support when needed</p>	<p>...shows kindness and listens to others, to understand their needs and help improve their wellbeing.</p>
	Being emotionally intelligent	<p>Identifying my own emotions and prejudices and understanding how these can affect my judgment and behaviour</p> <p>Identifying my strengths and limitations, the impact of my behaviour on others and the effect of stress on my own behaviour</p> <p>Managing the impact of my emotions on my behaviour with consideration of the impact on others</p> <p>Recognising and articulating my own values and principles, understanding how these may differ from those of other individuals and groups</p> <p>Being positive in my outlook to identify opportunities in situations and in my relationships with others to gain their support</p>	<p>...knows how their attitudes, feelings and behaviours can impact on relationships.</p>
	Engaging authentically	<p>Showing genuine, care, respect and concern for others wellbeing, which includes the work and life needs of people</p> <p>Aiming to deliver what I promise, acknowledging when I cannot and communicate what I will do in a clear, engaging and transparent way</p> <p>Communicating clearly to prevent misunderstanding, taking time to check that people know what is being asked of them, as well as appreciating what is asked of me.</p> <p>Recognising situations that could create risk or cause harm to people and having the confidence to raise concerns and speak up when needed.</p> <p>Acknowledging when things have gone wrong and act in a way that creates a fair and just culture</p> <p>Acknowledging when things have gone wrong and act in a way that creates a fair and just culture</p>	<p>...is real, genuine, open and honest.</p>

Leadership Components	Enablers: <i>I will achieve this by...</i>	Capabilities: <i>I can demonstrate or evidence this by...</i>	Outcomes: <i>We will achieve a culture where everyone...</i>
Interdependent and Collaborative System Leadership	Co-producing and co-designing	<p>actively helping others to become involved and creating the conditions to support them in decision-making processes</p> <p>valuing the contribution from people with lived and learned experience</p> <p>encouraging differences of opinion and being comfortable with this</p> <p>developing and strengthening my facilitation skills to solve problems together</p> <p>strengthening the development of partnerships working between staff, people with lived experience and their respective communities</p>	...works together as equals to design and deliver health and social care services.
	Building a common purpose	<p>committing to the vision and objectives of my organisation</p> <p>challenging behaviours, symbols & rituals which are not consistent with the vision and objectives of my organisation</p> <p>being clear on my responsibilities & making the best use of my expertise & the expertise others bring</p> <p>valuing open, respectful and thoughtful debate with others to achieve high quality, continually improving compassionate care and support</p> <p>acknowledging the effort and contribution of the people I work with</p>	...shares the same goal of delivering high-quality, continually improving compassionate care and support.
	Sharing power	<p>developing relationships that achieve the best mutually agreed outcomes for people through agreed values, goals, wishes and desires</p> <p>participating and sharing in decision-making to improve my services</p> <p>engaging authentically in my relationships with others to create connectedness between people</p> <p>working together across different organisations, departments and teams to ensure safe quality care and support is provided</p> <p>developing relationships that achieve the best mutually agreed outcomes for people through agreed values, goals, wishes and desires</p>	...connects and combines their strengths, knowledge and expertise.
	Working across boundaries	<p>bringing myself to work, acting with purpose and enabling safe personal self-expression for myself and others.</p> <p>encouraging, promoting and sharing learning in and across organisations, learning from engagement with patients/service users and their carers/families</p> <p>reaching out to people beyond my immediate network</p> <p>actively considering others' perspectives and gathering diverse viewpoints</p> <p>developing an inquisitive mindset with high levels of curiosity and questioning</p>	...shares resources and knowledge across professions, agencies and sectors.

THE COLLECTIVE LEADERSHIP FRAMEWORK FOR NURSING AND MIDWIFERY

The following conceptual diagram, presented in Figure 8, represents the relationship between the four collective leadership components, their associated enablers and the three overarching requirements necessary for nurses and midwives to develop their collective leadership capabilities.

Figure 8: Collective Leadership Framework for Nursing and Midwifery in NI



As a nurse or midwife, to develop as a collective leader, you are required to:

EXPLORE your required capabilities, assess and identify your individual learning and development needs and source ways to achieve what is required of you;

EVOLVE during the process and develop your capacity to support a culture of collective leadership across the HSC system;

TRANSFORM by playing an ongoing central role in creating an accessible, high-quality and values-driven environment for service users.

COLLECTIVE LEADERSHIP ASSESSMENT TOOL

To support implementation of the *Framework*, an Assessment Tool has been developed (Annex 4).

As the *Framework* is based on the concept that leadership is not restricted to people who hold designated leadership roles, it has not been tied to particular job roles, stages or levels. Therefore, individuals may find that, where they assess their learning and development needs to be, may vary depending on the component, enabler or capability itself.

All capabilities included in the framework are important in developing a nurse or midwives leadership role. However, the type of job individuals have, the needs of the people they work with and the context of their role within an organisation will all affect which are most important for them to use and develop.

This will include individuals working through each collective leadership component, enabler and capability relevant to their role. An example of the assessment tool and rating scale for each capability is presented at Figure 9:



Figure 9: Assessment Tool Example

Collective Leadership Component: <i>Shared leadership in and across teams</i>					
Rating Scale: 1 Needs a lot of development 2 Needs some development 3 Well developed					
Enablers: <i>I will achieve this by...</i>	Capabilities: <i>I can demonstrate or evidence this by...</i>	Outcomes: <i>We will achieve a culture where everyone...</i>	1	2	3
Working effectively as a team	understanding roles, responsibilities and purpose within the team	...works together and recognises contributions of all team members			
	being aware of team dynamics and acting to promote effective team working				
	seeking opportunities to support and help people in both my own and other teams				
	helping others towards common goals, providing clear objectives and offering appropriate support				
	seeking feedback and examples of good practice, aiming to improve where possible				
Coaching and mentoring	identifying situations when coaching and mentoring could be used	... helps others to achieve their goals and reach their full potential through supportive conversations			
	actively listening during the mentoring/coaching session				
	being realistic about mentoring/coaching expectations and recognising when additional support may be needed				
	building rapport, using intuition to ask appropriate questions and giving constructive feedback and support				
	using effective techniques to foster the long-term learning or development of others				
Sharing and learning	respecting the psychological safety provided within my team to share learning and improve the improve the quality of my work	... shares their experiences for learning and improvement, and feels safe to be open and honest			
	interacting with team members to develop mutual understanding, empathy and caring to practically support each other, in an open and honest way.				
	actively seeking opportunities to learn and share with other colleagues				
	applying learning to practical work				
	building learning from experience into future plans				
Valuing difference and diversity	valuing diversity and challenging discrimination within the team and across the organisation	... values the contributions of people from diverse backgrounds and with different perspectives			
	speaking up if behaviours exist that aren't inclusive or don't promote diversity and equality				
	learning from the lived experience of the people around us and work to promote equality, diversity and inclusion				
	seeking diverse views when making decisions to ensure the best possible outcomes for others				
	upholding personal and professional ethics and values, taking into account the values of the organisation and respecting the culture, beliefs and abilities of others				

Further information and best practice tips on how nurses and midwives can gather their results and plan for their learning and development needs are presented in Annex 4.

05

**IMPLEMENTATION
AND MONITORING**

IMPLEMENTATION AND MONITORING OF THE FRAMEWORK

Implementation of the framework will involve building on the excellent examples already in our system in order to develop collective leadership capabilities at all levels and ensure everyone is prepared to lead, regardless of position or practice area. Realising the ambition will require a change in behaviours and mind-sets.

This framework is about identifying and promoting the right capabilities and signalling that collective leadership success is not just about what we deliver but how we deliver it, to continually improve the service provided. It includes a tool for staff to use to consider how their capabilities compare to the HSC values and behaviours and the culture that is required. Good leadership at all levels:

- Enables individuals and teams to perform at their best;
- Makes people feel valued;
- Provides better, safer and more effective care for service users.

Nonetheless, there are requirements from employer organisations to enable and support this – as presented below.

Steps to consider to establish the framework at organisational level:

Share the Vision and Build Will

- 1 Communicate and engage widely to reach all relevant stakeholders, areas and staff to share the vision that has been created and build will to encourage the right collective leadership capabilities at all levels within the organisation;
- 2 Promote adoption of the framework at the organisation's Board/Senior level and build into strategic aims and funding streams;
- 3 Review any existing leadership documents in use within the organisation to ensure alignment;
- 4 Agree an action plan across the organisation with practical steps to prioritise specific areas of focus;
- 5 Include the framework in new relevant policy development/frameworks/guidance.

Develop Capacity and Capability

- 1 Include the collective leadership enablers and capabilities in job descriptions and assessment/shortlisting processes to determine how well candidates' experience and commitment match these;
- 2 Incorporate into recruitment processes and when interviewing for roles at all levels, consider basing questions on the collective leadership enablers and capabilities;
- 3 Build the collective leadership components, enablers and capabilities into appraisal conversations to understand how well staff are doing in these areas and how they can do better;
- 4 Undertake learning needs analysis – where are we now and what are we hoping to achieve;
- 5 Targeting of priority activities/programmes at all levels, as appropriate;
- 6 Integrate learning and development into daily work – call out undesired behaviours;
- 7 Build into a digital system to improve access to supporting resources for all staff;
- 8 Consider what resource investment is required, if any;
- 9 Organise leadership and development activities and interventions around the collective leadership components, enablers and associated capabilities and behaviours to help staff learn more about what this framework entails;
- 10 Share learning and exemplars of good practice eg at a collective leadership event or conference.

Delivering Results

- 1 Agree the vision and the culture that must be in place so staff know how they should behave e.g. the collective leadership capabilities;
- 2 Identify accountability and responsibility processes and structures for all staff;
- 3 Establish an oversight and learning system to increase the chance of producing the intended results;
- 4 Link with the wider collective leadership system approach to determine what the assessment for leadership is indicating at present and where the focus needs to be;
- 5 Transparently, frequently and systematically review efforts/results to determine if the aim and objectives are being met.

MONITORING OF THE FRAMEWORK

This *Collective Leadership Framework for Nursing and Midwifery* will not add layers of regulation or oversight. Monitoring will include the use of existing information collection methods to assess how well staff at all levels are adopting and developing the identified capabilities, such as relevant data/information/feedback from HSC Staff Surveys, Quality Improvement Staff Health and Well-Being Surveys, Human Resources Departments, Information and Professional Assurance Frameworks.

Access to a digital system is recommended within this report, preferably at a regional level, for staff to access supporting resources. Such a system would also support monitoring of the framework by providing an opportunity to collect relevant information, create case studies and share best practice.

Monitoring at an organisational level

- Organisations to consider local governance, monitoring and reporting arrangements;
- Regular reviews to ensure inclusion of the framework in all relevant policy development/frameworks/guidance;
- Agree arrangements for monitoring the implementation plan to determine if the framework has been adopted, established and/or embedded in day to day practice across the organisation;
- Consider monitoring the links to wider interdisciplinary leadership frameworks, where relevant;
- Monitor the benefit of any resource investment;
- Learn from service user feedback to determine if there are improvements in user experience and/or outcomes;
- Monitor recruitment and retention information and consider any correlation;
- Review accountability and responsibility processes and structures;
- Consider where the organisation is on the journey towards a culture of collective leadership.

06

**CONCLUSION AND
RECOMMENDATIONS**

CONCLUSION

When we ask nurses and midwives who they think of as leaders among their professions, it is often senior managers, academics or those who work in strategic and policy positions that immediately come to mind. However, it is equally important that all nurses and midwives take part in leadership activities. The purpose of this framework is to demonstrate how collective leadership capacity and capability can be strengthened as an important aspect of effective nursing and midwifery practice at all levels irrespective of role and setting.

The vision of this framework is to create a culture which values acts of leadership from all staff, regardless of hierarchy, experience, location, discipline or level. This will build a collective leadership community in which everyone will take responsibility for nurturing cultures of high quality, continually improving, compassionate care and support.

This in turn will foster better decision making, promote innovation, increase accountability, health and well-being, staff morale and drive efficiency and effectiveness. We want to see nurses and midwives, at all levels, harnessing their strengths and working collectively, collaboratively and effectively across traditional boundaries to improve the outcomes and experiences for individuals, families and populations, addressing unwarranted variations and inequalities.

As HSC services continue to face unprecedented pressures and challenges, it is vital that NI accelerates the development of a culture of collective leadership to meet the challenging demands of health and social care, now and into the future.

Leadership is not a title, it is a mindset that must exist at all levels of an organisation. The development of this framework provides an opportunity to refresh our leadership perspective and make collective leadership front and centre and more relevant to nursing and midwifery workforce processes, at all levels.

Seeing and being involved in collective leadership activities as part of their day-to-day role will help keep nurses and midwives engaged in the shorter term while also proactively pursuing long-term success.

During the development of this framework, we have liaised with many colleagues across NI to ensure new measures for gathering data and feedback, which reflect our changing context and systems, link with this framework, in particular the HSC Survey and DoH Professional Assurance Frameworks.

RECOMMENDATIONS

This report sets out 23 key recommendations addressed to formal leaders who influence the workplace experience of nursing and midwifery staff, at all levels.

However, transforming the working lives of nursing and midwifery staff at all levels, and thereby the quality and sustainability of the care they deliver, requires that an integrated, coherent and comprehensive strategic approach should be taken to enable implementation of the recommendations.

This includes regulatory, education, improvement and professional organisations as well as all other key stakeholders across the HSCs, who should also support organisations to effectively implement each recommendation.

Department of Health

- 1 Establish an Oversight Group to support regional stakeholder engagement, implementation, monitoring and evaluation of the *Collective Leadership Framework for Nursing and Midwifery* across HSC organisation's in NI – linked to the implementation of the Workforce Strategy;
- 2 Include the framework in new relevant policy development/frameworks/guidance;
- 3 Standardise regional workforce planning, recruitment and selection processes for nursing and midwifery to utilise the *Collective Leadership Framework* within job descriptions, interview assessments etc;
- 4 Standardise regional professional processes and tools to include the Collective Leadership Framework including appraisals and clinical supervision;
- 5 Consider support for formal priority collective leadership programmes at a regional level via the Education Commissioning Group (ECG) for Nursing and Midwifery;
- 6 Consider links to a regional digital system for access to supporting resources, case studies and exemplars for staff at all levels;
- 7 Lead a regionally agreed evaluation which includes the use of existing information collection methods to assess how well staff at all levels are developing the identified behaviours, such as, relevant data/feedback from HSC Staff Surveys, Human Resources Departments and Professional Assurance Frameworks;
- 8 Support an opportunity to share learning and exemplars of good practice, for example, annual collective leadership event or conference.

Employer Organisations

- 9 Communicate and engage widely to reach all relevant stakeholders, areas and staff to share the vision, build will and encourage the right collective leadership capabilities at all levels within the organisation or system;
- 10 Adopt this *Collective Leadership Framework for Nursing and Midwifery* at the organisation's Board/Senior level and build into strategic aims;
- 11 Review any existing leadership documents in use to ensure alignment;
- 12 Engage in a regional implementation, monitoring and evaluation plan with practical steps to prioritising specific areas of focus and/or linking it to wider professional and interdisciplinary leadership frameworks e.g appraisals and clinical supervision;
- 13 Include the framework in new relevant policy development/frameworks/guidance;
- 14 Implement standardised regional workforce planning and recruitment and selection processes to include the *Collective Leadership Framework for Nursing and Midwifery*, and within appraisals and supervision;
- 15 Implement this *Collective Leadership Framework for Nursing and Midwifery* via regional professional processes and tools, including appraisals and clinical supervision;
- 16 Conduct a learning needs analysis to determine a baseline and any future developments or improvements;
- 17 Identify formal priority collective leadership programmes at all levels;
- 18 Integrate learning and development into the daily work schedules and routines of nurses and midwives;
- 19 Encourage and support a culture where undesired behaviours that do not align with this *Collective Leadership Framework for Nursing and Midwifery* are called out and dealt with appropriately;
- 20 Organise formal and informal leadership and development activities and interventions around the collective leadership components, enablers and associated capabilities.

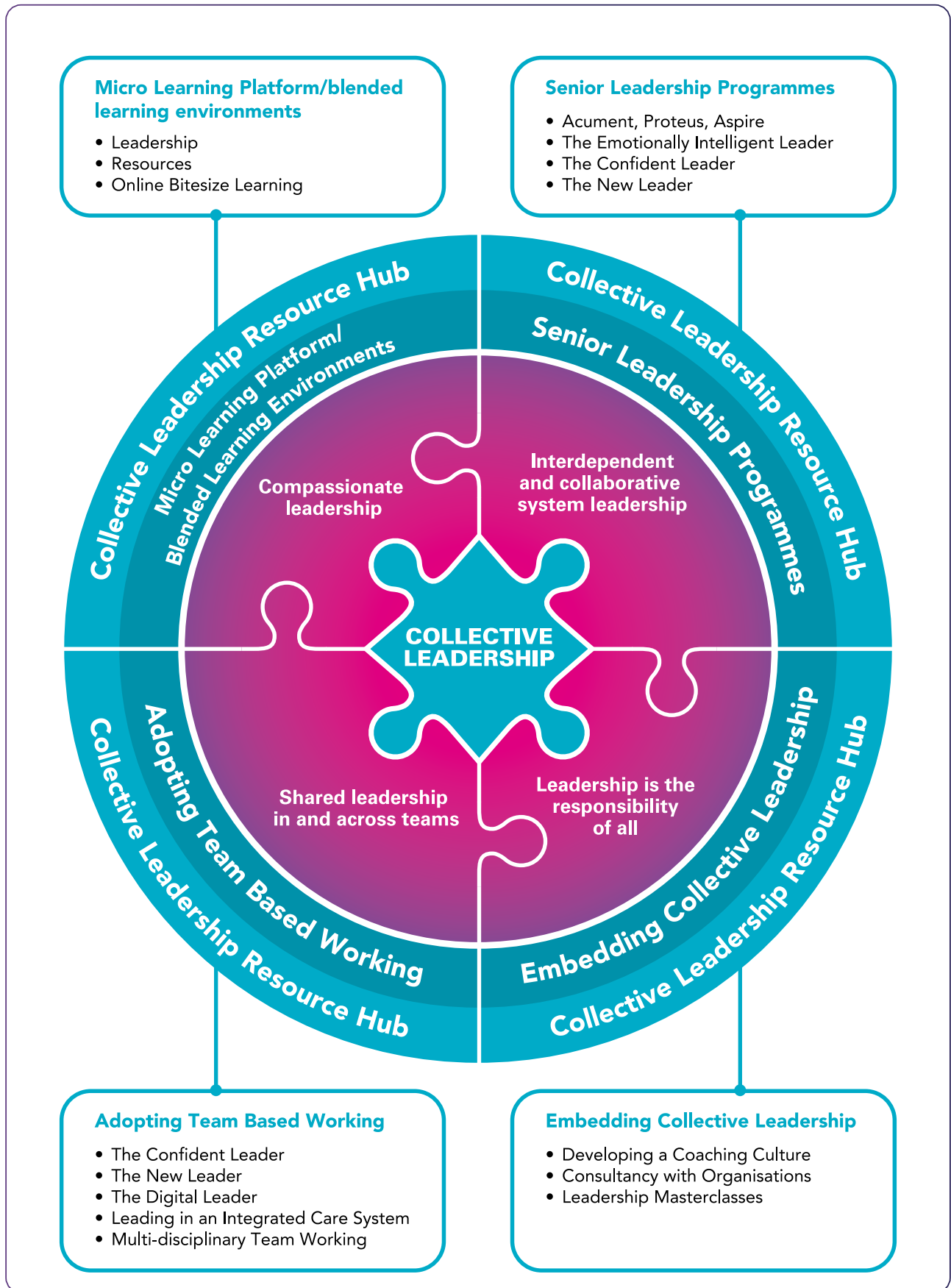
Education Organisations

- 21 Develop and organise formal leadership and development activities and interventions around the this *Collective Leadership Framework for Nursing and Midwifery's* components, enablers and associated behaviours;
- 22 Include the Collective Leadership Framework in both pre and post registration nursing and midwifery education programmes;
- 23 Consider the HSC Leadership Centre's Collective Leadership Hub²² as a complementary resource to formal collective leadership development programmes and relevant team development initiatives (Figure 10).

A COLLECTIVE LEADERSHIP FRAMEWORK

FOR NURSING AND MIDWIFERY

Figure 10: HSC Leadership Centre’s Collective Leadership Hub





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ANNEXES

ANNEX 1

Membership of the Task and Finish Group

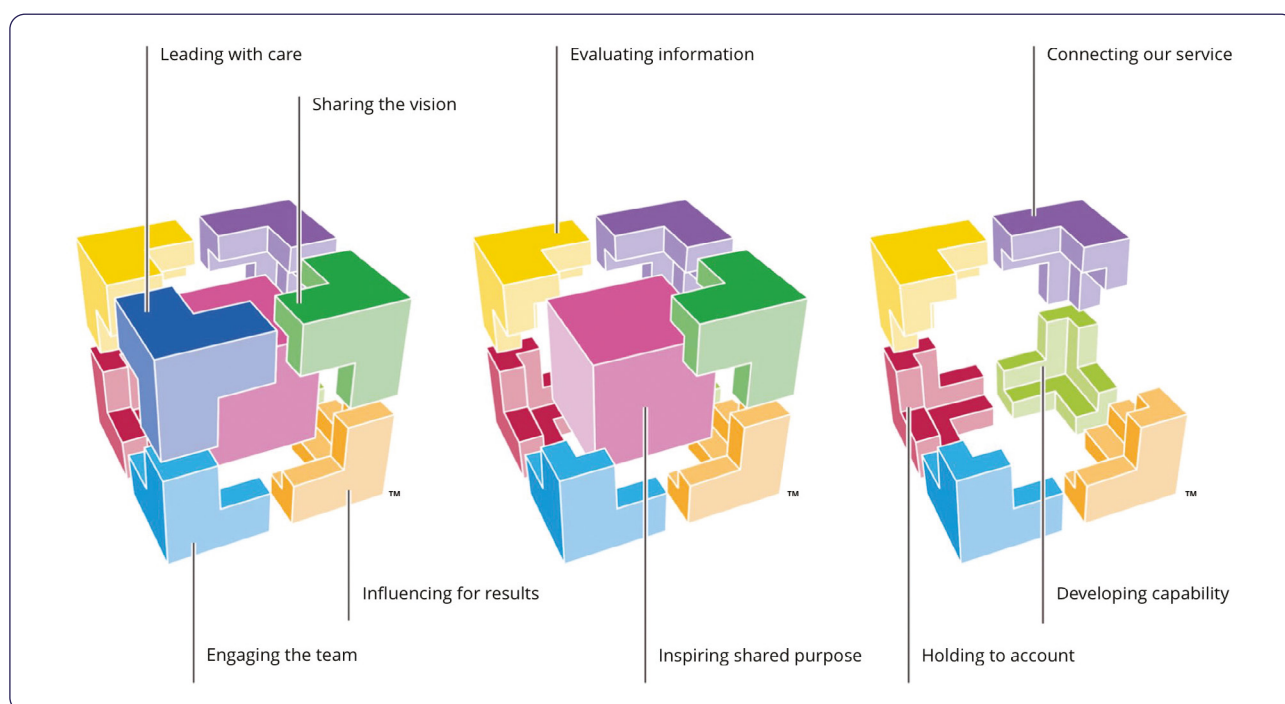
NAME	ORG
Chair: Myra Weir	HSCLC
Project Lead: Dr Carole McKenna	NIPEC
Professional Officer: Rose McHugh	NIPEC
Project Officer: Laura Jones	NIPEC
Brenda Carson	NIPEC
Donna Keenan	WHST
Elizabeth Graham	NHST
Patricia Ferguson	BHST
Elinor Welch	SEHST
Grace Hamilton	SHST
Denise Boulter	PHA
Sarah Penney	Independent Sector/UU
Katherine McElroy	PCC
Janet McCusker	CEC
Dr Debbie Goode	UU
Professor Tanya McCance	UU
Lesley Dornan	UU
Gail Anderson	QUB
Dr Barry Quinn	QUB
Ruth Thompson	RCN
Karen Murray	RCM
Ethel Rodrigues	Unite
Helen McVicker	NISCC
Dr Lorraine Parks	NIMDTA
Professor Suzanne Martin	AHPs
Robin Arbuthnot	HR Directors

ANNEX 2

Healthcare Leadership Models and Frameworks

In England, the *Healthcare Leadership Model*²³ (Figure 11) aims to deliver excellent leadership across the NHS and to have a direct impact on patient care. Comprising nine leadership dimensions it aims to help clinical and non-clinical staff explore ways in which they might already be acting as a leader, or inspire them to identify areas to develop and grow their leadership skills and behaviours.

Figure 11: The Healthcare Leadership Model



The model includes tools, resources and a range of programmes designed to develop and support staff, organisations and local partners to develop leaders; celebrating and sharing where outstanding leadership makes a real difference. One such resource is *Our Leadership Way*²⁴ (Figure 12):

Figure 12: NHS Leadership Academy Our Leadership Way



This approach describes how we can operate at our best and provides a tool for leaders to use to consider how their behaviour impacts on the cultures they create. Inclusive behaviours, required at every level are presented, symbolised by the heart (compassionate), the head (curious) and the hand (collaborative).

23 NHS Academy (2013) www.leadershipacademy.nhs.uk/healthcare-leadership-model/

24 NHS Leadership Academy (2021) www.leadershipacademy.nhs.uk/organisational-resources/our-leadership-way/

Wales’ approach to leadership development is encompassed by the principles of compassion²⁵, as outlined in Figure 13:

Figure 13: Compassionate Leadership Principles for Health and Social Care in Wales



The aim of this approach is to create a shared language of what compassionate leadership is and what it looks like in practice²⁶. The King’s Fund Report²⁷ refers to four elements of compassionate leadership, which form the Compassionate Behaviours Compass of the Wales approach.

In Scotland, *Delivering Quality Through Leadership*²⁸ recognises local and national linkages and provides scope for development approaches. A summary of Leadership Qualities and associated behaviours (in each of the clusters: *Personal Qualities*; *Service Excellence*; and *Future Focus*) provide a basis for further local development (Figure 14):

Figure 14: NHS Scotland’s Model for Leadership Development



25 HEIW (2021) *Compassionate Leadership Principles for Health and Social Care* <https://leadershipportal.heiw.wales>

26 HEIW (2020) <https://heiw.nhs.wales/workforce/10-year-workforce-strategy-for-health-and-social-care/>

27 King’s Fund (2020) www.kingsfund.org.uk/insight-and-analysis/reports/courage-compassion-supporting-nurses-midwives

28 NHS Scotland (2010) www.gov.scot/publications/delivering-quality-through-leadership-nhsscotland-leadership-development-strategy/

ANNEX 3

Comparison Matrix – Collective Leadership Components and Enablers Vs HSC Values

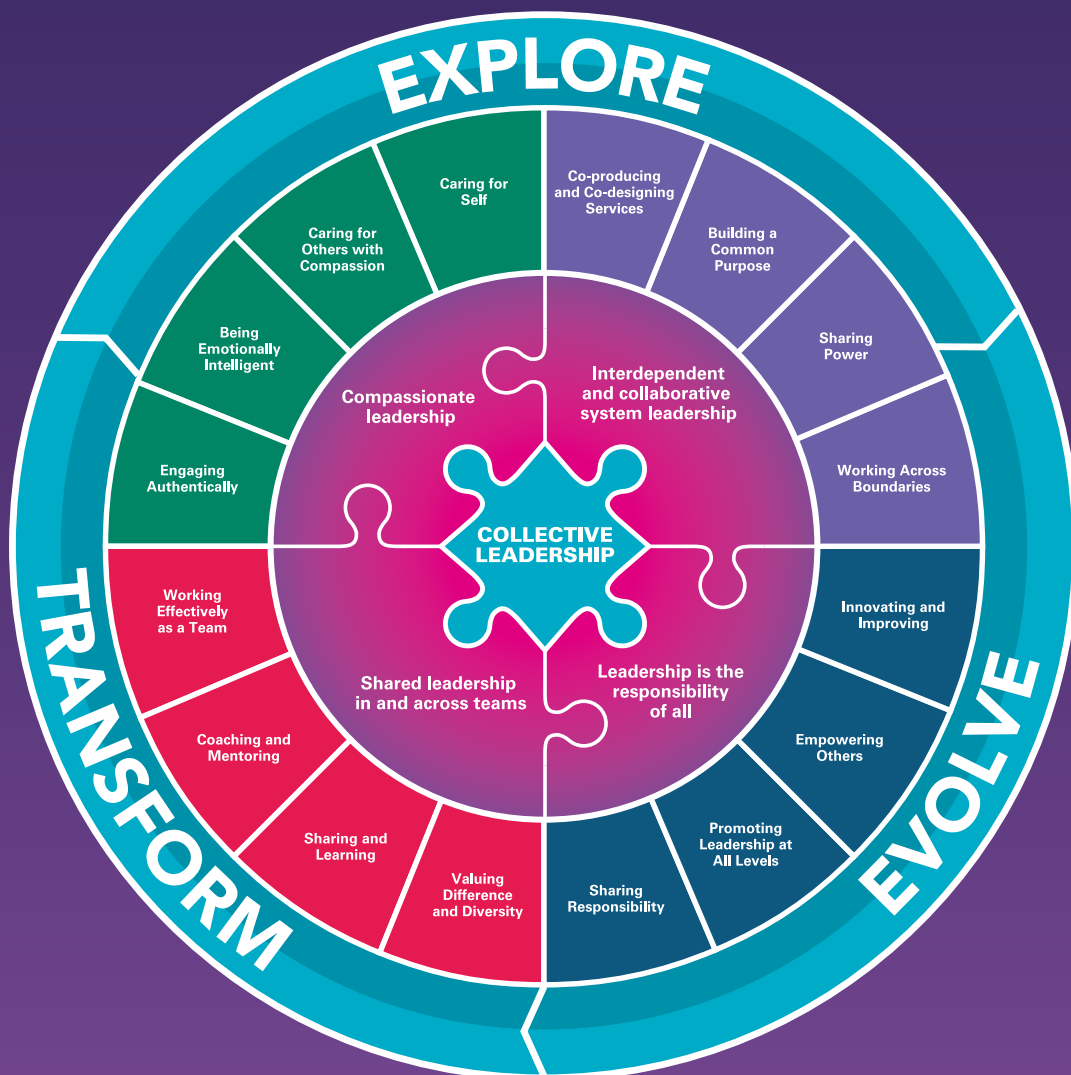
HSC Value	HSC Behaviour	Leadership is the responsibility of all				Shared leadership in & across teams			
		Innovating and improving	Empowering others	Promoting leadership at all levels	Sharing responsibility	Working effectively as a team	Coaching & mentoring	Sharing & Learning	Valuing difference & diversity
Working Together	I work with others and value everyone's contribution	✓	✓	✓	✓	✓	✓	✓	✓
	I treat people with respect and dignity		✓			✓		✓	✓
	I work as part of a team looking for opportunities to support and help people in both my own and other teams			✓		✓	✓	✓	✓
	I actively engage with people on issues that affect them	✓	✓	✓	✓	✓	✓	✓	✓
	I look for feedback and examples of good practice, aiming to improve where possible	✓	✓	✓	✓	✓		✓	✓
Excellence	I put the people I care for and support at the centre of all I do to make a difference				✓				✓
	I take responsibility for my decisions and actions	✓	✓		✓			✓	✓
	I commit to best practice and sharing learning, while continually learning and developing	✓		✓		✓	✓	✓	✓
	I try to improve by asking "could we do this better?"	✓		✓					✓
Openness & Honesty	I am open and honest in order to develop trusting relationships		✓	✓			✓	✓	✓
	I ask someone to help when needed								
	I speak up if I have concerns				✓	✓			✓
	I challenge inappropriate or unacceptable behaviour and practice		✓	✓					✓
Compassion	I am sensitive to the different needs and feelings of others and treat people with kindness		✓	✓		✓	✓	✓	✓
	I learn from others by listening carefully to them		✓		✓	✓	✓	✓	✓
	I look after my own health and well-being so that I can care for and support others			✓					

HSC Value	HSC Behaviour	Interdependent & collaborative system leadership				Compassionate leadership			
		Co-producing & co-designing services	Building a common purpose	Sharing power	Working across boundaries	Caring for self	Caring for others with compassion	Being emotionally intelligent	Engaging authentically
Working Together	I work with others and value everyone's contribution	✓	✓	✓	✓		✓	✓	✓
	I treat people with respect and dignity	✓	✓	✓	✓		✓	✓	✓
	I work as part of a team looking for opportunities to support and help people in both my own and other teams								
	I actively engage with people on issues that affect them	✓	✓	✓	✓		✓		✓
	I look for feedback and examples of good practice, aiming to improve where possible	✓	✓			✓	✓		✓
Excellence	I put the people I care for and support at the centre of all I do to make a difference	✓	✓	✓	✓		✓	✓	✓
	I take responsibility for my decisions and actions			✓			✓	✓	✓
	I commit to best practice and sharing learning, while continually learning and developing				✓	✓			✓
	I try to improve by asking "could we do this better?"	✓	✓	✓	✓	✓			✓
Openness & Honesty	I am open and honest in order to develop trusting relationships	✓	✓	✓	✓		✓	✓	✓
	I ask someone to help when needed					✓	✓	✓	✓
	I speak up if I have concerns		✓	✓			✓		✓
	I challenge inappropriate or unacceptable behaviour and practice		✓	✓	✓				✓
Compassion	I am sensitive to the different needs and feelings of others and treat people with kindness	✓	✓	✓	✓		✓	✓	✓
	I learn from others by listening carefully to them	✓	✓	✓	✓		✓	✓	✓
	I look after my own health and well-being so that I can care for and support others					✓		✓	

ANNEX

04

A Collective Leadership Framework for Nursing and Midwifery



Assessment Tool

INTRODUCTION

To support the implementation of the *Collective Leadership Framework*, this **Assessment Tool** will support nurses and midwives to develop their collective leadership capabilities, regardless of their level or area or field of practice.

The following information provides guidance on how to use the Assessment Tool and help you to identify your individual learning and development needs.

This tool should help you build on capabilities you already have. It promotes a flexible approach to maintaining and developing in any setting or practice area where you find yourself.

How to Use the Assessment Tool?

In order to identify and develop your collective leadership capabilities, there are a number of processes you need to work through as outlined below.

A. Assessing Your Learning and Development Needs

As the *Framework* is based on the concept that leadership is not restricted to people who hold designated leadership roles, it has not been tied to particular job roles, stages or levels. Therefore, you may find that, where you assess your individual learning and development needs to be, may vary depending on the component, enabler or capability itself.

All capabilities included in the framework are important in developing your leadership role. However, the type of job you have, the needs of the people you work with and the context of your role within your organisation will all affect which are most important for you to use and develop.

In order to assess your learning and development needs, you will need to work through each collective leadership component, enabler and capability relevant to your role. There is no particular order.

BEST PRACTICE TIPS:

Assess yourself against all the components, enablers and capabilities. You may want to ask a colleague or your line manager to help you decide on your learning and development needs.

A COLLECTIVE LEADERSHIP FRAMEWORK

FOR NURSING AND MIDWIFERY

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To work through a collective leadership enabler, take each capability in turn and rate yourself using the following scale:

1. You need a lot of development
2. You need some development
3. You are well developed

You should assess yourself against ALL the capabilities relative to your role for each of the four leadership components. You may want to ask a colleague or your line manager to help you decide.

BEST PRACTICE TIPS:

Be honest with yourself – rate yourself realistically, even if you do require a lot of development. You may find it helpful to discuss this with your manager or with another colleague, for example during professional supervision.

You can, if you wish, ask different people to assess you using the Assessment Tool. To do this, ask people in advance if they are happy to do this for you and then give them a copy of the relevant pages to complete and return to you.

People you may want to approach might include:

- Your line manager
- Other nurses or midwives you work with
- Others e.g. colleagues you work with outside your organisation
- Other members of the multi-professional team you work with.

This is commonly known as a 360° assessment.

B. Gathering Your Results

Having assessed yourself, you are ready to look at where your learning and development needs are.

BEST PRACTICE TIPS:

Ask other people to help you to gather a true picture of your learning and development needs. Select two or three areas to focus on at most at any one time. You may wish to take one enabler over a 4-6 week period and provide evidence for your learning as you acquire the capabilities you want to develop.

C. Planning for Your Learning and Development Needs

Once you have decided *what* you need to learn and develop for each of your identified leadership capabilities, you need to plan *how* you are going to do that. There are many ways you can do this. Meeting your learning and development needs can incorporate many types of flexible learning activities for example:

- supervised practice with a more experienced colleague;
- formal learning and development programmes;
- visits to another service area to observe practice or develop skills;
- completing an audit on an area of practice;
- development of practice activities;
- service development activities;
- distance and e-learning activities.

It may be necessary for you to maintain a portfolio of learning and development to demonstrate that you have developed the relevant behaviours. This will include pieces of supporting evidence such as:

- supervision and appraisal session records;
- reflections on specific area of learning and development;
- records of learning arising from participation in activities;
- reflections on reading journal articles;
- certificates achieved through any formal learning processes;
- other documentation e.g. a thank you letter from a service user or colleague.

Keeping a portfolio is useful to demonstrate your ongoing development e.g. for appraisal or revalidation requirements.

For more help with gathering information or keeping a portfolio and how to reflect, go to:
<https://www.nmc.org.uk>

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FOR NURSING AND MIDWIFERY

Leadership Component: *Leadership is the responsibility of all*

Rating Scale: 1 Needs a lot of development | 2 Needs some development | 3 Well developed

Enablers: <i>I will achieve this by...</i>		Capabilities: <i>I can demonstrate or evidence this by...</i>	Outcomes: <i>We will achieve a culture where everyone...</i>	1	2	3
Innovating and Improving	accepting and assisting in developing new ideas to improve safety and quality of services	...improves safety and contributes to quality improvement				
	reviewing practice and putting forward ideas to improve quality of services and minimise risk					
	taking action when I notice shortfalls in patient safety and am not afraid to try new things					
	routinely seeking feedback from people to improve services					
	working with others to constructively improve our services using systematic quality improvement approaches					
Empowering Others	respecting, valuing and acknowledging the roles, contributions and expertise of others	...enjoys being at work and is encouraged to use their expertise				
	creating a supportive environment which actively seeks and encourages others' contributions					
	providing opportunities to give and receive feedback					
	recognising the need for open and honest communication					
	encouraging people to engage in decision-making and to challenge constructively					
Promoting leadership at all levels	accepting that I have a leadership role in ensuring safe, high quality, compassionate care and support	...is a leader, even if not a formal leadership position, and develops leadership capabilities				
	acting as a leader using a range of collective leadership capabilities					
	recognising that leadership within the team is shared and not the responsibility of only one person					
	actively communicating with others using effective methods					
	seeking opportunities to develop and improve own leadership capabilities					
Sharing responsibility	involving key people in formal and informal decision-making processes about the future of services	...can influence, make decisions and take action where appropriate				
	remaining accountable for making timely decisions in complex situations					
	modifying decisions & flexing direction when faced with new information or changing circumstances					
	participating in decision-making					
	making unpopular decisions when in the best interests of service users and staff					

Collective Leadership Component: *Shared leadership in and across teams*

Rating Scale: 1 Needs a lot of development 2 Needs some development 3 Well developed			
Enablers: <i>I will achieve this by...</i>	Capabilities: <i>I can demonstrate or evidence this by...</i>	Outcomes: <i>We will achieve a culture where everyone...</i>	
			1 2 3
Working effectively as a team	understanding roles, responsibilities and purpose within the team	...works together and recognises contributions of all team members	
	being aware of team dynamics and acting to promote effective team working		
	seeking opportunities to support and help people in both my own and other teams		
	helping others towards common goals, providing clear objectives and offering appropriate support		
	seeking feedback and examples of good practice, aiming to improve where possible		
Coaching and mentoring	identifying situations when coaching and mentoring could be used	... helps others to achieve their goals and reach their full potential through supportive conversations	
	actively listening during the mentoring/coaching session		
	being realistic about mentoring/coaching expectations and recognising when additional support may be needed		
	building rapport, using intuition to ask appropriate questions and giving constructive feedback and support		
	using effective techniques to foster the long-term learning or development of others		
Sharing and learning	respecting the psychological safety provided within my team to share learning and improve the improve the quality of my work	... shares their experiences for learning and improvement, and feels safe to be open and honest	
	interacting with team members to develop mutual understanding, empathy and caring to practically support each other, in an open and honest way.		
	actively seeking opportunities to learn and share with other colleagues		
	applying learning to practical work		
	building learning from experience into future plans		
Valuing difference and diversity	valuing diversity and challenging discrimination within the team and across the organisation	...values the contributions of people from diverse backgrounds and with different perspectives	
	speaking up if behaviours exist that aren't inclusive or don't promote diversity and equality		
	learning from the lived experience of the people around us and work to promote equality, diversity and inclusion		
	seeking diverse views when making decisions to ensure the best possible outcomes for others		
	upholding personal and professional ethics and values, taking into account the values of the organisation and respecting the culture, beliefs and abilities of others		

A COLLECTIVE LEADERSHIP FRAMEWORK

FOR NURSING AND MIDWIFERY

Collective Leadership Component: *Compassionate leadership*

Rating Scale: 1 Needs a lot of development 2 Needs some development 3 Well developed					
Enablers: <i>I will achieve this by...</i>	Capabilities: <i>I can demonstrate or evidence this by...</i>	Outcomes: <i>We will achieve a culture where everyone...</i>	1	2	3
Caring for self	Understanding my own emotions, values and sense of purpose and their effect on my performance.	...looks after their own physical, psychological and social wellbeing			
	Managing my own time effectively and completing work requirements and commitments to a high standard, without compromising my own health and wellbeing.				
	Practicing taking care of the physical, mental and emotional aspects of my life to promote health and wellbeing.				
	Remaining calm and focused under pressure.				
	Recognising when I am struggling/overwhelmed and seek timely support				
Caring for others with compassion	Being kind, valuing people as individuals, treating them with compassion, courtesy, respect and dignity.	...shows kindness and listens to others, to understand their needs and help improve their wellbeing			
	Providing support and taking effective action to improve the health and wellbeing of others, focusing on what matters				
	Listening, showing empathy, advocating and working in partnership when dealing with people				
	Creating psychologically safe environments that enable open, honest and fearless conversations.				
	Appreciating the physical and emotional impact of working in HSC, offering support when needed.				
Being emotionally intelligent	Identifying my own emotions and prejudices and understanding how these can affect my judgment and behaviour	...knows how their attitudes, feelings and behaviours can impact on relationships			
	Identifying my strengths and limitations, the impact of my behaviour on others and the effect of stress on my own behaviour				
	Managing the impact of my emotions on my behaviour with consideration of the impact on others				
	Recognising and articulating my own values and principles, understanding how these may differ from those of other individuals and groups				
	Being positive in my outlook to identify opportunities in situations and in my relationships with others to gain their support				
Engaging authentically	Showing genuine, care, respect and concern for others wellbeing, which includes the work and life needs of people	...is real, genuine, open and honest			
	Aiming to deliver what I promise, acknowledging when I cannot and communicate what I will do in a clear, engaging and transparent way				
	Communicating clearly to prevent misunderstanding, taking time to check that people know what is being asked of them, as well as appreciating what is asked of me				
	Recognising situations that could create risk or cause harm to people and having the confidence to raise concerns and speak up when needed				
	Acknowledging when things have gone wrong and act in a way that creates a fair and just culture				

Collective Leadership Component: *Interdependent and collaborative system leadership*

Rating Scale: 1 Needs a lot of development 2 Needs some development 3 Well developed					
Enablers: <i>I will achieve this by...</i>	Capabilities: <i>I can demonstrate or evidence this by...</i>	Outcomes: <i>We will achieve a culture where everyone...</i>	1	2	3
Co-producing and co-designing services	actively helping others to become involved and creating the conditions to support them in decision making processes	...works together as equals to design and deliver health and social care services			
	valuing the contribution from people with lived and learned experience				
	encouraging differences of opinion and being comfortable with this				
	developing and strengthening my facilitation skills to solve problems together				
	strengthening the development of partnerships working between staff, people with lived experience and their respective communities				
Building a common purpose	committing to the vision and objectives of my organisation	...shares the same goal of delivering high-quality, continually improving compassionate care and support			
	challenging behaviours, symbols & rituals which are not consistent with the vision and objectives of my organisation				
	being clear on my responsibilities & making the best use of my expertise & the expertise others bring				
	valuing open, respectful and thoughtful debate with others to achieve high quality, continually improving compassionate care and support				
	acknowledging the effort and contribution of the people I work with				
Sharing power	developing relationships that achieve the best mutually agreed outcomes for people through agreed values, goals, wishes and desires	...connects and combines their strengths, knowledge and expertise			
	participating and sharing in decision-making to improve my services				
	engaging authentically in my relationships with others to create connectedness between people				
	working together across different organisations, departments and teams to ensure safe quality care and support is provided				
	developing relationships that achieve the best mutually agreed outcomes for people through agreed values, goals, wishes and desires				
Working across boundaries	bringing myself to work, acting with purpose and enabling safe personal self-expression for myself and others.	...shares resources and knowledge across professions, agencies and sectors			
	encouraging, promoting and sharing learning in and across organisations, learning from engagement with patients/service users and their carers/families				
	reaching out to people beyond my immediate network				
	actively considering others' perspectives and gathering diverse viewpoints				
	developing an inquisitive mindset with high levels of curiosity and questioning				



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