



project lift

Project Lift Community Engagement Events Series

Final Report

September 2019 to March 2021

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Introduction to this report

Between September 2019 and March 2021, Project Lift worked with Kaleidoscope Health and Care and its partners Heather Shearer and Meg Wright to deliver its 'community engagement programme'. The programme consisted of a series of events (digital and face-to-face) and other activities bringing people together from across healthcare and social services in Scotland to discuss their challenges and experiences, connect with each other, build individual agency and contribute to a collective conversation around what good leadership looks like. In doing so, the programme would support Project Lift's ultimate goal to establish a system-wide approach to identifying, supporting, enhancing and growing leadership at all levels across Scottish healthcare and social services, supporting the transformation of health and social services in Scotland.

This report describes the outcomes of the programme over the past 18 months in terms of its impact on community members themselves, insights gathered on what good leadership looks like for healthcare and social services, and the reach of the programme in terms of number and diversity of people engaged with.

The report will be of interest to anyone working in health and social care wanting to understand the value that the community engagement activity could have for them personally or professionally, or for their colleagues. The report also has implications for policymakers and leaders within government, healthcare and social services who want to understand what impact this kind of engagement programme can have on the sector's progress and transformation. There is also the third audience of anyone trying to create system transformation via supportive community engagement (or networking) methods, particularly in relation to the topics of leadership and culture.

The report outlines:

- **What we set out to achieve** with the programme, including our aims and their associated metrics/measures
- **Our methodology** for delivering the programme, including the shift in the plan in response to Covid-19

- **The outcomes** of the programme in relation to our aims and their associated metrics/measures, which included:
 - 'Broadening the reach of Project Lift';
 - 'Having a positive impact on community members' and
 - 'Contributing to a collective understanding of 'what good leadership looks like' in healthcare and social services across Scotland'
- **Suggested reflections to take forwards** into any further community engagement

There are also two annexes, one containing a detailed breakdown of each community event and another containing a detailed analysis of the data on the programme's reach.

Critically, the report highlights 12 key indicators of 'good leadership' cited by the community - including 'trust', 'role-modelling', 'creating space for reflection' and 'understanding your team' - all of which relate to skills in relationship building and management. How to create cultures which enable these qualities to shine in the workplace will be a question for more exploration in future engagement activity. While the overall reach of the programme was higher than predicted, a disproportionate majority of community members were healthcare professionals rather than social services professionals. We suggest aiming to close that gap by working closely with the social services community in future engagement. Thirdly, there was an overwhelmingly positive impact of the programme on individuals in relation to helping them build network connections, offering something 'different', helping enhance leadership skills, offering protected time for reflection, peer support through Covid-19 and more. We suggest this is cultivated even more in future engagement by offering more support and/or resources for the community to sustain its connection and conversations beyond the events themselves.

What we set out to achieve

The purpose, aims and metrics of the community engagement programme

What was the purpose of the community engagement programme?

Project Lift's goal is to establish a system-wide approach to identifying, supporting, enhancing and growing leadership at all levels across Scottish healthcare and social services. In doing so, Project Lift will help to support the transformation of health and social services in Scotland, improve their culture and the experience and wellbeing of Scotland's people. Find out more about Project Lift and its wider activity at: projectlift.scot

The community engagement activity of Project Lift underpins all of its other activities (such as talent management and leadership development), supporting it by offering creative and liberating spaces for leaders at all levels to:

- 1) Connect with others to share perspectives and stories;
- 2) Express their experience and interest in leadership, work culture and wellbeing;
- 3) Build their individual agency;
- 4) Make a collective contribution to the leadership of healthcare and social services* across Scotland, regardless of grade or profession.

It was therefore the Project Lift and Kaleidoscope team's mission for this programme of work to **create these spaces**, open to leaders at all levels. In addition, we aimed to a) **increase the reach** of the community and b) **enable connection and collaboration** between disciplines, professions and sectors through the work of this programme.

At the kick-off workshop in September 2019, we established a set of key aims and metrics for the community engagement programme to help us monitor the impact of the programme. These are outlined in **table 1** on the following page and we break down our performance against these metrics through this report.

*Please note, 'social services' refers to all social work, social care and early years services - which may be delivered by public, independent or voluntary organisations.

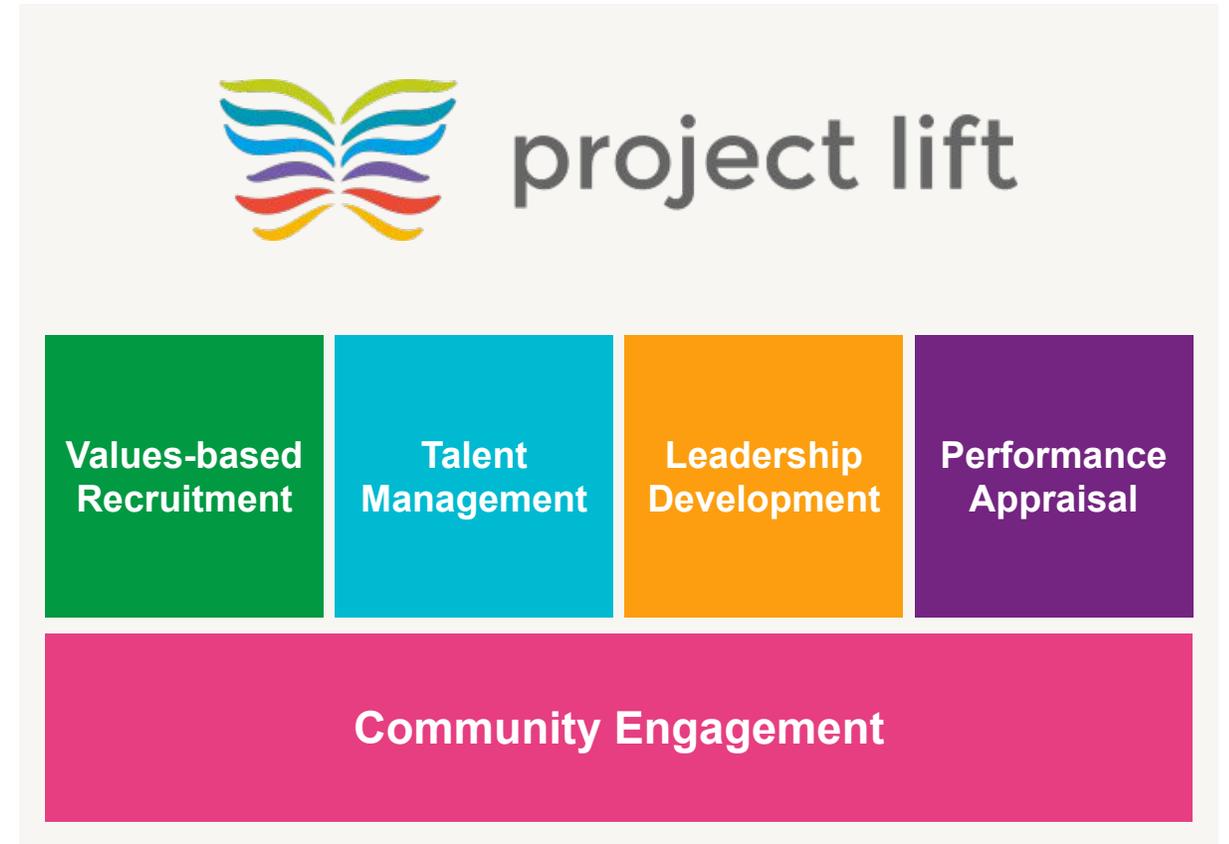


Table 1. The key aims and metrics for the programme

Aims of the programme		Metrics / markers to demonstrate aims are being met
Contributing to a collective understanding of 'what good leadership looks like' in healthcare and social services across Scotland		
1	Understand what 'good leadership' looks like through various lenses	A. Interpret reflections from the Project Lift community to determine what 'good leadership' is
Broadening the reach of Project Lift		
2	Increase the overall reach of the Project Lift community	A. Overall registration numbers for Project Lift events B. Proportion of attendees attending for the 'first time' C. Engagement level with other Project Lift community activity, e.g. website, social media, blogs, short films and writing competition
3	Foster a diverse Project Lift community in terms of sector, professional level and geography	A. Relative proportions of healthcare and social services workers registered for events B. Relative proportions of the professional levels of people registered for events C. Overall geographical spread of people registered for events
Having a positive impact on community members		
4	Help community members build their network connections	A. Proportion of attendees of events who made new/rekindled connections
5	Offer something 'different' to other initiatives	A. Perception of Project Lift events compared to other events or initiatives experienced
6	Help community members enhance their leadership skills in practice	A. Self-reported impact of events on the leadership skills of attendees B. Self-reported 'practical next steps'
7	Offer protected time for reflection	A. Number of hours provided for reflection and professional/personal development B. Self-reported sense of having time for reflection because of these events

Our methodology

The original programme of work and how this evolved through Covid-19

What we planned to deliver and the rationale behind it

In Winter 2019/2020, the Project Lift and Kaleidoscope team kicked off a series of face-to-face Project Lift community events in different areas of Scotland. The community event series is about creating spaces for leaders at every level in the healthcare and social services system to come together to listen, learn, exchange, connect and grow, exploring leadership through various lenses. As well as the face-to-face events, the programme planned two digital events, several videos about leadership in practice, a series of blogs, a writing competition, engagement with close associates (friends) of Project Lift and various analysis and reporting activities. The approximate timeline for these activities is laid out in [figure 1](#).

The planned activity was informed by two scoping workshops with the Project Lift team and friends of Project Lift which took place in Autumn 2019, as well as interviews with key stakeholders focusing on what success would look like for the programme.

In planning a wrap-around programme of engagement, rather than events alone, we hoped to reach a wider audience and break down barriers to new audiences for Project Lift. For example, we knew that some people felt Project Lift's message wasn't aimed at them as they weren't necessarily team leaders by job title - we tried to combat this by using accessible language in and using varied channels with our engagement, such as a writing competition, encouraging attendees to bring a friend or colleague, creating short videos and writing blogs.

We also knew that finding time to attend was a barrier for some people, which is why we created targeted communications with Allied Health Professionals Directors and others in senior positions to help workers feel they had license to attend. Another potential barrier would be the events being too far away geographically for many, hence our decision to spread the events out geographically, and to incorporate digital events and other forms of engagement (blogs, etc).

Another way we planned to expand the reach of Project Lift was leveraging our team's diverse networks. Project Lift already had a high profile among the healthcare community but we wanted to access the social services community more. We worked with Meg Wright and Dr Heather Shearer who are well connected in the voluntary sector and quality improvement community respectively to spread invitations and communications through their networks. Susan Nevill and Jess Alexander, both working for the Scottish Social Services Council, are also key stakeholders in the Project Lift team and we worked with them to spread the message to social services colleagues. Our relationships with these stakeholders were also critical in reaching and building relationships with the speakers for each Project Lift event, which were brought in from all corners of healthcare and social services (as well as outside of it) thanks to these connections.

How the programme evolved due to the Covid-19 pandemic (1 of 2)

Having delivered several of the planned activities (see [figure 2](#)), the Covid-19 pandemic caused the Project Lift and Kaleidoscope team to pause the programme and reassess our activity going forwards. We took a few months to allow the external context to settle and formulate a new, more appropriate set of activities which still achieved the aims we had originally set. We learned that sometimes the best thing we can do is 'get out of the way' and listen to what different groups are saying. This was received well and strengthened our resolve to always be listening.

Following two digital 'discovery workshops' in June 2020 with the friends of Project Lift group, we decided to develop a digital series of events, tailored to the needs highlighted by the community and still with a focus on exploring what good leadership looks like but now set within the context of the pandemic. It was agreed that there was value in creating a forum for discussion through these events in a time of great uncertainty, and that we would remain flexible and responsive to the needs of the community as the pandemic continued. We agreed that the role of the community engagement work would still be to create spaces for leaders at all levels to:

- 1) Connect with others to share perspectives and stories
- 2) Express their experience and interest in leadership, culture and wellbeing
- 3) Build their individual agency
- 4) Make a collective contribution to the leadership of healthcare and social services across Scotland, regardless of role, grade or profession

However, in addition, we wanted to place greater emphasis on the role of this work in:

- 5) Continuing to listen and respond to the community with resources, support and connection opportunities in the Covid-19 context
- 6) Use language that everyone understands in our communications/outreach

Based on these principles, we designed our programme of digital events (see [figure 3](#)). Five of these would be 90-minute, topic-led ('topic') events. Again, each event topic was a different lens through which to view the question: "What is good leadership?" and was based on topics identified in the Discovery Workshops. The events encouraged storytelling - asking the community to submit their experiences on that topic in advance, and pulling out key insights ahead of the event to inform our discussion. We also invited a number of speakers to share their stories in relation to that topic at each event, which we recorded and shared wider beyond the event itself. The events were also used to both make sense of and amplify literature and narratives already out there on that topic. Kaleidoscope Health and Care are experts in running engaging digital events, using technology and facilitation techniques to enable all participants to contribute meaningfully to the conversation. [Find out more about the principles that underpin events at Kaleidoscope.](#)

**"We know that now, more than ever,
there is a need and desire to connect"**

Project Lift community member

How the programme evolved due to the Covid-19 pandemic (2 of 2)

We also ran an additional eight 90-minute, community-led ('hosted') events. These events were designed to 'pass the mic' over to the community entirely, allowing them to set the topic for discussion and host the event, while Kaleidoscope and Project Lift supported the technical infrastructure and facilitation. These events would help to shape the narrative around a particular leadership topic that is important to the host and were, again, all about storytelling whereby the host would share their story on a topic and attendees would build on it. To identify hosts for these events, we ran a Twitter campaign encouraging community members to come forward with their topics for discussion, as well as making the invitation at each event as we went along.

An unexpected benefit of the digital programme of events was that we were able to expand our reach, both in terms of numbers and geography as running digital events made them more accessible to more people. As mentioned above, Project Lift is about leadership at all levels and at all stages, in all roles across healthcare and social services in Scotland, and so we wanted to ensure that we reached as many people as possible and as diverse a group of people as possible.

The events were explicitly about starting the conversation, and we encouraged participants to continue the conversation outside of the event by both using Twitter ([#PLCommunityEvents](#)) conversations and [creating resources](#) to support the community to host their own conversations among their own teams. We also ran a [12 days of Christmas campaign](#), sharing 12 short videos from Project Lift community members or friends across Scotland showcasing their activities, skills, entertainment and messages - all as a gift to the Project Lift community.



The key stakeholders involved in delivering the programme

At the heart of this programme was collaboration. The community engagement programme is a collaboration between Project Lift, Kaleidoscope and its associates, the speakers/hosts and the wider community. We aim to bring together all of these voices in the programme and do this through regular meetings, surveys, event feedback and workshops with stakeholders.

Project Lift	Kaleidoscope Health & Care	Heather Shearer and Meg Wright	Speakers and Hosts	Project Lift Community Members
<p>We work most closely with Jenni Jones and Sara Dewar at Project Lift to deliver this programme.</p> <p>We also work with a wider group of Principal Leads and partners at Project Lift, who offer advice on the strategic direction of this work, and offer insights into their areas of expertise. This includes Jess Alexander and Susan Nevill from the Scottish Social Services Council.</p>	<p>Bringing together our experience of community engagement and events, Kaleidoscope Health and Care lead the delivery of the engagement programme. We design and deliver the events, including leading speaker management, facilitation, technical expertise, write ups and evaluation.</p> <p>We also lead the overall project management of the programme.</p>	<p>Heather Shearer and Meg Wright are associates at Kaleidoscope Health and Care. They bring in their expertise from across the healthcare and social services system in Scotland to advise on the programme, facilitate events and broaden the reach of the work. Outside of their work with Kaleidoscope, Heather works with board members, improvement practitioners and medical students and Meg is Interim Manager Forth Valley Rape Crisis.</p>	<p>Much of the community engagement programme has been about storytelling. We heard from a range of inspiring leaders from across the healthcare and social services sectors, and are so grateful to all speakers for telling their story. Bios for all speakers can be found on the Project Lift team page. There were 36 in total across the events, and an additional 11 came forwards to volunteer as hosts for future events.</p> <p>Our speakers were engaged from across the healthcare and social services sector (see the full breakdown of each event in Annex A). We approached them based on their areas of passion, particularly beyond their job description and supported them to deliver their talks, taking into account the purpose, audience and outcomes.</p> <p>In our 'community-hosted conversations', our hosts are much more than speakers - they choose the topic and co-design the agenda and discussion questions.</p> <p>We distribute a survey to speakers to seek their feedback on the process, the event and their experience as a speaker.</p>	<p>The wider Project Lift community have a core role in shaping the direction of this programme. We want this programme to reflect the communities' needs, context and situations and have been able to adapt our approach based on feedback and the ever changing Covid-19 context.</p> <p>We seek views from the wider community through event feedback surveys, interviews with participants and workshops.</p>

How we adapted along the way

From the outset of the programme, we took a 'rapid learning' approach, whereby we evaluated each event via participant feedback and feedback from our teams to understand how and where we could improve for next time. This way, we were constantly adapting how we delivered the programme to ensure it was meeting the needs of the community as best as possible.

For example, when the pandemic started and we decided to take an entirely digital approach, there was a period of testing whether Zoom or MS Teams would be the most appropriate platform to use. We decided to use MS Teams because of its enhanced security and it was the most common platform used by the NHS and local authorities in Scotland. This move involved testing and refining our operations, tech support processes and the way we designed the events. For example, we offered one-to-one tech support for any participants who needed it, and we developed a 'work-around' to create virtual breakout rooms before this was an in-built function for MS Teams. We also discovered that short (90-minute) lunchtime sessions were most convenient for the community and keeping it simple by doing just one set of breakout sessions was preferred.

Through the Discovery Workshops in June 2020, we learnt that the community would appreciate a space to be listened to, share challenges, and get some new perspective among their day-to-day work, especially during the uncertainty and trauma of Covid-19. This is when we introduced the 'hosted' event idea, whereby community members themselves set the topic for discussion at an event, and kicked off the conversation as the 'host'. Kaleidoscope and Project Lift still provided support and infrastructure to run the event, but took more of a background role. This more literally gave the community a platform to have their needs, viewpoints and challenges listened to.

"I like that, as you're doing the events, you are using the new features of Teams and exploiting them. It is great to see"
Project Lift community member

Another key adaptation was the way we supplemented the events with other resources and communications. We worked closely with Sara Dewar, the Project Lift team's Communications Lead, to create multiple methods of engagement with the community, so we were not relying on the events alone. For example, each event had its own page on the website, which contained a blog written by the speaker/host or a team member to kick-start thinking on the topic, and some even provided short videos. We also added each insights pack to the event page, which included recordings of the speakers' talks from the event, as well as other resources like papers, blogs, etc. The Project Lift team also tweeted live alongside each event, to foster real-time online engagement. In addition, they ran a campaign to encourage more community hosts to come forwards, which involved posting short video clips of the Project Lift and Kaleidoscope team members on Twitter talking about the benefits of hosting an event.

To support the significant number of speakers and hosts we were engaging with, we offered individual 'tech tests' for each one to ensure they were comfortable with the setup on the day. After each event, we also asked them for feedback to understand how they felt throughout in the run-up to the event and on the day, and what they took away from it all.

This learning and adaptation was done to ensure we were always listening and responding to the community, and helped us meet the aims of the programme (see [table 1](#)). The following sections of the report provide an overview of our performance against the key metrics supporting these aims. The analysis is broken into sections:

- Contributing to a collective understanding of 'what good leadership looks like' in healthcare and social services across Scotland
- Broadening the reach of Project Lift
- Having a positive impact on community members

Figure 1. Our original programme of activity

The programme involved four face-to-face events (in different areas of Scotland) exploring leadership through various lenses, as well as two digital events, 'leadership in practice' videos, a series of blogs, a writing competition, engagement with certain friends of Project Lift and various analysis and reporting activities. The approximate timeline for these activities is laid out below.

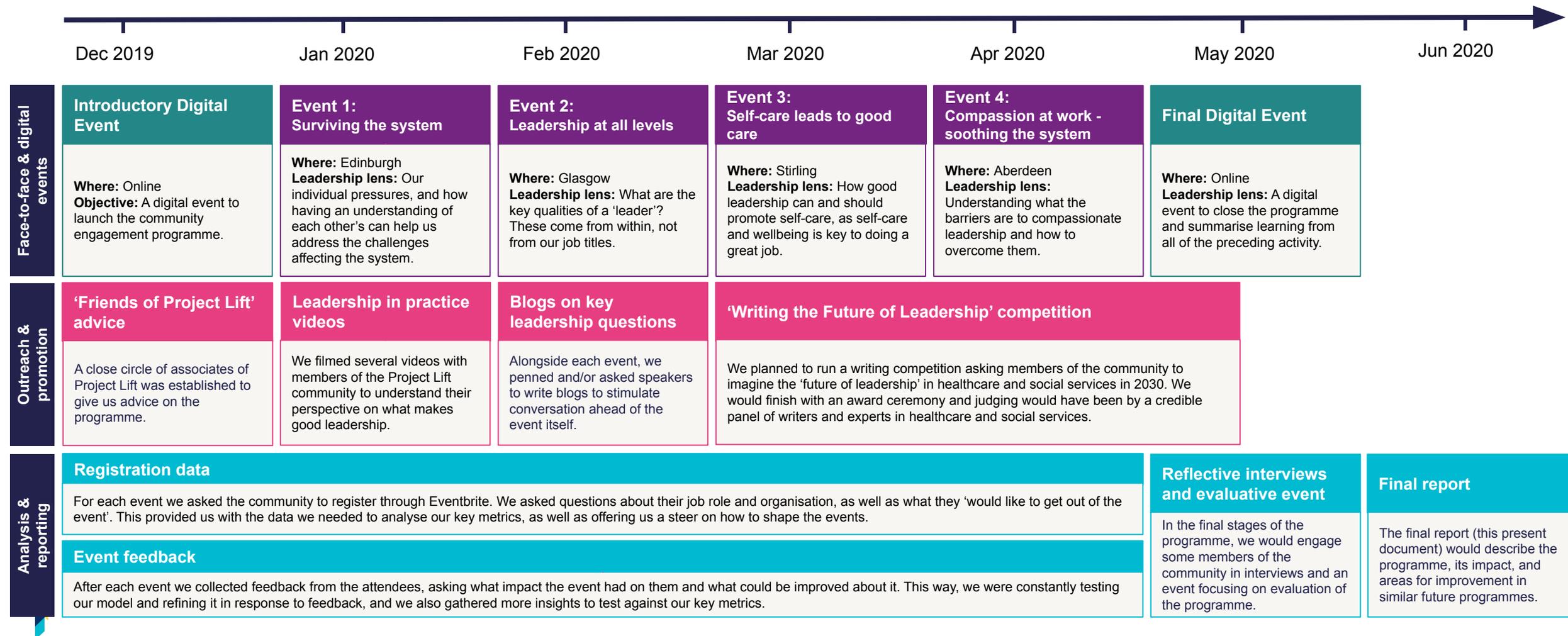


Figure 2. The interruption due to Covid-19

Having delivered several of the planned activities, the Covid-19 pandemic caused us to pause the programme and reassess the way forwards. The chart below shows the activities which were completed as planned (in colour), and the remainder (greyed out) which were not. We took a few months to allow the external context to settle and to formulate a new, more appropriate set of activities which still achieved the same aims as originally outlined.

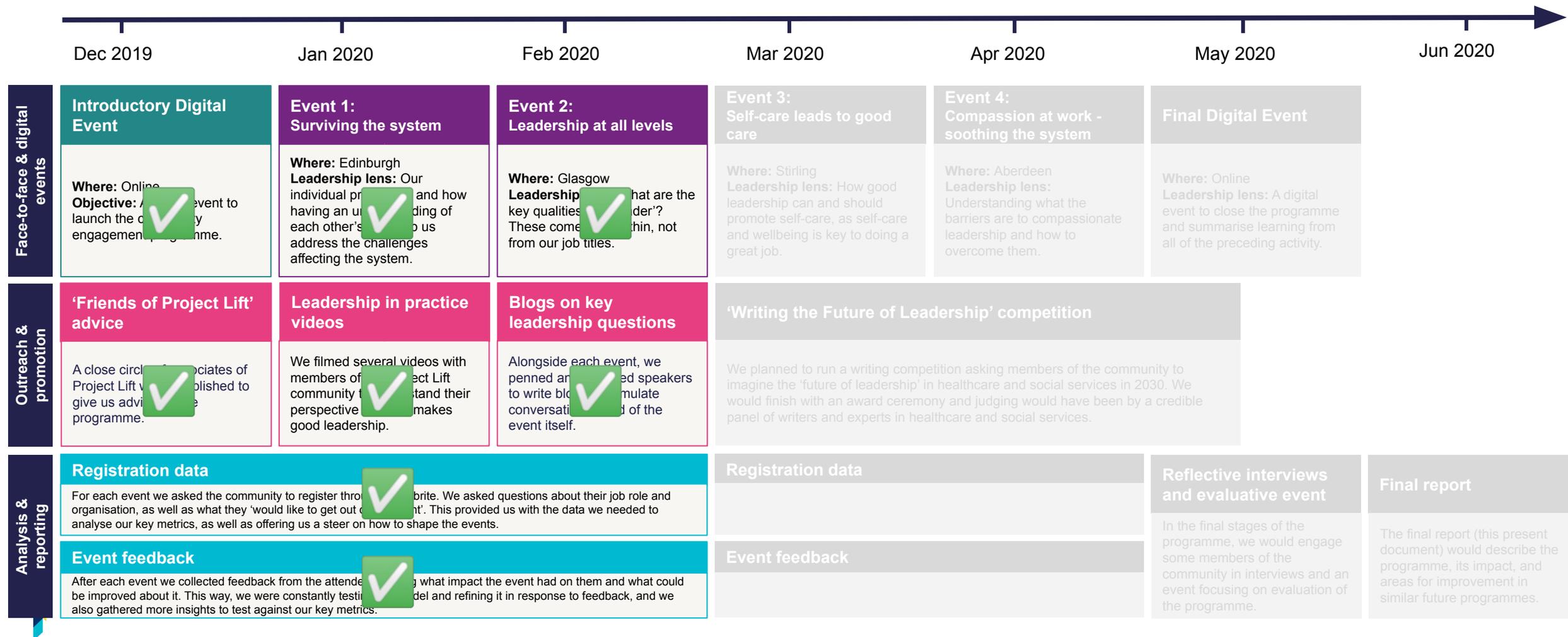
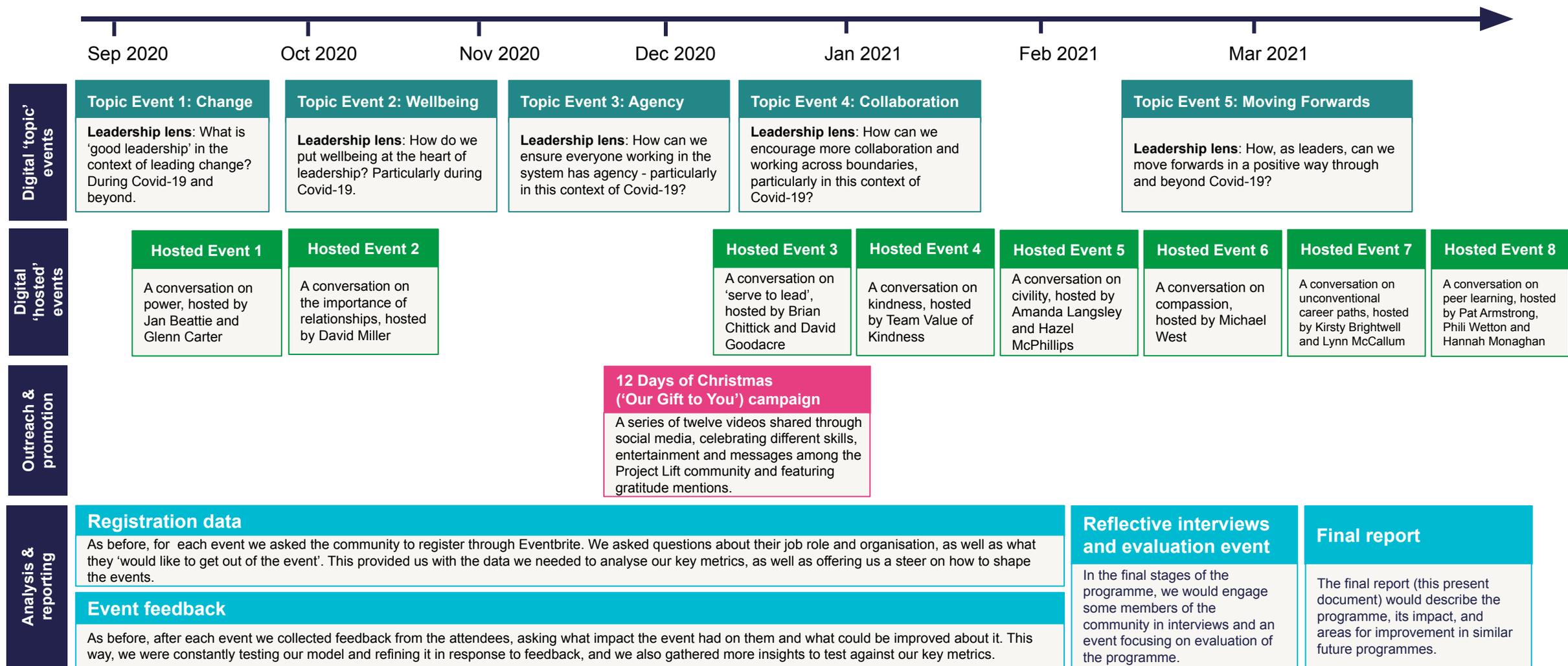


Figure 3. The evolved programme of activity

Following two 'Discovery Workshops' in June 2020, we redesigned the remaining programme of community engagement work, switching to an entirely digital format.



Overall outcomes of the programme - 1

Understanding 'what good leadership looks like'

Understanding ‘what good leadership looks like’: Summary of findings

1. What we were aiming to achieve

As outlined in [table 1](#) (see the extract to the right), we aimed to support the community to understand and contribute to ‘what good leadership looks like’ in healthcare and social services across Scotland (aim 1).

2. What we did

To achieve this aim, we used the community events to examine and discuss leadership through different lenses, for example ‘leadership and wellbeing’, ‘leadership and individual agency’, ‘leadership at all levels’, and so on. Some of the events were also hosted by community members themselves so that the lenses chosen for discussion were coming from the community we were here to serve. See [figure 4](#) for an illustration of the programme activity and a full list of the lenses.

In each event, we asked attendees to reflect and share their own experiences, challenges, stories, etc, and in doing so provided a wealth of insights into what good and effective leadership means for them. Across the events, multiple themes emerged, which we are labelling as ‘key indicators’ of good leadership, shown in [figure 5](#) below.

3. What we found

These are shown in full in [figure 5](#). These were 12 common indicators of good leadership cited by the community, including ‘trust’, ‘role-modelling’, ‘creating space for reflection’ and ‘understanding your team’. Interestingly, the key indicators all relate to skills in **relationship building and management**.

At the final evaluation event in March 2021, we asked several key members of the community to choose one of the indicators of good leadership that would create the biggest positive impact on the system. They cited that **authenticity, trust, role-modelling, understanding your team, creating space for reflection, and flexibility and adaptability** were the key indicators that could have the biggest impact on the system.

4. What we will do next

Now with a good understanding of what the Project Lift community thinks are the indicators of good leadership, we suggest that any further community engagement activity turns its focus to the ways in which we make these qualities more visible and commonplace across healthcare and social services in Scotland. Perhaps we turn from ‘understanding’ to ‘enabling’. For example, perhaps the community events could showcase good examples of these leadership qualities and bring in experts or people from the community to talk about *how* they implemented change in their teams or organisations. See a full description of how we suggest taking the learning forwards in the [‘Reflections to take forwards’](#) section below.

Extract from table 1:

Aims of the programme		Metrics / markers to demonstrate aims are being met
Contributing to a collective understanding of ‘what good leadership looks like’ in healthcare and social services across Scotland		
1	Understand what ‘good leadership’ looks like through various lenses	A. Interpret reflections from the Project Lift community to determine what ‘good leadership’ is

Figure 4. Community engagement programme activity and lenses through which the events considered leadership

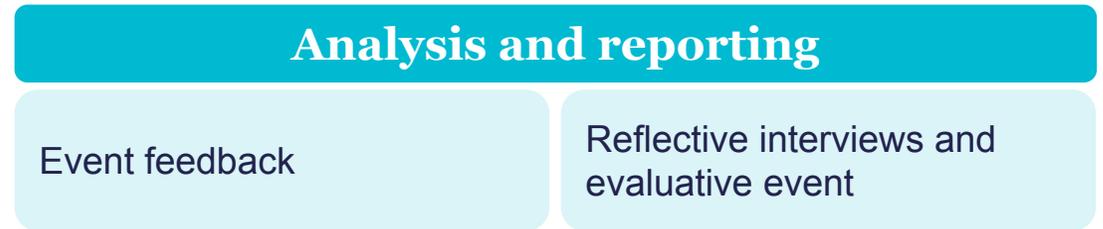
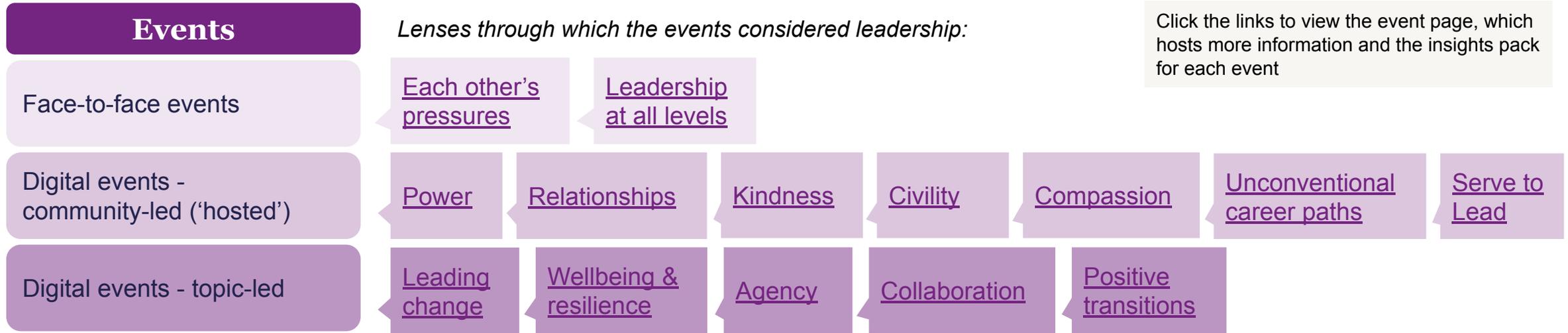


Figure 5. The 12 key indicators of good leadership

1. Trust.

Trust underpins good working relationships, and leaders have a role to create cultures of trust through championing authentic relationships, listening with fascination and responding to their team.

2. Small things matter.

Saying “hello”, remembering names and being visible in the office environment are small acts of leadership, but can have a powerful effect.

3. Purpose-driven.

Having a shared purpose as a team can be foundational to success. Leadership is about asking why, creating shared purpose, and being true to your own value set. The latter was seen as important to guiding ourselves through times of uncertainty, whilst also keeping in mind that others have their own individual value sets and needs.

4. Values-driven.

Understanding and staying true to your values as a leader.

5. Understanding your team.

Seeking to understand the whole person, understanding your team as people beyond their job title, role or pay band.

6. Role-modelling.

Actively modelling the behaviours you want to see in others, from small acts like not emailing on weekends, to larger things like showing vulnerability at work and actively listening to others with curiosity and fascination.

7. Authenticity.

Being your whole self at work, showing moments of vulnerability, admitting when you don't have the answers and creating a culture where others feel they can be their authentic selves. Recognising your own strengths and areas for development, and learning from others.

8. Kindness.

Mainstreaming cultures of kindness within workplaces, through language, actions and strategic thinking.

9. Flexibility and adaptability.

Adapting your leadership style to suit the needs of the situation or people you're working with while still staying true to your values. Knowing when 'Command and Control' leadership or a more collaborative leadership style is necessary.

10. Humour.

Creating a space for humour and laughter as a leader allows others to bring their whole self to work.

11. Challenging negative behaviours.

Actively challenging behaviours that do not fit with your team's values, in a way that is constructive.

12. Creating space for reflection.

Having active, reflective conversations with your team and encouraging others to increase confidence, develop skill sets and grow as leaders.

Overall outcomes of the programme - 2

Broadening reach of Project Lift

Broadening reach of Project Lift: Summary of findings (1 of 2)

1. What we were aiming to achieve

As outlined in [table 1](#) (see the extract to the right), we aimed to increase the overall reach of the Project Lift community (aim 2) and foster a diverse community in terms of sector, professional level and geography (aim 3). We set a number of metrics to help us understand whether we had achieved those aims (table 1 extract, right).

2. What we did

To achieve aims 2 and 3, we leveraged our communications within the Project Lift and Kaleidoscope networks, and the networks of our associates Heather Shearer, Meg Wright as well as the hosts/speakers we worked with. We also encouraged existing members of the community to 'spread the word' about the events with colleagues who were at different levels in their careers to them, and provided multiple ways for people to engage with programme content - from social media, to blogs, to short films.

We worked hard to make the language in our communications more inclusive of social services rather than overtly health-focused and increased the geographical spread significantly by increasing the proportion of digital events from two webinars to all remaining events.

3. What we found

In terms of increasing the overall reach of the community (aim 2), the average number of registrants per event was 86, however, we consistently saw an approx 50% attrition rate across the events, with the average number of attendees per event was 44 (our target was at least 50). At other Kaleidoscope events, attrition is expected to be between 20 and 50%. The high drop-out rate in this case might be due to the nature of this community's work and changing workplace demands due to Covid-19, or because many of the events were digital (and therefore less commitment required).

However, due to the switch to a digital format, we were able to run more events than originally planned with our available resources, so the total reach was higher than originally expected (1,203 registrations in total vs. 480).

In terms of reaching new people, on average 57% of attendees at each event were joining for the first time, demonstrating that the community was continually expanding. Meanwhile, through sharing events, resources, blogs and film with our audiences, and running multimedia campaigns, engagement with the programme increased over the period. For example, the ['12 Days of Christmas'](#) Twitter campaign brought over 4,500 interactions from a range of people.

Extract from table 1:

Aims of the programme		Metrics / markers to demonstrate aims are being met
Broadening the reach of Project Lift		
2	Increase the overall reach of the Project Lift community	A. Overall registration numbers for Project Lift events B. Proportion of attendees attending for the first time C. Engagement level with other Project Lift community activity, e.g. website, social media, blogs, short films and writing competition
3	Foster a diverse Project Lift community in terms of sector, professional level and geography	A. Relative proportions of healthcare and social services workers registered for events B. Relative proportions of the professional levels of people registered for events C. Overall geographical spread of people registered for events

Broadening reach of Project Lift: Summary of findings (2 of 2)

With regard to fostering a diverse community (aim 3), the majority of people registering for the events (79%) were healthcare professionals, while 10% were working in social services. There was a wide spread in the professional level of registrants, with roughly equal representation from 'managers/leaders' (26%) and 'team members' (24%) alike.

In terms of geographical spread of registrants, there was representation from all corners of Scotland - including the Western Isles, Highland, Borders and Ayrshire. **Figure 6** to the right displays the numbers of people from each area who registered for events. This spread was enhanced by taking a digital approach (therefore no need for travel), and because we ran more events over a longer time period than originally planned.

The top-level findings on reach can be seen in [figure 7](#) below. For a detailed analysis and charts to illustrate the data on reach, please refer to the charts in [Annex B](#) and [Annex C](#).

We also gathered insights on why people attended the events, how they heard about them, and whether they recommended them to anyone else. Some of these insights are displayed in [table 2](#) below.

4. What we will do next

A suggested aim for any further community engagement activity would be to increase representation from social services, perhaps by undergoing targeted communications with this community and the leaders and key influencers within it. We would also suggest sticking to a digital format, since this makes the events more accessible to more people. Thirdly, increasing the registration number limit might lead to more attendees at each event in future, if we assume a similar ~50% attrition rate. See a full description of how we suggest taking what the learning forwards in the '[Reflections to take forwards](#)' section below.

Figure 6. Map showing number of registrants for events from each area of Scotland (excludes some areas with low representation).

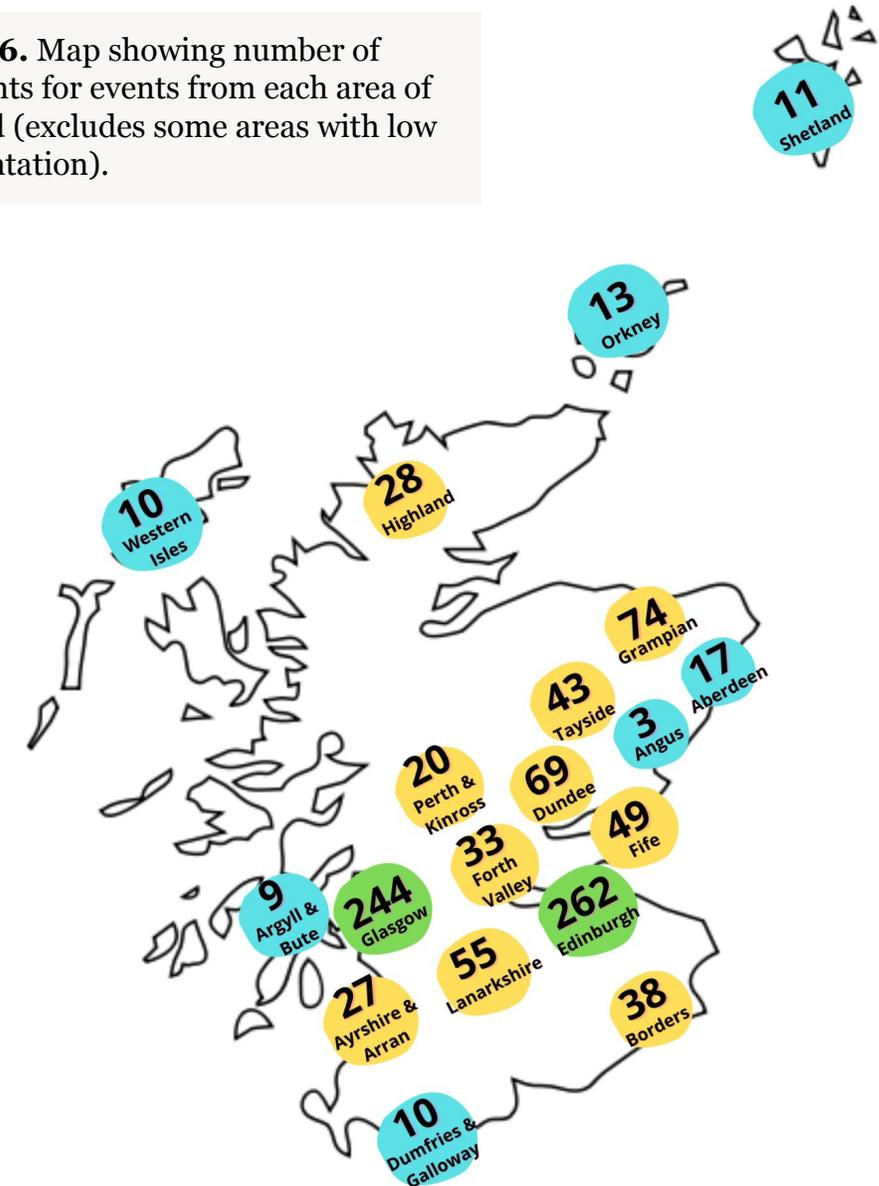


Figure 7. Summary of performance against markers of broadening reach of the community

The average number of registrants per event was

86

We consistently saw about a 50% attrition rate across the events, with the average number of actual attendees per event being

44

Across all of the events, the proportions of registrants at each 'level' were:

Executive leader of an organisation	3	%
Manager of multiple teams or services	6	%
Manager/leader of a service or project	26	%
Professional/function specialist	20	%
Senior manager/leader of an organisation	5	%
Team leader/Supervisor	15	%
Team member	24	%
Unspecified	1	%

On average, **57%** of attendees at each event were joining for the first time

On average, of the people who registered for the events:

79% were from healthcare

10% were from social services

7% were from healthcare and social services*

4% were from other (e.g. leadership development)

Overall capacity for each event was limited to between 80 and 100 people and the tickets

often sold out

Table 2. Reflections from community members on why they attend, and how they find out about, the events

Why did you attend the Project Lift event(s) you attended?

"It's good to listen to people at the events. It's a great opportunity to meet other people who have freedom of mind - there's not enough of that from the NHS. There's a lot of 'management' but not 'leadership'. I'm not sure if I'm a leader but there are things I can do which can make things better and I can still play my part."

"Coming along makes you have a broader understanding and work alongside people who are doing informal learning about leadership. I was already aware about leadership things in the events but learnt more about them - I didn't previously understand how much QI and leadership go hand in hand."

"For the past few years I've been exploring leadership, and doing a MSG on leadership. So it's useful to hear different perspectives for that. Focus at work on wellbeing with team - so get ideas for this."

How did you hear about Project Lift and the events?

"David Taylor through a personal email, subscribing to email links, eventbrite, subscribing to the newsletter, and the Friday cheer-up email. Nice to have cheeriness at the end of the work week. We really should have joy at work."

"I had colleagues come up to me and say: 'You should try this'. It's all about open conversations really."

"I had heard about Project Lift, but in my previous post I hadn't used any events or resources. I see now it would have benefited me in my previous post as well. But I gave it more priority in my new job. And now I realise it's valuable."

"I was part of Leadership Cubed, and was sent an email to re-sign up for newsletters - so I did that."

Have you highlighted this events series to your colleagues before now? If so, how? If not, what could you do?

"I let my colleagues know and have been to some events with colleagues of mine. I try to get feedback when I can, so my manager knows about it. It's good for personal development."

"I've shared it via emails in my department. There are a couple of members of my team wanting to develop and I recommended Project Lift resources/events to them directly as well. I also provide supervision to someone who I recommended PL resources/events to."

"I shared the insights pack from the 'Serve To Lead' event within my and the wider team, and copied it in to the 'general info' Teams channel. It was the first time I did that. I like them because they give a flavour of the event - the format is easy to digest rather than being one great big long note. Really important, especially for now when events are online. Insight packs are good at carrying the conversation on."

"I let the team know, and they've signed up. Flagged to HR as some things useful to them. As my team is working remotely we have Zoom meetings, so I flag events there."

Overall outcomes of the programme - 3

Having a positive impact on community members

Having a positive impact on community members: Summary of findings

1. What we were aiming to achieve

As outlined in [table 1](#) (see the extract to the right), we aimed to have a positive impact on the community members with the events by helping them to build network connections (aim 4), offering something ‘different’ to other initiatives (aim 5), helping them enhance their leadership skills (aim 6) and providing protected time for reflection (aim 7). We set various metrics to help us understand whether we had achieved those aims, see the table 1 extract to the right. We gathered data in relation to these metrics via interviews, feedback forms after each event and a final ‘evaluation event’ with community members.

2. What we did

To achieve aim 4, we focused on creating interactive, psychologically-safe spaces for attendees, helping them to feel comfortable to share and build relationships despite being online. We also encouraged attendees to swap details and make connections beyond the events. To support aim 5, we ensured the spaces we created were not didactic, but rather were led more through storytelling and the sharing of experience and by the voice of the community members themselves. With regard to aim 6, we ensured that speakers/hosts for the events shared wisdom from their own experiences, encouraged the sharing of resources among attendees, and wrote up all of the insights gathered - from hosts/speakers and attendees alike - in the insights pack after each event. For aim 7, we ensured that the events were conveniently timed (90 mins over lunchtime) for most people.

3. What we found

Please see the following few pages for a full summary of the impact of the events on community members. However, in short, there is evidence that the **events had a positive impact in all the ways outlined by aims 4 to 7**. The average score which participants gave for the events was **4.6** out of 5.

Extract from table 1:

Aims of the programme		Metrics / markers to demonstrate aims are being met
Having a positive impact on community members		
4	Help community members build their network connections	A. Proportion of attendees of events who made new/rekindled connections
5	Offer something ‘different’ to other initiatives	A. Perception of Project Lift events compared to other events or initiatives experienced
6	Help community members enhance their leadership skills in practice	A. Self-reported impact of events on the leadership skills of attendees B. Self-reported ‘practical next steps’
7	Offer protected time for reflection	A. Number of hours provided for reflection and professional/personal development B. Self-reported sense of having time for reflection because of these events

4. What we will do next

Insights from community members suggest they would appreciate support with embedding learning on ‘good leadership’ into their organisations by opening up a conversation about workplace culture. There is also appetite for creating more space, time and infrastructure for interaction among community members both within and beyond the events. See a full description of how we suggest taking what the learning forwards in the [‘Reflections to take forwards’](#) section below.

Impact on the community members: Aim 4 - Help build network connections

Metric: Proportion of attendees of events who made new/rekindled connections at each event

60%

of attendees reported making new, or rekindling existing, connections at the events which they wouldn't have otherwise

It's always good to be able to catch up with people. **There's always somebody in the room** you've had a connection with before.

I'm new in my organisation which has 300 people or so in the organisation. In one of the events I saw someone from my own organisation from a different department that I wouldn't ever come across within my organisation and, after the event, I sent them an email to say "hi". **I wouldn't have been able to come across them otherwise - it has been useful.**

From the first event, a couple of people who I met in my breakout room, **I now follow them on Twitter.** I chose to follow them because I thought "I like the way you're speaking about this topic."

You meet people from lots of different areas. I don't know if it'd be as effective in a face-to-face format. **It's so fast, you have to get on with it, can't object, so you're more likely to meet somebody new** [than at a face-to-face event].

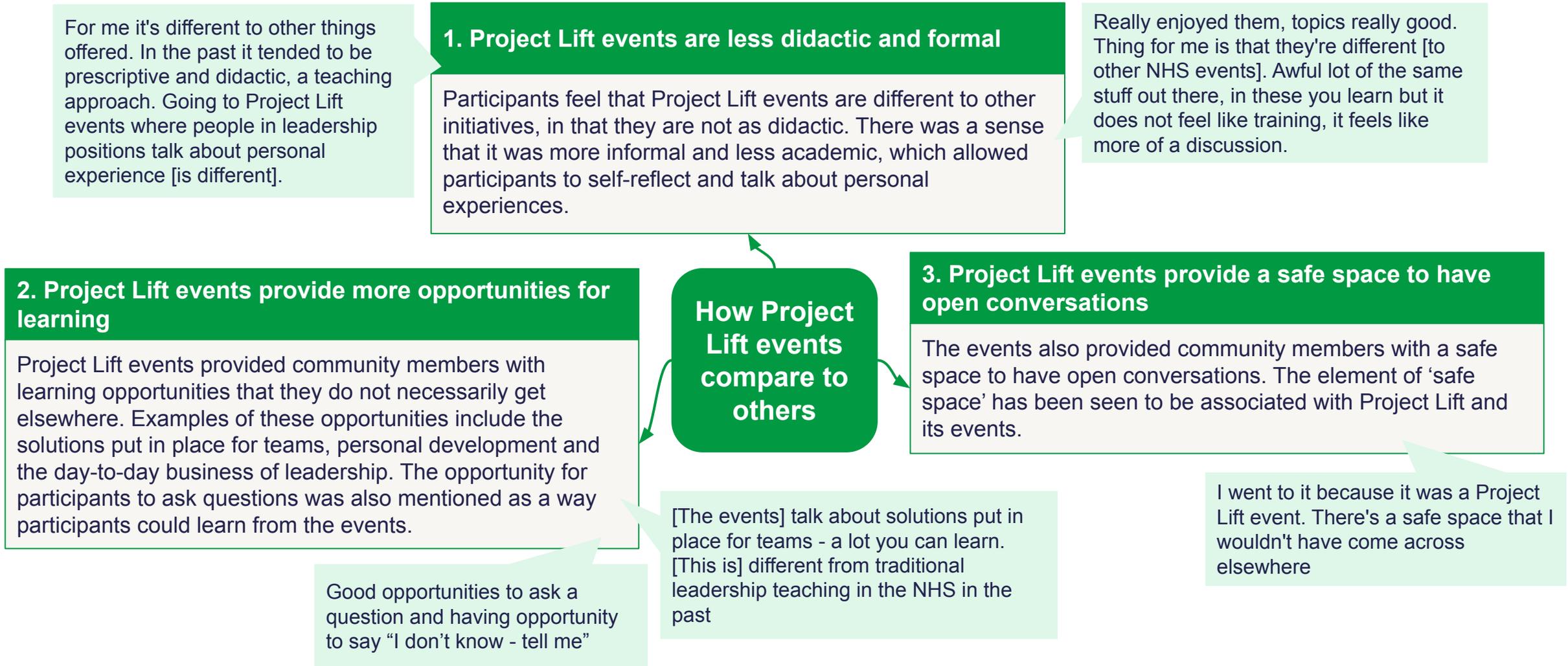
A few ladies in a different event shared references and reading with me which resonated. **People feel quite comfortable sharing and following up.** These events are much more interactive.

At face-to-face events it has been achieved, as I did meet people - I even met someone I was at school with! **I think it's easier achieved face-to-face.** Having time is the thing - perhaps have more more time for people to go to loo and come back for a chat on digital events.

There were a couple of people who we had a breakout group with who I then carried the discussion on with a bit. **One was in the complaints department (so a totally different part of the NHS to me)** and did a team building exercise which she shared with me.

Impact on the community members: Aim 5 - Offer something 'different' to other initiatives

Metric: Perception of Project Lift events compared to other events or initiatives experienced



Impact on the community members: Aim 6 - Help enhance leadership skills in practice

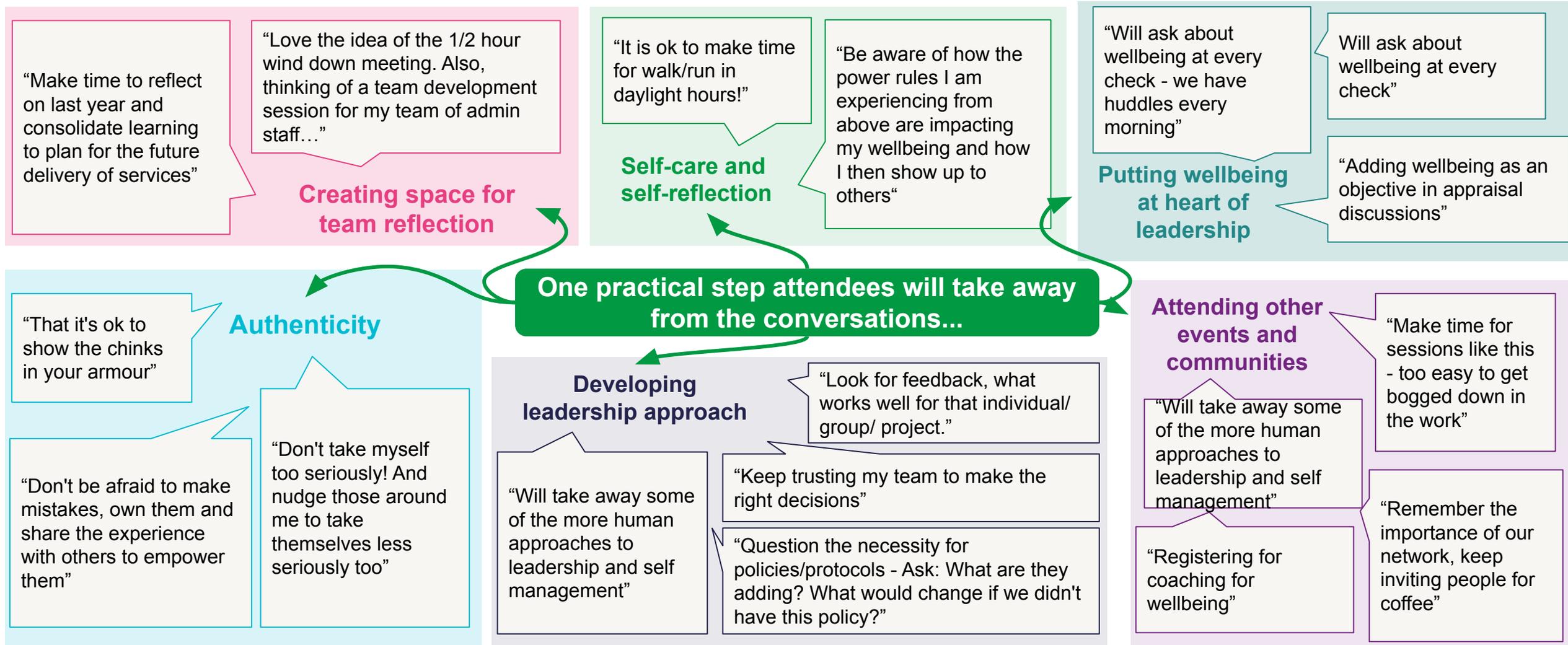
Metric A: Self-reported impact of events on the leadership skills of attendees



Impact on the community members: Aim 6 - Help enhance leadership skills in practice

Metric B: Self-reported 'practical next steps'

An important part of the events, and to contributing to a collective understanding of 'what good leadership looks like' in health and care across Scotland, was to encourage action off the back of each event. We ended each session by asking attendees to reflect on the conversations they had and tell us "one practical step" they would take away and apply in their own contexts. Please see the key themes and a selection of examples shared by participants below.



Impact on the community members: Aim 7 - Offer protected time for reflection

Metric A: Number of hours provided for reflection and professional/personal development

Metric B: Self-reported sense of having time for reflection because of these events

A total of **25 hours** of reflective time was provided by this programme, across **14 events**

1. Allowed more time for reflection on challenges

Participants reported that the events allowed for more time for reflection on challenges that they face as a leader, such as dealing with difficult situations with colleagues. They helped self-reflection on when things do not go well and encouraged better self-awareness.

It's always helped self reflect on when things haven't gone well with others. The only person I can really change is myself. There's always something that each individual brings to a situation. It has encouraged me to be more self aware and be better in difficulties.

The events offer time and space to reflect.

2. Time together "helped me feel part of something"

The events have cultivated a sense of belonging in the journey of leadership development, which gives community members the opportunity to share their own challenges, support, resources and contacts.

I gained a sense of feeling that I'm not alone in this journey of leadership development - there are shared challenges and shared support, in the form of resources and also people.

The stories - that's your treasure.

How the events gave a sense of having more time for reflection

3. An efficient use of time

The events were identified as a good space and use of time to get away and reflect on leadership development, to supplement reflection time they already do at work.

Creating space for people to 'decompress' at the end of the day, shift or week and to 'socialise' within their teams

[The events are] so short but it's an excellent use of time and space to get away and reflect on your development and how it will impact that.

4. Being guided to reflect is helpful

The events were hosted and facilitated, helping community members feel more supported and structured in their reflection.

The space to reflect is unusual and helpful to be guided

Impact on the community members: Other impacts that emerged

1. Felt more comfortable expressing themselves

The programme helped community members feel more comfortable expressing themselves and their own vulnerabilities, allowing them to be honest and truly authentic during the session and within their work.

Made me less anxious about expressing my own vulnerabilities, including to the team. Not a bad thing. Big fan of authentic leadership rather than sitting in the office and pretending everything is fine, which it hasn't always been. Made me more willing to be more authentic. Hope it encourages rest of the team to do this.

The events have also helped me connect with people in my team in a different way - the one yesterday helped me connect with my team and connect with kindness.

2. Created a sense of belonging for some workers

The event series also helped create a sense of belonging within the community. Event topics were not exclusive and provided benefit and a place for some people who felt they needed it.

For us working in social services and health - this is for us not just a healthcare conversation. This is a comfortable space where we can be equal. We don't always feel that when we talk about health.

Love that different disciplines come and engage and talk. This triggers something - curiosity will take it forward.

Other impacts the events had on community members

3. Others' experiences "could help me in future"

The personal stories of the speakers were impactful and resonated with participants. Participants also mentioned how listening to the experiences of others was helpful to their leadership approach should they ever be in those situations.

I enjoyed hearing the personal stories, some of the detail will remain with me and I can use this when I'm in similar situations

4. Peer support through Covid-19

The events provided a space for people to reflect on their work and their challenges through the Covid-19 pandemic. They mentioned how it was helpful to know they weren't the only ones with challenges and to talk them through together.

I enjoyed hearing other people's stories and felt reassured that the leadership skills I currently use were beneficial to the current situations that Covid-19 presents to our team.

Loved connecting with others, a safe space to listen and interact. I felt listened too. Brilliant.

Impact on the community members: How community members would describe the events

They're well worthwhile. They're so short but it's **an excellent use of time and space to get away and reflect on your development and how it will impact that.**

It also has a subconscious impact on your development - you can just listen, you don't need to talk a lot. They are for anyone - it can be for anyone who wants to develop their leadership skills.

It's so accessible - you don't need to be at a certain level. **Anyone can access these events, it's not daunting.** It's a pleasure actually - it's a break away from a busy day where you don't need to think too much. It's a 'brain break', a different part of your brain is being used.

I also like the fact that we are bridging the 'us and them' gap for students. They weren't just observing, they were participating, which they're not always encouraged to do.

They've been good - insightful and well run. There have been really interesting speakers - I really loved the 'Serve to Lead' one, it was absolutely fantastic.

The sessions were online and it was powerful. These things are more powerful in person - it's hard to absolutely replicate the social side, but online I hadn't been disappointed at all - they tend to keep more short and snappy which seems to work.

The events are informal and very welcoming. You will probably see people you know at them, which people quite like.

They are very relevant to everybody. I promote them to junior members of the team in the same way as to longer-standing members of the team.

The events are relevant to everyone - it's not a matter of the stage of your career.

They usually have Project Lift facilitators there, so you get used to seeing them there and they are very helpful for guiding conversations.

Reflections to take forwards

To inform the activity in future community engagement

Understanding ‘what good leadership looks like’: Reflections to take forwards

Throughout the programme, we sought feedback from community members to understand how to develop the programme moving forwards. We gathered feedback after each event, did some in-depth interviews, and an evaluative event towards the end of the programme in March 2021. The reflections from our insight gathering suggest several things to consider in further community engagement activity. We have summarised these reflections in the following pages, grouping them into the three areas of:

- Contributing to a collective understanding of ‘what good leadership looks like’ in healthcare and social services across Scotland
- Broadening the reach of Project Lift
- Having a positive impact on community members

1) Move from the ‘what’ to the ‘how’

Now with a good understanding of what the Project Lift community thinks are the indicators of good leadership, we suggest further community engagement activity turns its focus to the ways in which we make these qualities more visible and commonplace across healthcare and social services in Scotland. Perhaps we turn from ‘understanding’ to ‘enabling’, asking the question of how to create positive workspaces and cultures which encourage these qualities more among leaders and team members.

2) Advocate for the nurturing of people and yourself, especially now

The key indicators of good leadership are relationship- and people-focused, i.e. we are hearing that our key resources are each other and ourselves. There is a common understanding of the importance of nurturing each other and ourselves, listening with fascination, promoting kindness, etc. Particularly since Covid-19, the focus on treating each individual with care is stronger than ever.

3) Ensure there is common language

Often one of the barriers to change is communication with other sectors which have influence in the system. It is important to ensure the learning we take from the community engagement, including these 12 key indicators, is disseminated to the right audiences and in language which resonates with them, whether that’s the government, politicians, private sector or social services and healthcare sectors.

4) Evidence the importance of ‘soft’ skills

The learning from this programme demonstrates the value of ‘soft skills’ in good leadership. It is important to provide more evidence like this to promote transformation of the system, especially when leadership is often already seen as something to ‘fit in’ on top of other work. This evidence would support the value of community events like Project Lift’s; members of the system may be more likely to engage with them with an evidence-base to support them. A CPD accreditation might support this as well, which is something we suggest Project Lift looks into.

5) Get the learning to people who couldn’t attend

Much of the workforce was not able attend the events. Especially in circumstances such as the Covid-19 pandemic, it can be difficult to find time for personal and professional development. Perhaps it would be worth understanding how to disseminate the learning from the programme - particularly with respect to the 12 key indicators - to the wider community in an accessible and efficient way.

6) Authenticity in leading through Covid-19

Throughout Covid-19 community members learned a lot about authenticity in particular and how it goes along with good leadership. For some, pushing to a ‘command and control’ model didn’t feel authentic, whereas innovating and redesigning systems and processes as a team felt more authentic. For others, doing more through interactions on the phone/online felt less authentic to them.

Broadening reach of Project Lift: Reflections to take forwards

1) Consider using Project Lift advocates

To increase the reach of the Project Lift community further, community members suggested creating a network of 'advocates' or 'champions' who could inspire members of their networks to join in. For this, they would need to be able to discuss tangible benefits of attending the events, e.g. using data or case studies, and be able to make it relevant to people at different professional levels. Project Lift and Kaleidoscope are, however, aware that there is a level of 'champion fatigue' within the system, since teams have been asked to champion a number of different initiatives already. Any activity like this must therefore be sensitive to this fatigue risk and should work with the community to understand how best to deliver it.

If it was something Project Lift took forwards, the advocates would ideally be well-connected and from diverse parts of the system, and in diverse roles/levels. Project Lift could equip them with the tools they need to be the go-to person for their community, whether that is a place-based or interest-based community. Advocates could encourage an 'invite a colleague from a different level or discipline' approach, to encourage more diversity within the Project Lift community.

2) Showcase tangible benefits of the programme

Using the contents of this report and other insights, it might be beneficial to identify the tangible benefits of joining Project Lift community events and showcase them through marketing campaigns. These campaigns could target different groups, recognising that different audiences require a slightly different approach. Campaigns might involve some short film clips of community members discussing what they got out of the programme, or it could be simply highlighting who has attended the events before and mixing this in with some feedback from community members. Project Lift already has the [Stories that Lift platform](#) to share and highlight attendee and speaker experiences.

3) Support community members to share learning

Supporting community members to take the learning from the events back to their workplace and integrating it could be a way of spreading the message as well as supporting system transformation. We already provide resources to help people do this (e.g. [our 'DIY event' blog and infographic](#)) and there are anecdotal reports of community members running events within their own teams. However, more focus could be put on continuing the conversation beyond the events, whether these are coming from a place-based or interest-based perspective. There are also conferences and other events which Project Lift could have a profile and perhaps even run some sessions at.

4) Increase the focus with social services

There is energy among those working in social services to have conversations with healthcare colleagues on leadership, culture and wellbeing - those who have joined the Project Lift events reported gaining a lot from them, likewise healthcare colleagues are benefiting too. However, if there is a 'health focus' - perceived or otherwise - at the events or in our communications, it can make this group feel excluded and not attend. Some direct engagement with more organisations working in this sector could help address this. In doing so, we might also strengthen partnerships between health and social services more generally. There might also be opportunities to make the branding of Project Lift more inclusive or new partnerships to support inclusion of social services.

We know that work has already been done to adapt Project Lift's language, voice and messaging to be more inclusive, and therefore perhaps the barrier is occurring before one even reaches Project Lift or the events. More investigation is needed in planning future community engagement to understand this and address the barriers as required.

Having a positive impact on community members: Reflections to take forwards

1) Change the conversation on what classes as 'leadership'

Changing culture starts by changing the conversation. Often, people working in the system do not see themselves as 'leaders' - some perceive that to be a leader you need to be in a certain role. However, we know now that many important indicators of good leadership, as highlighted by this report, are the softer qualities which many people have and demonstrate daily.

Building on work already being done in this area, Project Lift could continue to lead a conversation on 'what leadership is' in the system. Project Lift already uses this messaging in its ethos, website and community engagement activity. It could be beneficial to continue trying to bring in speakers/hosts who are from a less senior level to talk about their experiences.

We know there is a long culture change to shift perspectives on what leadership is and who it applies to. We suggest Project Lift continues to support this shift through its events and other engagement activity.

2) Change culture to support leadership development

We recognise that not all working environments will enable people working in the system to embed the leadership skills and insights they learn about through Project Lift, even if they want to. This can be because environments are stressful or unsupportive for example. Perhaps there is a piece for Project Lift to address on how to create the 'enablers' that help leaders shift their leadership practices.

3) Build in more opportunities for connection

Community members suggested various ways to encourage more connections to be made at the community events. For example, providing a 'spare' 10 minutes for people to connect, chat and exchange details at the end of the event; sharing of contact details (with permission) and their areas of expertise or location; pledging to connect with someone or do an action at the end of each event.

4) Acknowledge humanity as well as the wins

While it's important to celebrate the wins, however small, when it comes to developing our leadership skills, it is also important to acknowledge and embrace the fact that we are human and might not do a great job all the time. Project Lift community members might be innovators and leaders, but they are also people. Continuing to spread this message through any future engagement activity may be welcomed.

5) Create processes and infrastructure for change

Another approach which might support community members to enhance leadership skills is encouraging them to think about where leadership sits in their objectives. This helps people stay accountable to becoming better leaders. Community members suggested that to embed change, you need to develop processes and infrastructure which support the change - for example, normalising behaviour-oriented performance reviews. There needs to be the belief among teams and organisations that this is important, and there is also an issue for clinical healthcare staff in that their Performance Development Plans are not always well maintained.

6) Encourage and build peer-to-peer support

One reason people attend Project Lift events is to ask for help from the community on how to address challenges around leadership, wellbeing and culture. Perhaps there is an opportunity to support community members to support each other beyond the events. The events provide some peer-to-peer support, an insight into each other's challenges and how people are working across systems, however, Project Lift could explore further how it supports the community to continue this after each event. Is there perhaps an appetite for a more continuous network, or community-based events, where the community is more constant?

7) Help foster more connection by buddying up

One method to support more connection beyond the events themselves is a 'buddy' system. By pairing up with someone else from the event and setting some actions or doing some reflective practice together, you make a new connection, learn from each other and keep each other accountable (essentially, promoting action learning sets). Project Lift has considered running 'follow-up' events whereby people come together for a second time to share what they did as a result of the first event - perhaps this could be developed further.

Recommendations for future community engagement

Based on what we have learnt from Project Lift's community engagement so far, we outline below some recommendations for any future activity:

- **Project Lift's events and other engagement activity are valued by community members**, demonstrated by positive performance against the metrics we have set and additional insights gathered across the duration of the programme. We suggest there is a period in any further engagement of playing back to the community what they said, since this may drive more engagement. We suggest highlighting the key ways in which Project Lift adds value to community members:
 - Helping to build network connections
 - Offering something different to other initiatives
 - Helping enhance leadership skills in practice
 - Offering protected time for reflection
 - Sharing learning from others' experiences
 - Peer support through Covid-19 and beyond
 - Creating a sense of belonging
 - Supporting self-expression at work and with peers
- Now with a good understanding of what the Project Lift community thinks are the indicators of good leadership, we suggest further community engagement activity turns its focus to the ways in which we make these qualities more visible and commonplace across healthcare and social services in Scotland. **Perhaps turn from 'understanding' to 'enabling', asking the question of how to create positive workspaces and cultures** which encourage these qualities more among leaders and team members.
- **There is an appetite for more support beyond the events themselves**, helping community members to build peer networks for continuous learning and review of their progress - whether that is place- or interest-based. We suggest looking into resources and infrastructure which would support this, helping community members to make the most from what they learn at the events. More time at the events themselves could also be allocated to connection building.
- **To diversify the community further, we suggest a stronger focus on engaging social services** to increase representation from this sector. This could involve working closely with partner organisations and influential individuals in the system to understand what the barriers are and engage them in finding the solutions.
- **We also suggest a continued focus on what leadership is and why it matters for people at all professional levels**. Using advocates and marketing campaigns could support this, helping to diversify the community further.
- **We suggest continuing with a digital model**, given the extra accessibility it offers and the more efficient use of resources.
- There is value in the emotional support which these events offer. They clearly provide a space for people to look to themselves and their peers to understand what they are experiencing and for support. **We didn't anticipate the emotional impact the events would have and this is something we would encourage Project Lift to nurture even more in future.**
- **Another role which Project Lift might want to step into more is becoming more influential around the processes and structures which support leadership development** in the workplace, for example, objectives setting, personal development planning, etc. Perhaps there is a route for more advocacy and policy-change by Project Lift.

This report was published in April 2021

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Annex A: More detail on each event

Event 1: Surviving the system - 27 January 2020

What happened

On 27 January 2020, we met at Dovecot Studios in Edinburgh for the first Project Lift Community event of the year. The event was about 'Surviving the System' - this topic is around learning about each other's pressures, and understanding 'who's yanking whose chain' both individually and as a system. We discussed healthcare and social services system challenges and pressures, and explored how good leadership at all levels is essential to addressing these challenges.

The aim of this session was to:

- Understand system pressures and challenges through shared learning;
- Understand how good leadership at all levels is essential to address these challenges;
- Discuss and learn about practical leadership resources and skills to take away and apply in our own settings

We heard from **Angiolina Foster**, Chief Executive of NHS 24 discussed her leadership journey and how to have meaningful impact in our jobs. **Anne-Marie Monaghan** shared her perspective particularly as a user of services. She discussed the impact our decisions have on people and the importance of being aware of this. She encouraged us to listen to the 'troublemakers'. **Dee Fraser**, Deputy Director of the Coalition of Care and Support, shared her perspective on leadership. She discussed making sure that the right person, not the right position, makes the decision.

Key insights on what good leadership looks like

In this session, we looked at some common leadership challenges and explored specific leadership tactics that have helped, or could help, when addressing those challenges:

- Get to know your team - be present and visible
- Delegate well
- Role model
- Action learning sets
- Say "hello"
- Listen to appreciate and learn
- Help ourselves to think more about 'we' rather than 'they'
- Enable spaces for people to come together to enable relationships
- "What can I do?"
- Eat/share food together
- Self-agency - just do it, make it happen at every/any level.
- Analysis of what needs to change - root cause analysis. Ask "what is going well?"
- Keep asking "why?" - vision and purpose

Event 2: Leadership at all levels and solving everyday challenges in health and care - 26 February 2020

Face-to-face
event

What happened

On 26 February 2020, we ran a series of 4 'mini sessions' in different venues across Glasgow. The topic 'Leadership at all levels' is around understanding what leadership actually means in our contexts and how it can improve what we do and how we feel about our work. We focused on sharing and learning from others in a similar position about how certain types of 'leadership' come from within, not from our job titles. The aim of this session was to:

- Explore our perception of 'what leadership is' in healthcare and social services across levels;
- Learn from others, and connect and share knowledge about how we approach leadership in our role;
- Provide space to take on practical leadership resources and skills to take away and apply in our roles.

We heard from **Linda Davidson**, Associate Director of Human Resources at NHS Forth Valley, who shared her own leadership journey and discussed how we can support others in their own journey, and how we can deal with conflict and challenge. We then heard from **Stephanie Phillips**, Director of Service Delivery at NHS 24, who shared her perspective and talked about her experience coming from the private to public sector, and shared some key principles that she works by. In the final session, **Mags McGuire**, Executive Nurse Director at NHS Greater Glasgow & Clyde shared her journey with leadership. She discussed her tips on what leadership needs to bring.

Key insights on what good leadership looks like

In the breakout groups, we shared some of the things we find difficult about demonstrating leadership, and explored the ways to tackle them:

- On challenging behaviours - listen to the hard stuff and involve service users
- On 'selling' developmental opportunities - provide feedback on the impact that it has, and start with 'why'
- On building consensus - Keep coming back to 'what is the task' to try to reach agreement to try something as a test of change
- On implementing change - Use a variety of communication tools, including smaller working groups. Making small changes at local level to give evidence on what works.
- On thinking about how our actions will be perceived - take the time to listen to what the team needs and make the space to prepare for important conversations.

Event 3: Leading change in the context of Covid-19 and beyond - 9 September 2020

What happened

On 9 September 2020 we came together to explore what it means to lead change through Covid-19 and beyond. We'd heard many different experiences, perspectives and stories about leading change during COVID-19 and what it had been like for people. We heard how important leadership is right now, knowing that taking the opportunities ahead of us, in order to keep the best of the changes made during COVID-19, will take a real effort and focus. We collectively examined new insights generated over the last few months, and long-standing challenges from before the pandemic.

Our speakers shared their perspective on what 'good leadership' looks like, especially in a time of a crisis. [Meg Wright](#), Interim Manager, Forth Valley Rape Crisis, discussed some of the challenges of working virtually, such as missing the 'chit chat' of an office and using this to gauge how your team is doing. [Eddie Fraser](#), Director of Health and Social Care Partnership, East Ayrshire emphasised the importance of connections and relationships and compassion in leadership. He discussed his experience of trying to foster a culture of trust while working virtually. [Carol Potter](#), Chief Executive, NHS Fife, discussed many of the challenges over this time, and highlighted how for many staff this has been a very difficult time on a personal level. She shared that they sent a letters to the children of staff to say thank you and to connect with staff and their families.

Key insights on what good leadership looks like

Understanding the whole person and the importance of understanding that all staff have their own anxieties was highlighted.

Participants discussed the importance of being approachable and showing empathy with colleagues, and ensuring that you are present. The importance of being inclusive in leadership style was important as was working hard to ensure everyone is as engaged and valued as they can be.

Being clear on purpose and values was highlighted, as well as focusing on the 'why'. Participants discussed the importance of understanding your own core values as a leader, and staying true to these.

Many groups discussed the importance of being open and honest when we don't have the answers and admitting our mistakes and when we need help. Being able to identify what needs to happen and having trust in the team that it will be done was also highlighted.

The challenges of 'Command and Control Leadership' was explored, as well as the importance of adapting your leadership styles to suit people and the situation.

On average, participants scored this event:

4.8/5

Find the full write up [here](#).

Event 4: Power and leadership - 24 September 2020

What happened

On 24 September 2020, [Glenn Carter](#), Speech and Language Therapy Coordinator at NHS Forth Valley, and [Jan Beattie](#), Allied Health Professionals Officer for Primary Care at Scottish Government, kicked off our first community-hosted event, focusing on leadership and power. Glenn and Jan hosted a conversation with team leaders across the health, social and voluntary sectors that focused on using power to affect positive change. They also wrote a [blog](#) to provoke thinking on this topic.

They asked these questions to spark engagement: 'Our primary purpose as healthcare and social services leaders is to improve outcomes for the people we serve. But does the system get in the way of us improving real outcomes for people? Do the people working in the system easily let go of power and do they feel they have the permission to think radically and deliver true person-led rather than system-centred care?'

In their opening session our hosts covered what we mean by 'power' and how this has shifted with culture and time. They explored what it means to give away and let go of power, and the importance of really listening to others and admitting when we don't know all the answers. They discussed accountability, setting boundaries and knowing when to step in as a leader, and when there can be a place for 'command and control' leadership. They put this into the context of Covid-19 and explored how the pandemic has impacted this and how we have achieved things we didn't previously think were possible.

Key insights on what good leadership looks like

Thinking particularly about the topic of 'enabling power' participants shared the following principles:

- Trust and respect
- Showing vulnerability and when you make mistakes
- Being aware of own unconscious bias
- Emotional intelligence and empathy
- Listening and understanding the organisation and individuals within it
- Aligning people around shared vision and common aims
- Being clear on outcomes
- Honesty and openness
- Reflection and being able to adapt your approach
- Humour
- Flexibility

On average, participants scored this event:

4.4/5

Find the full write up [here](#).

Event 5: Wellbeing and resilience at work in the context of Covid-19 and beyond - 1 October 2020

What happened

On 1 October 2020, we came together to explore the topic of wellbeing and resilience. We had all heard so many different experiences, perspectives and stories about wellbeing through the phases of the pandemic, both through personal and professional connections. We also know leaders have a key influence on culture, or how we experience our working environment and relationships in the workplace. Taking care of ourselves and one another can take its toll and it's especially important that we notice, listen and respond with kindness and compassion to ourselves and each other.

Our speakers shared their story on "Putting wellbeing at the heart of leadership". **Pat Armstrong**, Chief Executive, ACOSVO discussed the pressures of Covid-19 on the voluntary sector and how this had meant focusing on wellbeing was more important than ever. She explored the importance of leaders looking after their own wellbeing in order to support others. **Ralph Roberts**, Chief Executive, NHS Borders spoke from his own experience of managing his own wellbeing as a leader, and the importance of creating an environment where people are able to prioritise their wellbeing and speak out about how they are feeling, and also the importance of role modelling this as a leader. **Ailsa Sutherland**, Group Manager, West Lothian Council discussed the importance of really listening to colleagues to understand how to put wellbeing first.

Key insights on what good leadership looks like

Relationships and listening to your team was a key theme - 'knowing' your team well is ever more important. Encouraging joy and humour at work was linked to this as many discussed the importance of just being human and authentic at work.

Understanding needs and responding flexibly as a leader is important. Change caused by Covid-19, pressures on the system and remote working was discussed, and how leaders can respond to this changing need.

Role modelling putting wellbeing first was a common theme, especially in terms of showing vulnerability and being your authentic self as this can give permission to others to be open. The theme of self awareness linked to this.

Following on from that, mainstreaming wellbeing and kindness was a key theme. Some felt that the language of empathy and kindness was becoming more common, wellbeing now usually a part of strategic thinking, and leaders had been allowed to become more authentic.

Event 6: The importance of relationships - 22 October 2020

What happened

On 22 October 2020, [David Miller](#) hosted an event focusing on relationships and leadership. David is Chief People Officer at Scottish Government and invited the wider HR community to join in the conversation.

David talked about his experiences of moving roles during the pandemic, sharing an honest account of how he felt being thrust into a new environment, organisation and type of work whilst people are working from home. He once believed that leadership was about being an expert, but discovered that it was about being true to values and empowering others. David also talked about the role of 'command and control' leadership during emergency situations and the need for honesty when issues arise and then managing expectations within these.

During the event we split participants into breakout groups where they discussed 'how can we create cultures that place real value on relationships?' Participants explored themes such as holding onto your own value set and creating space for authenticity, cultivating trust, establishing shared purpose, dealing with the breaking down of barriers, creating a safe space for honest and open communication and the role of command and control style leadership.

Read the [blog](#) by David and Project Lift which stimulated thinking on this topic.

Key insights on what good leadership looks like

Being true to your own value set was seen as important to guiding ourselves through times of uncertainty, whilst also keeping in mind that others have their own value sets and needs.

Leaders should have the ability to trust and enable others to thrive.

As working from home has impacted the way we foster relationships, leaders should create more and different opportunities for people to connect in a way that suits them.

Every conversation sets a tone for moving forward and it's important for everyone to take responsibility for building and managing relationships. It's important to upskill and train people to be able to have these open and honest conversations.

Event 7: Agency, power and purpose - 25 November 2020

What happened

On 25 November, we held an event to collectively explore how leaders can afford a sense of power and purpose that comes with agency to all people in the system. We heard from [Edel Harris](#), Chief Executive, Mencap, **John Loughton**, Chief Executive, Scran Academy and **Nelson Kennedy**, Associate Director for Digital, NHS National Services Scotland, all of whom shared their story on why it's important that we all have agency in our roles and what good leadership looks like for ensuring everyone in the system has agency (i.e. power and purpose), in the context of Covid-19. We shared a [blog](#) to get people thinking about this in advance.

Rather than having power 'handed' to individuals, Edel talked about people needing to feel empowered through having value. This with having vision and purpose and the motivation of making a difference are key areas which can grant agency for individuals. John highlighted how the power of an individual position of authority who speaks authentically can really make a difference. Nelson discussed agency as having people at the centre of what we do through acting with purpose, building connections and having authentic, trusting relationships.

Participants were split into breakout groups and discussed 'why is agency important and how we can put it at the heart of leadership?' They discussed themes such as the importance of authenticity and honesty in communication, shared purpose, more focus on wellbeing, technology enabling increased accessibility to others and command and control challenges.

Key insights on what good leadership looks like

Talk openly and honestly with people, ask others what they think and how they feel. Welcome all voices, including ones from people who might think differently to your own views.

Managing digital meetings well - we risk losing those with quieter voices, those not willing to push in and those maybe dissatisfied and disengaged when 'hands up' are not invited into the conversation.

As a leader it is key to make it clear that people can decide for themselves – to give permission for agency and then follow through with a leadership style that supports that.

Prioritise wellbeing, empower others and enable an increased agency of their colleagues.

Event 8: Collaboration and working across boundaries - 10 December 2020

What happened

On 10 December, we held an event to explore experiences of collaboration and working across boundaries during the pandemic, and the impact that this has had. We heard from [Anna Fowle](#), CEO, Scottish Council for Voluntary Organisations, [Heather Shearer](#), Coach, Quality Improvement Trainer and Facilitator and [Tam Begbie](#), National Coordinator, Navigator Scotland. Tam wrote this [blog](#) to spark thinking for the event.

Anna talked about trust and how organisation and coordination are important for collaboration to work effectively. She felt continuous learning is also important and involves building on each other's skills and expertise. Heather highlighted the importance of introducing ourselves with 'why we are here' rather than job titles and to not let someone's 'status' get in the way of collaborating, encouraging us to remember that leaders are still human. Tam emphasised that everyone has different skills and if you pool them you have a firm platform to deliver lots and help others with what they need. You are then in a far better position to help those who need it.

Participants were split into breakout groups and discussed why collaboration is important, and how we can put it at the heart of leadership. They discussed themes such as connection and conversation, the need for transparency and trust, the impact of power dynamics when working from home and how shared purpose is central for collaboration to thrive.

Key insights on what good leadership looks like

Recognise your own strengths and areas for development - and then offer your strengths out to people, while learning from other people about improving your development areas.

Using technology effectively is key to collaboration being possible and for the shared purpose to be the central priority.

We need to find a way to enable people to have time to rest and recuperate if they are to come back and be as empowered and strong to do what we did during Covid.

When introducing yourself start with why you are there rather than simply stating your role to instigate shared purposes and common focus.

Event 9: Serve to lead - 21 January 2021

What happened

On 21 January 2021, [David Goodacre](#), Army Officer, and [Brian Chittick](#), Interim Chief Officer for the Shetland Health and Social Care Partnership, hosted a conversation about the parallels between leadership in the military and in healthcare and social services, as well as how we can instil leadership at all levels and what it means to 'serve to lead'. You can read David's blog on this topic [here](#).

David talked about his time spent at the Royal Military Academy Sandhurst where the training help him in understanding his abilities as a leader and understanding himself. David drew parallels between the military and the NHS, as they are both founded on values, duty and service. In both there is an environment of fear, unpredictably, and the fast pace of change. Learning from the decentralised execution of operations in the military, Brian explained that during the pandemic healthcare workers were also empowered to show their own initiative, judgement and decision-making, which led to speed, agility and decisiveness in how to respond to the pandemic.

Participants were split into breakout groups where they discussed what we can learn about leadership in health and care from the military. They discussed themes such as the importance of having core values, trust, authenticity and humility, the need for individuals to decompress, better connection within teams and how we grow as leaders.

Key insights on what good leadership looks like

It is important to identify core values as leaders, and assess how we are committed to them and how we practice them everyday.

Trust is achieved through authenticity and good relationships. Humorous, cheerful and authentic relationships can go a long way in building trust.

Creating space for people to 'decompress' at the end of the day, shift or week and to 'socialise' within their teams

Creating ways to connect when teams are not together during this time.

Having active, reflective conversations are useful in encouraging leaders' confidence and helping them grow in their skillset.

Event 10: Has kindness become too fashionable? - 18 February 2021

What happened

On 18 February 2021, **Team Value of Kindness (VOK)**, a team focused on live collaboration work around the topic of kindness, hosted a conversation about kindness and leadership, focusing on the question of “has kindness become too fashionable and therefore lost it’s impact?” We shared [4 resources](#) to stimulate some debate before the event.

To kick off the session, we heard from Team VOK members **Maureen Swannie**, Interim Head of Children's Health Services, who talked about the beginnings of Team VOK where they were thinking of linking their work to the [National Performance Framework](#) in that all people should be treated with kindness, dignity and compassion. **Greycy Bell** GP & Deputy Medical Director, talked about the need for need for this to be formalised and move from small random acts of kindness to radical kindness. **Gavin Payne** General Manager, Facilities & Estates, talked about how vulnerability and kindness are members of the same family and that vulnerability is not a weakness but natural and situational. **Brenda Wilson**, Clinical Nurse Advisor for the NHS Scotland Academy and Project Lead Nurse talked about how having warmth within ourselves, showing compassion and being there, benefits others and can really make a difference. **Claire Ritchie**, Acute Site Director, AHP Rehabilitation Consultant, talked about kindness fatigue and how live this issue can be in teams within healthcare and social services that have been consistently working extra hours in difficult circumstances. She shared that individuals find that they can lose the ability to listen to each other through not having the time to focus on connection.

Key insights on what good leadership looks like

Some participants felt it is beneficial to define kindness as treating people how we'd like to be treated.

It was recognised that acts of kindness are varied and different for different people e.g. some may appreciate the offer of a cup of tea while others may prefer being given a little space.

Participants recognised that vulnerability is important to embed kindness and that it needs to be made safe or normal in the culture at work.

Participants discussed the importance of being kind to yourself before you can show kindness to others and the need to have the internal and external resources to do so. This is done by showing vulnerability and responding with compassion.

When people value people for who they are rather than what they do, they start to feel psychologically safe to be vulnerable and be themselves. Participants felt that honesty and authenticity is key in doing this.

On average, participants scored this event:

4.3/5

Find the full write up [here](#).

Event 11: Moving forward or falling back? Ensuring positive transitions after Covid-19 - 25 February 2021

What happened

On 25 February 2021, we held an event on the growing calls to have a more thoughtful way of moving forward, one that recognises the good, bad and the ugly of the previous 10 months, and the increasing calls to keep the good, challenge the bad and learn from the ugly. We heard from three speakers, who shared their story, and their perspective on why it was important to move forward after the pandemic has eased and what leaders can do to maintain the good changes. **Ian Findlay CBE**, Chief Officer, Paths for All talked about using a 'systems thinking' approach in his talk, using his experience of health and environment systems to present a challenge to us as leaders. You can read his blog on this topic [here](#). **Jason Leitch**, Clinical Director, Scottish Government shared his perspective using three 'I's: Improvement, Inequalities and Involvement. **Pamela Dudek**, Chief Executive Officer, NHS Highland reflected on Ian and Jason's comments on inequalities and how important that is to her. She used the analogy of a boat in the storm - although we're all in the same storm, we don't all have the same boat.

Participants were split into breakout groups where they discussed "How can we all, as leaders, empower ourselves and our teams to maintain the good changes and prevent going back to old ways?"

We were saddened to hear that Ian Findlay, one of the speakers at this event, passed away on Friday 5th March 2021. He was an inspirational speaker at the event whose message resonated powerfully with our attendees. Our condolences to his family, friends and colleagues. His organisation, Paths for All, have opened an [online book of condolence](#) for expressions of sympathy and to share memories of Ian.

Key insights on what good leadership looks like

Participants felt leadership is about making sure we mean what we say about kindness - walk the walk as well as talk the talk.

There is need for influencing the culture of systems we work in through kindness. For example, if we are asking staff to deliver kind services, they need to experience kindness themselves.

There is benefit in always going back to the needs of the people we're serving, asking why we are doing things in a certain way and who is going to be affected.

It was mentioned that taking baby steps and being realistic about what we can do, what we should do and what impact we can have is important.

Leaders should think about their 'circles of influence and control' - focus on what they can influence now.

"The good news - we are leaders and it is within our gift to bring about these transformational changes. My challenge to us is to be the agents of that change." Ian Findlay CBE

On average,
participants scored
this event:

5/5

Find the full
write up [here](#).

Event 12: Civility and Leadership - 4 March 2021

What happened

On 4 March 2021, [Amanda Langsley](#), Associate Director OD & Learning, and [Hazel McPhillips](#), Advanced Nurse Practitioner and Clinical Facilitator at NHS Lothian hosted a conversation about civility and leadership, focusing on the question: “Civility costs nothing and buys everything so why do we ‘lose it’?”

In Amanda and Hazel’s opening conversation they highlighted that without civility we will never have good staff experience at work. They defined incivility as behaviours that violate the norms of respect but where the intent to harm is ambiguous. Amanda and Hazel shared stories of incivility and explored how it impacts not only the recipients but others through a ripple effect to the onlookers. They talked about the costs of incivility on areas such as decline in work effort, performance commitment and even having effects on service users. They explored how the behaviour of incivility is ingrained and remains unchallenged and as such we operate in a culture that sometimes rewards this behaviour or we see it as ‘survival mode’.

Amanda highlighted the importance of looking through a compassionate lens when talking about those who display incivility. In NHS Lothian, they have a small group to change the culture and think about what they can do to help people to spread a culture of civility and kindness and to help everyone to meet incivility and unkindness with compassion. You can read Amanda’s blog on this topic [here](#).

In breakout rooms we explored how we could work towards a culture aligned to our organisational values when incivility is commonplace, how we could create the conditions for recipients and onlookers to manage incivility, and how we could support people to reflect on the impact of their behaviours and implement strategies for change.

Key insights on what good leadership looks like

Participants discussed the importance of having courageous conversations with compassion when dealing with incivility.

The importance having psychological safety was explored, so that people feel able to compassionately respond to and challenge incivility.

Some participants highlighted the importance of self awareness - some people don’t realise the impact their behaviours and small actions have on other people.

In terms of responding to incivility, some participants highlighted the importance of staff knowing there is a ‘safe person’ who can they turn to or talk to if they are experiencing difficulties. Some mentioned the importance of support through education and tools to have the skills, ability and courage to slow the conversation down, encourage time for reflection and de-escalation.

Participants discussed the need for a more explicitly focusing on building civility and putting more emphasis on the positive impact of it, and how small things like remembering and using colleagues’ names can make a big difference.

There was discussion about how some may fear a risk in worsening the situation if they spoke out or challenged behaviour. Role modelling how to call out incivility was felt to be an effective way of encouraging others and creating a safe environment.

Event 13: Compassionate Leadership for High Quality Health and Care - 9 March 2021

What happened

On 9 March 2021, [Professor Michael West CBE](#) from The King's Fund hosted a community conversation on compassion and compassionate leadership. Michael has been involved in compassionate, collective and inclusive leadership research and thinking for a number of years and has worked closely with health and care organisations and systems. Michael hosted the conversation, focusing on the importance and relevance of compassionate leadership in the wider health and care system. We recommend reading the [latest blog](#) from Suzie Bailey and Michael West on this topic.

In Michael's opening perspective, he explored what we mean by compassion in health and care and the impact it can have. He shared data and research that demonstrated the physical effect that compassion can have on health outcomes, as well as dispelling the myths of compassionate leadership. He explored the topic through highlighting 4 elements of compassionate leadership:

- Attending: paying attention to staff – 'listening with fascination'
- Understanding: shared understanding of what they face
- Empathising
- Helping: taking intelligent action to serve or help

He also explored how this related to team working, especially during remote working, and psychological safety. He discussed the importance of 'self-compassion' and the importance of practicing this as a leader.

In breakouts, we discussed how we can we develop our own compassion as leaders, how we can develop our practice of self-compassion, and how we can create space to reflect and learn.

Key insights on what good leadership looks like

Many groups discussed the realities of how people are working, especially due to the pressure at the moment. Many people recognised the pressure people working in health and social care are under, and how this can impact how compassionate an environment or our actions are.

Some people discussed the theme of empowerment, and how we can help people to empower themselves. They felt this is done through building trust as leaders.

Role modelling was also a key theme, for example, being aware of the impact that sending emails on the weekend might have on staff, or encouraging people to go home when they should.

The theme of relationships and how this relates to compassion particularly resonated with some participants. They highlighted the value of making connections, investing in them, psychological safety and getting to know the person and what they value.

Some groups discussed ways to influence the culture. They explored how small things such as every interaction, like every email you send or conversation you have, can impact the culture.

Participants also shared a number of real examples of how they have created spaces to reflect and learn in practice, such as embedding it into important processes in the team. We also discussed what it means to practice self-compassion for participants.

Event 14: Unconventional Careers - 25 March 2021

What happened

On 25 March 2021, [Kirsty Brightwell](#), GP and Medical Director, NHS Shetland, and [Lynn McCallum](#), Acute Medicine Consultant and Medical Director, NHS Borders hosted a conversation about unconventional careers and leadership.

Lynn and Kirsty had a conversation about their experiences in their careers, sharing their story and what led them to where they are now.

Lynn expressed her gratitude for the leaders who supported her and the difference it made. She also talked about the importance of being a 'disrupter' and being aware of imposter syndrome within leadership.

Kirsty highlighted that a lot of the decisions she made were based on what was the right thing to do, which could lead to getting into 'sticky situations'. She also stressed the importance of having the time to reflect on staying true to your values, what is important to you and sticking to the principles of why you came to leadership.

In breakout groups, participants shared their reflections from the discussion, and explored why it is sometimes easier to see the challenges first rather than the opportunities and how we can shift our mindset to see the opportunities in each challenge.

We are pleased to share Kirsty's guest [blog](#), which sparked thinking on this topic.

Key insights on what good leadership looks like

Participants discussed the value in not taking the traditional career path as it offers another perspective. There are a lot of people who aren't interested in the conventional path as they want to feel part of an organisation and feel involved. There was also some discussion that not everyone fits neatly in boxes or career paths and there should be awareness of this.

The theme of staying true to your values resonated with participants, and particularly Kirsty's point about sticking to childhood values, being comfortable with who you are and developing what you have in yourself.

Many participants related to having imposter syndrome and talked about the negative impacts involved. They discussed how imposter syndrome encompasses fear and lack of confidence in individuals.

Many participants discussed the real value in having a mentor and having a coach to help build confidence.

Annex B: More detailed analysis of data on reach

Broadening the reach of Project Lift: Increase overall reach of the community

Metric A: Overall registration numbers for Project Lift events

One of the key aims of the programme was to broaden the reach of Project Lift (aim 2). To help achieve this, we wanted to maximise registration numbers for each event, using a benchmark of approximately 50 attendees at each event. The overall registration limit for each event was limited to between 80 and 100 people (depending on the event) and the tickets often sold out. The average number of registrants was **86**.

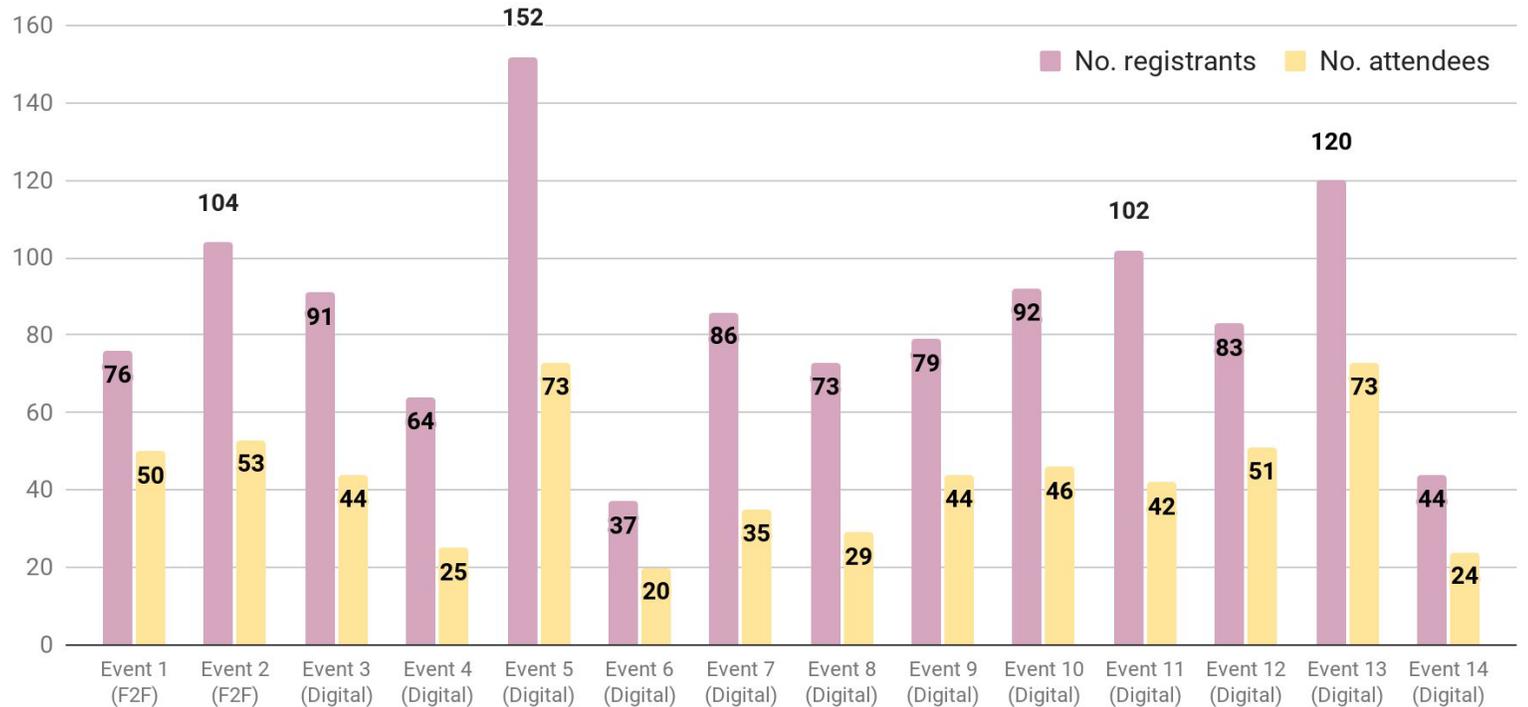
However, we consistently saw about a 50% attrition rate across the events, with the average number of actual attendees per event being **44** (see chart). Therefore, we suggest increasing the registration limit for any future events to account for the attrition.

Moving the events online due to the pandemic meant that we were able to support more events in total within the resources allocated, which helped increase reach beyond what we would have done in the original plan of activity (**1,203 registrations in total vs. 480 expected**).

Across all of the events, below is the total number of:

- Registrants: **1,203**
- Unique registrants: **807**
- Originally expected number of registrants: **480**
- Actual attendees: **609**

Number of registrants and actual attendees per event



Broadening the reach of Project Lift: Increase overall reach of the community

Metric B: Proportion of attendees attending for the 'first time'

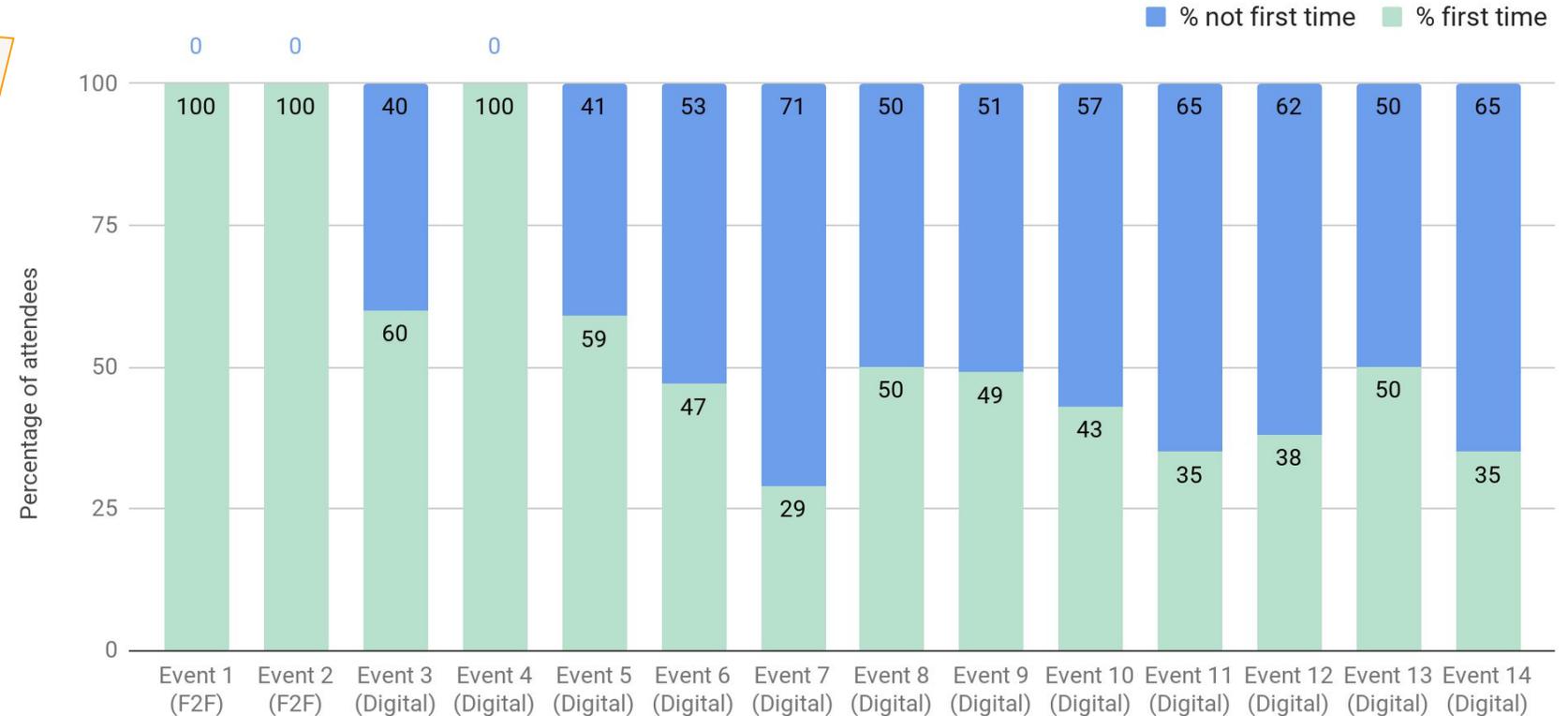
Another measure of whether we were achieving the key aim of broadening the reach of Project Lift (aim 2), was to assess how many 'new' people were attending the events each time.

At each event, we asked participants whether this was their "first Project Lift event" or not. The chart opposite shows the relative proportions of attendees for whom this was their first event.

On average, **57%** of attendees at each event were joining for the first time, demonstrating that we continued to draw new community members in throughout the programme. However, as can be expected, the proportion of people attending for the first time seems to gradually decrease as time goes on.

The significant repeat attendance for each event also demonstrates that a number of people found value in coming to Project Lift events more than once.

Percentage of attendees for whom the event was their "first time at a Project Lift event" or not



Broadening the reach of Project Lift: Increase overall reach of the community

Metric C: Engagement level with other Project Lift community activity, e.g. website, social media, etc

Over the course of the contract, we worked with Project Lift to produce blogs, videos and social media content to complement the events series and foster more engagement with the community. The activity did generate significant engagement with our target audiences.

We also produced materials (such as the [‘DIY Event Guide’](#)) to enable members of the community to host their own conversations around leadership and culture, and we have anecdotal evidence that this was happening in some areas.

More than an event page

We designed our event pages to engage rather than to just inform - these included the intention of the event, the focus on conversation, details of contributors, guest blogs, related articles, video content from health and care and the wider industry and then were updated post event with the insights packs for people to revisit or explore for the first time. The event pages are collated into our ‘past events’ section on the website as community assets for anyone to access and use providing an extensibility that anyone can benefit from.

The offer to talk through how to do this with a [member of the team](#) is always live to help anyone keen but not confident in how to make the most of these.

Staying in touch

Project Lift use blogs, news items and [twitter](#) to keep open contact with the community and to reach those connected to them. When the programme changed in response to the pandemic we shared our why, what and how of our adapted programme with the community in a [blog](#). The community engagement was intertwined with the communications and engagement work more widely in Project Lift, building on relationships and channels already present. Key activities were:

- Sharing events, resources, blogs and film with our 4,800 Twitter followers and tagging speakers, and with established mailing lists ranging from 1,000 to 4,000 people. Both increased over the period of the programme.
- Running our [‘Could you host an event?’ campaign](#) in November 2020 which brought in over 12 valid suggestions, some now delivered and some ready to revisit.
- In December 2020 we ran [‘12 Days of Christmas - Our Gift to You’](#) - a collaborative multimedia campaign of 12 guest video ‘gifts’ all sharing a gratitude shout-out to individuals, groups or communities supporting others in the difficult times. The Twitter campaign brought over 4,500 interactions from a range of people and highlighted many great organisations. We also received a special message from [Dr Andy Cope](#) and shared our own [Thank You](#) message to our contributors.

Broadening the reach of Project Lift: Foster a diverse Project Lift community in terms of sector, professional level and geography

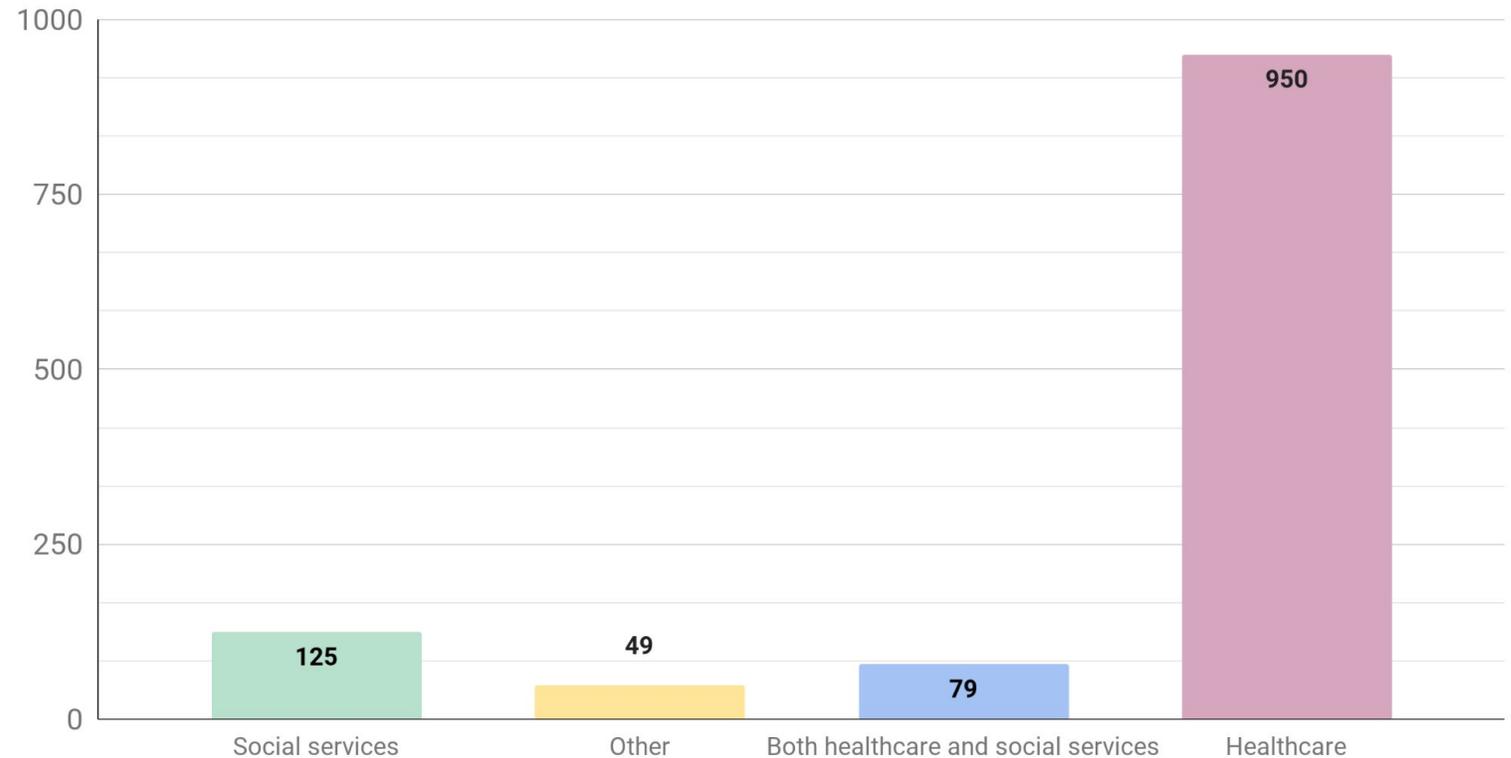
Metric A: Relative proportions of healthcare and social services workers registered for events

Another key aim for the programme (aim 3) was to build a diverse Project Lift community in terms of sector, professional level and geography.

First addressing sector, the vast majority of registrants for each event were from healthcare organisations (i.e. NHS). There was relatively low representation from social services and organisations which perform both healthcare and social services. A small percentage also came from other organisations (e.g. academia). The chart on this page shows the total absolute number of registrants from each sector across all of the events.

It is unclear what the barriers were to social services in attending these events, however, it is something we suggest understanding and addressing in any future activity.

Total number of registrants working in each sector (i.e. Healthcare / Social Services / Both Healthcare and Social Services / Other)

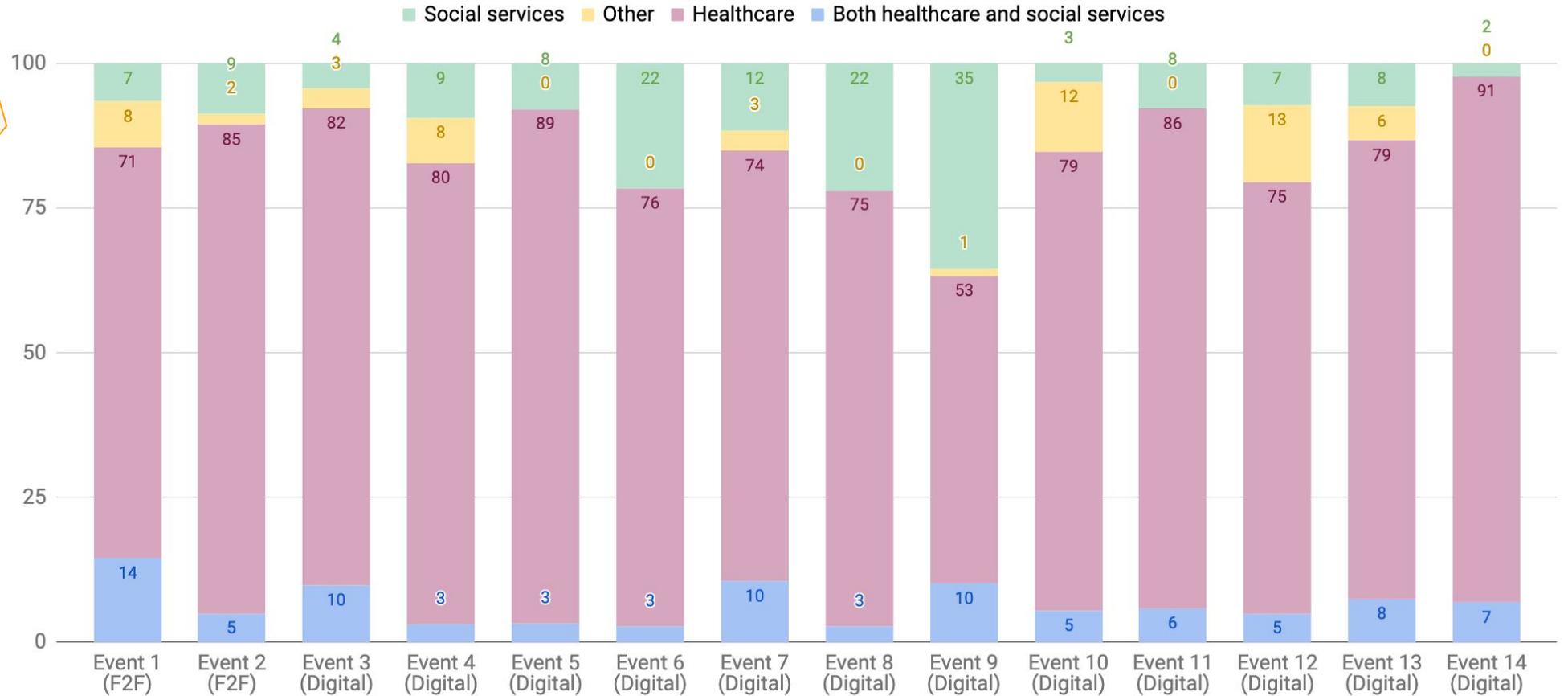


Broadening the reach of Project Lift: Foster a diverse Project Lift community in terms of sector, professional level and geography

Metric A: Relative proportions of healthcare and social services workers registered for events

The chart on this page shows the relative proportion of registrants from each sector per event. As shown, there is significantly higher representation from healthcare than any others. Again, achieving a more diverse set of registrants in terms of sector is something we suggest understanding and addressing in future engagement activity.

Percentage of registrants working in each sector per event



Broadening the reach of Project Lift: Foster a diverse Project Lift community in terms of sector, professional level and geography

Metric B: Relative proportions of the professional levels of people registered for events

The chart on this page shows the overall proportion of registrants from each professional level. As shown, there is a spread across all levels, however, the majority of registrants were at the level of 'manager/leader of a service or project'.

Encouragingly, there is a significant proportion of registrants who are not in formal leadership roles (e.g. team members), which is positive as we were conscious not to target just senior levels of leadership.

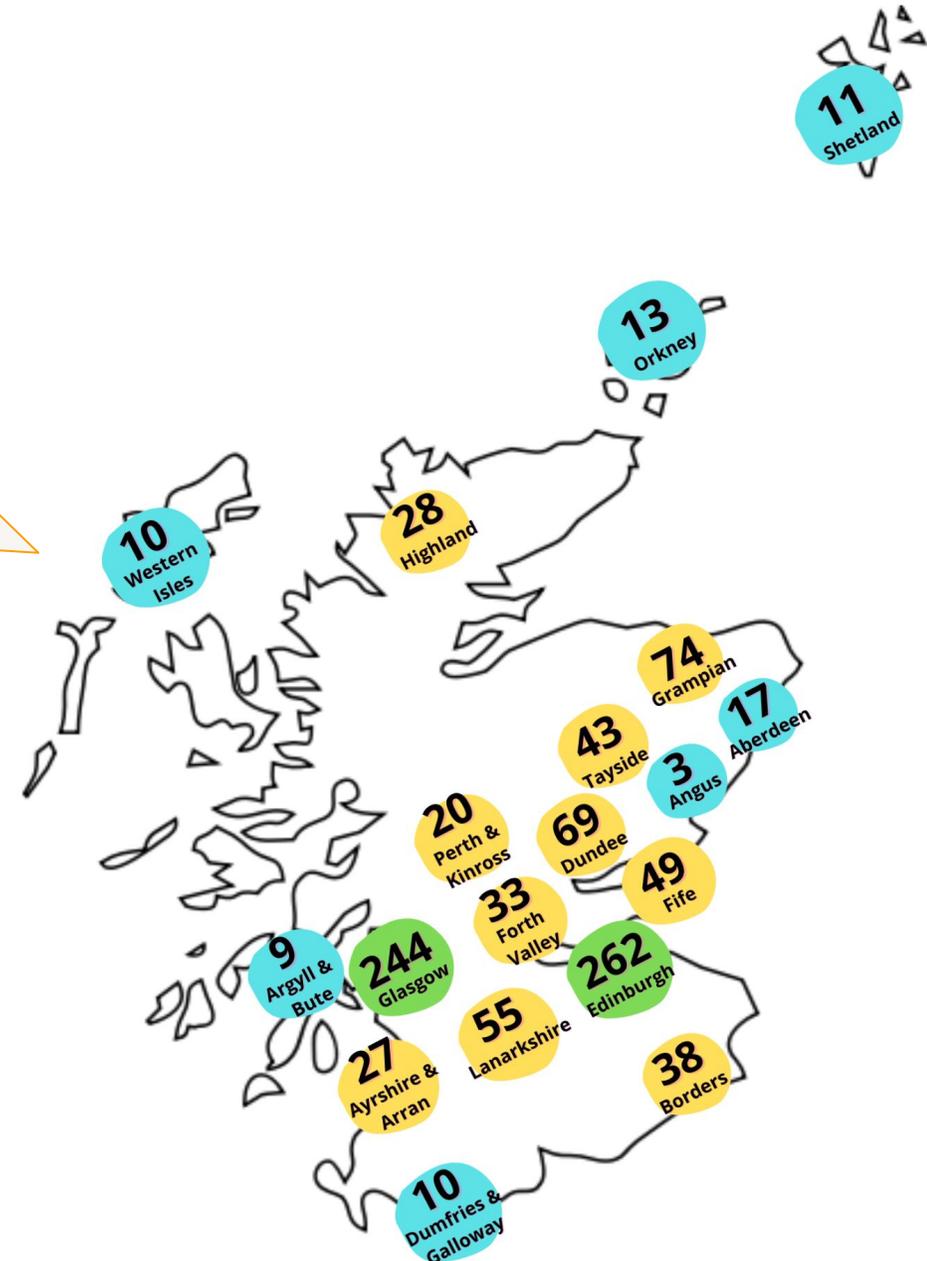
Professional level of registrants, as a proportion of total registrants



Broadening the reach of Project Lift: Foster a diverse Project Lift community in terms of sector, professional level and geography

Metric C: Overall geographical spread of people registered for events

Another measure to demonstrate how diverse the Project Lift community has become is through assessing geographical spread. The chart on this page illustrates the numbers of registrants based in different areas across Scotland. As you can see, there is a wide spread of representation, from all corners of Scotland, including the Western Isles, Shetland, Edinburgh, Glasgow, Dumfries and Galloway, and Highland. In any future engagement, we suggest aiming to maintain this spread, or enhance it even further, by continuing with a digital format for events. Using a digital approach and shareable content meant that the community wasn't limited to certain physical locations and attendees were able to connect from hundreds of miles away without incurring travel costs or lengthy journeys.



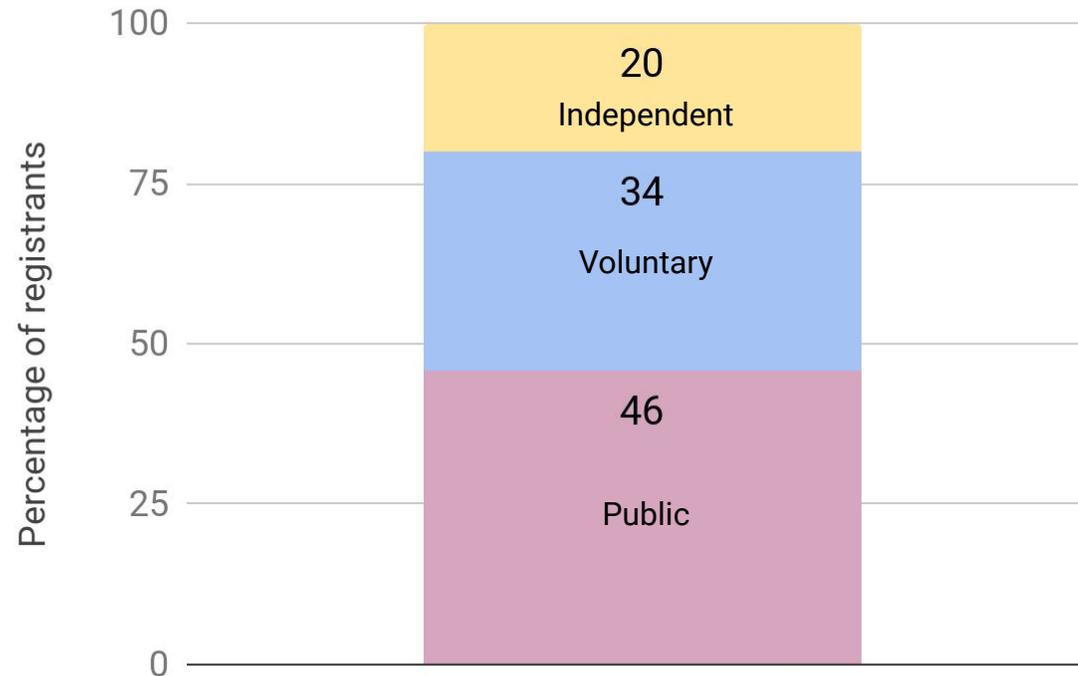
Annex C: Extra detail on social services

Broadening the reach of Project Lift: Foster a diverse Project Lift community in terms of sector, professional level and geography

Bonus metric 1: Relative proportions of each sector within social services

The chart on this page provides a breakdown of the types of organisations represented within social services. As shown, the majority of registrants in social services worked for public sector organisations (e.g. local authorities).

Relative proportions of registrants who are working in social services in the public, voluntary or independent sector



Broadening the reach of Project Lift: Foster a diverse Project Lift community in terms of sector, professional level and geography

Bonus metric 2: Relative proportions of each sector within social services

The chart on this page provides a breakdown of the category of people using the service that the organisations provide. The potential categories of people are:

- Adults
- Children & Families
- Early Years
- All

Some organisations serve more than one of these categories, hence the key shows 'Adults / Children & Families' for example.

As shown, the majority of public sector organisations serve 'All', while the majority of independent sector organisations serve 'Adults' and much of the voluntary sector organisations serve 'Children & Families'.

Relative proportion of organisations in each sector which registered for a Project Lift event, in terms of the primary category of people using their services

