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CRITICAL REFLECTION ON PRACTICE DEVELOPMENT

Two related narratives: learning from an evaluation of a short coaching workshop and a pilot coaching project

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Abstract

Background and context: A key role of the district's Nursing Midwifery Practice and Workforce Unit is to build capability in the nursing and midwifery workforce. In this paper I reflect on the experience of my team following attendance at a two-day Coaching for Performance workshop and the impact this had on developing coaching skills for nurse managers and nurse unit managers in South Eastern Sydney Local Health District.
Aims: To highlight how engaging in critical reflection enabled the unit team to identify gaps in the transfer of coaching skills learned from the two-day workshop to everyday management practices. The pilot project to embed coaching into management practices is the result of the team's reflection. The method, findings and implications for coaching practices for nurse managers and nurse unit managers are described in detail.
Findings: Using Gibbs' model of reflection, the unit team reflected on its collective experiences following attendance at the workshop. This led to the development of a pilot coaching project called Embedding Coaching into Practice for nurse managers and nurse unit managers, which enabled the transfer of coaching skills learned to everyday management practices. The pilot project used a 'coaching the coach' approach, with structured follow-up at the managers' places of work. This had a positive impact on the development of coaching skills and managers were able to use these skills with confidence to enable their staff to develop problem-solving skills.
Conclusions: This paper highlights how using a validated tool for reflection can lead to positive change. 'Coaching the coach' can support transfer of coaching skills learned into everyday practices, which has a positive impact on work performance for nurse managers, nurse unit managers and their staff. It supports the practice development principle that lifelong learning can influence effective workplace cultures and have a positive impact on patient care.
Implications for practice:
- Development of coaching skills for managers enables them to build better relationships with staff and facilitate conversations about work performance and how this can influence patient care
- Coaching programmes that have a practical component should include planning for ongoing support from an experienced coach to practise the skills learned
- Collaboration, inclusiveness and participation are key to building effective workplace cultures

Keywords: Nurses, coaching skills, reflection, effective workplace cultures

Introduction
A key role of the Nursing and Midwifery Practice and Workforce unit (NMPWU) is to build capability in the nursing and midwifery workforce in South Eastern Sydney Local Health District (SESLHD). In this paper, I reflect one of the ways in which we have been doing this. Gibbs' model of reflection, (Gibbs, 1988) is used to describe a team reflective experience in a coach training programme to develop coaching skills for leaders in the health district. According to McCormack et al., (2013, p 19) 'workbased learning with its focus on active learning and formal systems for enabling learning in the workplace' can lead to transformation of patient care. The implications for coaching practice are discussed, as are the ways coaching can influence skill development for nurses and midwives and impact positively on workplace culture. In this paper I offer two distinct yet related narratives: first, I summarise the outcomes and learning from an evaluation of a short coaching workshop offered to staff in leadership positions in SESLHD. This evaluation led the team members to advance and practise their own coaching skills. Second, I present a pilot coaching project aimed at enhancing the coaching skills of the nurse unit managers and nurse managers who had completed the initial coach training programme.

Reflection using Gibbs' model of reflection
Description
During 2011, SESLHD provided an opportunity for staff in leadership positions to engage in a two-day Coaching for Performance workshop, provided by an external coaching organisation. Greene and Grant (2003) suggest coaching can create positive change in people, and managers can use coaching to enhance and increase the performance of individuals and teams. Coaching can also develop emotional intelligence, which can lead to sustainable behaviour changes that can improve the way individuals manage themselves and work with others (Neale et al., 2009). The aim of the workshop was to develop coaching skills, so leaders would engage in coaching conversations to support the development of staff. The workshops were comprehensive and the coaching model used was IGrow, popularised by John Whitmore in the early 1980s (cited in Green and Grant, 2003, p 100). IGrow is an acronym for Issue Goal Reality Options Wrap-up. This format was used to structure the coaching session. Follow-up support post-workshop involved monthly attendance at a coaching circle facilitated by the external coaching organisation. The aim of the coaching circles was to listen to any problems the leaders who attended the workshop were experiencing, and support the transfer of the coaching skills they learned to everyday practice. Attendance at the circles was the responsibility of the leaders; some of the team found it difficult to attend due to the location of the coaching circles and competing work commitments.

Thinking and feeling
The team members found that difficulty in accessing post-workshop support affected their ability to practise the new coaching skills. The team felt frustrated that the coaching circles only happened once a month and would have liked more opportunities to practise their coaching skills in a 'safe environment' while getting feedback from an experienced coach. This could point to a flaw in the structure of the coaching programme. Olivero, Bane and Kopelman (cited in Yu et al., 2008) point out that support is highly significant for the transfer of newly acquired coaching skills to practice. Rafferty and Fairbrother (2015) highlight that the opportunity to practise newly acquired coaching skills facilitates the transfer of those skills to practice. The team thought it was likely that other leaders who had attended the workshop would feel the same way.

Evaluation
The evaluation of the pilot project was based on data from the evaluation of the workshop (carried out by the external organisation), as well as a pre- and post-coaching pilot project survey using the Survey Monkey website. The survey revealed that 59% of participants were only able to attend one follow-up support coaching circle, with a lack of time identified as the main reason. At the time of the workshop evaluation, 90% of the workshop participants said they had applied what they had learned in the workshops to their coaching practices. A follow-up survey of a cohort of the participants in 2013 by NMPWU showed that figure had fallen to 62%.

Despite limitations, the team felt that attending the workshop was a very positive experience. They learned new coaching skills, including asking questions in a way that engages the person being coached in critical thinking, as well as using the micro-skills of active listening, body language and tone of voice to build rapport. They also learned to use the IGrow coaching model. They could see opportunities to use these coaching skills to support staff development in SESLHD. There is strong evidence that developing coaching skills in the workforce can have a positive impact on work performance, and help build stronger relationships, particularly between managers and staff (Locke, 2008; McNamarra et al., 2014; Rafferty and Fairbrother, 2015). Johnson et al. (2011), Batson and Yoder (2012) and Narayanasamy and Penney (2014), agree with this and also point out that coaching can help staff to have a positive attitude to work as well as increase job satisfaction and improve staff retention. Providing the opportunity to attend the workshop demonstrated a commitment to staff development from the organisation; doing so for more than one hundred staff was a costly exercise. Lassenger (cited in Batson and Yoder, 2012, p 1666) affirm that organisations that support coaching can influence the extent to which managers use coaching for staff development in the workplace. However, the team identified that a lack of opportunities to access ongoing support affected their ability to do so with confidence.

Analysis
The areas in which this experience had an impact on the team were empowerment and collaboration; these two factors can be summed up as sharing information with people so they can take initiative and make decisions to solve problems that improve performance towards a common goal (New South Wales Health, 2014, p 21). The team felt empowered to attend the coaching workshop to further develop their coaching skills. They collaborated with other leaders and the external coaching organisation. This extended their professional networks and helped build relationships with other stakeholders in the organisation. Nicholl and Tracey (2007) state that developing networks can stop staff working in isolation, promote the sharing of experiences and improve staff retention. However, the team found it difficult to attend the follow-up coaching circles and made assumptions that, like them, other leaders may not be currently using the coaching skills learned to full potential.

Conclusion and action plan
The team reflected on what they had learned from the coaching workshops. They assessed their current skill level against the level of coaching skills required to support the workforce. They felt more training may be required to help their skills reach the required level, and that greater opportunity to access post-workshop support could have increased confidence in using the coaching skills learned.

The NMPWU recognised that it needed to offer more support to nurse managers and nurse unit managers across the service who had attended the workshops to help them embed the coaching skills they had learned into their management practices. A pilot project was designed to implement this process, based on the principle of 'coaching the coach' in order to build confidence in the regular use of coaching skills.

Embedding coaching into management practices pilot project
An invitation was distributed to 90 nurse managers and nurse unit managers employed in SESLHD who had completed the two-day Coaching for Performance workshop facilitated by the external coaching organisation. They were offered the opportunity to build on the skills developed in the workshops and support to embed 'coaching conversations' into regular management practices. A total of 22 nurse managers and nurse unit managers were keen to take up this opportunity. Participants were invited to engage in three one-hour coaching sessions over a period of approximately four months, using the IGrow model with an experienced coach from NMPWU. The coaching sessions were structured towards developing coaching skills use with their staff in the workplace. Participants were expected to report on progress at the following coaching session. The coaching sessions occurred at the participants' place of work.

Method
The pilot project was evaluated using -pre- and post-project surveys and both were analysed by the NMPWU team. Responses were compared to measure and monitor any changes to coaching practices as a result of the pilot. Based on previous experience using Survey Monkey as an evaluation tool, ethics approval was not required.

Findings
Frequency of coaching conversations
The frequency of coaching conversations with staff generally showed an increase. Participants were asked to identify the frequency with which they had informal coaching conversations with their staff. Initially the greatest number of participants were having coaching conversations monthly but after the pilot project the greatest number were having conversations weekly. The number having daily conversations was relatively unchanged. This is summarised in the Table 1.

Table 1. Average number of informal coaching conversations		
Frequency	**Before**	**After**
Daily	37.5	38.46 (+1)
Weekly	18.8	45.15 (+26.35)
Monthly	31.3	15.38 (-15.92)

The most significant increase in frequency occurred in the 'weekly' group. The majority of participants reported that the frequency of their coaching conversations with staff had an impact on assisting the staff members to achieve their goals. No participants reported a decrease in frequency of coaching conversations; the table does show a decrease in monthly coaching conversations but this is likely to be explained by the increase in weekly conversations.

Formal coaching conversations with staff (for example, pre-arranged appointments for coaching) also increased significantly. Before the pilot project, only 6.3% of participants had formal coaching with staff. After the project this had increased to 30.77%.

Coaching 'on the run'
Coaching 'on the run', or 'corridor coaching' occurs when managers engage in short, on-the-spot coaching conversations, using enabling questions to help staff to identify their own solutions to a work-related issue. This may also help to develop facilitation skills as they become active listeners and engage their staff in conversations when providing feedback. According to Manley et al. (2008, p 248) this can build expertise in the workforce and create a culture of learning and development. The survey showed an increase in coaching conversations being conducted 'on the run' by managers. Before being coached 93.8% reported they engaged in this practice, while 100% said they did so afterwards.

Managers' confidence in using the IGrow coaching model was measured. All respondents reported increases in their confidence level. Most importantly, the least confident groups had shifted upwards. This is summarised in Figure 1 .

Figure 1: Confidence of managers with IGROW coaching model
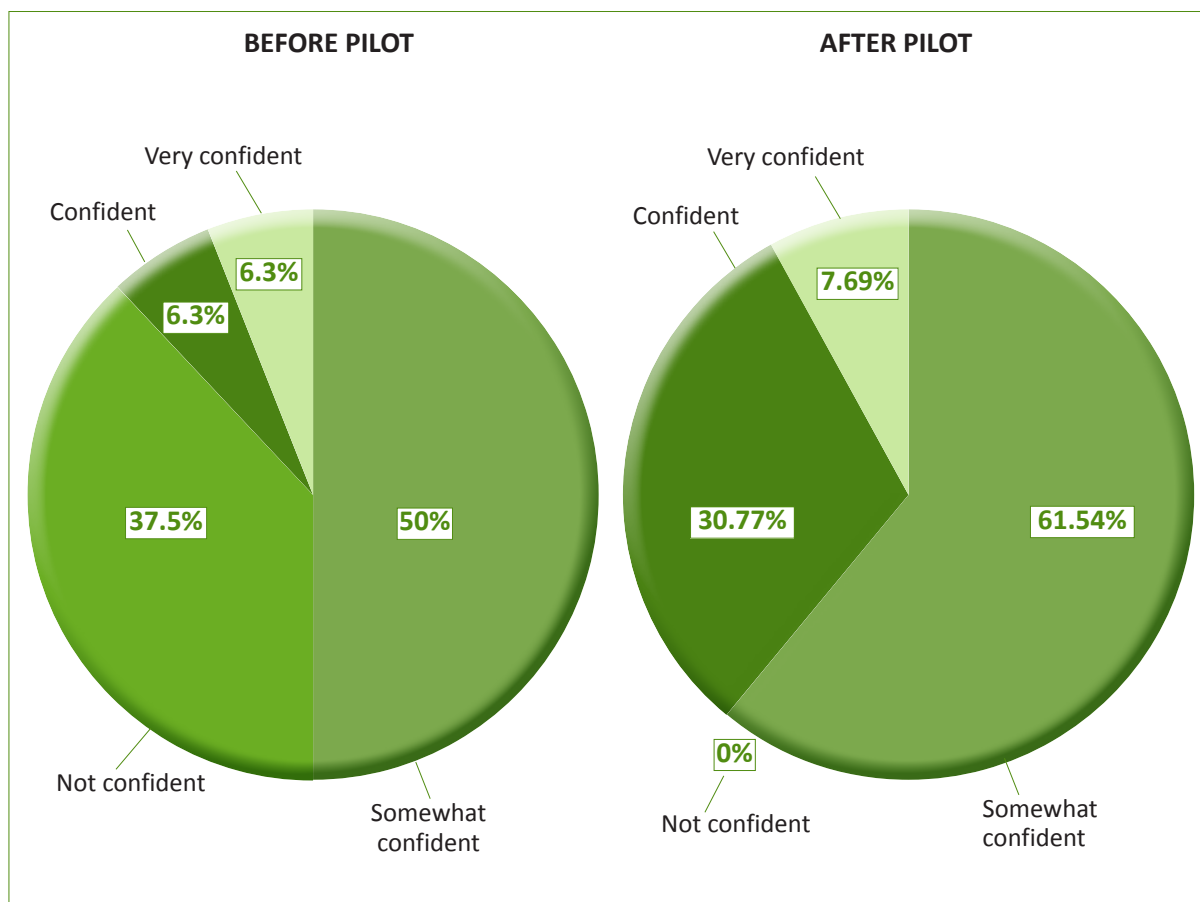
The above figure suggests that coaching support was most effective for the participants who initially reported being 'not confident' and the overall move towards increasing confidence supports the expectation of the pilot project that providing a structure for support would enhance confidence. Rafferty and Fairbrother (2015) agree that integrating coaching skills into managerial practices can increase managers' confidence, as well as job satisfaction, role clarity and retention of staff.

Impact of being supported through coaching
All participants (n=22) reported that having coaching had helped them to coach their own staff either 'often' (76.92%) or 'sometimes' (23.08%). Specific enhancements to practice were highlighted by participants through free text entries in the post-project survey. These included increased confidence, but also 'following up with staff', 'being a better listener', 'using a structured approach' and 'not letting a problem fester'. These themes suggest that a primary goal of engaging with staff through the techniques of coaching conversations is being met. Coaches who use active listening and reflective questioning help employees to generate insights and solutions for issues that arise in the workplace (Batson and Yoder, 2012, p 1662).

Participants were asked to identify factors that enhanced their ability to provide coaching. Responses indicated that significant factors included allocating specific time for coaching, having the confidence to use the skills learned and seeing the improvement in staff as a result of coaching. Similarly, time – or the lack of it – was cited as a barrier to coaching staff.

Finally, participants had to identify what they are now doing differently as a result of the coaching support they have received. Themes emerged from the free text responses, which include:

- Enhanced teamwork through recognising the needs of the team and working with them to resolve them

- Awareness of opportunities to coach or to use the techniques with staff
- Enhanced awareness of the impact of the use of language and the questions asked
- Spending time with staff allowing them to solve their own problems instead of fixing them
- Enhanced confidence in their ability to lead coaching conversations

Themes extracted by the coaches
The coaches met to analyse the themes of the coaching sessions they had with the participants. The overarching theme related to communicating with staff members, whether offering enabling support, dealing with entrenched behaviours or handling performance issues. The coaches reported that most used the coaching sessions to prepare for a 'difficult' conversation of one kind or another. Jackman and Strober (2003, p 8) suggest that managers fear giving feedback to staff because they are uncomfortable with conflict. After the second coaching session, the coaches noticed that there was a shift in the managers' approach to engagement with their staff. They were now less reactive and more considered with their responses to staff. After several feedback sessions with staff, managers noticed an improvement in their relationships with staff. The 'manager as coach' concept empowers employees to think for themselves while receiving feedback in a positive and meaningful way (Rafferty and Fairbrother, 2015, p 1250).

A real consideration is the positive impact the willingness to communicate in this way can have on individuals and teams. Effective communication is very important in healthcare; nursing and midwifery managers are key players in teams so it is important they have good communication skills. Coaching places high value on using communication skills to build trust, engage and motivate others (Byrne, 2007, p 1988).

The project highlighted to our team that training is more effective with structured follow-up, particularly one-to-one support and role modelling. Training programmes for coaching need structure, effective delivery, and support that enables the application of skills to practice (Stevens, 2008, p 147). The external coaching organisation provided and delivered a well-structured programme but the coaching circles used to support participants after the workshop were undersubscribed, and did not meet the learners' needs in translating theory to practice. Those who were given one-to-one support through this pilot project reported an increase in confidence to engage in coaching conversations with staff, as well as in using the IGrow coaching model. This has a significant impact on their coaching skills, use of language and ability to ask enabling questions. One nurse manager said:

> *'I spend more time with the staff talking through their issues, rather than solving issues for them without their involvement.'*

Time constraints were identified by participants as an inhibitor to engaging in coaching of staff. The 'coaching on the run' approach was shown by this evaluation to be an acceptable and a more practical model for managers to use. These interactions can be quick and effective in encouraging staff to solve problems in the working environment. The frequency of coaching has increased and it could be said that, as staff and managers are engaged in more conversations, this can assist in developing relationships with individuals and teams. However, this was not specifically investigated in this project.

On comparison of the pre- and post-pilot project survey results, it is evident that support provided via the three coaching sessions enabled managers to develop their coaching skills further. There is evidence that coaching is now becoming part of the participants' regular practice and the benefits of this are illustrated by the following quotes:

> *'I am actually putting coaching into practice and thinking about word choice.'*
> *'I am more able to work with the team and support them. Team concerns and problems can be dealt with early as possible.'*
> *'Coaching has allowed me to grow in confidence and have the ability to communicate with staff in a different manner, which has in turn allowed me to make a difference in my workplace.'*

This pilot project has demonstrated that coaching individuals to coach is an effective means of enhancing managers' confidence, and this is reflected in the frequency of coaching conversations they now have with their staff.

Discussion
The two parts of this project included the NMPWU team analysing their experiences of coach training with the aim of providing support and challenge to nurse managers and nurse unit managers across the district in the application of learned coaching skills. The team used structured reflection and action planning in order to identify the skills they required to be able to provide this.

The principles of collaboration, inclusion and participation are visible in the project. This is evidenced by the collaboration, involvement and participation in the project from our team, the nurses and the organisation, which influenced coaching practice, and began to help build better relationships between managers and staff. Blair and Wood (2014, p 5) agree these principles build relationships for successful change within organisations. It is interesting to compare the findings from the Embedding Coaching into Practice project with findings from other projects. Our project found that development of managers' coaching skills also improved their facilitation skills, and commitment to lifelong learning can build capability and capacity in the workforce. This is supported by Manley et al. (2011) as they describe the significance of skilled facilitation as an enabling factor in building effective workplace cultures, and lifelong learning as a key attribute of workplace cultures that are person centred, with the patient at the centre of care.

Another significant finding was the importance of a support framework to transfer coaching skills learned by the managers to their everyday practices. The managers were supported by the coaches from the NMPWU, who went to their place of work for coaching sessions at times that were convenient to managers, rather than them having to come to the coach. Titchen (2003, p 33) describes critical companionship as a metaphor for supporting and enabling individuals to develop person-centered practices. The coaches became critical companions to the managers to support them to develop coaching skills with their staff. The managers engaged in three coaching sessions and after each session, the manager developed an action plan for learning and gave feedback on progress at the following session. This enabled the learning and transfer of coaching skills to practice to occur over a period of four months. Rafferty and Fairbrother (2015), support the concept that incremental learning of coaching skills with an experienced coach expedites transfer of skills to practice.

There were some limitations of the pilot project to consider. Survey monkey was used as it is a simple evaluation tool to measure results for a pilot project. However the results are self-reported. Should we decide to run the programme again in the future, we will use a validated evaluation model. One such model could be the CIPP model of evaluation developed by Stufflebeam et al. (cited by McCormack et al., 2013, p 181). There is a plethora of coaching literature available to support the impact of coaching in the corporate environment, but coaching is still a relatively new concept in healthcare and there is limited research available to describe its impact on the workforce. More research is required to explore this issue.

Conclusion
The NMPWU team used Gibbs' model to reflect on an event that described their experience of developing coaching skills after attending a two-day Coaching for Performance workshop. The team felt that the follow-up support offered was inadequate to help them apply the skills they learned to their coaching practice. A survey of the participants confirmed this to be the case. A pilot project for 'coaching the coach' was designed to support nurse managers and nurse unit managers to transfer their coaching skills. The use of Gibbs' model confirmed the value of reflection in promoting positive change, as it enabled the team to think outside of the box and develop the coaching pilot project.

Results from the pilot project highlighted that coaching the coach can increase managers' confidence to use coaching skills to build better relationships with their staff, and enable staff to develop problem-solving skills. They suggested that training is more effective with structured one-to-one follow-up, and enables better application of skills to practice. Coaching 'on the run' is an acceptable and practical model to use, given that lack of time was identified as a limiting factor on coaching conversations with staff. One of the main themes identified by the coaches was that managers used the coaching sessions to prepare for difficult conversations with their staff to address behavioural and performance issues. To be able to help managers prepare for difficult conversations and manage potential conflict situations, specific conflict resolution training may be required for the NMPWU team.

The work from this coaching pilot project is transferable, and a coaching programme can be developed with managers and leaders across all disciplines of healthcare to help build effective workplace cultures.

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