series of domains, notably ‘Self-Leadership’ and ‘Collaborating & Influencing’. Distinct components within the SCLF programme were felt to be especially useful; namely ‘Leadership Development Days’, Coaching and the shadowing of medical leaders. The evaluation identified a need to provide ongoing support for Fellows returning to clinical training, with many Fellows citing time constraints, a lack of colleague understanding and unsupportive workplace cultures as particular challenges.

Conclusion The evaluation will help inform the future development of the SCLF programme and may offer useful learning regarding the format and content of similar clinical leadership programmes.

Women represent an increasing proportion of the health and social care workforce, yet remain underrepresented on boards and in senior NHS leadership positions.1 There is thus a high probability that conference organisers trying to convene well-known speakers will find themselves with a ‘manel’ (an all-male panel of speakers), or a significantly gender-imbalanced lineup. Conferences offer unrivalled opportunities to showcase diversity and inclusivity, to network and as a lever for cultural and organisational change. Speakers and panels should model what we want our future health and social care workforce to look like.

Token women representatives or waiting for change are insufficient. Women Speakers in Healthcare was co-founded by 5 NHS healthcare professionals, with a vision to ensure balanced gender representation at all healthcare conferences and events, with parity of opportunity for all. We are actively promoting and raising the profile of women speakers by:
1. Creating the UK’s largest database of women speakers in healthcare;
2. Providing development and training opportunities to inspire and enable women and
3. Engaging women speakers and male allies through networking and collaboration.

To-date, WSH has 1761 Twitter followers, 390 women speakers signed up to the database and has facilitated conference-speaker connections. We encourage all forms of diversity, are actively engaging male allies and encourage speakers and supporters to nominate other women speakers. We aspire to continue to grow the database, facilitate further speaker-organiser connections and ultimately to ensure that we never again find a suitable female speaker for the panel...

Website: www.womenspeakersinhealthcare.co.uk
Twitter: @womenspeakersHC

Enhancing Your Leadership and Management Skills

NURTING MENTORSHIP IN HEALTH CARE ORGANIZATIONS: ‘HOW DO YOU KNOW’

1Francesco Locati*, 1Roberto Cosentino, 1Patrizia Bertolai, 1Gianluca Vecchi, 2Giulia Martinelli, 2Marco Salmoiiragh, 1General Directorate Healthcare Trust Unit Seriate, Italy, 1Regional Lombardia, Milan, Italy; 2General Directorate Welfare, Regione Lombardia, Milan, Italy

Health Care Organizations are properly considered the most complex ones and there is a growing attention at a complexity perspective in health policy. Leading complex organizations is a crucial task, moving away from a trait and personality background towards the relevance of leadership styles and behaviours.

Based on this assumption, we planned the development of an effective model for leading groups or organizations in health care in order to achieve better outcomes, that arises from a structured observation of Health Care CEOs working in their context. The main clue was the importance of specific behaviour patterns that can be elicited through modeling processes.

Modeling process enables people in the groups and learning organizations to cope through scheduled intervention to verify improvements and to produce continuous feedback. Different techniques based on the so-called ‘sleight of mouth’ procedure were selected to elicit specific leadership patterns, through an observational study, and comparing main indicators of performance, included in Regione Lombardia and Sant’Anna of Pisa networks.

Among the set of behavior patterns investigated through the lens of ‘sleight of might’ technique were: not knowing, active listening, relationships, giving answers immediately, seeking feedback, values bridging, easiness, reframing, sense making, utilizing ‘strange’ attractors, interpersonal management tactics. The conclusive results of the benchmarking analysis and the patterns are ongoing. Impact is valued through the awareness of different levels of learning, recognizing specific patterns of performance, modeling and acting strategies for change.

Learning groups and organizations are powerful setting of improvement, particularly in health care where many variables are at stake. The analysis of the patterns to be elicited related to performance represents a platform for coping and reproducing successful strategies in the realm of leadership.

Leading Innovation and Improvement

WOMEN EMPOWERING WOMEN

Sarb Clare, Sarah Falcon, May Yan, SWBH NHS Trust

76% of NHS workers are female yet only 36% are in senior positions. Female doctors dominate medical school with the majority at 56%, however only 36% are Medical Consultants,