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**ENHANCING THE LEADERSHIP CAPACITY  
OF MIDDLE MANAGERS  
THROUGH LEARNING CIRCLES**

By

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BA, Université de Moncton, 1992

A thesis submitted in partial fulfillment of  
the requirements for the degree of

MASTER OF ARTS

In

LEADERSHIP AND TRAINING

We accept this thesis as conforming  
to the required standard

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## **ABSTRACT**

Middle Managers in the Canadian healthcare system will face a panoply of leadership challenges and changes in the years to come. This thesis explores how learning circles can contribute to enhancing the leadership capacity of Middle Management within the Restigouche Health Authority (RHA).

All action research activities carried out for the purpose of this project focused on the operationalization of strategic directions through the development of a departmental or program health and business plan model linking organizational and departmental objectives to the budgeting process.

Project findings and conclusions revealed the effectiveness of learning circles as a vehicle to enhance the learning and leadership potential of Middle Managers within the RHA by (a) increasing participant satisfaction, (b) increasing organizational cohesion, (c) contributing to leadership competencies, and (d) engaging participants.

## **DEDICATION**

This project is dedicated to Patrick Richard Todd, whose support and love turned a year of challenge into a victorious labour of love and commitment, and to McKay Alexandria Lynne Todd (MALT), who guided the researcher's journey from within.

## **ACKNOWLEDGEMENTS**

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# **CHAPTER ONE:**

## **FOCUS AND FRAMING**

### **Introduction**

Interest in the subject of how exploring strategic initiatives through learning circles could enhance Middle Managers' leadership capacity stemmed in great part from my involvement in the development of the Restigouche Health Authority's (RHA) logo, mission, vision, guiding principles, health status profile, community needs assessment, strategic directions and goals, and strategic information sessions since the fall of 2002. In evolving roles as Acting Director of Communications, Manager of Volunteer Services and Director of Planning and Information Management, I oversaw coordination of the above-mentioned exercises, carried out for the purpose of ultimately developing a three-year regional health and business plan that would allow our organization to better serve its population with all players moving in tandem. The exercises were meant to facilitate the planning process for Managers by allowing them to make decisions based on the needs and desires of RHA stakeholders with regard to the future direction of healthcare services within the RHA. They were also meant to signal a shift in culture within the organization, in which the needs and priorities of the organization would funnel upwards rather than downwards, and in which Middle Managers would be heard and become active leaders by contributing to the organization's future planning initiatives.

In the year and a half preceding publication of this major project, a series of information sessions were delivered for the purpose of familiarizing Middle Management with the data, tools and models available to them for developing their department-specific three-year business plans. It should be noted that no overarching corporate plan was initially developed, the intent being that the departmental plans, based on data and

strategic directions, would be tied in to budget allocations, feed upwards, and as a whole constitute the organization's three-year health and business plan.

While Middle Managers had in the past expressed a desire to have more input into the decision-making process, common feedback from these sessions was that there was a lack of overall direction from the organization as to what potential future changes must be considered in the planning process and as to what the actual plan should or would look like. While the RHA Health and Business Plan (HBP) Steering Committee took this feedback to heart, ultimately developing an initial high-level strategic plan (Health and Business Plan Strategic Initiatives, 2005) that could serve as a starting point for Middle Management planning initiatives, it is this initial feedback from Middle Managers (i.e. their expression of fear, concern, consternation, and a desire to demonstrate due diligence), that has remained at the heart of this major project. I wondered if bringing Middle Managers together to address this current topic of interest through learning circles might contribute to the validation of learning circles as an effective forum in which Middle Managers can alleviate the concerns and challenges they experience as leaders and directly contribute to the organization's success by enhancing leadership capacity at their level.

My initial interest in the concept of learning circles specifically and their potential as a catalyst for enhancing leadership capacity within the RHA can in large part be linked to the fact that they are for the most part self-led and do not rely on a lecturer or an expert to guide the discussions (Learning Circles Australia, 2005). To me, this meant that once the initial action research had been carried out, there was potential to motivate learning circle participants to adopt the learning circle format themselves in exploring further leadership challenges.

The research question put forth was: “How could learning circles contribute to enhancing the leadership capacity of Middle Managers of the Restigouche Health Authority?” Further elucidation of the following was inherent to answering this question:

1. Can learning circles contribute to the planning and visioning skills of Middle Managers within the RHA?
2. Can learning circles contribute to the: a) leadership competencies of; b) learning (explicit and implicit) of, and; c) sharing of information by Middle Managers within the RHA?
3. Are Middle Managers within the RHA interested in pursuing the concept of learning circles as a forum for developing leadership capacity?
  - a. What are the factors that contribute to participants’ satisfaction/dissatisfaction with learning circles?
4. Will the organization as a whole support the concept of learning circles?
5. What factors are critical to the viability, credibility and sustainability of learning circles?

## **The Opportunity**

During the above-mentioned strategic initiative development exercises, citizens, professionals and physicians were consulted to determine their perspective on healthcare within the RHA. They voiced their concerns, needs and hopes for our region and for their own future within our region. Their contribution was sought with the express intent of developing a three-year health and business plan mandated by the Government of the Province of New Brunswick that would be reflective of the community served by the RHA.

The RHA Health Status Profile (Restigouche Health Authority Health and Business Plan Steering Committee & O’Keefe and Associates, 2004) and Community Needs Assessment (Restigouche Health Authority Health and Business Plan Steering Committee & Management Dimensions, 2004) allowed us to more clearly define our internal and external clients and their needs and to attach quantitative data and statistical vigour to the planning process. They helped us solidify some of the concerns expressed by government in regard to use of services and to give additional credence to the concerns expressed by managers and caregivers within the Health Authority. Conversely, in some cases they helped alleviate concerns regarding utilization of services and at-risk populations. Ultimately, they helped us determine where the organization should be focusing its attention in the near future (expressed through the development of strategic directions and initiatives).

Healthcare is a changing field, with an increased focus on wellness and access to appropriate care within the appropriate context. In essence, “dramatic shifts in health needs and technologies are requiring significant changes in the delivery and integration of health services” (Canadian Healthcare Association, 1999, p. v). In the past, access to healthcare had typically been interpreted as on-site and hands-on provision of services. However, a move to achieve a seamless, integrated continuum of care within the Province and its eight health regions has broadened this vision, resulting in centres of excellence for specialized services and new healthcare delivery models (i.e. community health centres, shared services such as mobile diagnostic units, telehealth services, etc.). One challenge for smaller regions therefore lies in providing timely and appropriate access to care for the patient. Another major challenge is the shift in focus from the provision of hospital-based curative care to the promotion of community-based preventive care.

In light of the above, the RHA is asking managers to think and act more innovatively, strategically and effectively. They are being asked to rethink healthcare, to focus more on wellness and to play an active leadership role in ensuring appropriate and timely access to care for our population. The tools provided to these managers to assist them in their evolving role are the strategic directions and initiatives cited previously, as well as a series of documents and quality improvement templates aimed at monitoring progress and planning for the future (RHA, 2004a). Despite the availability of these tools, planning for the future of healthcare remains a daunting task, and in light of the expectations placed on the Middle Managers working in this changing field, many “find themselves bewildered as they face the task of rationalizing multiple sets of business and care processes” (Paine-Mantha & Garrett, 2003, p. 42).

By determining how and if learning circles can help RHA Middle Managers develop their leadership capacity, it may be possible for the RHA to become a much more innovative, robust and inviting organization in the future. Letting Middle Managers know we have heard their concerns while working within the limits imposed on us, and more importantly letting them develop their own leadership capacity within the RHA, might prove to be a most powerful motivational tool that could serve to benefit both the organization and the people it serves.

### **Significance of the Opportunity**

By responding to the clearly expressed needs of its Middle Managers, the RHA can position itself as an evolving, leading, and informed organization. Simply stated, by demonstrating a willingness to help find solutions to this particular concern as voiced by Middle Managers, and by investing time and energy into making those solutions practical, positive, enhancing and cost-effective for all involved, there is potential to increase our chances of gaining credibility and trust and hence increasing buy-in from

Middle Managers. This will be of the utmost importance moving forward given rapid management turnover, the need for leadership at all levels of a rapidly expanding organization, and the foreseen changing landscape of healthcare over the years to come.

There is potential to significantly increase satisfaction amongst Middle Managers by allowing them to express their concerns and ideas in an open and safe forum, and more importantly by demonstrating that a culture shift is effectively occurring by providing them with such a forum in which they are encouraged to share their learning, increase their knowledge, and arrive at solutions and best practices that are reflective of their needs. Potential outcomes of facilitating the strategic management learning of Middle Managers within the organization could extend to greater effectiveness, a more positive outlook, a common understanding of the organization, and increased personal and job satisfaction.

Long-term benefits identified include a more informed, trusting, effective, confident and powerful Middle Management team, focused on sharing best practices, knowledge-based decision making, and cost-effectiveness. Potential outcomes include decreased costs through proper planning, and improved client care arrived at through a common vision and understanding of the organization and its people. There is also the possibility of increasing the organization's reputation as an employer of choice, thereby increasing Middle Management recruitment and retention potential.

Establishing the value of learning circles focused on strategic planning in developing the leadership capacity of Middle Management may validate learning circles as an effective means by which to address a whole gamut of leadership and organizational workforce issues in the future such as absenteeism, harassment, human resources planning, etc.



Benefits to the RHA's Middle Managers may include decreased levels of stress, decreased risks and frustration associated with improper planning, and a greater understanding of our organization as a large and complex system, its various stakeholders and its limits (through participation in and contribution to action research). Ultimately, it may serve to increase their learning, facilitate knowledge transfer, build a supportive peer group, and increase credibility at the Senior Management level in their leadership capacity.

“In Middle groups, special attention needs to be paid to integration. In the diffusing environment, integration will not happen naturally; it has to be worked at rigorously” (Oshry, 1995, p. 161).

The potential risks involved with failure to implement a forum in which Middle Managers can express their concerns and ideas could extend to decreased satisfaction, higher management turnaround, lack of motivation, lack of understanding of the organization's vision, lack of trust in the organization's commitment to begin planning from the bottom up, resistance to future change, poor planning, and hence lesser quality service to the client. While hard to measure, the impact of these factors may contribute to the organization's ability to weather changes in the years to come.

### **Systems Analysis of the Opportunity**

The RHA is one of eight regional health authorities serving the population of the Province of New Brunswick. Located on the North Shore of the Province, the RHA provides services to approximately 37,000 people. This represents 4.1% of the overall population of New Brunswick. In turn, New Brunswick represents 2.4% of the population of Canada. While the RHA's significance within the Provincial and National context may appear minuscule when expressed in terms of percentages, the challenges

the region faces in relation to access to care and accountability on a per capita basis are no lesser than in other health regions in Canada.

In light of this, both the Province of New Brunswick (New Brunswick Department of Health and Wellness, 2003a) and the RHA subscribe to the promotion of healthier lifestyles and the appropriate access to healthcare for all New Brunswickers, regardless of their place of residence.

As a very small and geographically isolated health region, there is significant value in demonstrating to residents within the region's catchment area and to the Government of New Brunswick that the RHA is an innovative, progressive, knowledgeable and effective organization, capable of meeting the challenge set forth.

At the National and Provincial level, some very innovative initiatives have focused on access to care over the past several years (i.e. telehealth initiatives, wellness programs, NB three-year healthcare plan). The RHA is currently involved in many of these initiatives at various levels, and because of its small size and early planning initiatives, is likely armed with as much if not more hard data to support its future directions than any of the other health authorities in this Province.

Armed with this data, and with the added impetus of a National and Provincial push to be more innovative in healthcare delivery, the context is ripe in this small region to illustrate the value that proper planning, dissemination of information, shared learning and leadership development can have on the healthcare system as a whole.

### **Organizational Context**

The RHA, instituted under the *New Brunswick Regional Health Authorities Act* (assented to in 2002) (Government of New Brunswick, 2002), currently oversees operations for one acute care hospital facility, one community health centre, one health care clinic, one forensic and long-term tertiary care psychiatric hospital, one addictions

services facility, and an extra-mural (homecare) program. Transition of operations for Public Health and Mental Health Programs to NB regional health authorities has been confirmed by Government and is foreseen in the near future. The RHA is governed by a 15-member Board of Directors, 7 of whom are named by the Minister of Health and Wellness, and 8 of whom are elected (in keeping with Section 19 of the *New Brunswick Regional Health Authorities Act*, assented to in April 2002) (Government of New Brunswick, 2002). Operations are overseen by a President and Chief Executive Officer, who reports to the Deputy Minister of Health and Wellness. Three Vice Presidents report directly to the President and CEO, overseeing the activities of approximately 80 directors, managers and coordinators, who in turn oversee a staff complement of approximately 1,300 full-time, part-time and casual employees (see Appendix A for RHA Organizational Chart).

Under the NB Regional Health Authorities Act and under the guidance of reports such as *Reporting to New Brunswickers* (New Brunswick Department of Health and Wellness, 2003b) the RHA is committed to contributing to wellness and providing equal access to care for its population. The RHA's logo, depicted here, is meant to graphically illustrate the organization's commitment to freedom from illness, seamless continuity of care and diversity of healthcare service provision.



In addition, the RHA strives to support wellness and access to care in its mission and vision statements as well as in its strategic directions. The term "mission" is derived from the Medieval Latin term *missio*, and literally means *task assigned* (*Webster's ninth new collegiate dictionary*, 1991, p. 760). In the for-profit and not-for-profit sectors, organizations commonly use the term when referring to their reason for being.

According to Dr. Christopher Bart (2002), Professor of Business Administration at McMaster University, in Hamilton, Ontario, and a leading expert on helping organizations develop mission and vision statements, a mission statement defines “who we are, what we do, who we serve, and why we exist.” Peter Senge (1994) supports this in his definition of mission (purpose), by focusing specifically on the “why” of an organization’s existence. He notes that great organizations have a source of purpose that extends to a need to make a difference in the world. Zuckerman (1998) solidifies the concept of the mission statement by explaining how it is ultimately the mechanism by which the organization will set the stage for its vision, which will in turn be developed into strategies, goals, objectives and actions.

Throughout its strategic planning exercise, the RHA referred stakeholders back to the four fundamental mission questions as described above, i.e. “who we are, what we do, who we serve, and why we exist.” In this sense, the RHA’s mission statement served as the basis for all findings stemming from its research, hence promoting alignment of where we are today with where we want to be in the future. As such, it is the foundation upon which all planning initiatives within the RHA are derived.

*Restigouche Health Authority Mission Statement:* We work towards wellness for all. As part of the community, we: assist individuals in assuming an active role in their own health; promote healthy lifestyle behaviors; provide preventative, acute, rehabilitative, and palliative services in the home, community and hospital settings, as well as provincial psychiatric tertiary and forensic services. (RHA, 2005, para. 1-5)

*Restigouche Health Authority Vision Statement:* Individuals, families and communities taking responsibility for their own health by making a commitment to wellness. (RHA, 2005, para. 6-7)

*Restigouche Health Authority Strategic Directions:* Ensure appropriate access to comprehensive quality health care services; ... Promote wellness and individual responsibility for health; ... Promote an integrated approach to geriatric and rehabilitative services; ... Promote the Provincial tertiary psychiatric program; ... [and] Ensure a balanced approach in fulfilling the organization’s guiding principles. (RHA, 2004b, p. 1)

## **CHAPTER TWO:**

### **REVIEW OF LITERATURE**

#### **Research Question**

In seeking to determine, “How could learning circles contribute to enhancing the leadership capacity of Middle Managers of the Restigouche Health Authority?,” I explored three areas of interest, namely learning circles, leadership capacity, and Middle Management in healthcare.

Interest in determining how Middle Managers within the RHA could increase their leadership capacity led me to further examine the possibilities presented by learning circles. It was the intent of this project to determine how learning circles could be used at the Middle Management level to enhance leadership capacity.

#### **Learning Circles: What Are They and What Can They Deliver?**

*Knowledge is not simply another commodity. On the contrary. Knowledge is never used up. It increases by diffusion and grows by dispersion... (Boorstin, n.d., p. 1)*

#### ***Learning Circles Defined***

Learning circles are most often described as a group of five to fifteen individuals who gather regularly for about two hours at a time to learn about and discuss issues that are important to them and their milieu (Learning Circles Australia, 2005). While assisted by a facilitator, these groups are for the most part self-led and do not rely on a lecturer or an expert to guide the discussions. They encourage one speaker at a time, with others taking notes and/or listening quietly.

Ideally, the group will name their facilitator, whose role is to keep the discussion flowing and fair. Participants are expected to read about one hour’s worth of material between sessions.

The purpose of learning circles is to serve as an empowering means of bringing about learning and social change at the learners' pace. Ultimately, they aim to come up with an action plan for the problem at hand (Boileau, 2002).

### ***How Are Learning Circles Structured?***

The first step in organizing a learning circle involves an organization, group or individual determining that this forum could potentially promote interest and understanding of a given topic or concern. Learning Circles Australia (2004) describe this creator of the learning circle as the "organiser." The other parties involved in the success of a learning circle are the participants (i.e. the individuals interested by the issue at hand) and the leader (referred to hereafter as the facilitator). While the facilitator should be well versed in leading discussions, keeping them focused, and being organized, he or she is in no way expected to be an expert on the topic at hand. Though the organizer will be responsible for getting the learning circle off the ground, once the learning circle actually begins, his or her role will become secondary to the facilitator's.

Learning circles are for the most part an informal process, yet there would appear to be value in providing some structure adapted to the needs of the sponsoring organization and participants (Learning Circles Australia, 2004).

They are preferably held in a comfortable meeting area that allows for privacy and a minimum of distraction, and generally last for 1.5 – 2 hours. They are held on a regular basis, anywhere from several weeks to several months (University Teaching Services, 2002). Normally, they will require participants to peruse literature beforehand. Prior to exploring the issue of focus for the learning circle, it is valuable for the group of participants to establish the group's purpose and guiding principles for meetings, a clear definition of the problem or concern to be explored, and a clear understanding of roles (Askim, 2002).

### ***Learning Circles within an Organizational Context***

Learning circles are being used by a number of organizations to promote learning and development. This forum can in fact be used by “groups of teachers, students, parents, community members, administrators, or other professionals and can be a combination of members from any or all of these groups” (Collay, Dunlap, Enloe, & Gagnon, 1998, p. 2).

Camille Boileau (2002), Executive Coordinator for the Task Force on Service Delivery (Public Works and Government Services), has used learning circles in her quest to determine if there is such a thing as a “professional manager” and feels that this forum is an effective means for problem-solving at the management level that could benefit leaders throughout Canada.

The Association of Registered Nurses of Newfoundland and Labrador and the Council for Licensed Practical Nurses also implemented a learning circles project in an effort to enhance the practice environment and work relationship between registered nurses (RN's) and licensed practical nurses (LPNs). Benefits evaluation of the project demonstrated “significant increases in new learning, skills development, and changes in belief and attitudes” (Bennett, 2001, p. 3).

The fact that learning circles have been tried successfully within various government and healthcare agencies lends itself to pursuing the concept within the RHA. The perceived learning circle benefits described by Boileau (2002) for problem-solving at the management level and their potential for enhancing some of the leadership competencies as noted by Bennett (2001) indicate a probability for enhancing leadership capacity inasmuch as it relates to leadership competencies in Middle Management.

### ***Learning Circles as Compared to Other Adult Learning Models***

A wide variety of adult learning models currently exist. While similar in many regards, there are certain distinguishing assets that set apart learning circles.

For example, while discussion groups and learning circles may strongly resemble one another, Learning Circles Australia (2004) makes 3 specific distinctions between the two models, namely that a learning circle tends to be more focused, is based on common resources, and is always intended to have an action outcome. Learning circles also distinguish themselves through the use of a talking piece, “a designated object passed from hand to hand” that “grants the holder of the piece the chance to speak without interruption” (Baldwin, 1998, p. 67).

Communities of practice, defined as “groups of people who share a concern, a set of problems, or a passion about a topic, and who deepen their knowledge and expertise in this area on an ongoing basis” (Wenger, McDermott and Snyder, 2002, p. 4), are another model of adult learning currently in use within various organizations. While the concepts of communities of practice and learning circles seem very similar, what would most strikingly seem to distinguish the two is that while learning circles revolve around a subject of common interest or concern to all participants (who may or may not be experts on the subject), communities of practice assume a certain degree of expertise or familiarity with the focus of discussion.

While other adult learning models do not lack in appeal, what drew me most to the learning circle concept was two of the distinguishing features noted above. Firstly, the talking piece, characteristic of learning circles, is in itself an empowering tool that favours sharing by all participants. Secondly, the learning circle does not assume or require expertise. These two features made the forum one which could benefit



recognized and experienced leaders, but more importantly one in which more passive and hesitant future leaders might feel more comfortable exploring their own potential.

### ***Potential Outcomes of Learning Circles***

Learning circles are not meant to have participants learn a lot of facts or come to absolute agreement on the topic at hand, but rather to deepen their understanding of the topic and give them the confidence and assurance to follow their beliefs and to continue their quest for learning on the subject. They are meant to facilitate a democratic process and encourage fair and equitable discussion amongst participants (Learning Circles Australia, 2005).

A learning circle is meant to foster the honest expression of individuals' ideals, goals, practices and experiences. It is meant to be a forum in which hard questions can be discussed and to reduce feelings of isolation within the organization (Scheinberg, 2001). It provides a means for interaction with others who know the issues, and for the ultimate development of action plans. It allows for a real sense of learning that will leave participants feeling energized and confident (Boileau, 2002).

In this sense, a learning circle can contribute to many of the leadership competencies identified within the framework of this action research project. In keeping with the premise that leadership capacity is competency based, it therefore has the potential to enhance leadership capacity.

### **Leadership Capacity Defined**

To determine whether learning circles can enhance leadership capacity, it was important for all participants to have a common understanding of the term "leadership capacity," particularly as it relates to healthcare in Canada.

### ***What is Leadership Capacity?***

Capacity is defined as the “facility or power to produce, perform, or deploy” (*Webster’s ninth new collegiate dictionary*, 1991, p. 203). Leadership capacity, however, is a far more complex term to define.

This resides in the fact that while many descriptions for leadership exist in the literature, it is surprisingly difficult to arrive at one common definition for this notion. In most cases, the term is defined by the practices, values, and principles espoused by successful leaders. Case in point, Kouzes and Pozner (2002) base their description of exemplary leadership on five behavioural practices, namely modelling the way, inspiring a shared vision, challenging the process, enabling others to act, and encouraging the heart. Yukl (2002) further supports the ambiguity surrounding the term when he concludes that leadership has for the most part been described “in terms of traits, behaviours, influence, interaction patterns, role relationships and occupation of an administrative position” (p. 2).

For the purposes of this major project, I chose to rely on the definition provided by the Master of Arts in Leadership and Training (MALT) Program in describing leadership as competency-based.<sup>1</sup> In the program overview booklet provided to the 2003 MALT cohort, leadership is defined as

the extent to which the leader is an aware, meaningful, responsible participant open to learning – willing and able to explore, discover, and develop competencies in a variety of areas within and with others while living a balanced and creative life. (Royal Roads University, 2003, p. 8)

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<sup>1</sup> Competency: The ability to perform activities to the standards required in employment, using an appropriate mix of knowledge, skill and attitude. All three aspects must be present if someone is to be effective in the workplace. To improve competence, you need to increase not only your knowledge, but also your understanding of how knowledge can be applied, and your skill in applying it (Office of the Deputy Chief of Staff G1 – Civilian Personnel Directorate, retrieved February 26, 2005 at [http://www.per.hqusaureur.army.mil/cpd/Leader\\_Development/whatiscompetence.htm](http://www.per.hqusaureur.army.mil/cpd/Leader_Development/whatiscompetence.htm)).

This definition of leadership was retained in light of its foundation in competencies, which are observable indicators. In other words, the observance of certain behaviour-based leadership competencies and potentially of the development of these competencies should make it possible to denote any enhancements in leadership capacity.

### ***Exemplifying Leadership Capacity***

One important distinction to be made is that between successful leadership and successful management in the purest sense of the terms. While the two are often used interchangeably, they are in fact not one and the same. Schein (1992) purports that “leaders create and change cultures, while managers and administrators live within them” (p. 5). This does not mean to say, however, that the terms are mutually exclusive. In fact, a great leader can also be a great manager, and vice versa (Yukl, 2002).

On the one hand, the success of management will be based principally on the effectiveness and efficiency of a responsibility centre, that is, on its ability to meet deadlines, productivity expectations, and financial objectives (Anthony & Young, 2003). On the other hand, successful leadership will be defined by fostering organizational change through the development of a future vision and attainment strategies, through the communication of this vision, and through the empowerment of others to carry this vision through (Yukl, 2002).

The ability to address the apparent dichotomy that exists between management and leadership is one of the contributing factors in applying learning circles to the leadership challenges that managers face. This is particularly true when one considers that a learning circle’s very purpose defines it as a means for addressing common issues and concerns as described above by Anthony and Young (2003) while making it a

conduit for the sharing of knowledge and the establishment of a common vision and plan of action in keeping with Yukl's (2002) premises for leadership.

### ***Perspectives Within Healthcare***

In light of the complex and changing organizational reality of healthcare, it is essential to foster robust leadership that will meet future challenges enthusiastically, and ultimately encourage positive change within the system. According to Newt Gingrich, former Speaker of the U.S. House of Representatives, the changes required in healthcare of the future will in fact be greatly dependant on leadership (Bisch, 2004).

In an interview with Healthcare Executive (Lanser, 2000), Daniel Goleman refers to the importance of emotional intelligence within leadership. According to him, emotional intelligence in leaders is critical to distinguishing an organization. Leaders strong in this area will share vision, allowing others within the organization to see how they fit into the "big picture." They will involve others, will inspire loyalty and will encourage decision-making by consensus.

Julie T. Chyna (2000) also speaks to the need for Middle Managers to move toward soft skills. These are the skills that allow us to work more effectively with others, to understand, evaluate and motivate others, to self-assess, and to show critical thinking and strategic planning skills. As these Middle Managers arrive at an executive level, they will have to further expand on those skills, showing flexibility (i.e. relinquishing the command and control style they may have espoused as a front line manager), advocating for the organization, entertaining positive relations with physicians, and honing their communication and learning skills.

In keeping with the competency-based definition of leadership guiding this project, the observance of managers' ability to successfully apply and understand the leadership skills described by Goleman (as cited in Lanser, 2000) and Chyna (2000) will

serve as an indicator of enhanced leadership capacity within the framework of this action research. More precisely, this study will seek to determine whether the following competencies have increased through participation in learning circles: (a) creativity; (b) team-building skills; (c) communication skills; (d) research and inquiry; (e) systems theory, thinking and planning; and (f) organizations and organizational change.

### ***Perspectives Within Healthcare – The Canadian Context***

In an article on leading Canada's healthcare transformation published in *Canadian Healthcare Manager* (2004), sixteen Canadian healthcare leaders from the private and public sector were interviewed to answer eight questions aimed at defining the leadership needs, challenges, gaps and successes that currently exist within healthcare in Canada.

While their answers varied to some degree, common themes around leadership needs in Canada involved the ability to collaborate, create a common vision and inspire to action. In identifying the biggest leadership gap, the respondents all referred to a need for increased cooperation at all levels, be it within the system, across public and private systems, between care provider and receiver. Success stories involved examples of partners buying in to change initiatives and moving forward together, be it in terms of participating in the use of evolving technology within the field or developing a shared vision of the future.

In fact, there is increasing evidence of the recognition for enhanced leadership and leadership behaviours within healthcare in Canada. A concrete example of this is the development of leadership programs such as that initiated by the Nova Scotia Association of Health Organizations (NSAHO) in the Spring of 2004. The need for such a leadership program for the health care service was in fact identified as a priority by the NSAHO Organizational Development Steering Program, mandated to "guide the

development of the NSAHO Organizational Development Service to ensure it is responsive to the needs of health organizations” (NSAHO, 2004, p. 1).

As stated previously, by their very nature and purpose, learning circles would appear to allow for the knowledge development so required by managers in the evolving field of healthcare in Canada, while allowing these very managers to foster a common sense of direction, a harmony that will allow them to share, learn, grow and inspire, all traits inherent to recognized leaders. By developing these leadership traits and fostering recognized leadership behavioural practices, learning circles would therefore appear to hold the potential to enhance leadership capacity.

### **Middle Management in Healthcare**

The participants in this study included managers, in particular Middle Managers within healthcare. As such, it is important to understand the complexities Middle Management faces on an ongoing basis, but in particular in the ever-changing field of healthcare.

#### ***Middle Management Defined***

Boothe and Farquhar (2003) define Middle Managers as those who oversee human, physical and financial resources, who are at least two levels below the CEO and at least one level above a first-level supervisor.

This is the general definition adopted for the purposes of this research project given that it most aptly represented the audience targeted by strategic initiatives within the RHA and therefore within the scope of this study. However it should be noted that the term ‘Middle Manager’ is used throughout as a concept and that the operational titles that relate to this definition of Middle Management within the RHA can be referred to as ‘directors’, ‘managers’, ‘nurse managers’, and ‘coordinators’.

### ***Middle Management Challenges***

One of the most frequently discussed management challenges today is that of combining traditional management skills, pent on delivering financial and productivity results, with effective leadership skills, focused on change management, public relations, and the ability to inspire (Boothe & Farquhar, 2003). In other words, “while energy and passion top the list, woe to the executive who forgets about the numbers completely” (Slater, 2000, p. 20).

The world within which Middle Managers must operate is ever more complex, in constant flux, and ever more demanding of flexibility and innovation on the part of organizations and the managers who operate within them (Boothe & Farquhar, 2003). It is further complicated by generational differences within the workplace, which demand increasing adaptability on the part of managers to work practices reflective of a generational culture that is not their own (Hood, 2000).

Alan Zuckerman (1998) drills down to seven challenges specific to healthcare delivery organizations and their managers between now and the year 2010, namely: cost control, aging population, technological advances, pharmaceutical advances, alternative medicine, information explosion, and consumerism. Memel (2003) summarizes the ultimate challenge of healthcare managers as knowledge management, stating that proper knowledge management will allow care providers to respond to client needs throughout the continuum of care while meeting traditional management and operational objectives.

### ***Easing the Burden***

Several solutions to facing these challenges are proposed within current literature. While some of these solutions lie with Middle Managers aligning their needs and contributions to the offerings and contributions of the organization (Broscio &

McLennan, 2000), others lie within the management support mechanisms put in place by organizations (Boothe & Farquhar, 2003).

Certain authors will purport a single answer to the complexities of organizational change within healthcare. Vicky Pain-Mantha and Bill Garrett (2003) suggest that Middle Managers familiarize themselves with their health information system (HIS) in an effort to better understand the complex processes and operations of a healthcare organization. They do acknowledge, however, that an antiquated or poorly populated HIS will not necessarily provide the answers so desperately sought, which begs the question as to whether one can rely on a single source as a solution to Middle Management woes. Sanjiv Sharma (2001) expects that a new level of co-operation amongst stakeholders within the Canadian healthcare system will be critical to ensuring a sustainable healthcare system. The author contends that the responsibility for overseeing this co-operation lies with the organizations themselves.

Boothe and Farquhar (2003) take a more measured approach to the issue of accountability inasmuch as it relates to easing the burden of Middle Managers. They describe it as a combination of managerial and organizational responsibility. They recognize 5 roles that Middle Managers will have to espouse in the future, namely:

1. delivering strategy-driven results;
2. serving as an inspiration;
3. recruiting, retaining, developing and managing human resources;
4. building relationships;
5. building, leading, and participating in teams. (pp. i-ii)

This action research does not exclude any of these roles, but focuses specifically on the first by exploring how learning circles can enhance leadership capacity by facilitating the development of departmental and program plans that effectively tie into



organizational strategy. This focus is the result of an organizational impetus for Middle Managers to be better prepared for the future and of an expressed Middle Management need to increase its planning skills.

Boothe and Farquhar (2003) further describe ten responsibilities that organizations will have to assume vis-à-vis their Middle Managers, namely:

1. *clarifying current and evolving managerial roles;*
2. *ensuring middle management decision-making authority in matters of financial and human resources;*
3. *preparing managers for change by fostering a learning environment;*
4. *providing workload and work/life balance flexibility;*
5. *supporting teamwork and communication initiatives;*
6. *recognizing value-added contributions by middle managers;*
7. *retaining top performers and dealing with underperformers;*
8. *identifying top performers early in their career;*
9. *coaching, mentoring and providing networking opportunities for middle managers;*
10. *providing capacity-building tools for middle managers. (pp. i-ii)*

In this case, the study will focus particularly on the third, ninth and tenth organizational responsibilities described above by attempting to provide a forum in which Middle Managers can enhance their leadership capacity in a changing environment through learning and networking.

From the literature reviewed, it would appear that the line between good management and good leadership is increasingly blurred, with the two seeming to ironically run parallel and overlap, particularly inasmuch as regards solutions to Middle Management dilemmas. However, based on my experience and review of current

literature, it would appear that the key to sustainable organizations resides in the development of leadership capacity, a process for which both the organization and Middle Managers will be held accountable in years to come.

It is perhaps for these reasons that large-scale academic institutions are increasingly exploring the possibilities of learning circles in developing a common understanding of and approach to complex issues, of encouraging systems thinking and of fostering a common and positive vision of the ways in which various systems can influence and interact with one another to build a better and more sustainable future (Concordia University, 2005).

## **CHAPTER THREE:**

# **CONDUCT OF ACTION RESEARCH PROJECT**

### **Introduction**

“How could learning circles contribute to enhancing the leadership capacity of Middle Managers of the RHA?” is the research question this participatory action research project sought to answer.

Analysis of the data gathered for this purpose was founded in qualitative research principles but did not exclude quantitative principles. The data was derived from a variety of sources, including a literature review, two surveys, a series of learning circles and my documented observations throughout the action research process.

### **Research Approach**

In comparing qualitative and quantitative research methods, Denzin and Lincoln (2000) indicated that qualitative research focuses on the quality or features of meanings, processes, and things within a study, while quantitative research focuses almost exclusively on the interpretation of their amount, frequency or intensity.

The research question guiding this research project did not call for an exact measure, degree or rating, but rather sought to identify those elements that would allow for fulfilment of the question’s purpose (i.e. determining how learning circles can contribute to enhanced leadership capacity by contributing to six identified leadership competencies).

While this clearly placed the project in the realm of qualitative research methods, it is important to note that it did not exclude quantitative methods. In other words, statistical and measurable methods and documents were used to situate study findings

and subjects. Quantitative findings were derived principally from the pre- and post-learning circle survey data, which were gathered electronically and compiled to arrive at common themes (See Appendix C.5 and E). However, quantitative analysis performed within the overall qualitative study was less complex than had this been a purely quantitative study. The outcome sought through learning circle activities was data rich and meaningful in content as opposed to purely substantial in number. In light of this, while analysis of survey data was largely quantitative in nature, overall findings relating to the learning circle experience integrated qualitative data derived from my personal notes and from data recorded throughout the learning circle activities, including “one-of” comments where deemed relevant.

Based on the 16 tenets of a participatory research approach as identified by Kemmis and McTaggart (1988), the qualitative methodology within this project was based upon participatory action research. The authors list these tenets, indicating that participatory research: (a) is an approach to improving social practice by changing it, (b) is contingent on authentic participation, (c) is collaborative, (d) establishes self-critical communities, (e) is a systematic learning process, (f) involves people in theorising about their practices, (g) requires that people put their practices, ideas and assumptions about institutions to the test, (h) involves keeping records, (i) requires participants to objectify their own experiences, (j) is a political process, (k) involves making critical analyses, (l) starts small, (m) starts with small cycles, (n) starts with small groups, and (o) allows and requires participants to build records.

The learning circles carried out for the purpose of this project met all the criteria of participatory action research as listed above. Specifically, they aimed to change current practice by engaging a small group of voluntary participants to share, deepen and challenge their knowledge of a topic in a collaborative setting.

## Research Methods and Tools

### *Data Gathering Tools*

The term research implies an investigation into facts and a review of or inquiry into assumptions (*Webster's ninth new collegiate dictionary*, 1991, p. 1002). For the purpose of this project, this translated into a literature review, development of two surveys, and four learning circles. It also included documentation of my personal observations throughout the process.

### *Trustworthiness*

All data gathering tools and consultation processes within this action research project aimed to contribute to the rigor of this qualitative research, also referred to as *trustworthiness*, or the measure by which properly and systematically collected and presented data can be interpreted, evaluated, replicated and corrected if need be (Janes, 1992). In the case of this major project, trustworthiness was measured against several criteria as described by Stringer (1999), namely credibility, transferability, dependability, and confirmability.

Firstly, *credibility* was supported (a) through prolonged engagement in the field, namely my involvement in the health authority's strategic initiative development since 2001; (b) through triangulation of findings from a literature review, learning circles and surveys; and (c) through member check via final report-out to research participants. These components all contributed to credibility as described by Creswell (2003) and Del Siegle (n.d.). Also, peer debriefing occurred after the last learning circle and focused on the learning circle participants' overall experience.

*Transferability*, the "extent to which the findings can be applied in other contexts or with other respondents" (Del Siegle, n.d., p. 1), was established through journaling and description of encounters in rich, thick descriptive text (Creswell, 2003), particularly

inasmuch as regards the learning circles and the feelings and opinions expressed therein. I also documented my perceptions and observations throughout the research process, listing content (observations) and personal reflections on the content (McCormack Steinmetz, 2000). While the content was of great value, it is my reflections on and interpretation of the content that required the most extensive validation by stakeholders.

*Dependability* relies on representing the evidence obtained in the study in a rich, thick and descriptive manner that would allow other researchers to reproduce the same or a similar study and arrive at the same or similar findings. Dependability will reflect credibility and vice versa. I therefore endeavored to provide a rich, thick and descriptive narrative of the steps taken to establish credibility and as such to ensure the dependability of my study (Del Siegle, n.d.).

*Confirmability* “is the degree to which the findings are the product of the focus of the inquiry and not of the biases of the researcher.” This criteria requires referencing the source of any interpretations, recommendations, and conclusions for the purposes of an audit (Del Siegle, n.d.). To ensure confirmability, I retained all raw data related to my study, including but not limited to: (a) personal observations, (b) participants’ documented observations, (c) flip chart notes, (d) documents, (e) background information, (f) organizational report-out documents, (g) learning circle transcripts, (h) survey results, (i) findings, (j) themes, and (k) subsequent conclusions (Lincoln & Guba, as cited in Del Siegle, n.d.). I clearly described the processes of collecting and analyzing data and documented the means by which raw data had been preserved.

### ***Data Gathering Process***

#### *Literature Review*

The literature review developed within the framework of this major project touched on three topics, namely leadership capacity in healthcare, learning circles and

Middle Management challenges in healthcare in Canada. Literature was obtained from a variety of sources, including professional journals, books, and Web-based articles and learning sites.

The literature review was aimed at elucidating the concept of learning circles, their structure and how these might be used in various settings to enhance leadership capacity. It also sought to define leadership capacity and document leadership challenges and successes within healthcare in Canada. Finally, it proposed to examine Middle Management, the challenges faced by this group of potential leaders, and the solutions put forth by various authors for easing the Middle Management burden. I developed the literature review in such a way that it might serve as a stand-alone informative document for future learning circle organizers within the RHA intent on addressing leadership challenges through this forum.

Finally, in developing the literature review I bore in mind the need to identify those competencies most required of future leaders, recognizing that leadership is competency based and that to accurately measure the potential contribution of learning circles to leadership, I would have to identify these key competencies in the initial survey and draw a line in the sand by measuring Middle Managers' grasp of them.

### *Surveys*

I also distributed two surveys, the first developed as a means of gathering quantitative data anonymously to develop learning circle content reflective of Middle Management's needs, and the second to support the findings and observations derived from those very learning circles. This approach is consistent with the view that surveys can be useful within a qualitative research context provided they are supplemented by additional research (Palys, 2003). Both surveys were included in draft format in my

Ethics Proposal, submitted to the Royal Roads University Ethics Coordinator and Research Ethics Board in January 2005.

*Pre-Learning Circle Survey.* The initial pre-learning circle survey (see Appendix C4A and C4B) was aimed principally at determining Middle Management's planning concerns and level of interest in enhancing leadership skills through learning circles. While the information retrieved through this initial survey did not provide an in-depth review of individuals' perceptions and feelings, it provided a large and purposive sampling of quantitative data that contributed to the development of the learning circle agendas (see Appendix D.3) and overall themes (see Appendix D.4). It was pilot tested with four individuals, none of whom were employees of the RHA, for the purpose of determining clarity and pertinence of questions, and to anticipate potential difficulties or confusion arising from the model proposed (Palys, 2003). The survey was revised on several occasions following pilot participant comments and feedback from the organizational sponsor and project supervisor. It was developed using the Royal Roads University on-line survey tool and combined structured and open-ended questions so as to allow respondents the opportunity to elaborate on the elements I had identified as relevant to the study (Palys, 2003).

The on-line survey was distributed to 84 directors, managers and coordinators within the RHA. To ensure a theoretically representative sample, a purposive sampling method was used, i.e. survey sampling representatives were chosen based on specific criteria (Palys, 2003). More specifically, all candidates met both of the following stipulations:

- Middle Manager within the RHA
- Not a member of the RHA HBP Steering Committee



Exclusion of RHA HBP Steering Committee members resulted from my concern that their involvement might dissuade the participation of many Middle Managers and hence place limitations on the research. For the most part, RHA HBP Steering Committee members sit at the Senior Management level, though three members are considered Middle Management. Prior to the development of this research project, certain Middle Managers had confided in me their feelings of inadequacy regarding the planning process, which led me to believe that the involvement of individuals versed in the organization's planning process to date might prove intimidating to some.

The initial survey was announced to Middle Management during a strategic initiatives information forum held by the RHA HBP Steering Committee on March 21, 2005, at which all Middle Managers present also received background material (see APPENDIX C1A and C1B) explaining the survey's purpose, consent and privacy specifications, and a glossary of terms (see APPENDIX C3A and C3B). The electronic survey link (see APPENDIX C2A and C2B) with this same accompanying information was sent out on March 24, 2005, and respondents were asked to complete the questionnaire by March 31, 2005 at the latest. It should be noted that in keeping with the RHA's Official Languages Policy, I translated all initial survey material and background documentation and it was distributed in both official languages. I was approved by the RHA to carry out the translation as I possess a Bachelor of Arts in Translation.

In all 15 of 84 potential responses were initially received and electronically compiled using an Excel workbook, bringing initial overall response rate to 18%, which was slightly lower than I had hoped for. Even though Yun and Trumbo (2000) maintain that e-mail reminders can in some cases as much as double initial response rates, I opted not to send out a reminder to increase response rates. This decision was based on the fact that the survey aimed to obtain spontaneous and enthusiastic feedback from

respondents who felt strongly about the survey topic, and I did not want Middle Managers to feel they had been pressured or prodded to take part.

Following the on-line survey close date, four additional Middle Management staff contacted me to indicate their interest in completing the survey. As such, and following approval by my project supervisor, Scott Comber, Ph.D, I re-opened the on-line survey site for a period of 24 hours. This brought total response rates up to 23%. The aggregate data was then analyzed and integrated into a summary results document which served to develop learning circle agendas and to report out initial findings to learning circle participants and RHA Senior Management through the project sponsor and the Corporate Services Committee. The report-out document was developed in an effort to ensure transparency around the research project and to validate findings gathered to date by ensuring their credibility, dependability and confirmability.

*Post-Learning Circle Survey.* The post-learning circle survey was distributed only to learning circle participants, on April 22, 2005, in an effort to obtain more involved feedback by respondents based on their learning circle experience.

More specifically, learning circle outcomes were further validated through the post-learning circle survey, in which participants were asked to rate the effectiveness of learning circles and to comment on their overall experience within this action research project. This survey was developed based on initial survey responses and on my observations throughout the conduct of learning circles. Again, it was meant to serve as a means of validating my observations of participant comments and perceptions in relation to the learning circle experience. This anonymous survey, also developed using the Royal Roads University on-line survey development tool, received a 90% response rate. As in the case of the pre-learning circle survey, results were imported into an Excel workbook for data compilation and analysis purposes. The post-learning circle data

analysis was then integrated into a final validation document prepared for learning circle participants and Senior Management.

Given the 90% survey response rate, data findings for the post-learning circle survey, largely quantitative in nature, were reported by number of survey respondents (9), not by total number of learning circle participants (10). This data, once integrated into the final organizational report-out document, was combined with information from the literature review and with qualitative data derived from my personal notes and data recorded throughout the learning circle activities, including “one-of” comments where deemed relevant. The integrated report-out document was delivered to learning circle participants for their feedback and validation of the research findings and conclusions on June 15, 2005.

### *Learning Circles*

The four learning circles themselves, held between April 11 and 22, 2005, preceded the second survey. I contacted the ten learning circle participants, self-identified on a voluntary basis upon completing the initial survey, via a telephone call and e-mail on April 1, 2005. The e-mail contained an attached letter of confirmation, describing learning circle agendas, location, time requirements and expectations (See Appendix D1, D2, ). Also attached was the literature review for information purposes.

The learning circles themselves fell more specifically into the realm of an action research approach, in that their purpose was to empower, humanize and give voice to participants, allowing them to increase their understanding of the system within which they work and to address the planning concerns that were most pressing for them at the time the research was conducted (Stringer, 1999). Given that I was involved and participating in the learning circles as an observer, and in some cases as facilitator, this component of the research also fell into the domain of phenomenologism (Palys, 2003).

Research findings relating to this portion of research were derived from my documented observations and from transcripts of the four learning circles held. It should be noted that a guiding themes and questions booklet (see Appendix D4) developed for the participants' and researcher's notes served me well in theming learning circle observations for final report-out purposes. The objective for this part of the research was to arrive at rich and meaningful qualitative data.

The aforementioned surveys and learning circle summary results aimed to provide further dimension to the literature review through triangulation (i.e. the aggregate of multiple perspectives and to bring depth to the phenomena being researched). While triangulation efforts in this case did not necessarily exclude adding data to confirm initial findings, they were intended more to bring depth and reflection to the research question by approaching it from different angles (Denzin & Lincoln, 2000) through the use of the consultation processes noted above.

## **Research Participants**

### ***Research Team***

Research is not done in isolation. Throughout the action research project described herein, I was able to rely on the expertise and support of two critical individuals, namely Jean Boulay and Scott Comber, Ph.D.

The organizational sponsor approached to support this project was Mr. Jean Boulay, Vice President – Corporate Services with the RHA. As Chair of the HBP Steering Committee, responsible for the development of the organization's strategic directions and goals, he had ownership of the issue being examined. He promotes the development of new and improved healthcare service access models for our region. He has openly voiced his desire to support a culture shift within the organization, in which Middle Managers increase their input into and sense of ownership in the decisions that will

guide our organization into the future. The fact that he was my immediate supervisor and that I co-chaired the above-mentioned committee with him facilitated frank communication of issues, roadblocks and needs.

His more than 20 years of experience within the healthcare system allowed him to guide me, negotiate deadlines and assist with provision of necessary resources for the purposes of research. Though his background is non-clinical, his knowledge of the system within which we must work and succeed, as well as of its operating structure and potential, greatly contributed to the development of a viable and potentially innovative solution to operationalizing the strategic directions of the health authority by empowering Middle Management and allowing their leadership voice to be heard.

I met my project supervisor, Scott Comber, Ph.D., during the course of my second residency within the framework of the Master of Arts in Leadership and Training in October 2004. I felt his background in organizational development, his enthusiasm regarding the premise of my project proposal, and his expertise in terms of academic rigor would be of great benefit to ensuring the quality of research conducted and establishing its trustworthiness. His ability to question me throughout the conduct of this study was of immeasurable value, as he guided me through enquiry and not through mandate. As a result, this research project was one of continuous reflection in which I sought to more clearly understand my own motivation and courses of action. Also, his easy-going nature and openness regarding frank discussion made learning enjoyable and easy.

### ***Research Participants***

The research question being studied herein stems from a desire to determine if learning circles could contribute to enhancing the leadership capacity of Middle Managers within the RHA, particularly inasmuch as relates to the development of a

three-year departmental business plan. This required relying on the perceptions and desires of Middle Managers of the RHA for feedback and depended on collaboration with a small representative group of Middle Managers to provide their view of how potentially credible and/or valuable this forum is in allowing them to develop their leadership capacity.

To ensure appropriate representation in the survey and learning circles, I relied on a purposive sampling model, seeking out a group of individuals for whom “the processes being studied are most likely to occur” (Denzin & Lincoln, 2000, p. 370). This meant inviting all Middle Management staff to complete the initial survey, namely 84 Coordinators, Managers, Nurse Managers, and Directors (excluding members of the RHA HBP Steering Committee). It then required the participation of a cross-section of Middle Management staff (from the Coordinator to the Director level) in the learning circle and subsequent post-learning circle survey processes.

The initial survey was distributed to all parties listed above and included a question requesting their participation in learning circle activities. The primary selection criterion for participation in the learning circle component was in fact potential participants’ willingness to engage in the process (to be determined by their indication on the initial survey). As such, voluntary participants who had included their name and coordinates in the appropriate space on the survey then received a second formal letter and a follow-up call requesting their continued input into the strategic planning process via the learning circle forum. The number of interested parties was 10, representing (a) a diversity of language (English and French), (b) various places of work (i.e. facility), (c) core service areas of work (i.e. Professional Services, Nursing, Support and Corporate Services, Community-based Services), and (d) levels within the organization (Coordinators, Managers, Nurse Managers, Directors).

All 10 learning circle participants were then asked to complete the final post-learning circle survey.

## **Ethical Considerations**

Glesne (1999) claims that ethical considerations are part and parcel of the dealings a researcher will have with his or her subjects and with the data hence gathered. He also discusses the principles that guide most research, namely informed consent, avoidance of harm and confidentiality.

In carrying out this action research project, I sought to allay any concerns around pre-conceived notions or potential biases I had by identifying them in the requests for ethical review submitted to RRU and to the RHA, as well as in my personal self-assessment and in discussions with research participants. I referenced all source material according to the guidelines established by the American Psychological Association (2001). I displayed respect for the human dignity of all participants, and received free and informed consent from all participants prior to their involvement in the research process.

No vulnerable persons or risks were involved in this study. Confidentiality and privacy of participants was ensured throughout the conduct of action research, and all data were coded accordingly. The paragraphs that follow include a more detailed description of steps taken to ensure the respect of ethical considerations involved in this project.

The ethical considerations addressed by Glesne (1999) are directly aligned with the guiding principles endorsed by most medical institutions and organizations in the performance of their daily activities. From the onset, internal and external clients entering the healthcare environment are asked to provide personal information. It is expected that this information will be gathered in a respectful and confidential manner,

and that individuals will be clearly informed of and understand the reasons for which their personal information is being gathered. These principles were respected throughout the conduct of this action research project.

Privacy legislation in New Brunswick (enacted through the *Protection of Personal Information Act*) is based upon ten guiding principles. In light of this legislation, which provides a confidentiality framework for healthcare data gathering and dissemination, it was necessary to adhere to the ten basic privacy principles in carrying out the research described herein. These are: (a) accountability; (b) identifying purpose; (c) consent; (d) limiting collection; (e) limiting use, disclosure and retention; (f) accuracy; (g) safeguards; (h) openness; (i) customer access, and (10) challenging compliance.

Privacy in the case of this action research project was ensured by using a secure and anonymous electronic survey tool, and by attaching privacy stipulations to all correspondence requesting input from Middle Managers.

In addition to conforming to Provincial legislation and to the Royal Roads University Research Ethics Policy, it was necessary to obtain ethical approval from the RHA's Ethics Committee as I was collecting, analyzing and disseminating data as a student of the Royal Roads University Master of Arts and Leadership Training Program rather than in my capacity as Director of Planning and Information Management.

Participants in this participatory action research project were peers, including subordinates at the manager and coordinator levels, and like directors. In light of this, certain risk and conflict of interest considerations did exist. Participants were informed from the onset that study findings would be shared with their peers. Because I work with or for, and in some cases oversee, these individuals, there was a potential conflict of interest or bias that was made clear to all participants prior to requesting their input.



All survey respondents and learning circle participants were informed in writing that I was the individual carrying out the research, were provided with the research question and project deliverables, and were given the option of participating in this process or not. All information sharing and participation requests were vetted through the Vice President – Corporate Services. Participation was entirely voluntary, with a space reserved on the initial general Middle Manager survey asking participants if they wanted to take part in the learning circle exercise.

A perceived risk to participants involved the disclosure of information through learning circle outcomes. There was also potential for a perceived risk by peers and subordinates given that I was biased by my previous involvement in internal strategic initiatives, having been involved in the development of most strategic initiatives currently endorsed by the health authority. This was identified as a limitation of the research, particularly during the conduct of learning circles, in which I described my responsibility to remain an objective and impartial observer while recognizing the phenomenological reality of the action research project.

All learning circle participants were informed of the means by which data was to be collected, asked to sign a consent form, and debriefed as to the research outcomes through a report-out delivered once all data had been gathered and analyzed. Learning circle participants were provided with a description of coding procedures to be used in transcribing learning circle data. Participants were informed that the major project would be made public and distributed to all levels of Management within the Health Authority, as well as submitted to the National Library of Canada. Through the major project proposal, the Health Authority was made aware of the fact that any findings and conclusions stemming from the action research remain the intellectual property of the researcher.

## Study Conduct

This action research project was carried out over the course of approximately eight months, spanning from November 2004 to June 2005, though my organizational sponsor, Mr. Jean Boulay, Vice President – Corporate Services, was confirmed in the Spring of 2004.

Confirmation of the project supervisor was made on November 1, 2004, and I submitted my draft project proposal for approval to both my supervisor and sponsor on November 2, 2004. My project deliverables were included in this draft, and consisted of: (a) the understanding that outcomes, findings, lessons learned and recommendations of this major project would be delivered as a thesis to be submitted to the Royal Roads University Library and to the RHA HBP Steering Committee through the project sponsor; (b) the understanding that a summary of themes and conclusions document was also to be developed as a reader friendly public version for RHA management staff; (c) a milestones calendar; (d) organizational resource requirements; and (e) an action research project budget.

In November 2004, following approval of the action research project proposal and deliverables, I submitted it to the approval of the RHA Ethics Committee. This consisted of a 15-minute summary PowerPoint presentation to the Committee on the project's objectives and ethical considerations, followed by a 15-minute question period by Committee members. The presentation was supplemented by the Ethical Review request developed for the Royal Roads University Research Department, a copy of which was provided to the RHA Ethics Committee Chairperson. Approval by the RHA Ethics Committee was recommended to the organization's Professional Advisory Committee Chairperson on November 26, 2005 (see Appendix B), and subsequently approved. My

Ethical Review request was then submitted to the RRU Research Department for approval to commence action research, which was granted on February 16, 2005.

I then proceeded to fine tune the draft survey questions, and distributed a pilot survey to four individuals, as well as to my project sponsor and supervisor, on February 11, 2005. The survey questions and format were modified to reflect pilot participant feedback and based upon comments from the project supervisor and sponsor. The revised pre-learning circle survey was then computerized using the Royal Roads University survey development tool.

While the initial survey was originally to have been distributed in late February, the distribution date was deferred to March 24, 2005 to allow for a presentation by the RHA HBP Steering Committee on the organization's Strategic Initiatives at a Management Forum to be held on March 21, 2005. As a member of the HBP Steering Committee, I supported this request, as the session was meant to provide members of management with additional information and direction on the organization's vision for the next three fiscal years. As such, there was a risk that Middle Managers' perspectives on their own planning initiatives prior to the Management Forum might not be as informed or as enthusiastic as they would be following the Forum. In light of this, I was pleased with this opportunity for Middle Managers to glean as much information as possible on the planning process prior to inviting them to complete a survey and participate in learning circles focused on this very subject.

I took advantage of the Forum to provide Middle Managers with information on my action research project, with the research question and purpose, and with details on the initial survey. I then followed up with an e-mail on March 24, 2005 that provided 84 potential respondents with a secure link to the anonymous survey sites (one English and one French). I also attached a project background and consent document and a glossary

with references pertaining to the research. The translation of the initial survey and supporting documentation was carried out in light of the RHA's policy on official languages. I felt that respecting this policy was more than an administrative requirement, it was also a means by which to respect the diversity of Middle Management within my organization, to increase the level of comfort with the survey tool and content, and hopefully to increase enthusiasm and interest in the project.

The sites remained open for a period of seven days, closing on March 31, 2005, after which a follow-up memo was e-mailed out to all 84 potential respondents thanking them for their interest and/or contribution as applicable. I was then contacted by four Middle Managers on April 3, 2005, each requesting that the English and French survey sites be re-opened so that they might participate in the study. After verifying the ethical implications of such action with my project supervisor, I proceeded to re-activate the sites for a period of 24 hours on April 7, 2005. All four respondents then completed the on-line survey, with three of the respondents volunteering to take part in learning circles. With these four additional respondents, I achieved a 23% survey response rate and received consent to contact 10 Middle Managers to take part in learning circle activities.

I proceeded to analyze the pre-learning circle survey results, importing the data into an Excel workbook to simplify the data analysis and the generation of graphic representation of survey responses for report-out purposes. The data thus analyzed was synthesized into a report-out document, which themed the findings under three general headings, namely: (a) planning within the RHA; (b) managing within the RHA; and (c) leading and learning within the RHA

This document was then distributed to learning circle participants via e-mail, as well as to the project sponsor, project supervisor, and RHA Corporate Services Committee. Together with the Literature Review, it also served to develop the learning

circles Themes and Questions Booklet in an effort to ensure that Middle Management concerns were appropriately addressed through the learning circles.

For the purposes of this study, I deemed that these concerns could likely be addressed in a total of four learning circles focused on planning within the RHA. These 2-hour sessions were held off-site between April 11 and 22, 2005.

It should be noted that prior to commencing the learning circles upon which the findings herein are based, all voluntary participants were provided with background information and documentation, including:

- An e-mail, a letter, and a follow-up phone call confirming their participation;
- A consent form to participate in learning circles;
- A summary of pre-learning circle survey results, so as to allow participants an overview of current Middle Management perspectives and concerns on planning within the RHA;
- A literature review on learning circles, leadership capacity and Middle Management challenges in healthcare;
- An article on systems thinking (a specific area of concern noted in pre-learning circle survey);
- A series of four agendas for learning circles;
- A learning circle themes and questions booklet;
- A series of ground rules for learning circles;
- A learning circle facilitator's guide; and
- Project coding specifications (for protection of participant anonymity);

In all, nine of the 10 volunteer participants attended the first learning circle, nine attended the second, all 10 attended the third, and eight attended the fourth and final

learning circle session. Learners represented Nursing Services, Professional Services, Corporate and Support Services and Community-based Services from the Health Authority (including representatives of Provincial programs). Both men and women were represented within the group, as were both official languages. I facilitated the first session; the three other sessions were facilitated by participants on an alternating and voluntary basis. For these final sessions, I acted as observer, except in two cases where I was asked to present material prepared by absentee participants.

From the onset, participants in learning circles contributed actively to the process and shared an understanding of their expected learning and sharing outcomes. Case in point, each member arrived at the first session with a statement of intent in hand (based on the information gleaned from the initial survey results, from the literature provided on learning circles, and from their own personal experience). Collectively they combined their statements to arrive at the following statement of intent to guide them through their learning circle activities:

**Statement of Intent**

“We will work together and support each other in developing a uniform planning tool that can guide employees at all levels of the organization.”

Members also agreed upon ground rules, which were posted for all to see during each learning circle:

**Ground Rules**

1. One speaker at a time
2. Open and honest
3. Respect for others' ideas and opinions
4. Discuss ideas – not personalities
5. Every question is the RIGHT question
6. Start on time – be on time returning from breaks
7. One speaker at a time – respect the TALKING PIECE
  8. Build on each others' thoughts
  9. Listen to others
  10. RELAX – learning should be FUN

All sessions were recorded audio-visually using a video camera and a pocket recording device. The pocket recording device that was used to record the sessions also served as a talking piece.

The talking piece is a designated object that is passed hand to hand and grants the holder of the piece the chance to speak without interruption. One person has the floor while other members listen attentively. The purpose of using a talking piece is to guarantee that people are heard, or have the opportunity to be heard. (Baldwin, 1998, p. 67)

I transcribed all learning circle information, using a coding a coding system approved by participants to ensure their anonymity.

Members approved the standing agenda developed for the learning circles. Each agenda consisted of the following items: (a) breakfast, (b) review of conclusions & action items from previous learning circle, (c) opening the circle, (d) check in, (e) addressing the concern (based on daily theme), (f) confirmation of action items for next learning circle, (g) check out.

Food and beverages were provided in an effort to reduce the formality of the sessions. The review portion of each session was intended to focus learning circle participants, and to validate the outcomes of sessions held to date. The means of opening the circle was left to the discretion of the facilitator. In some cases this was done by presenting participants with a token of appreciation (e.g. one facilitator gave each participant a banana after hearing that this fruit could stimulate brain activity and encourage innovative thought), in others the facilitator simply shared a personal reflection with participants.

The check-in portion of each session allowed all participants a one-minute opportunity to describe any fears, concerns or barriers they were experiencing that might affect their contribution or learning on that given day and served to ease participants

into the learning circle mode (i.e. speaking one at a time into the personal recording device and actively listening while others expressed themselves).

Addressing the concern was facilitated by the Themes and Questions Booklet provided at the onset of the first learning circle session. In this booklet, an overview of the purpose of the day's session was provided, as were a series of questions meant to guide the participants in arranging their thoughts around the day's themes. This booklet also included a table for recording personal notes for each session so that learners could record their reflections, observations and lessons learned as they listened to their peers.

In some instances, I digressed from the agenda after the initial concerns had been addressed in an effort to build on or gain greater insight into participants' feedback

Confirmation of action items was included on the agenda as a means to ensure everyone's understanding of expectations for the next learning circle session.

Check-out served as a means of humanizing the sessions prior to closing, providing participants with an opportunity to note any successes, challenges, concerns or realizations that had resulted from listening to and sharing with their peers.

While the information gathered from both initial research methods (literature review and survey) served to feed the learning circle agendas, the information gathered from the learning circles was in turn used to develop the post-learning circles survey and the common themes and recommendations included in this final research project report.

The on-line post-learning circle survey was opened to learning circle participants between April 22, 2005 and April 29, 2005. A total of 9 participants responded to the survey, accounting for a 90% response rate. This data was again compiled in an Excel workbook and analyzed accordingly. The responses from this survey, distributed to learning circle participants following the last learning circle forum and aimed at determining participants' perception of learning circles as a tool conducive to the



enhancement of their leadership capacity, were analyzed together with literature review findings, initial survey findings, and my documented observations of learning circle activities. I included the combined information, findings and conclusions in a final report-out document delivered to learning circle participants for validation on June 15, 2005.

Following validation of the report-out document and relevant findings, I shared it with the Project Sponsor and the information contained therein was integrated into my major project document.

## **CHAPTER FOUR:**

# **RESULTS AND CONCLUSIONS**

### **Study Findings**

#### *Background*

As noted previously, findings for this action research project were derived from multiple data and information sets. These included: (a) a literature review, (b) pre-learning circle survey results (23% response rate); (c) eight hours of learning circle transcripts and my documented observations of learning circles; and (d) post-learning circle survey results (90% response rate).

This chapter will seek firstly to examine the outcomes of each of these research activities individually and secondly to correlate the findings in an effort to situate the reader as to the conclusions derived from research activities. Detailed findings have been included in appendix.

The question that ultimately drove this action research project and that was used to situate findings was as follows: “How could learning circles contribute to enhancing the leadership capacity of Middle Managers of the RHA?” The very wording of this question assumed a degree of success in applying learning circles to increasing leadership capacity, that is I did not ask “if” learning circles could contribute, but rather “how” this contribution could be defined. This assumption was based on the premise that “leadership will evolve from a ‘command and control’ to a partnering culture, where leadership is focused on actively engaging the employee through stewardship and appreciation in order to elicit commitment and ownership from employees” (Saint-Onge & Wallace, 2003, p. 324). In other words, leadership will emerge from a group of people brought together to reflect on and share their own experience and successes.

To develop the detailed findings and conclusions in response to the overarching research question, I had to first draw a line in the sand by establishing the relationship between learning circles, leadership capacity and Middle Management considerations. This was done through the development of an extensive literature review and supplemented by results of the initial Middle Management survey. I then drew upon the three identified literature review elements in my analysis of survey results, which I then used to further explore: (a) planning within the RHA, (b) managing within the RHA, and (c) leading and learning within the RHA. Survey responses also served to identify potential volunteers for the subsequent learning circles planned as part of this action research project.

### *Summary of Findings*

The key findings derived from all research activities can be related back to four constants, namely: (a) cohesion; (b) engagement; (c) satisfaction; and (d) leadership competencies, particularly soft skills. Following the learning circles, I further noted findings in regard to (a) unperceived strengths; and (b) unexpected learning.

The pre-learning circle survey showed that Middle Management had concerns regarding organizational cohesion and a lack of strategic alignment. Respondents demonstrated significant engagement, with 89% of Middle Management engaged in planning activities. Their level of satisfaction with planning tools was established at 63% and respondents expressed an interest in developing the leadership competencies identified in the survey.

These factors were further explored through learning circles. In addition, I observed subtle indicators of strengths and skills that were not necessarily perceived by the participants themselves in relation to knowledge transfer and competency

development, in particular systems thinking. Learning circles also produced unexpected learning upon which I have elaborated herein.

Post-learning circle survey results showed that participants perceived an increased sense of cohesion as a result of having come together to examine a common concern. They also indicated a renewed sense of engagement in organizational planning activities. Their satisfaction with the planning “process” had increased. They however expressed ongoing concern with planning “tools” yet greater confidence in further exploring and developing these tools. All participants identified a variety of leadership competencies, particularly soft skills, that had been enhanced through learning circles. In addition, as the researcher and data analyst for this survey, I observed a number of comments indicative of unperceived competencies amongst respondents. Finally, respondents elaborated upon the unexpected learning and sharing that had taken place through learning circles. Findings as they relate to these constants are further explored in the sub-sections that follow, broken down according to the research activities undertaken.

### ***Findings from Literature Review***

Based on the literature review, learning circles can serve as a forum to discuss hard questions, reduce feelings of isolation within the organization, and develop action plans. They are therefore recognized as an effective means for collective visioning and planning.

As such, learning circles appeared to be an appropriate means of fostering leadership, and of doing so at the Middle Management level within healthcare.

### ***Findings from Pre-Learning Circle Survey***

Several key takeaways were derived from the pre-learning circle survey distributed to RHA Middle Management. These have been grouped under the four headings below.

#### ***Engagement***

An unexpected finding of the research was that while not all Middle Management staff had an actual departmental/program business plan, a few had actually put effort into developing a variety of planning options, of pilot projects, and of wind-down plans (i.e. a planning “grab bag” reflective of future organizational direction options). This appeared to indicate that there existed a strong desire and commitment within Middle Management to support the organization in its efforts to become a more insightful, proactive and forward-thinking entity.

In terms of planning, the survey revealed that 89% of RHA Middle Management respondents had developed a plan or undertaken planning initiatives within their department or program. It should be noted that no timeframe was provided to respondents in asking this question (i.e. had the planning occurred during last month, last year, etc.). Nonetheless, this indicated that RHA Middle Management was in fact already displaying some of the traits ascribed to successful leadership, namely by developing a future vision and determining how to attain this vision. This information also correlated with Yukl’s (2002) perspective on successful leadership as noted in the literature review. This finding motivated me to pursue the assumption that RHA Middle Managers brought together by means of a learning circle would have valuable knowledge to share with and glean from their peers regarding the chosen subject matter (i.e. planning).

*Cohesion*

The overall initial survey findings also showed a consistency in many of the tools used in planning initiatives, particularly the (a) RHA's (2004a) Health Status Profile, (b) individual departmental/program Q.I. plans, and (c) the RHA's Mission, Vision and Guiding Principles statements. This consistent use of organizational strategic documents was of particular interest given the expressed concerns around lack of clear organizational direction and cohesion. The apparent dichotomy of the perceived lack of cohesion in "process" despite the use of the same planning and visioning "tools" therefore contributed to the premise of the second learning circle theme, in which learning circle participants would be asked to share planning successes, challenges, tools and interdependencies. Informal verbal discussions were also noted by several respondents as a useful tool in planning, adding to my interest in using a verbal communication forum such as learning circles to contribute to the transfer of knowledge within the organization.

It should be noted that while departmental/program mission statements and descriptions of departmental/program future state projections were the most common elements found in individual plans, the actual gap analysis piece was the most infrequently included element. In an effort to further elucidate planning methodology, this information provided for the third learning circle theme, namely developing a common framework or model for Middle Management planning.

*Satisfaction*

In regard to satisfaction with individual departmental or program plans to date as a management tool, 63% of Middle Management respondents indicated that they were pleased with their plan. They cited increased resources (namely time, people, training), cohesion and organizational direction as potential contributors to increasing their

satisfaction levels. This again reflected key findings from the literature review, in which the greatest potential identified by Canadian healthcare leaders for addressing leadership gaps within the system resided in a need for increased cooperation across healthcare departments, organizations and overall systems (Canadian Healthcare Manager, 2004).

The biggest contributing factor to satisfaction levels was the plan's ability to contribute to continuity of care and to clearly illustrate a link between departmental/program objectives and organizational strategic initiatives. As a result of the potential to increase satisfaction by increasing cohesiveness, I developed the premise for the first learning circle, namely breaking down silos.

#### *Leadership Competencies*

In regard to leading and learning, at least 89% of respondents identified "soft skills" (specifically communication, creativity and team-building) as critical to the planning process. This yet again aligned with the literature review, which identified a need for Middle Managers to focus on soft skills if they are to become the leaders of the future (Chyna, 2000). RHA Middle Management respondents consistently identified their grasp of "team-building skills" as being strong. This was conducive to the learning circle premise described in the literature review, which focuses on regularly bringing together a group of individuals to learn about and discuss issues that are important to them and their milieu. This self-assessed penchant towards team-building skills was also made evident in the desire expressed by more than half of survey respondents to take part in the proposed learning circles.

In addition, 74% of respondents indicated a desire to further develop "systems theory, thinking and planning" as a competency. These findings relating to leading and learning were consistent with the findings around management considerations

indicating the potential to enhance management satisfaction by breaking down silos and gaining a greater sense of organizational direction (Boothe & Farquhar, 2003).

*Summary of Pre-Learning Circle Survey Findings*

Triangulation of results from various survey questions showed a link between those areas seen as shortfalls within the individual and organizational planning process, those areas identified as weaknesses within individual planning competencies, those areas identified as potential areas for individual learning and the preferred focus of learning circles.

Respondents indicated that dissatisfaction with departmental/program plans and the organizational planning process stemmed in large part from a lack of cohesion and working in silos. In conjunction with this, respondents identified “systems theory, thinking and planning” as the competency they grasped the least and the one they would most like to develop. Finally, the majority of respondents identified “tying departmental/program needs into organizational strategic initiatives” as their preferred focus for learning circles.

Together with the desire expressed by Middle Management to take part in learning circles, the consistency of these responses led me to believe that there was potential to further explore what contribution learning circles could make to increasing RHA Middle Managers’ leadership capacity.

***Findings from Learning Circles and Post-Learning Circle Survey Results***

The sharing of information that has happened here has given me strength, energy. All change is normal and allows for development (... and) these sessions have motivated me to want to bring about change. Many implied objectives have also been achieved through these learning circles, like the sharing of information, respect for the importance of the role of each individual no matter what your discipline, and the realization that issues that may seem insurmountable to an individual become achievable when shared with a group. (Personal correspondence, Learning Circle Participant #9, April 22, 2005)



### *Background*

In analyzing the findings from learning circles, I relied on a combination of learning circle transcript data, personal observations, and post-learning circle survey results. Though I initially attempted to report on learning circle activities and final survey results separately, it rapidly became evident that many of the findings emanating from learning circle discussions and transcripts were simply reinforced by or tightly linked to the post-learning circle survey. For this reason, these two research activities have been analyzed in conjunction with one another as to have done so separately would have just been repetitive for the reader. For clarification purposes however, I have identified from which of the activities the citations supporting the findings are derived.

Furthermore, since each of the four research activities was meant to bring depth and reflection to the research question by approaching it from a different angle, this final section correlates the findings of all four research activities.

### *Engagement*

Peter Vaill (1996) espouses the premise that “managerial leadership is not learned; managerial leadership is learning” and that the current and ever-changing systems within which leaders and managers must work require continual learning and hence innovation and creation (p. 126). This sub-section sought to determine whether learning circles could enhance leadership capacity within the organization by exploring Middle Management’s engagement in continual learning within the RHA.

I noted the commitment by learning circle participants to attend four learning circles as a sign of engagement on the part of Middle Managers. I further sought to determine their engagement by asking them, during the second learning circle, held on April 15, 2005, to share their planning efforts to date and to elaborate on any planning

challenges and successes they had experienced as Middle Managers. All participants actively contributed to the discussions, openly sharing their challenges and successes.

Senge (1994) associates learning to change, that is to a re-creation of ourselves, to an ability to extend beyond our perceived limits. Schein (1992) maintains that leaders must recognize the potential for this extension of one's abilities within themselves, and that for this to occur, these individuals must be actively involved in the process of change. Based on this premise, I felt it critical to determine whether there was interest amongst learning circle participants to pursue future learning circle activities for the purpose of learning and leading within the RHA.

When asked if they would take part in future learning circles focused on planning within the RHA, all post-learning circle survey respondents indicated that they would. They also all indicated that they would take part in future learning circles focused on other Middle Management leadership challenges within the RHA.

The following statement by a post-learning circle survey respondent is reflective of the perceptions noted above that individuals must come to a realization of their potential on their own through active involvement:

Initially I thought we were too polite and that there was not much discussion (arguing) going on as in meetings but now think that the reason was we were in a circle to learn not to pass the buck. After all what does it matter how things were done as long as we recognize that we need to make a change and want to be a part of it.

Subjects of interest for future learning circles as expressed by post-learning circle survey respondents were as follows: (a) team building; (b) change and dealing with change; (c) best practice tips & tricks; (d) indicators & outcomes; (e) communication; (f) performance improvement & employee motivation; (g) attendance; (h) auditing staff charting; (i) accreditation; and (j) policy application.

Based on post-learning circle survey feedback, it would appear that the following factors contributed to the engagement of learning circle participants to varying degrees: (a) holding the learning circles off-site; (b) size of learning circles, in this case, 10 participants; (c) group diversity; (d) food & beverages; (e) session structure and guiding material; (f) background information; and (g) talking piece;

### *Cohesion*

Supported by pre-learning circle survey results, I chose to focus the learning circles on a current leadership dilemma faced by Middle Management within the organization, namely increasing cohesion by tying departmental/program needs into organizational strategic initiatives (i.e. planning).

In regard to strategic planning, Senge (1994) states that successful and shared visions rarely come exclusively from “the top” or from figures of authority. He qualifies this by explaining that to be successful, a vision will be shared, and to be truly shared, this vision must connect the personal vision of individuals from throughout the organization. In other words, building this collective vision will require leaders to share their personal vision, and to request the support of their peers and followers in sustaining this vision. It is important to note that he does not discredit the value of personal vision, stating that personal vision is in fact inherent to leaders and will likely often contribute to them actually caring about a shared vision. It is however through this development of a shared vision built on personal visions that organizations will ultimately achieve the visionary leadership they so seek.

To relate this back to the application of learning circles in increasing cohesiveness, or developing planning and visioning skills, Baldwin (1998) explains how by its very premise a learning circle will in a sense devoid individuals of their exclusive ownership of a concept. They will have to relinquish their control of their vision to the

synergy of a group, and allow a new holistic vision to emerge. In this sense, learning circles can set the stage for the development of the shared vision recognized by Senge (1994).

In the post-learning circle survey, respondents commented on their recognition that all RHA staff should understand why we do what we do as an organization. They spoke of having achieved a greater understanding of where they individually fit into the big picture. In the words of one respondent: “We have different goals, objectives, etc. working towards the same mission.”

Overall, eight of nine post-learning circle survey participants indicated that they considered learning circles had contributed to their overall planning capacity in a satisfactory fashion. More specifically, six respondents indicated that the learning circles had allowed them to discover new planning tools at their disposal, five noted that the sessions had allowed them to discover new ways to set aside time for planning, eight maintained that it had contributed to their knowledge of the planning process, and six acknowledged that the circles had contributed to a sense of organizational support regarding the planning process.

The planning model (Table 1) developed during the 3rd learning circle was further testament to how individual personal knowledge could contribute to the development of a shared vision.

### *Satisfaction*

While the focus of the learning circles organized for the purposes of this action research project was on developing a model or template to tie individual department / program planning initiatives into organizational planning initiatives, final learning

**Table 1. Departmental and Program Planning Model**

1. What do you feel a departmental/ program plan should look like (i.e. what will its components be)?	2. What should the plan’s lifecycle be?	3. What common tools should all RHA middle management staff use to develop their plans?	4. What stakeholders should all RHA middle management staff consider in developing their plans?	5. What other considerations should RHA middle management staff include in developing their plans?
<p>While the content of each departmental / program plan should ultimately consider who the plan will serve, the plan should serve as a roadmap, i.e. it should be a reference tool to ensure the viability of objectives and should describe how to achieve objectives as laid out.</p> <p>The components listed as being essential to the development of a departmental / program plan are as follows:</p> <ul style="list-style-type: none"> <li>- Introduction, i.e. the “what, where, when, why and how” of the plan;</li> <li>- Mission</li> <li>- Vision</li> <li>- Objectives</li> <li>- Gap analysis (re. resources, needs, objectives), particularly when significant \$\$\$ are attached to gaps, though it was noted that this may be a challenge in direct care</li> <li>- Timeframes around objectives</li> <li>- Budget (level of detail should reflect \$\$\$ attached to the plan)</li> <li>- Statistical data / Literature to support initiatives</li> </ul>	<p>A 3-yr plan allows for the development of a long-term vision and a consistency with the RHA strategic plan’s lifecycle. It also allows the time to see results. Renewal of the 3-yr plan and course correction as needed should however occur on a yearly basis,</p> <p>The degree of detail contained within the plan should reflect the needs expressed by the department / program, however, the shorter the time-frame, the more detailed the information should be (i.e. 1<sup>st</sup> yr should be more detailed and precise than 2<sup>nd</sup> yr, 2<sup>nd</sup> yr more detailed than 3<sup>rd</sup>).</p>	<ul style="list-style-type: none"> <li>- RHA Strategic Plan (refreshed)</li> <li>- RHA Mission &amp; Vision</li> <li>- RHA Health Status Profile (refreshed)</li> <li>- Standards (Provincial, National &amp; International Professional &amp; Accreditation Standards)</li> <li>- Current Policies</li> <li>- Budget</li> <li>- Healthcare trends &amp; “better” practice guidelines (evidence-based)</li> <li>- Previous plan</li> <li>- Stakeholder concerns</li> </ul>	<p>ALL internal and external STAKEHOLDERS must be considered in the development of the plan – including everyone who will CONTRIBUTE to the achievement of the plan AND everyone who will BENEFIT from it.</p> <p>This may include:</p> <ul style="list-style-type: none"> <li>- Employees</li> <li>- External Clients (patients &amp; general public)</li> <li>- Internal Clients (Nursing, MD’s, specific depts.)</li> <li>- Volunteer organizations</li> <li>- Private sector (based on pre-established criteria), i.e. vendors</li> </ul> <p>Likewise, middle managers as stakeholders should also be considered in strategic decision-making bodies such as at the PAC table</p>	<ul style="list-style-type: none"> <li>- Benchmarking</li> <li>- “Better” practice</li> <li>- Bargaining agreements</li> <li>- Politics and political influences</li> <li>- Budget template (should be provided)</li> <li>- HR capacity (must include vacation, sick time, etc.) and skill levels (for determination of training needs)</li> </ul>

circle participant comments indicate that the actual tool developed was not the biggest contributing factor to the success of learning circles. In the words of Participant #6, “while I don’t think I’ll ever be 100% comfortable, the model can’t die here; ... it should be shared, regardless of my comfort level, because in some ways it’s about risk taking” (Personal Correspondence, Learning Circle #4, April 22, 2005). This aligns with literature review findings according to which learning circles do not aim for absolute solutions to the topic at hand, but rather for the deepening of understanding that will give participants the confidence to move forward in their quest for learning (Learning Circles Australia, 2005).

### *Leadership Competencies*

As reiterated in the literature, leadership is most often defined as a series of traits or behavioural competencies consistently displayed by recognized leaders (Kouzes & Posner, 2002). This sub-section focuses on those areas where learning circles might prove most beneficial to developing leadership competencies and hence enhancing the leadership capacity of Middle Management within the RHA. The identification of these competencies is at the heart of this action research project.

While the number of traits or competencies identified by authors may vary to some degree, their gist is fairly similar. The leadership competencies I identified for the purposes of the pre- and post-learning circle surveys conducted within the context of this study were: (a) creativity; (b) team-building skills; (c) communication skills; (d) research and inquiry; (e) systems theory, thinking and planning; and (f) organizations and organizational change. Findings in this sub-section have been grouped under communication, other soft skills (encompassing creativity and team-building), and other skills (encompassing research and inquiry; systems theory, thinking and planning; and organizations and organizational change).

Analysis of the pre-learning circle survey results showed that of the six leadership competencies cited within the context of this study, all were identified by at least 79% of respondents as inherent to the planning process. This showed a correlation between leadership capacity and planning as described by Yukl (2002), who purports that successful leadership will be defined by fostering organizational change through the development of a future vision and attainment of strategies, through the communication of this vision, and through the empowerment of others to carry this vision through.

*Communication as a Leadership Competency – Breaking Down Silos.* Of the six above-mentioned leadership competencies, communication was identified most frequently, that is by 95% of pre-learning circle survey respondents, as crucial to planning. Of respondents, 68% felt they possessed communication skills, and 47% of overall respondents indicated a desire to further develop these skills. In tying this back to planning, where dissatisfaction with departmental/program plans was reported to exist in 37% of cases it stemmed in large part from a lack of cohesion within the organization and from working in silos, both factors that can result from poor communication as noted by Kouzes and Pozner (2002) who cite that “we’re helpless if left to ourselves. Socially and professionally, we need other people” (p. 260).

As a result, I chose to focus the initial learning circle session on breaking down silos. According to the Reconciliation Learning Circle Kit (Copyright Commonwealth of Australia, 1999), encouraging communication and exchanging information in this fashion is consistent with the aim of most initial learning circle sessions.

In post-learning circle survey results eight of nine respondents indicated that learning circles had contributed to enhancing their communication skills .

One respondent had the following to say about breaking down silos, the communication that took place during learning circles and the unexpected (explicit)

learning that resulted from it: “I have a great sense of understanding what other groups’ roles are and how we differ. There isn’t one cut and dry table where we all fit. We have different goals, objectives, etc. working toward the same mission.”

*Developing Other Soft Skills for the Purpose of Enhancing Leadership Capacity.*

Pre-learning circle survey results also revealed that 89% of respondents attributed other leadership skills commonly referred to as “soft” skills (namely creativity and team-building) to the success of planning initiatives. Julie T. Chyna (2000) speaks specifically of the need for Middle Managers to move towards these soft skills in their quest to become successful leaders. The acknowledgement of team-building as a necessary planning competency also relates back to two of the roles recognized by Boothe and Farquhar (2003) as being inherent to Middle Managers of the future, namely (a) building relationships, and (b) building, leading, and participating in teams.

In post-learning circle survey results, seven of nine respondents indicated that the sessions had enhanced their creativity, and six of nine felt that the learning circles had contributed to their team-building skills.

The two following excerpts from the post-learning circle survey relate back to the contribution of learning circles to creativity and team-building:

“I learned that the planning process need not be complicated nor should it be inflexible and must be adaptable as situations change. I learned that planning should not be done in isolation and that it is important to include stakeholders and partners to various degrees. I learned that I am human and that I have made some discoveries about myself and my role within the learning circle.”

“These informal training sessions allow for team building, and help increase support and trust amongst managers as well as providing a training aspect. During these meetings, I realized that managers can find answers to complex situations while having fun.”



### *Unperceived Strengths*

Post-learning circle survey results showed overall participants' perception that their competencies in certain areas had not been or had only slightly been enhanced through learning circles. While (a) research and inquiry; (b) systems theory, thinking and planning; and (c) organizations and organizational change were all identified by RHA Middle Management in the pre-learning circle survey as competencies required for planning, the first two rated lowest when it came to Middle Managers' grasp of them. Systems theory, thinking and planning was the leadership competency that Middle Managers had most hoped to develop, but that they identified least as having been enhanced by learning circles, with only 33% of respondents indicating that learning circles had contributed to this competency.

Despite this perception by respondents, answers to related questions on implicit and explicit learning derived from learning circles seemed to indicate a good grasp on systems theory, thinking and planning. Case in point:

“I learned to develop a model that must take into consideration the needs of clients, employees, and the RHA. It must be in tune with the mission, vision and guiding principles. I learned that plans could be 1 to 3 years depending on the goals involved. I learned about the format of a planning model i.e. introduction, gap analysis, human resource requirements. It is important to base a plan on bench marks, evidence base practice, standards, and budgetary considerations.”

This statement would appear to meet the criteria laid out in the definition of systems theory, thinking and planning provided in the Royal Roads University MALT Program Overview of Competencies (2003), which reads as follows:

The extent to which the leader understands and applies systems theory and systems thinking within and with others as he or she explores relationships among individuals in groups and teams, among groups in organizations, organizations in national and global settings, and in a variety of local and global ecosystems. (p. 6)

Of post-learning circle survey respondents, five of nine indicated that learning circles had contributed to their research and inquiry skills and six of nine indicated that the circles had contributed to their understanding of organizations and organizational change. The increased awareness around research and inquiry skills is evidenced by one learning circle participant's acknowledgement in the post-learning circle survey that: "I learned that certain individuals in the group really take time to explore research and literature before determining their objectives. This made me reflect on the fact that I may rely a little too much on my intuition."

In regard to organizations and organizational change, I observed discussion and knowledge transfer on this competency during the second and third learning circle sessions, during which participants noted that planning could start small and evolve over time, and should allow for a degree of flexibility given the changing system within which we work (Personal correspondence, Learning Circle Transcripts #2 and #3, April 15 and 18, 2005).

#### *Expected and Unexpected Learning*

Schein (1992) maintains that culture within an organization can be seen as the "accumulated shared learning of a given group, covering behavioral, emotional, and cognitive elements of the group members' total psychological functioning" (p. 10). This sub-section sought to determine in what areas learning circles had in fact contributed the learning of participants and if the sharing of knowledge within the RHA had hence enhanced a culture of leadership within the organization.

Collay, Dunlap, Enloe and Gagnon (1998) state that learning circle participants will model ways in which to share the "knowledge they have constructed through individual learning and to reconstruct what they know through collaborative learning" (p. 32)

In the post-learning circle survey, eight of nine respondents spoke of the implicit (expected) learning that had taken place as a result of their participation. Some of the respondents indicated having come into the exercise hoping to learn anything they could, and most referenced the sense of support, solidarity and encouragement derived from the overall learning experience.

Eight of nine post-learning circle survey respondents cited explicit (unexpected) learning. This learning was expressed in terms of self-discovery, peer openness, an appreciation of peers' roles and support, increased confidence, shared management challenges, and an appreciation for the learning circle methodology.

In the final appreciation of the learning circles exercise, one survey respondent spoke of having gained a greater understanding of where they fit into the big picture.

All survey respondents indicated that the talking piece, an inherent component of the learning circle format, had contributed to their ability to learn. Eight of nine respondents felt that holding the learning circles off site had contributed to their learning, while one respondent indicated that location had had no impact on learning. Similarly, eight of nine respondents felt the diversity and cross representation of the learning circle group had contributed to their learning, with one respondent indicating that it had distracted from learning. These findings are in keeping with Collay, Dunlap, Enloe and Gagnon (1998), who maintain that leadership is found within a group as a whole as well as within individuals, and that different leaders and forms of leadership can positively contribute to learning at different times, in different settings, and in different circumstances.

An explicit discovery I made during the course of action research involved the admission by several participants that prior to the first session, they had harboured a slight fear of "not fitting in" with the group or "not having anything to contribute" to the

group. It should be noted that I had not initially considered these anxieties as a potential barrier to the sharing, planning and learning process.

However, based on participants' feedback during the final learning circle and subsequent survey, it would appear that once they had overcome the initial reluctance to speak into a portable recording device (used as the "talking piece" for the purpose of these learning circles), learners grew more comfortable with sharing their experience and with the overall learning circle process. All participants contributed, and the process of only speaking when holding the talking piece was respected by all at all times.

In the words of post-learning circle survey respondents:

"During the learning circles ... I also learned to involve others more in my planning (i.e. other depts. affected) and that the talking piece would be so helpful in sharing our ideas. I plan to try it at a future staff meeting."

"... the idea of going to a meeting during which I could snack and drink my coffee while sharing with others put me in a good mood and made me want to actively participate."

"The talking piece contributed to my sense of responsibility and also enable me to own my statements and thoughts. It was empowering"

"I very much enjoyed this new experience myself, even if at first I was not certain I had much to contribute to the group. In the end, I realized that everyone was going through about the same thing and that we were all there for the same reason. Support amongst ourselves. Thank you so much!"

The third session learning circle session opened with a particular focus on knowledge gleaned in listening to the other participants during the previous session. All participants enthusiastically described their learning experience and what they had learned about the planning process through listening to their peers. The following briefly describe the key learnings that were noted by participants in relation to planning:

- (a) literature reviews, internet searches, and the review of trends can contribute to the validity and reliability of planning initiatives;

- (b) planning and research take time; we should make it an essential part of every day without feeling guilty about it;
- (c) project management skills can be applied to planning;
- (d) employee input can be very valuable in stakeholder consultation;
- (e) flexibility and simplicity can facilitate planning while a quest for ultimate perfection and detail can make the planning process much more daunting;
- (f) peer consultation is invaluable to planning;
- (g) all managers have small plans and projects on the go; these can be expanded upon for the purpose of developing three-year plans; and
- (h) attitude towards planning must change from “don’t have the time” to “must take the time” (Personal Correspondence, Learning Circle #3 Transcript and Researcher’s Notes, April 18, 2005).

## **Study Conclusions**

### *Summary*

The conclusion to the overarching research question resides in the answer to the five sub-questions upon which this action research project is based. In summary, the overriding action research project can be termed a success, more specifically in that learning circles can enhance the leadership capacity of Middle Managers of the RHA by contributing to their: (a) visioning and planning skills; (b) leadership competencies; (c) learning; and (d) enthusiasm in engaging in a new communication forum. The final answer as to whether learning circles themselves will actually be successful within the RHA resides for the most part in the organization’s future support and exploration of this forum.

In all, this action research project spanned a period of approximately seven months (from the time of proposal submission to report finalization). It was supported throughout by Royal Roads University, through the Project Supervisor, Dr. Scott Comber, Ph.D., and by the RHA, through the Project Sponsor, Mr. Jean Boulay, Vice President – Corporate Services. I would be amiss to neglect the additional and enthusiastic contribution of and support by RHA Middle Management staff and the HBP Steering Committee.

In arriving at my conclusions, I became increasingly aware that without the support and encouragement of these individuals, none of this would have been possible. The involvement, dedication and participation of all these individuals made the action research a possibility, their input allowed me to create meaning in relation to my findings, and their enthusiasm served as a driving force in propelling me forward in my quest to apply my own learnings and leadership questions to the organization.

From my perspective, the most telling element of success derived from this action research project was the learning circle participants' overall interest and desire. In keeping with Royal Roads University's (2003) definition of leadership, participants in the process were eager to learn, share, and examine and pursue a variety of skills and competencies.

The enthusiasm displayed by this group left an indelible impression on me. I left every learning circle having gained a greater understanding of (a) the participants, (b) the organization, (c) the challenges of the system within which we work, and (d) the commitment and professionalism of the people working within it. The ability by this learning circle group to transmit such a feeling of enthusiasm and support is undeniably an indication of one of the five exemplary leadership practices referred to in the literature by Kouzes and Pozner (2002) as "encouraging the heart" (p. 315). The

knowledge I gleaned from the participants also attests to the phenomenological reality of the research, in that I was not left indifferent to the findings and I derived much meaning from this research experience.

It is my sincere hope that the conclusions herein will render justice to the initial intent of this project, namely to determine how learning circles could contribute to enhancing the leadership capacity of Middle Managers of the RHA by applying the learning circle concept to a current Middle Management leadership challenge, in this case planning. I have elaborated on each of the conclusions below according to the original five sub-questions.

### ***Detailed Conclusions***

#### *Cohesion*

The first sub-question examined whether learning circles could contribute to the planning and visioning skills of Middle Managers within the RHA. Action research findings show that they can.

In keeping with Senge's (1994) view that successful visions and planning initiatives will be shared by individuals throughout the organization and that the individual's personal vision will contribute to the organization's overall vision, learning circle participants pooled their resources and past successes to arrive at a planning model that could be used in the development of future departmental/program plans.

The planning model developed is a tangible outcome of learning circle activities. However, it is the enhanced level of comfort achieved around the planning process that was revealed to be the greatest measure of learning circle success. According to learning circle participants, having a forum in which to express their concerns and to have them addressed by their organizational peers gave them the desire and confidence to further develop their planning skills. Case in point, when asked to elaborate on the impact of

organizational and/or provincial complexities on departmental/program planning, Participant #6 stated, “I am not going to wait, I am going to influence” (Personal Correspondence, Learning Circle #3, April 18, 2005).

### *Leadership Competencies and Learning*

The second sub-question examined whether learning circles could contribute to the: a) leadership competencies of; b) learning (explicit and implicit) of, and; c) sharing of information by Middle Managers within the RHA. Action research findings show that they can. It should be noted that the answer to this sub-question was central to this research project’s premise. Its basis in competency was a clear indicator of leadership development.

Of the six leadership competencies cited in the context of this study, all were recognized by Middle Management as inherent to the planning process. This reinforced the correlation between leadership capacity and planning described by Yukl (2002). Post-learning circle survey results revealed that 89% of respondents felt that learning circles had contributed to enhancing their communication skills and that there was significant potential to increase other “soft” skills through learning circles given that 78% of respondents indicated the sessions had enhanced their creativity, and 67% felt that the learning circles had contributed to their team-building skills. This supports the premise that learning circles can contribute to enhancing creativity and team-building within the organization, hence contributing to two of the five leadership behaviours cited by Kouzes and Posner (2002), namely “challenging the process” through creativity, and “encouraging the heart” by building a strong sense of collective identity and community spirit.

Overall, it would appear that the greatest contribution of learning circles to leadership competencies and capacity lies in the realm of enhancing leadership skills



traditionally referred to as “soft” skills, in this case communication, creativity and team-building.

In keeping with Peter Vaill’s (1996) affirmation that “managerial leadership is not learned; managerial leadership is learning” (p. 126) and that the current and ever-changing systems within which leaders and managers must work require continual learning and hence innovation and creation (p. 126), all learning circle participants enthusiastically described their learning experience within the framework of learning circles, listing eight key learnings related to planning that they derived from listening to their peers.

In the post-learning circle survey, 89% of respondents spoke of the implicit (expected) learning that had taken place as a result of their participation, referring mostly to the sense of support, solidarity and encouragement derived from the overall learning experience. These same respondents cited explicit (unexpected) learning in terms of self-discovery, peer openness, an appreciation of peers’ roles and support, increased confidence and shared management challenges.

Based on the above, learning circles can enhance leadership capacity within the RHA by contributing to continual learning.

Schein (1992) maintains that culture within an organization can be seen as the overall combined shared learning of a group. Collay, Dunlap, Enloe and Gagnon (1998) state that learning circle participants will model ways in which to share their individual learning to develop shared learning (p. 32).

Learning circle participants spoke to an increased level of comfort with sharing their knowledge as they grew more accustomed to the learning circle format.

Based on learning circle findings, it would appear that learning circles can contribute to the development of a culture of leadership as described by Schein (1992), and hence to leadership capacity, through shared learning.

#### *Middle Management Engagement*

The third sub-question examined whether Middle Managers within the RHA were interested in pursuing the concept of learning circles as a forum for developing leadership capacity. This was examined in light of the desire recognized in leaders to be actively involved in change processes (Schein, 1992). Action research findings show that all learning circle participants would take part in future learning circle activities.

Post-learning circle survey respondents cited well-structured off-site learning circles consisting of appropriate background material and made up of a diverse group of approximately ten participants as conducive to their expressed interest.

#### *Organizational Support of Learning Circles*

The fourth sub-question examined whether the organization as a whole will support the concept of learning circles. Where lack of time, organizational support and cohesiveness were consistently identified by Middle Management as a barrier to successful planning initiatives within the RHA prior to and while carrying out the learning circles, it is my conclusion that the time afforded by the organization to learning circle activities was an effective, tangible and significant demonstration of organizational support to an identified Middle Management challenge.

The provision of capacity-building forums to Middle Management has been identified as a critical responsibility of organizations of the future (Boothe & Farquhar, 2003), and according to a survey administered by Kouzes and Posner (2002) support is a sought leadership trait. Yukl (2002) further purports that superiors can facilitate conditions for leadership development by supporting their employees. Boothe and

Farquhar (2003) elaborate on the combination of managerial and organizational accountability required for successful organizations of the future, citing the provision of capacity-building forums by the organization to its Middle Managers as a critical responsibility. As a result, I felt it pertinent to determine the level of support that can be expected from the organization in regard to learning circles.

This having been said, it would be presumptuous on my part to affirm the degree or type of organizational support that will be forthcoming from Senior Management as a result of my recommendations, a measure that extends beyond the scope of this project. However, it should be noted that the organization, through the project sponsor (Mr. Jean Boulay, Vice President – Corporate Services), supported all measures taken and findings made within the framework of this action research project.

Beyond the scope of the project, the organization has openly committed (Management Forum on Strategic Planning, October 2004 and January 2005) to supporting Middle Management in its actions to become more influential in organizational decision-making. In our numerous discussions on the subject, my project sponsor consistently reiterated this commitment. He affirmed that time spent on organizational planning, on Middle Management skills development and on leadership development was time well spent.

The organization willingly incurred various expenses in sponsoring learning circles, in particular allowing for approximately 112 Middle Management hours in all to planning activities for the purpose of enhancing leadership capacity. This can be broken down into a total of 80 Middle Management hours spent in learning circle sessions per se, and an estimated 14 hours of Middle Management time incurred for completion of the pre- and post-learning circle on-line surveys. It is difficult to estimate the time spent on learning circle preparation by participants, however affording a ball park figure of one

half hour of preparation per learning circle per participant would account for an additional 18 hours of Middle Management time.

The organization also showed its support by expressing a keen interest in receiving the results of this research through a report-out to the RHA HBP Steering Committee and Corporate Services Committee for the purpose of sharing, supporting, advancing and helping to sustain any learning that has occurred as a result of learning circles.

Audio-visual equipment used for the purposes of these sessions was also provided by the organization.

It should be noted that I assumed responsibility for my preparatory time, the learning circle material (stationary supplies) and the costs incurred for facilities rental and catering services (approximately \$350). I volunteered to pay these costs as the influence of these factors on the success of learning circles was not known, and research into these factors had not shown them to be critical to the success of the learning circles. However, Post-Learning Circle Survey results did reveal these factors to be contributors to varying degrees in creating an atmosphere conducive to sharing and learning.

#### *Ensuring the Viability, Credibility and Sustainability of Learning Circles*

The fifth and final sub-question examined how to ensure the viability, credibility and sustainability of learning circles. Action research findings lead to the conclusion that the future sustainability, viability and credibility of learning circle findings are dependant on actioning the recommendations made by learning circle participants during the fourth learning circle. These recommendations have been integrated into the study recommendations.

Kouzes and Posner (2002) forge a very strong link between credibility and leadership, purporting that credibility is in fact “the foundation of leadership” (p. 32). In

light of this, learning circle participants spent part of the last learning circle determining how the findings of the learning circles could be communicated and supported by the organization in such a way that Middle Management would not only accept the findings, but truly believe in the potential of learning circles as a means to further enhance leadership capacity within the RHA.

The questions around this section could perhaps have been clearer. Participants initially wondered if they were being asked how to ensure effective communication of learning circle outcomes (knowledge they had gleaned and actions that had resulted around planning), or if they were being asked how to ensure the communication of the learning circle process (future potential of learning circles). Following some discussion, all agreed that tools and learnings evolving from learning circles were but a measure of the learning circle process, and that the overall process itself was what should be considered (Personal Correspondence, Learning Circle Transcript #4, April 22, 2005).

In determining critical success factors, learning circle participants deemed that: (a) they should have the opportunity to use and share the information gleaned from learning circles; (b) that I, as the researcher, should submit a report-out document on learning circle results to the Chair of the RHA HBP Steering Committee; and (c) that a future organizationally sponsored learning circle on planning progress should be held.

More precisely, participants suggested holding a follow-up learning circle on planning progress in three months to determine how effective the learning had actually been. The learning circle could consist of a mix of current participants and new Middle Management representatives. It was felt that the session would have to be well organized and facilitated, and that the learning circle process would have to be properly outlined for new participants. Participants felt that communication of validated findings and support by the RHA HBP Steering Committee for the process would be critical to

ensuring the success of the process (Personal Correspondence, Learning Circle Transcript #4, April 22, 2005).

So as not to lose sight of the specific outcomes derived from this series of learning circles, in particular the planning model developed, participants expressed a desire to see the model fine tuned, and for the large part felt that they themselves had a significant responsibility in sharing their learning and what they had gleaned from the model with their peers. It was also noted that the sharing of these findings should be done on an individual basis or at the very least in small groups, allowing for individual learning styles. Means suggested for sharing this information in small groups included informal discussions between learning circle participants and their peers, calling future learning circles, setting up or using existing multidisciplinary groups, developing planning mentors, and identifying resource persons to assist with application of the planning model to departmental/program plan development. It should be noted that participants even identified some of their peers seated around the table as strong leaders and potential future mentors or resource people.

One participant also suggested that regular follow-up be made by resource people to make sure that all managers are on the right track, and that this might occur in general management forums, which participants viewed as better suited to higher level issues (Personal Correspondence, Learning Circle Transcript #4, April 22, 2005).

Participants agreed that any written communication should be supported by verbal communication so as to take into account the various learning and communication styles of individuals. Participants were comfortable with reporting the validated learning circle findings out to the RHA HBP Steering Committee (Personal Correspondence, Learning Circle Transcript #4, April 22, 2005).

*“Success is often the result of taking a misstep in the right direction.”*  
(Bernstein, n.d., p. 1)

## Scope and Limitations of the Research

As the saying goes, “hindsight is 20/20” (Wilder, n.d., p. 1) It is my hope that my hindsight in identifying project limitations and lessons learned may become the foresight of future learners.

The RHA is a fully bilingual organization. As such, it views the bilingualism of its Management Staff as an asset, and most Middle Managers are able to function in both official languages, namely English and French. This was true in the case of learning circles, in which participants expressed themselves in the language of their choice. Given that all learning circle participants were able to express themselves in and understand English, I received their consent to distribute the final survey in English only. It should nonetheless be noted that bilingualism does not ensure mastery of the second language. In the case of one final survey respondent, certain discrepancies and inconsistencies were noted in responses to similar questions, which led me to believe that certain misinterpretations may have contributed to extreme variations in the case of this respondent’s answers. I was unable to confirm that this was in fact the case without discovering the identity of the respondent, however this is noted as a limitation of the research.

As well, it should be noted that all findings reported in French from the initial survey and the survey transcripts have been relayed in findings in English by me, and that I do possess a Bachelor of Arts in Translation. Regardless of this title, it is recognized that any translation is in fact an interpretation, and so while all findings have been validated by participants, there is still a risk of digression in terms of reporting results. Again, this is noted as a limitation of the research.

Finally, I acknowledge that the participants in the action research project were only provided with the organization’s three-year strategic initiatives document one week

before the action research was initiated. It is my contention that future planning research should incorporate the identification of this organizational tool and that its earlier availability could have influenced action research findings. Once again, this is noted as a limitation of the research.



## **CHAPTER FIVE:**

### **RESEARCH IMPLICATIONS**

#### **Study Recommendations**

During the last learning circle, when asked to determine critical success factors in ensuring the viability, credibility and sustainability of learning circle outcomes, participants deemed that they should have the opportunity to use and share the information gleaned from learning circles, that I should submit a report-out document on learning circle results to the RHA HBP Steering Committee, and that a future organizationally sponsored learning circle on planning progress should be held.

As such, I recommend that the learning circle participants apply their learning to the development of individual three-year departmental/program plans for the years 2006/2007 – 2008/2009. These plans will be required by Senior Management in the fall of 2005.

Prior to submitting these plans, and based on the suggestion by Post-Learning Circle Survey respondents that learning circles be held on a quarterly basis, I recommend that a learning circle involving all original participants be held in September 2005 to determine and share whatever learning they were able to apply to the development of their plan.

Based on learning circle participant feedback according to which a follow-up learning circle should be held to confirm whether participants were able to enhance their planning and leadership capacity as a result of their learnings from the first four learning circles, I recommend that the participants agree to success criteria prior to initiating the September learning circle and that they weigh the success of that learning circle's outcomes against those criteria.

Based on the enthusiasm of learning circle participants and on their identification of potential mentors and resources in their midst, it is my recommendation that the learning circle participants take responsibility for organizing the September learning circle focused on planning.

Based on the learning circle participants' recommendation that the findings of this research be submitted to the RHA HBP Steering Committee to determine organizational support of the learning circle premise, I recommend that the said Committee review the content and recommendations of this research project.

It is also recommended that the RHA HBP Steering Committee sponsor future learning circles aimed at addressing Middle Management challenges within the RHA by providing a combination or all of the following support mechanisms: (a) provision of meeting time, (b) off-site meeting space, (c) equipment and supplies as applicable, (d) catering services, and (e) acknowledgement and recognition of learning circle outcomes.

It is also recommended that the HBP Steering Committee officially recognize planning mentors or resource people within the organization.

### **Organizational Implications**

*"The toughest thing about success is that you've got to keep on being a success."* (Berlin, n.d., p. 1)

The implications of implementing the recommendations herein may be felt at three levels, namely at the front line or departmental level, at the Middle Management level, and at the organizational level. The key to the successful implementation of recommendations will ultimately reside in the enthusiasm of individuals at all of these levels.

Using the learning circle format to sustain the organization's commitment to a change in the decision-making process, or more specifically its commitment to the

empowerment of its Middle Managers as true leaders, will undoubtedly invite a period of instability and uncertainty during which the traditional decision-making authorities may be fearful of losing control of organizational strategic direction (Schein, 1992). During this period, learning circle participants may be insecure or hesitate to assert themselves for fear of seeing their decisions or efforts ignored or dismissed. Kouzes and Posner (2002) have recognized the stress and frustration associated with the implementation of change, while maintaining that the ability to infuse enthusiasm into a challenging and new way of doing things is a key and common factor to successful organizations.

In light of this, if the recommendations herein are accepted by the RHA HBP Steering Committee, it is crucial that this traditional decision-making group of leaders, mostly comprised of Senior Management members, recognize and enthusiastically support the learning circle process and communicate this support to Middle Management accordingly.

Likewise, for learning circles to produce the desired results, build credibility, and enhance leadership capacity, Middle Management will have to be pro-active in organizing and sustaining learning circle activities and resulting follow-up actions. That is, they will have to show results and make things happen (Kouzes & Posner, 2002).

The enthusiastic contribution of front-line workers should not be neglected in this process, as their input and direct contact with the organization's clients and their needs may very well contribute to many of the challenges that could be discussed within the learning circle format.

By ensuring this enthusiasm, no small feat by any means, the organization as a whole stands to benefit, and to do so at minimal financial cost. As indicated in analyzing the significance of the opportunity, supporting the implementation of learning circles could contribute to Middle Management's sense of empowerment, satisfaction,

knowledge, synergy, trust and commitment to the organization. The organization stands to gain financially and in terms of effectiveness and decreased frustration by fostering and engaging a more focused, knowledgeable, confident, supportive and powerful Middle Management team. Front-line staff stand to gain from improved and consistent processes and from a greater understanding of organizational issues derived from learning circle outcomes.

### **Implications for Future Research**

Much organizational change occurred during the course of this research project, with the RHA HBP reacting to planning concerns addressed by Middle Management by developing a three-year strategic initiatives plan that was communicated to all RHA Middle Managers in the days preceding the action research activities described herein. Learning circle discussions showed an appreciation for the effort made obvious by Senior Management through the development of this organizational plan. Learning circle participants also emphasized the sense of support and commonality they had developed through the learning circle experience. As such, the following research questions might be considered in future research:

How has the RHA's 3-year rolling strategic plan impacted individual departmental initiatives?

How have individual departmental initiatives impacted the organization's 3-year rolling strategic plan? or How has the organization's strategic initiatives document evolved to incorporate the individual visions of department and program managers?

What organizational benefits have members of the RHA HBP Steering Committee perceived subsequent to the acknowledgement of learning circles as a leadership development forum?

How has the support and commonality fostered through learning circles been reflected in day-to-day operations within the RHA?

How can knowledge gleaned from participation in learning circles be transferred effectively to potential future leaders within the RHA?

How do Middle Managers who have not participated in learning circles perceive the learning circle process and outcomes?

## **CHAPTER SIX:**

### **LESSONS LEARNED**

#### **Research Project Lessons Learned**

During the action research portion of this project, I made several key discoveries that infused unexpected meaning into my research. Of particular note was the fear expressed by learning circle participants as to their ability to contribute effectively to the overall learning circle process. I was both surprised and moved by the admission of uncertainty by highly performing and effective individuals within the organization, and have registered this for consideration in future exploration of organizational change initiatives.

The irony of this discovery is that it is some of these very participants who elicited the deepest reflection within me or brought additional insight to the questions I was pondering through my research.

I was also moved by the enthusiasm and commitment of Middle Management within the RHA to the tasks they undertake. This was made obvious in the initial survey and during learning circles. While it seems that typical meetings seem so often to deal with the inefficiencies that exist within our system, all that seemed to come through from the learning circle environment was the consistency with which participants performed the actions requested of them, for example developing a statement of intent for the first learning circle, following up on feedback requested by me between learning circles, and coming to each session prepared for the day's objectives.

I was also surprised at my own fear of actually applying theoretical concepts to real-life situations through action research. After spending several months researching the literature, the prospect of actually implementing what was largely perceived as a

“soft” forum to an operationally focused organization filled me with trepidation. I was very fearful of letting down my group of peers or of wasting their time. More surprising, however, was again the enthusiasm expressed by participants with regard to the overall process, and the extent to which the participants contributed to putting me at ease.

The importance of balancing academic and professional learning opportunities with personal growth became increasingly obvious as I advanced in my initiatives. This was highlighted when I found out I was pregnant approximately two weeks after receiving commitment from my organizational sponsor and project supervisor. A fairly tumultuous year that included major professional challenges in terms of human resources and project development, and major life changes including a precipitated maternity leave and a physical move to another province somehow all seemed to meld together into an incredible year of enthusiastic discovery. My commitment to my health and physical well-being was crucial throughout this time, and I pursued my passion for jogging throughout, an activity I am convinced nourished both body and soul throughout my learning journey. I also benefited enormously from the support of the MALT-JPSL 2003 cohort and from the unfailing encouragement and love of my husband and MALT-JPSL 2003 peer, Patrick R. Todd.

While I pride myself on my commitment to deadlines and organization skills, and had initially thought that the analysis piece of research would be the simplest, I was surprised at how easily I was waylaid by unexpected turns of events and by my own sudden onset of procrastination.

Given that my estimated delivery date was on July 28, and the final date for submission to the MALT dropbox on July 31, 2005, I subjected myself to a writing frenzy. The richness and abundance of data that I had initially rejoiced over suddenly became overwhelming as I struggled to make sense of and establish correlations between

findings from the various action research activities. No matter how much you plan, it is crucial to remember that life can sometimes alter the path you have mapped out.

My decision to forego piloting the second survey for time's sake turned out to be a mistake I would not repeat in future research endeavours of the like. The submission of a draft post-learning circle survey to objective parties might have served to demonstrate areas that were not being explored or where questions did not correlate with or contribute to the initial survey questions. Case in point, when developing the findings and conclusions sections of this research project, I came to the realization that I had not factored in facilitation as a measure for success in learning circles, nor had I considered the development of ground rules or allowed for respondents to elaborate on further elements that might have contributed or detracted from learning or from level of comfort.

I wish I had had the foresight to hold an information session on learning circles prior to conducting the actual learning circles. While I built the information piece into the first hour of the first learning circle, this measure took away from time that might have otherwise been spent on the actual focus of learning circle content. As well, it is my opinion that providing insight into this learning forum to a larger audience of Middle Managers might have served the organization better in finding topics of interest for future learning circles.

In terms of recording equipment, I learned that back-up means are a must. While my original intent was to supplement audio data recordings (gathered with a miniature voice recorder that also served as a learning circle talking piece) with my personal observations, my fear of missing out on relevant data and physical cues and expressions led me to visually record the sessions as well. This proved valuable when the final learning circle micro cassette got entangled in the recorder, literally chewing up the last



30 minutes of recorded learning circle data. At that point, I was able to rely on the videocassettes to supplement my personal notes.

As research progressed, I became very aware of the need to distinguish between the findings as they related to planning (the focus of the four learning circles), and as they related to the actual learning circle process. It should be reiterated that the findings herein are meant to reflect the possibilities surrounding learning circles as a vehicle for enhancing leadership capacity. In keeping with this analogy, if one compares this overall research project to a public transit system, the planning component was simply one of the destinations on the road to leadership capacity development; the actual vehicle for getting there was the learning circle forum. In some cases the line between the vehicle and the destination became blurred even for me.

Finally, I learned that true deep and rich learning is enabled by (a) a passion for the subject being studied or observed, and (b) the support of the leaders in our midst. Years ago, my father told me that if I found a job I loved, I would never have to work another day in my life. How very right he was. I count myself among a very privileged group of individuals who are passionate about their job and their peers. The ability to combine (a) my learning and (b) my passion for planning and people definitely contributed to the richness of this action research project. It made the learning fun. The support I received from the leaders within my organization only served to enhance this positive experience. As such, I would encourage all future learners to identify their passion and their support system prior to undertaking an extensive learning journey.

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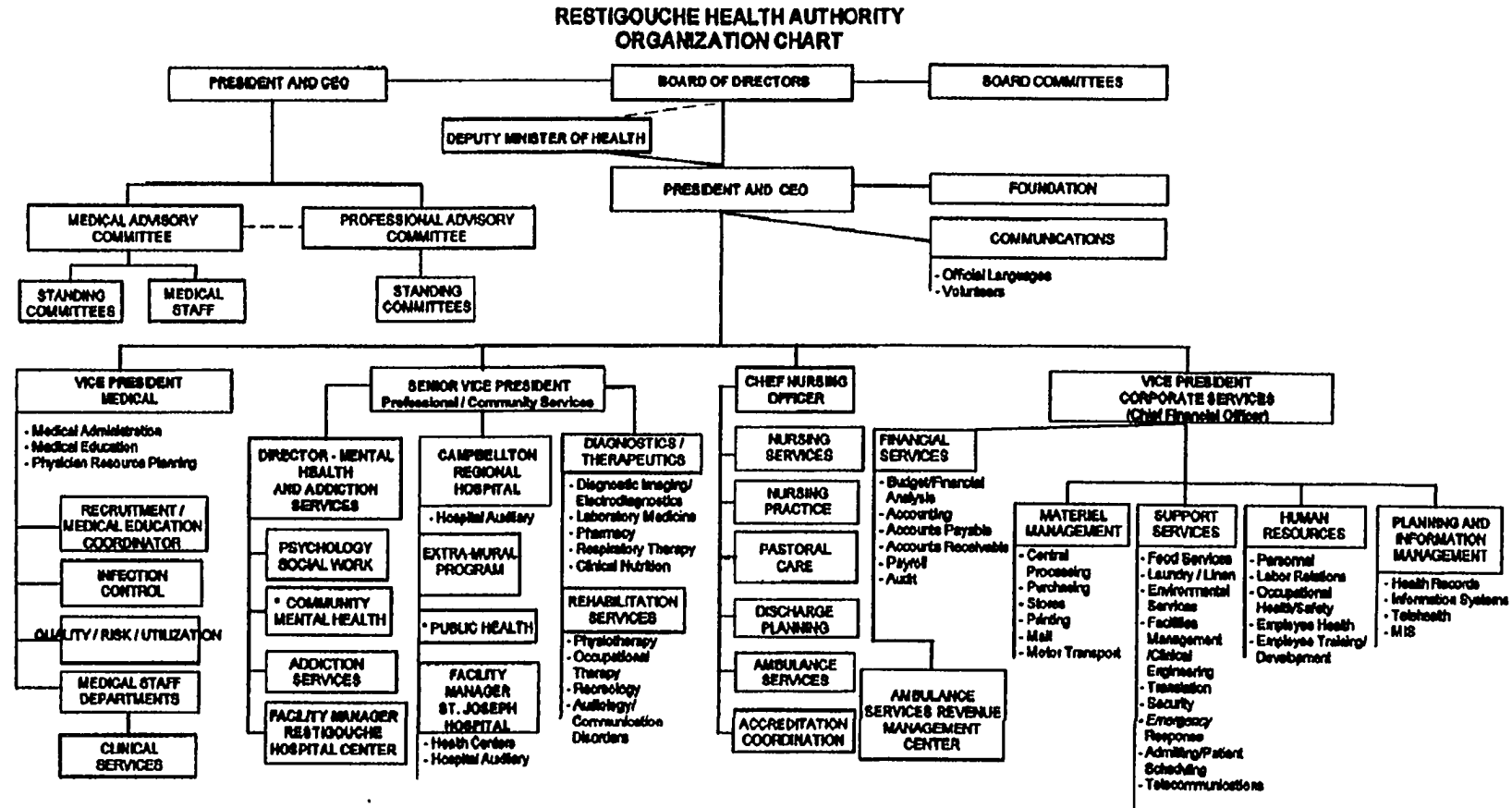
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# APPENDIX A: RHA ORGANIZATIONAL CHART



July 2004  
 \* Effective Date - To Be Determined

Source: Bellemare, C. (2005). Email personal communication.

## APPENDIX B:

### RHA – ETHICAL APPROVAL



Régie de la santé du Restigouche  
Restigouche Health Authority

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November 26, 2004.

Mrs. Ruth Lyons  
Chairperson  
Professional Advisory Committee

Mrs. Lyons :

Re : *Research Project " Whose turn to lead?" - increasing  
the organisation's leadership capacity by getting  
middle managers to share and learn together*

*The Ethics Committee, at its last meeting held on  
November 26, 2004, recommends the approval of the above  
Research Project by Mrs. Christine Cowan.*

Sincerely,

Claire Dennie  
Chairperson, Ethics Committee  
Restigouche Health Authority

CD\lga  
CC : Mrs. Christine Cowan

## APPENDIX C:

### PRE-LEARNING CIRCLE SURVEY

*C1A Invitation to Participate in Pre-Learning Circle Survey*

#### *Restigouche Health Authority Management Survey*

#### **“WHOSE TURN TO LEAD?” INCREASING THE ORGANIZATION’S LEADERSHIP CAPACITY BY GETTING MIDDLE MANAGERS TO SHARE AND LEARN TOGETHER**

*On March 24, 2005, an on-line survey link will be sent to all\* Restigouche Health Authority coordinators, managers and directors. This link will remain open for a period of one week, namely until April 1, 2005.*

*The survey should take approximately 20-30 minutes to complete, and the identity of respondents will remain anonymous. You will not be asked to research any of the survey questions\*\*; your spontaneous feedback is what will be sought. If you feel you do not have enough information to answer a question, simply indicate this clearly; do NOT leave a blank.*

*Data gathered from this survey will remain anonymous (see note below) and will be used for the purpose of developing an effective means by which management staff of the RHA can increase their leadership capacity, in this case through the implementation of learning circles that will explore the development of a planning model adapted to the needs of Middle Managers within the RHA.*

*NOTE: Your feedback is extremely valuable. Completed survey results will be exclusively available to the researcher (Christine Cowan) via a secure on-line site and will not be identifiable unless participants fill in the final section indicating their desire to be contacted for participation in learning circles. THANK YOU FOR COMPLETING THIS SURVEY. YOUR TIME IS GREATLY APPRECIATED.*

*\*With the exception of the RHA’s CEO, Vice Presidents, and members of the RHA Health and Business Plan Steering Committee.*

*\*Please take a few moments to read the attached background, glossary and consent information prior to completing the survey. All attached information will also be forwarded to you electronically together with the survey link on March 24, 2005.*

*“All things are difficult before they are easy.” (Thomas Fuller)*



C1B Invitation to Participate in Pre-Learning Circle Survey(French)

**Sondage destiné aux gestionnaires de la Régie de la santé du Restigouche**

**“WHOSE TURN TO LEAD?” INCREASING THE ORGANIZATION’S LEADERSHIP  
CAPACITY BY GETTING MIDDLE MANAGERS TO SHARE AND LEARN  
TOGETHER**

(titre de thèse)

*Le 24 mars 2005, un lien électronique sera envoyé à tous\* les coordonnateurs, chefs de service et directeurs de la Régie de la santé du Restigouche. Le lien demeurera actif pendant une période d'une semaine, soit jusqu'au 1er avril 2005.*

*Il devrait prendre entre 20 et 30 minutes à remplir et l'identité des participants demeurera anonyme. Prière de ne pas faire de recherche pour répondre à ces questions\*\* puisqu'on encourage votre rétroaction spontanée. Si vous sentez que vous n'avez pas suffisamment d'information pour répondre à une question, veuillez l'indiquer clairement plutôt que laisser des espaces vides.*

*Les données recueillies de ce sondage demeureront anonymes (voir note ci-dessous) et serviront à déterminer un moyen efficace pour augmenter la capacité de leadership des gestionnaires de la RSR, dans ce cas en organisant des cercles d'apprentissage qui examineront l'élaboration d'un modèle de planification adapté aux besoins des gestionnaires de la RSR.*

*NOTE : Votre rétroaction est très importante. Les résultats des sondages seront exclusivement disponibles au chercheur (Christine Cowan) au moyen d'un site en ligne sécurisée et ne seront pas identifiables sauf dans le cas des participants qui inscriront à la dernière question leurs coordonnées pour signaler leur désir de participer dans les cercles d'apprentissage prévus dans le cadre de cette recherche. JE VOUS REMERCIE DU TEMPS QUE VOUS ACCORDEREZ À CETTE DEMANDE, CELA EST GRANDEMENT APPRÉCIÉ.*

*\* à l'exception du président-directeur général, des vice-présidents et des membres du Comité directeur du plan de santé et d'affaires de la Régie de la santé du Restigouche.*

*\*\*Veuillez prendre quelques instants pour lire l'information ci-jointe (dont le glossaire et les détails sur le consentement) avant de remplir le sondage. Ces renseignements vous seront aussi acheminés électroniquement le 24 mars 2005 avec le lien électronique donnant accès au sondage.*

*« Les défis vous font découvrir sur vous-même des choses que vous ne soupçonniez pas. C'est ce qui vous grandit et vous pousse au-delà des limites. » (David Lyle Boren)*

C2A *On-line Invitation to Participate in Pre-Learning Circle Survey*

**Restigouche Health Authority Management Survey**

**“WHOSE TURN TO LEAD?” INCREASING THE ORGANIZATION’S LEADERSHIP  
CAPACITY BY GETTING MIDDLE MANAGERS TO SHARE AND LEARN  
TOGETHER**

*You are invited to take part in this on-line survey, intended for all\* Restigouche Health Authority coordinators, managers and directors.*

*It should take approximately 20-30 minutes to complete, and the identity of respondents will remain anonymous. Please do not research any of these questions\*\*; your spontaneous feedback is what is being sought. If you feel you do not have enough information to answer a question, please indicate this clearly; do NOT leave a blank.*

*Data gathered from this survey will remain anonymous (see note below) and will be used for the purpose of developing an effective means by which management staff of the RHA can increase their leadership capacity, in this case through the implementation of learning circles that will explore the development of a planning model adapted to the needs of Middle Managers within the RHA.*

*NOTE: Your feedback is extremely valuable. Completed survey results will be exclusively available to the researcher (Christine Cowan) via a secure on-line site and will not be identifiable unless participants fill in the final section of the survey indicating their desire to be contacted for participation in learning circles. THANK YOU FOR COMPLETING THIS SURVEY. YOUR TIME IS GREATLY APPRECIATED.*

*The secure on-line survey will be accessible from March 24, 2005 until March 31, 2005. Click on the following link to be automatically be re-directed to the survey site.*

***<http://learn.royalroads.ca/DLOpenQuestions/Questions.asp?intContainerID=4902&StyleSheet=artdeco.css>***

*\*with the exception of the RHA’s CEO, Vice Presidents, or members of the RHA Health and Business Plan Steering Committee.*

*\*\*Please take a few moments to read the attached background, glossary and consent information prior to completing the survey. Feel free to print it and follow along as you complete the survey.*

*“All things are difficult before they are easy.” (Thomas Fuller)*

C2A On-line Invitation to Participate in Pre-Learning Circle Survey(French)

**Sondage destiné aux gestionnaires de la Régie de la santé du Restigouche**

**“WHOSE TURN TO LEAD?” INCREASING THE ORGANIZATION’S LEADERSHIP  
CAPACITY BY GETTING MIDDLE MANAGERS TO SHARE AND LEARN  
TOGETHER**

(titre de thèse)

**Vous êtes invités à participer à un sondage en ligne destiné à tous\* les coordonnateurs, chefs de service et directeurs de la Régie de la santé du Restigouche.**

*Le sondage devrait prendre entre 20 et 30 minutes à remplir et **l’identité des participants demeurera anonyme.** Prière de ne pas faire de recherche pour répondre à ces questions\*\* puisqu’on encourage votre rétroaction spontanée. Si vous sentez que vous **n’avez pas suffisamment d’information** pour répondre à une question, veuillez l’indiquer clairement plutôt que laisser des espaces vides.*

*Les données recueillies de ce sondage demeureront non identifiables (voir note ci-dessous) et serviront à déterminer un moyen efficace pour augmenter la capacité de leadership des gestionnaires de la RSR, dans ce cas en organisant des cercles d’apprentissage qui examineront l’élaboration d’un modèle de planification adapté aux besoins des gestionnaires de la RSR.*

*NOTE : Votre rétroaction est très importante. Les résultats des sondages seront exclusivement disponibles au chercheur (Christine Cowan) au moyen d’un site en ligne sécurisée et ne seront pas identifiables sauf dans le cas des participants qui inscriront à la dernière question du sondage leurs coordonnées pour signaler leur désir de participer dans les cercles d’apprentissage prévus dans le cadre de cette recherche. JE VOUS REMERCIE DU TEMPS QUE VOUS ACCORDEREZ À CETTE DEMANDE, CELA EST GRANDEMENT APPRÉCIÉ.*

***Vous pourrez accéder directement au sondage en ligne à partir du 24 mars 2005 jusqu’au 31 mars 2005 en suivant le lien ci-dessous :***

***<http://learn.royalroads.ca/DLOpenQuestions/Questions.asp?intContainerID=4981&StyleSheet=artdeco.css>***

*\* à l’exception du président-directeur général, des vice-présidents et des membres du Comité directeur du plan de santé et d’affaires de la Régie de la santé du Restigouche.*

***\*\*Veuillez prendre quelques instants pour lire l’information ci-jointe (dont le glossaire et l’information sur le consentement) avant de remplir le sondage. Vous pouvez imprimer le tout pour faciliter votre tâche.***

***« Les défis vous font découvrir sur vous-même des choses que vous ne soupçonniez pas. C’est ce qui vous grandit et vous pousse au-delà des limites. »***

*David Lyle Boren*

*C3A Pre-Learning Circle Survey Background Information*

**“WHOSE TURN TO LEAD?” INCREASING THE ORGANIZATION’S LEADERSHIP CAPACITY BY GETTING MIDDLE MANAGERS TO SHARE AND LEARN TOGETHER**

**PROJECT BACKGROUND & CONSENT**

*This on-line survey is part of an action research project being carried out by Christine Cowan, researcher, in partial fulfillment of a thesis within the Master of Arts in Leadership and Training – Specialization in Justice and Public Safety, through Royal Roads University, in Victoria, B.C. The project’s purpose is to determine how learning circles could contribute to enhancing the leadership capacity of Middle Managers of the Restigouche Health Authority.*

*This survey is the first component of a three-part consultation process that can be broken down as follows:*

- 1. Initial survey (current activity)*
- 2. Learning circles (4-5)*
- 3. Post-survey (for learning circle participants)*

**Consent To Take Part In Initial Survey**

*Completing the initial on-line survey indicates your willingness to contribute to this action research project.*

**Consent To Take Part In Subsequent Learning Circles**

*Survey respondents who also wish to take part in the learning circle activities will be invited to indicate their consent by electronically signing\* the last survey question.*

*\*While sustained commitment is extremely valuable to the research outcomes, participation is entirely voluntary and all candidates are free to withdraw from this research project at any time.*

**Learning Circles: Agenda, Location, Time Requirements, Participants & Expectations**

*Participation in learning circles will require involvement in four (4) learning circle sessions lasting two (2) hours each between April 8 and 22, 2005 (see calendar below), and may require individual readings between sessions. A maximum of 12 participants will be eligible to take part in this process. Should the number of interested parties exceed 12, candidate selection will be based on cross-representation reflecting the diversity of RHA facilities, professional groups, and official languages. Survey respondents who consent to take part in learning circles will be contacted by the researcher by phone and will receive written confirmation of their desire to participate.*

*All learning circles (minimum of 4, maximum of 5, based on outcomes) will be held in the Soup N’ Sweets Restaurant conference room, located at 1 Savoie Avenue (next to the Atlantic SuperStore), from 8:00 – 10:00. Coffee and a continental breakfast will be served. Please note that for data compilation purposes, learning circle activities will be recorded using audio-visual support. All audio-visual material will be seen exclusively by the researcher and will be stored securely by said researcher for a period of two years following completion of research, after which it will be destroyed. All learning circle background material will be made available in English, but participants may express themselves in the language of their choice.*

<i>Friday, April 8</i>	<i>-</i>	<i>1st learning circle</i>
<i>Monday, April 11</i>	<i>-</i>	<i>2nd learning circle</i>
<i>Friday, April 15</i>	<i>-</i>	<i>3rd learning circle</i>
<i>Monday, April 18</i>	<i>-</i>	<i>4th learning circle</i>
<i>Friday, April 22</i>	<i>-</i>	<i>5th learning circle (alternate, or if applicable)</i>

*Interested participants will be provided with an agenda and any pre-requisite reading material 1 week prior to the first learning circle.*

**Project Validity And Academic/Organizational Sponsors**

*This project is being supervised by Mr. Scott Comber, PhD, on behalf of Royal Roads University. The internal project sponsor for the RHA is Mr. Jean Boulay, VP – Corporate Services and Chairperson of the RHA Health and Business Planning Steering Committee. Should you have any questions or concerns as to the authenticity of this research, please feel free to contact Mr. Boulay at 789-5037.*

**GLOSSARY**

**Business Planning**

*Often used interchangeably with “strategic planning,” the concept of business planning is in large part derived from a military context. Campbell (1993) defines it as a “process for defining organizational objectives, implementing strategies to achieve those objectives, and measuring the*

**effectiveness of those strategies.”** The process has been used sporadically in healthcare since the 1970s (Zuckerman, 1998).

*Under Section 32 of the New Brunswick Health Authorities Act, all health authorities within the Province of New Brunswick will prepare and submit to the Minister of Health and Wellness a regional health and business plan (2002).*

#### **Communication skills (as a competency)**

*The extent to which a leader “listens well and presents ideas when speaking and writing and uses practical skills in communication to encourage creativity among others” (Royal Roads University, 2003, p. 4).*

#### **Competency**

*The ability to perform activities to the standards required in employment, using an appropriate mix of knowledge, skill and attitude. All three aspects must be present if someone is to be effective in the workplace. To improve competence, you need to increase not only your knowledge, but also your understanding of how the knowledge can be applied, and your skill in applying it (Office of the Deputy Chief of Staff G1 - Civilian Personnel Directorate, retrieved February 26, 2005 at [http://www.per.hqusaureur.army.mil/cpd/Leader\\_Development/whatiscompetence.htm](http://www.per.hqusaureur.army.mil/cpd/Leader_Development/whatiscompetence.htm)).*

#### **Creativity (as a competency)**

*The extent to which a leader is “far-sighted, open to exploring and developing new and imaginative ideas, and willing to take risks in testing creative ideas under conditions of uncertainty” (Royal Roads University, 2003, p. 3).*

#### **Gap Analysis**

*A formal means of identifying and correcting shortfalls between desired and actual levels of performance. Sometimes referred to as ‘the space between where we are and where we want to be’, it can be undertaken as a means of bridging that space (retrieved February 26, 2005 from [http://www.catalyze.co.uk/gapanalysis\\_body.htm](http://www.catalyze.co.uk/gapanalysis_body.htm)).*

#### **Leadership Capacity (as a competency)**

*The ability to increase “the extent to which the leader is an aware, meaningful, responsible participant open to learning – willing and able to explore, discover, and develop competencies in a variety of areas within and with others while living a balanced and creative life” (Royal Roads University, 2003, p. 8).*

#### **Learning Circles**

*Forum in which a group\* of five to fifteen individuals gather regularly for about two hours at a time to **learn about and discuss issues that are important to them and their milieu** (Learning Circles Australia, 2005), to express concerns and ideas, share their knowledge and learn together. Some very basic examples of learning circles are musician jam sessions (Comber, February 21, 2005) and book clubs.*

*\*While assisted by a facilitator, these groups are for the most part self-led and do not rely on a lecturer or an expert to guide the discussions. Their purpose is to serve as an empowering means of bringing about learning and social change at the learners’ pace. Ultimately, they aim to come up with an action plan for the problem at hand (Boileau, 2002).*

#### **Mission**

*Defines “who we are, what we do, who we serve, and why we exist” (Bart, 2002).*

#### **Organizations and Organizational Change (as a competency)**

*The extent to which a leader understands the structural and systemic nature of organizations and organizational change and can assist others as they apply that understanding to explore, develop, and accomplish creative organizational objectives in specific organizations and among organizations in local and global contexts (Royal Roads University, 2003, p. 7).*

**Research and Inquiry (as a competency)**

*The extent to which the leader understands and can use sophisticated approaches to research to enhance her or his own learning, to work with others as they do the same, and to apply the results of research on various levels and in a variety of organizations within and with others to enhance knowledge, decision-making, and performance (Royal Roads University, 2003, p. 5).*

**Systems Theory, Thinking, and Planning (as a competency)**

*The extent to which the leader understands and applies systems theory and systems thinking within and with others as he or she explores relationships among individuals in groups and teams, among groups in organizations, organizations in national and global settings, and in a variety of local and global ecosystems (Royal Roads University, 2003, p. 6).*

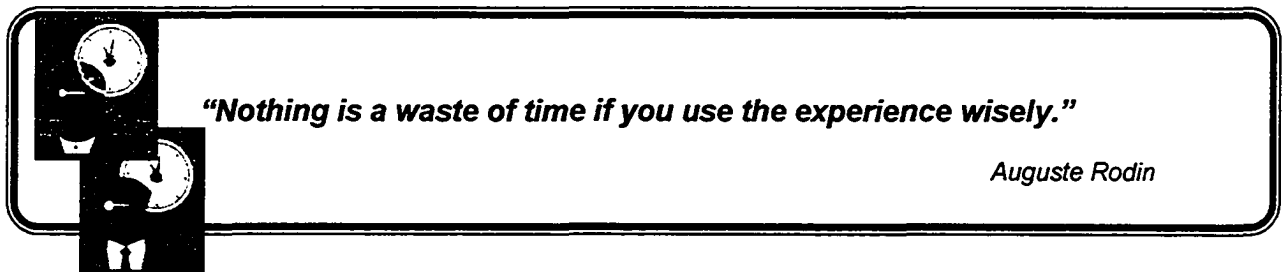
**Team-Building Skills (as a competency)**

*The extent to which a leader encourages healthy and open social interaction among individuals, facilitates collaboration, and encourages group organization and group achievement (Royal Roads University, 2003, p. 4).*

**Vision**

*Defines "who and where we want to be" (Bart, 2002).*

Christine Cowan, BA  
Researcher



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*C3B Pre-Learning Circle Survey Background Information (French)*

**Projet de recherche intitulé :  
"WHOSE TURN TO LEAD?" INCREASING THE ORGANIZATION'S LEADERSHIP CAPACITY BY GETTING  
MIDDLE MANAGERS TO SHARE AND LEARN TOGETHER**

**INFORMATION RELATIVE AU PROJET ET CONSENTEMENT À Y PARTICIPER**

Ce sondage en ligne fait partie d'un projet de recherche effectué par Christine Cowan, chercheur, dans le cadre de sa thèse (Master of Arts in Leadership and Training – Specialization in Justice and Public Safety, Royal Roads University, Victoria, B.C.). La raison d'être du projet est de déterminer si les cercles d'apprentissage peuvent contribuer à la capacité de leadership des gestionnaires de la Régie de la santé du Restigouche.

Ce sondage est la première partie d'un processus de consultation constitué de trois activités de recherche, soit :

1. Un premier sondage (activité actuelle)
2. Cercles d'apprentissage (4-5)
3. Un sondage destiné aux participants des cercles d'apprentissage

**Consentement à participer au premier sondage**

En remplissant ce premier sondage en ligne, vous indiquez votre consentement à participer à ce projet de recherche.

**Consentement à participer aux cercles d'apprentissage**

Les participants au 1<sup>er</sup> sondage qui désirent de plus participer aux cercles d'apprentissage pourront signaler leur consentement en apposant électroniquement\* leur signature à la dernière question du sondage en ligne.

\*Quoiqu'un engagement soutenu est d'une grande importance au succès des résultats de la recherche, votre participation est entièrement volontaire et tout participant est libre de se retirer du projet de recherche à tout moment.

**Cercles d'apprentissage : Ordre du jour, endroit, horaire, participants et attentes**

La participation dans les cercles d'apprentissage obligera les participants à assister à quatre cercles d'apprentissage d'une durée de deux heures chacun entre le 8 avril et le 22 avril 2005 (voir calendrier ci-dessous). Les participants pourraient être appelés à lire de la documentation entre les séances. Un maximum de douze participants seront admissibles au processus. Si le nombre de personnes intéressées dépasse douze, la sélection des candidats se fera de façon à assurer la diversité des établissements, des groupes professionnels et des langues officielles de la RSR. Le chercheur communiquera par téléphone avec les répondants au sondage ayant indiqué leur consentement à participer dans les cercles d'apprentissage et confirmera leur participation par écrit.

Tous les cercles d'apprentissage (minimum de quatre, maximum de cinq, selon les résultats) se dérouleront dans la salle de conférence située à l'arrière du Restaurant Soup N' Sweets, (situé au 1, avenue Savoie, à côté du Atlantic SuperStore), de 8 heures à 10 heures. Le café et un petit déjeuner seront servis. Veuillez noter que pour les besoins de compilation des données, les cercles d'apprentissage seront enregistrés à l'aide de support audio-visuel. Tout matériel ainsi enregistré sera vu exclusivement par le chercheur et sera conservé pour une période de deux ans suivant la recherche, après quoi il sera détruit. Toute la documentation pour les cercles d'apprentissage sera distribuée en anglais, mais les participants pourront s'exprimer dans la langue de leur choix.

Le vendredi 8 avril	-	1er cercle d'apprentissage
Le lundi 11 avril	-	2e cercle d'apprentissage
Le vendredi 15 avril	-	3e cercle d'apprentissage
Le lundi 18 avril	-	4e cercle d'apprentissage
Le vendredi 22 avril	-	5e cercle d'apprentissage (s'il y a lieu)

Les participants intéressés recevront l'ordre du jour et toute documentation pré-requise une semaine avant le premier cercle d'apprentissage.



**Validité du projet et parrains académiques et organisationnels**

Ce projet est surveillé par M.Scott Comber, PhD, au nom de Royal Roads University. Le parrain interne du projet pour la RSR est M. Jean Boulay, V.-P. aux Services généraux et président du Comité directeur du plan de santé et d'affaires de la RSR. Si vous avez des questions ou préoccupations relativement à la véracité de ce projet, vous pouvez communiquer avec M. Boulay au 789-5037.

## GLOSSAIRE

### **Analyse des écarts (« gap analysis »)**

Un moyen formel d'identifier l'écart entre le degré désiré et le degré réel de rendement. Cette analyse peut être entreprise pour entamer l'élimination de cet écart (extrait le 26 février 2005 du site [http://www.catalyze.co.uk/gapanalysis\\_body.htm](http://www.catalyze.co.uk/gapanalysis_body.htm)).

### **Capacité de leadership (en tant que compétence)**

**Le degré selon lequel le leader (chef de file) est un participant sensibilisé, délibéré et responsable, ouvert à l'apprentissage - et selon lequel il est ouvert à et en mesure d'examiner, de découvrir et d'élaborer des compétences dans divers milieux chez les autres et avec les autres tout en profitant d'une vie équilibrée et créative.** (Royal Roads University, 2003, p. 8).

### **Cercles d'apprentissage**

« Méthodologie éprouvée en éducation populaire dans plusieurs traditions, le Cercle d'apprentissage propose un lieu où des acteurs de milieux ou d'horizons différents s'assemblent pour mettre en commun leurs expériences et leurs connaissances dans le but d'approfondir ensemble leur compréhension d'une question. Animés d'une préoccupation commune, les membres d'un cercle d'apprentissage s'engagent dans une démarche de réflexion d'une durée définie, afin de développer ensemble une perspective et un savoir nouveau, et envisager des moyens de transcrire cette vision commune dans l'action, individuelle et collective, en faveur de la transformation sociale » (extrait le 18 mars 2005 du site [http://instdev.concordia.ca/leadership\\_f/cercle.html](http://instdev.concordia.ca/leadership_f/cercle.html)).

\*ces groupes sont constitués de cinq à quinze personnes (Learning Circles Australia, 2005). De simples exemples de cercle d'apprentissage sont les séances de musique « jam » et les groupes de lecture (Comber, le 21 février 2005).

### **Cohésion d'équipe (« teamwork » - en tant que compétence)**

Le degré selon lequel le leader (chef de file) encourage une interaction sociale saine et ouverte et selon lequel il facilite la collaboration et encourage le travail et le succès du groupe (Royal Roads University, 2003, p. 4).

### **Communication (en tant que compétence)**

Le degré d'efficacité avec lequel le leader (chef de file) écoute et exprime verbalement et par écrit les idées et utilise des compétences pratiques en communication pour promouvoir la créativité chez les autres (Royal Roads University, 2003, p. 4).

### **Compétence**

**La capacité d'effectuer des activités selon les normes requises par l'emploi à l'aide d'une combinaison adéquate de connaissances, d'aisance et d'attitude.** Ces trois dernières qualités sont essentielles à l'efficacité dans le milieu de travail. Afin d'améliorer le degré de compétence, il faut augmenter non seulement les connaissances, mais aussi sa compréhension de la façon dont on les applique et l'aisance avec laquelle on les applique (Office of the Deputy Chief of Staff G1 - Civilian Personnel Directorate, extrait le 26 février 2005 du site [http://www.per.hqusaureur.army.mil/cpd/Leader\\_Development/whatiscompetence.htm](http://www.per.hqusaureur.army.mil/cpd/Leader_Development/whatiscompetence.htm)).

**Créativité (en tant que compétence)**

*Le degré selon lequel un chef de file est prévoyant, ouvert à examiner et à élaborer des idées innovatrices, et disposé à courir le risque de concevoir des idées créatives dans un contexte d'incertitude (Royal Roads University, 2003, p. 3).*

**Mission**

*Un énoncé qui définit qui nous sommes, ce que nous faisons, la clientèle que nous servons et la raison pour laquelle nous existons (Bart, 2002).*

**Organismes et changement organisationnel (en tant que compétence)**

*Le degré selon lequel le leader (chef de file) comprend la nature structurelle et systémique de l'organisme et du changement organisationnel et selon lequel il peut aider les autres à appliquer cette compréhension pour examiner, élaborer et atteindre des objectifs organisationnels dans un organisme donné et entre organismes dans un contexte local et mondial (Royal Roads University, 2003, p. 7).*

**Planification d'affaires**

*Souvent utilisé comme synonyme de « planification stratégique », la planification d'affaires découle en grande partie du contexte militaire. Selon Campbell (1993), il s'agit d'un processus servant à définir les objectifs de l'organisme, mettre en place les stratégies nécessaires pour atteindre ces objectifs et mesurer l'efficacité de ces stratégies .” Le processus est utilisé de façon sporadique dans les soins de santé depuis les années 1970 (Zuckerman, 1998).*

*Conformément à la partie 32 de la Loi sur les régies de la santé du Nouveau-Brunswick, toute régie dans la province devra élaborer et soumettre au ministre de la Santé et du Mieux-être un plan régional de santé et d'affaires (2002).*

**Recherche et investigation (en tant que compétence)**

*Le degré selon lequel le leader (chef de file) comprend et peut utiliser des approches sophistiquées de recherche pour approfondir ses propres connaissances et pour travailler avec d'autres qui font de même et selon lequel il peut appliquer les résultats de la recherche à divers paliers de l'organisme et dans une variété d'organismes pour améliorer les connaissances, la prise de décision et le rendement. (Royal Roads University, 2003, p. 5).*

**Théorie et pensée des systèmes et planification (en tant que compétence)**

*Le degré selon lequel le leader (chef de file) comprend et applique la théorie des systèmes et la pensée des systèmes chez les autres et avec les autres lorsqu'il examine les relations entre individus dans des groupes et équipes aux seins d'organisations, dans des organisations nationales et internationales et dans une variété d'écosystèmes locaux et mondiaux. (Royal Roads University, 2003, p. 6).*

**Vision**

*Énoncé qui définit qui nous voulons être et la direction que nous voulons prendre (Bart, 2002).*

*Christine Cowan, BA  
Chercheur*



**« Je n'invente rien, je redécouvre. »**

*Auguste Rodin*

## Références

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*C4A Pre-Learning Circle Survey Questionnaire*

**Survey Information: MALT-JPSL\_2003\_Leadership Capacity Survey**

This on-line survey is intended for all Restigouche Health Authority coordinators, managers and directors. Data gathered from this survey will be used for the purpose of developing an effective means by which management staff of the RHA can increase their leadership capacity, in this case through the implementation of learning circles that will explore the development of a planning model adapted to the needs of Middle Managers within the RHA. This Survey is anonymous.

**Helpful Information:**

1. To complete this Survey form, you will need to use Internet Explorer 5 or greater. [Your Browser: IE 6.0]
2. To complete this Survey form, you will need to have Javascript enabled. [view instructions]
3. Once you have completed this form, you will need to click the "Record Response" button. If you do not click this button, your response will not be recorded.
4. If you are using Internet Explorer 5 or greater with Javascript enabled and you have clicked the "Record Response" button, but you are still encountering problems, please note the steps you followed and what you saw on your screen. Providing this information to the Computer Service Desk will enable us to diagnose and resolve this problems faster. If you have any questions about this questionnaire contact the Owner or, for technical questions, the RRU Helpdesk.

**MALT-JPSL\_2003\_Leadership Capacity Survey-Survey Form**

**SECTION 1 - PLANNING WITHIN THE RESTIGOUCHE HEALTH AUTHORITY**  
Overview of current planning activities by middle managers within the RHA

1) I have developed a plan or have undertaken planning initiatives within my department or program. NB: IF YOU ANSWER "YES," PROCEED TO QUESTION 1c IF YOU ANSWER "NO," COMPLETE QUESTIONS 1a & 1b, THEN SKIP TO SECTION 2, QUESTION 2c

- Yes
- No

1a) If no, please elaborate, i.e.

- I do not have the tools I need for planning activities
- I do not have the time I need for planning activities
- I do not have the knowledge I need for planning activities
- I do not have the organizational support I need for planning activities
- Other

1b) If you answered "Other" to question 1a, please elaborate  
(Maximum 4000 characters)

1c) If yes, my plan is

- complete
- in progress

1d) My plan is

- A formal stand-alone document
- Integrated into other work plans or documents

1e) My plan is

- A one-year plan
- A three-year rolling plan
- Other

1f) If you answered "Other" to question 1e, please elaborate  
(Maximum 4000 characters)

1g) My plan includes (check all that apply)

- A departmental/program mission or purpose statement
- A departmental/program vision statement
- A departmental/program description of current state
- A departmental/program description of future state projections
- A gap analysis for projected change initiatives
- Other

1h) If you answered "Other" to question 1g, please elaborate  
(Maximum 4000 characters)

1i) I used the following tools (documents, processes, resources, etc.) to develop my plan  
(please check all that apply)

- RHA Mission / Vision / Guiding Principles
- 2004 RHA Health Status Profile
- Departmental/program Q.I. Action Plan
- Government of New Brunswick Provincial Health Plan (2004-2008)
- Government of New Brunswick Balanced Scorecard Report
- Management Information System (MIS) Data
- Department of Health and Wellness Annual Report
- Canadian Council on Health Standards Accreditation Standards
- Romanov Report
- Best Practice Guidelines
- Other

1j) If you answered "Other" to question 1i, please elaborate  
(Maximum 4000 characters)

1k) I felt these tools fully met my needs

- Yes
- No

1l) If no, I feel the following tools might be helpful in the development of a plan (feel free to list more than one or stipulate that you do not know)  
(Maximum 4000 characters)

**SECTION 2 - MANAGING WITHIN THE RESTIGOUCHE HEALTH AUTHORITY**  
This section applies to management planning challenges within the Restigouche Health Authority

2a) I would describe my level of satisfaction with my plan to date as a management tool as

- Extremely dissatisfied
- Dissatisfied
- Satisfied
- Extremely satisfied

2b) The reason(s) for my level of satisfaction/dissatisfaction is (are)  
(Maximum 4000 characters)

2c) I feel that the development of a plan can contribute to my ability to lead and manage within the Restigouche Health Authority

- Yes
- No

2d) If no, I would make the following recommendations for increasing my ability to lead and manage within the Restigouche Health Authority  
(Maximum 4000 characters)

2e) I feel that formal planning is an effective mechanism by which to achieve organizational success

- Yes
- No

2f) If no, I would make the following recommendations for increasing organizational success  
(Maximum 4000 characters)

**SECTION 3 - LEADING AND LEARNING WITHIN THE RESTIGOUCHE HEALTH AUTHORITY**

This section explores the competencies required for planning and the level of interest expressed by managers of the RHA to further develop these competencies

3a) I believe the following leadership competencies are required for planning (please indicate all that apply)

- Creativity
- Team-building skills
- Communication skills
- Research and Inquiry
- Systems Theory, Thinking and Planning
- Organizations and Organizational Change
- Other

3b) If you answered "Other" to question 3a, please elaborate  
(Maximum 4000 characters)

3c) I believe I possess the following leadership competencies (please check all that apply)

- Creativity
- Team-building skills
- Communication skills
- Research and Inquiry
- Systems Theory, Thinking and Planning
- Organizations and Organizational Change
- Other

3d) If you answered "Other" to question 3c, please elaborate  
(Maximum 4000 characters)

3e) I would like to further develop the following leadership competencies (please check all that apply)

- Creativity
- Team-building skills
- Communication skills
- Research and Inquiry
- Systems Theory, Thinking and Planning
- Organizations and Organizational Change
- Other

3f) If you answered "Other" to question 3e, please elaborate  
(Maximum 4000 characters)

3g) What processes or forums, if any, do I currently have to enhance planning leadership competencies? (please check all that apply)

- Departmental meetings
- Management forums
- Professional peer group
- In-house educational sessions / programs
- External educational sessions/programs
- Provincial meetings
- Superior (manager, director, vp, etc.)
- Mentor
- None
- Other

3h) If you answered "Other" to question 3g, please elaborate  
(Maximum 4000 characters)

3i) I would presently rate my level of satisfaction around the organizational planning process as

- Extremely unsatisfactory
- Unsatisfactory
- Satisfactory
- Extremely satisfactory

3j) The reason(s) for my level of satisfaction/dissatisfaction is (are)  
(Maximum 4000 characters)

3k) I feel that regular gatherings with my peers to learn about and discuss current planning issues could contribute to increasing my planning leadership competencies within the Restigouche Health Authority

- Yes
- No

3l) The way(s) in which I feel these gatherings could contribute to or hinder my ability to increase my planning leadership competencies within the Restigouche Health Authority is (are)  
(Maximum 4000 characters)



3m) If I could choose to focus the learning circles on one specific area of planning, it would be (please check only 1):

- Preparing a business case proposal
- Integrating the planning process into my work schedule
- Developing a departmental/program planning model/template
- Identifying supporting literature and processes that can contribute to planning in healthcare
- Tying departmental/program needs into organizational strategic initiatives
- Don't know
- Other

3n) If you answered "Other" to question 3m, please elaborate  
(Maximum 4000 characters)

3o) I would be interested in participating in a learning circle aimed at increasing leadership capacity within the Restigouche Health Authority by exploring the development of a viable planning model reflective of the needs of RHA Management staff

- Yes
- No

3p) If yes, by writing my name, title, facility and extension in the blank space below, I indicate my desire and consent to take part as a research subject in a learning circle exercise being conducted within the framework of a thesis entitled "WHOSE TURN TO LEAD?" INCREASING THE ORGANIZATION'S LEADERSHIP CAPACITY BY GETTING MIDDLE MANAGERS TO SHARE AND LEARN TOGETHER. I also understand that by providing this information I am indicating my consent for the researcher, Christine Cowan, to contact me.

(Maximum 4000 characters)

*C4B Pre-Learning Circle Survey Questionnaire(French)*

Survey Information: MALT-JPSL\_2003\_Leadership Capacity Survey\_FR

Ce sondage est destiné à tous les coordonnateurs, gestionnaires et directeurs de la Régie de la santé du Restigouche. Les données recueillies de ce sondage seront utilisées dans le but d'élaborer un moyen efficace par lequel les gestionnaires de la RSR peuvent augmenter leur capacité de leadership, dans ce cas en mettant en place des cercles d'apprentissage qui examineront l'élaboration d'un plan d'affaires adapté aux besoins des gestionnaires de la RSR. Ce sondage est anonyme. This Survey is anonymous.

Helpful Information:

1. To complete this Survey form, you will need to use Internet Explorer 5 or greater. [Your Browser: IE 6.0]
2. To complete this Survey form, you will need to have Javascript enabled. [view instructions]
3. Once you have completed this form, you will need to click the "Record Response" button. If you do not click this button, your response will not be recorded.
4. If you are using Internet Explorer 5 or greater with Javascript enabled and you have clicked the "Record Response" button, but you are still encountering problems, please note the steps you followed and what you saw on your screen. Providing this information to the Computer Service Desk will enable us to diagnose and resolve this problems faster.

If you have any questions about this questionnaire contact the Owner or, for technical questions, the RRU Helpdesk.

MALT-JPSL\_2003\_Leadership Capacity Survey\_FR-Survey Form

SECTION 1 - PLANIFICATION AU SEIN DE LA RÉGIE DE LA SANTÉ DU RESTIGOUCHE

Survol des activités actuelles de planification par les gestionnaires de la RSR

1) J'ai élaboré un plan ou j'ai entamé des activités de planification dans le cadre de mon service ou programme. NB: DANS L'AFFIRMATIVE, VEUILLEZ PROCÉDER À LA QUESTION 1c, DANS LA NÉGATIVE, VEUILLEZ REMPLIR LES QUESTIONS 1a ET 1b, PUIS PROCÉDER À LA SECTION 2, QUESTION 2c

- Oui
- Non

1a) Dans la négative, veuillez élaborer, p. ex. :

- Je n'ai pas les outils nécessaires pour entreprendre des activités de planification
- Je n'ai pas le temps nécessaire pour entreprendre des activités de planification
- Je n'ai pas les connaissances nécessaires pour entreprendre des activités de planification
- Je n'ai pas le soutien organisationnel nécessaire pour entreprendre des activités de planification
- Autres

1b) Si vous avez répondu "Autres" à la question 1a, veuillez élaborer :  
(Maximum 4000 characters)

1c) Dans l'affirmative, mon plan est

- complet
- en voie de développement

1d) Mon plan est :

- un document en soi
- intégré à d'autres documents ou plans de travail

1e) Mon plan est :

- un plan d'un an
- un plan triennal vivant
- autre

1f) Si vous avez répondu "Autre" à la question 1e, veuillez élaborer :  
(Maximum 4000 characters)

1g) Mon plan comprend (veuillez cocher chacun qui s'applique) :

- Un énoncé de mission pour mon service, unité ou programme
- Un énoncé de vision pour mon service, unité ou programme
- Une description de mon service, unité ou programme tel qu'il ou qu'elle existe actuellement
- Une description du potentiel de mon service, unité ou programme
- Une analyse des écarts ("gap analysis")
- Autres

1h) Si vous avez répondu "Autres" à la question 1g, veuillez élaborer :  
(Maximum 4000 characters)

1i) J'ai utilisé les outils suivants (documents, processus, ressources, etc.) dans l'élaboration de mon plan (veuillez cocher toutes les réponses qui s'appliquent) :

- Mission, vision et principes directeurs de la RSR
- Profil d'état de la santé de la RSR (2004)
- Plan d'action de gestion de la qualité pour les services et programmes
- Plan provincial de la santé du Gouvernement du Nouveau-Brunswick (2004-2008)
- Fiche de rendement équilibré du Gouvernement du Nouveau-Brunswick
- Données du système de gestion de l'information (données "MIS") de la RSR
- Rapport annuel du Ministère de la santé et du mieux-être
- Normes du Conseil canadien d'agrément des normes de la santé
- Rapport Romanov
- Normes d'exercice ("Best Practice Guidelines")
- Autres

1j) Si vous avez répondu "Autres" à la question 1i, veuillez élaborer :  
(Maximum 4000 characters)

1k) Ces outils ont entièrement répondu à mes besoins :

- Oui
- Non

1l) Dans la négative, je crois que les outils suivants pourraient être utiles dans l'élaboration d'un plan (veuillez énumérer tous qui s'appliquent ou clairement indiquer si vous ne savez pas) :  
(Maximum 4000 characters)

## SECTION 2 - GESTION AU SEIN DE LA RÉGIE DE LA SANTÉ DU RESTIGOUCHE

Cette section examine les défis qui existent relativement à la planification pour les gestionnaires de la Régie de la santé du Restigouche

2a) Mon degré de satisfaction avec mon plan à ce jour en tant qu'outil de gestion est le suivant :

- Extrêmement insatisfait
- Insatisfait
- Satisfait
- Extrêmement satisfait

2b) La raison pour mon degré de satisfaction ou d'insatisfaction est la suivante :  
(Maximum 4000 characters)

2c) Je crois que l'élaboration d'un plan peut contribuer à ma capacité de gérer et d'agir en tant que chef de fil ("leader") au sein de la Régie de la santé du Restigouche

- Oui
- Non

2d) Dans la négative, je ferais les recommandations suivantes pour augmenter ma capacité de

gérer et d'agir en tant que chef de file ("leader") au sein de la Régie de la santé du Restigouche  
(Maximum 4000 characters)

2e) Je suis d'avis que la planification formelle est un moyen efficace pour la RSR d'atteindre le succès organisationnel

- Oui
- Non

2f) Dans la négative, je ferais les recommandations suivantes pour contribuer au succès de l'organisation

(Maximum 4000 characters)

### SECTION 3 - LEADERSHIP ET APPRENTISSAGE AU SEIN DE LA RÉGIE DE LA SANTÉ DU RESTIGOUCHE

Cette section examine les compétences nécessaires à la planification et le degré d'intérêt exprimé par les gestionnaires de la RSR pour augmenter ces compétences

3a) Je crois que les compétences de chef de file (leadership) suivantes sont essentielles à la planification (veuillez cocher toutes les réponses qui s'appliquent) :

- La créativité
- La cohésion d'équipe ("team-building skills")
- La communication
- La recherche et l'investigation
- La théorie et la pensée des systèmes et la planification
- La compréhension des organismes et du changement organisationnel
- Autres

3b) Si vous avez répondu "Autres" à la question 3a, veuillez élaborer :

(Maximum 4000 characters)

3c) Je crois que je possède les compétences de chef de file suivantes (veuillez cocher toutes les réponses qui s'appliquent) :

- La créativité
- La cohésion d'équipe ("team-building skills")
- La communication
- La recherche et l'investigation
- La théorie et la pensée des systèmes et la planification
- La compréhension des organismes et du changement organisationnel
- Autres

3d) Si vous avez répondu "Autres" à la question 3c, veuillez élaborer :

(Maximum 4000 characters)

3e) J'aimerais développer davantage les compétences suivantes de chef de file (veuillez cocher toutes les réponses qui s'appliquent) :

- La créativité
- La cohésion d'équipe ("team-building skills")
- La communication
- La recherche et l'investigation
- La théorie et la pensée des systèmes et la planification
- La compréhension des organismes et du changement organisationnel
- Autres

3f) Si vous avez répondu "Autres" à la question 3e, veuillez élaborer :  
(Maximum 4000 characters)

3g) Quels processus, personnes ou structures sont actuellement à ma disposition pour augmenter mes compétences de chef de file (leadership) en ce qui concerne la planification? (veuillez cocher toutes les réponses qui s'appliquent)

- Réunions de service
- Séances d'information pour gestionnaires ("forums")
- Groupes de paires professionnels
- Séances ou programmes de formation internes
- Séances ou programmes de formation externes
- Réunions provinciales
- Supérieur (e), c.-à-d. chef de service, directeur (directrice), v.-p., etc.
- Mentor
- Aucun(e)
- Autres

3h) Si vous avez répondu "Autres" à la question 3g, veuillez élaborer :  
(Maximum 4000 characters)

3i) Je décrirais actuellement mon degré de satisfaction par rapport au processus de planification organisationnel comme :

- Extrêmement insatisfaisant
- Insatisfaisant
- Satisfaisant
- Extrêmement satisfaisant

3j) La raison (les raisons) pour mon degré de satisfaction ou d'insatisfaction est la suivante (sont les suivantes) :

(Maximum 4000 characters)

3k) Je crois que des rencontres régulières avec mes paires pour discuter des questions actuelles relatives à la planification et pour augmenter mes connaissances à ce sujet pourraient augmenter mes compétences de chef de file en ce qui concerne la planification au sein de la Régie de la santé du Restigouche

- Oui
- Non

3l) Veuillez élaborer sur la façon que vous croyez que ces rencontres pourraient contribuer ou nuire à augmenter vos compétences de chef de file en matière de planification au sein de la Régie de la santé du Restigouche :

(Maximum 4000 characters)

3m) Si j'avais à choisir comme sujet des cercles d'apprentissage un aspect particulier de la planification, le sujet choisi serait le suivant (veuillez cocher une seule réponse) :

- L'élaboration d'un plan d'analyse de rentabilité
- L'intégration du processus de planification aux activités de travail quotidiennes
- L'élaboration d'un gabarit/modèle de plan de service / programme
- L'identification de documentation et processus utiles à la planification en soins de santé
- Faire correspondre les besoins de service / programme aux initiatives stratégiques de l'organisme
- Je ne sais pas
- Autre

3n) Si vous avez répondu "Autre" à la question 3m, veuillez élaborer :

(Maximum 4000 characters)

3o) Je serais intéressé à participer dans un cercle d'apprentissage visant augmenter la capacité de leadership au sein de la Régie de la santé du Restigouche en examinant l'élaboration d'un modèle de planification viable représentatif des besoins des gestionnaires de la RSR

- Oui
- Non

3p) Dans l'affirmative, l'inscription de mon nom, de mon titre, de mon établissement et de mon local dans l'espace prévu ci-dessous confirment mon désir et mon consentement de participer en tant que sujet de recherche dans des activités de cercle d'apprentissage. Ces dernières seront effectuées dans le cadre d'une thèse intitulée "WHOSE TURN TO LEAD?" INCREASING THE ORGANIZATION'S LEADERSHIP CAPACITY BY GETTING MIDDLE MANAGERS TO SHARE AND LEARN TOGETHER. Je comprends qu'en fournissant ces renseignements, j'autorise le chercheur, Christine Cowan, à communiquer avec moi. Je comprends aussi que ces cercles d'apprentissage se dérouleront en anglais.

(Maximum 4000 characters)

*C5 Pre-Learning Circle Survey Results*

*"WHOSE TURN TO LEAD?" INCREASING THE ORGANIZATION'S LEADERSHIP CAPACITY BY GETTING MIDDLE MANAGERS TO SHARE AND LEARN TOGETHER*

MALT-JPSL\_2003\_Leadership Capacity Survey  
April 9, 2005 Summary Results – Not for distribution

***Summary Results from  
RHA Management Survey  
On Leadership Capacity***

***Working Document  
For Learning Circle Participants***

The following is a summary of results from the Leadership Capacity Survey distributed to RHA Management staff on March 24, 2005. It is meant to serve as background information for learning circle (LC) participants in an effort to focus LC discussions and action items. If you have any questions or comments, please do not hesitate to contact me.

An invitation to complete the survey was sent to a total of 84 middle management staff within the RHA. In all 15 responses were initially received and included in data compilation, bringing initial overall response rate to 18%<sup>1</sup>, which was slightly lower than the researcher had hoped for. However, given that the survey aimed to obtain **spontaneous** feedback from respondents who felt strongly about the survey topic, she opted not to prod respondents or send out a reminder<sup>2</sup> to increase response rates.

Following the on-line survey close date, 4 additional middle management staff contacted the researcher to indicate their interest in completing the survey. As such, and following approval by the project supervisor, Dr. Scott Comber, MBA, Ph.D, the researcher re-opened the on-line survey site for a period of 24 hours. This brought total response rates up to 23%.

The information contained herein is a summary of findings based on the feedback received from RHA middle management respondents. The researcher would like to acknowledge this feedback, and the interest shown by these colleagues.

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<sup>1</sup> According to David Nachmias (1992, Research methods in the social sciences), response rates to surveys typically vary between 20 and 40%.

<sup>2</sup> According to Gi Woong Yung and Craig W. Trumbo (2000, Comparative Response to a Survey Executed by Post, E-mail, & Web Form) e-mail reminders can in some cases as much as double initial response rates.



## ***SYNOPSIS***

This section provides a general summary of the findings contained within this document.

It should be noted that comparison of the survey summary derived from the initial 18% response rate and of that from the final 23% response rate revealed surprisingly similar results. That is to say, while percentages may have varied slightly, overall preferred answers (i.e. “most frequent”) remained consistent. The researcher was pleased to see this consistency revealed, as it further contributes to the validity of the research findings.

The pre-learning circle survey and synopsis findings are divided into three major sections, namely:

- PLANNING WITHIN THE RHA
  - MANAGING WITHIN THE RHA
  - LEADING AND LEARNING WITHIN THE RHA
1. PLANNING WITHIN THE RHA
    - a. 89% of RHA management staff have developed a plan or undertaken planning initiatives within their department or program. Of these:
      - i. 88% indicated that their plan was “in progress”.
      - ii. 25% indicated that their plan was a formal, stand-alone document.
      - iii. 59% indicated that their plan was a 1-yr plan; 18% that it was a 3-yr plan.<sup>3</sup>
      - iv. departmental/program “mission statement” was identified most often as an element of the plan; gap analysis was identified the least.
      - v. the RHA’s 2004 Health Status Profile and individual Quality Improvement plans were the tools used most often in plan development; the RHA’s Mission/Vision/Guiding Principles were a close second; other tools noted included a variety of non-official verbal communications.
      - vi. 29% felt that additional tools would be useful in developing a plan, namely increased organizational support and communication, as well as access to National/International standards.

2.

***SECTION 1 KEY TAKEAWAY:***

- *89% of RHA middle management staff have developed a plan or undertaken planning initiatives within their department or program.*

---

<sup>3</sup> The other 24% included “draft” plans, pilot projects, and wind-down plans.

MANAGING WITHIN THE RHA

- a. 63% of RHA management staff are satisfied with their plan to date as a management tool.
  - i. Reasons cited for dissatisfaction included:
    - (1).need for more resources (time, people, training) in order to make planning a priority – 40% of comments
    - (2).lack of cohesion / working in silos – 27% of comments
    - (3).need for dept/progr. plan approval by the organization prior to assessing its effectiveness – 27% of comments
    - (4).Need for clear direction/support from organization – 20% of comments
  - ii. Reasons for satisfaction included:
    - (1).plan contributes to continuity of care – 13% of comments
    - (2).plan contributes to achievement of organizational plan and strategic initiatives – 13% of comments
    - (3).plan clearly illustrates departmental link to organization – 13% of comments

**SECTION 2 KEY TAKEAWAYS:**

- *63% of RHA middle management staff are satisfied with their individual plans to date.*
- *Increased resources (time, people, training), cohesion, and organizational direction could all contribute to increasing satisfaction levels*

3. LEADING AND LEARNING WITHIN THE RHA
  - a. 95% of respondents identified “communication” as a necessary competency in planning. “Creativity”, “team-building skills”, and “organizations and organizational change” – 89% of respondents.<sup>4</sup>
  - b. RHA management staff rated themselves highest in “team-building skills”; lowest in “systems theory, thinking and planning”<sup>5</sup>.
  - c. 74% of RHA management staff indicated the desire to further develop the “systems theory, thinking and planning” competency.
  - d. 63% of respondents cited departmental meetings, in-house education and their superior as the support mechanisms upon which they rely to enhance their planning leadership competencies.
  - e. 53% of respondents claimed they were satisfied with the organizational planning process to date.
    - i. Reasons cited for dissatisfaction were as follows:
      - (1).need to involve right players in planning process/stop working in silos – 32% of comments
      - (2).need for clearer direction/coordination from organization – 21% of comments
      - (3).need for more dedicated planning time – 16% of comments
    - ii. Reasons cited for satisfaction were as follows:
      - (1).strong support systems in place – 5% of comments
      - (2).good communication – 5% of comments
  - f. 100% of respondents supported regular gatherings with their peers (i.e. learning circles) to discuss current planning issues as a means to enhance leadership capacity; 58% indicating they would take part.
  - g. 26% of respondents selected “tying departmental needs into organizational strategic initiatives” as the preferred focus of learning circles.
  - h. 53% of respondents agreed to participate in the learning circles being held within the context of this researcher’s action research project.

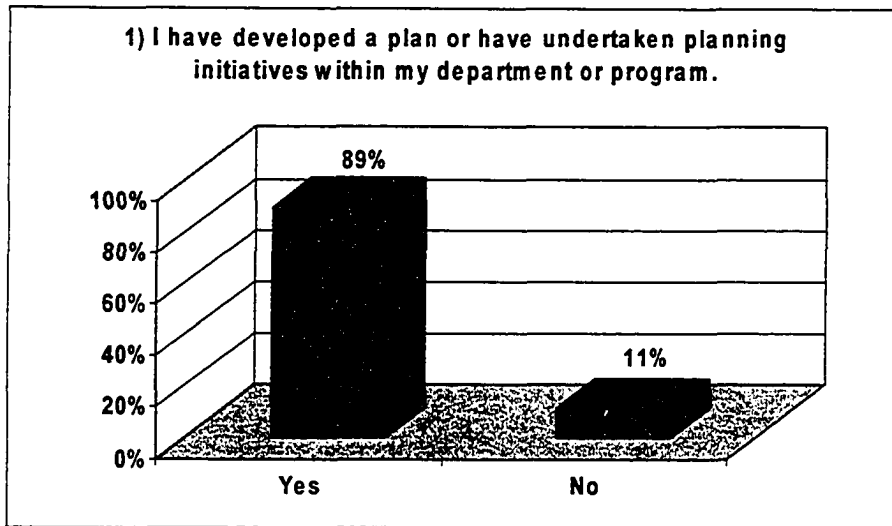
**SECTION 3 KEY TAKEAWAYS:**

- *At least 89% of respondents identified “soft skills” as critical to the planning process (communication, creativity, team-building)*
- *74% of RHA middle management staff would like to further develop their “systems theory, thinking and planning”*
- *This is consistent with the desire to focus learning circles on “tying departmental needs into organizational strategic initiatives”*

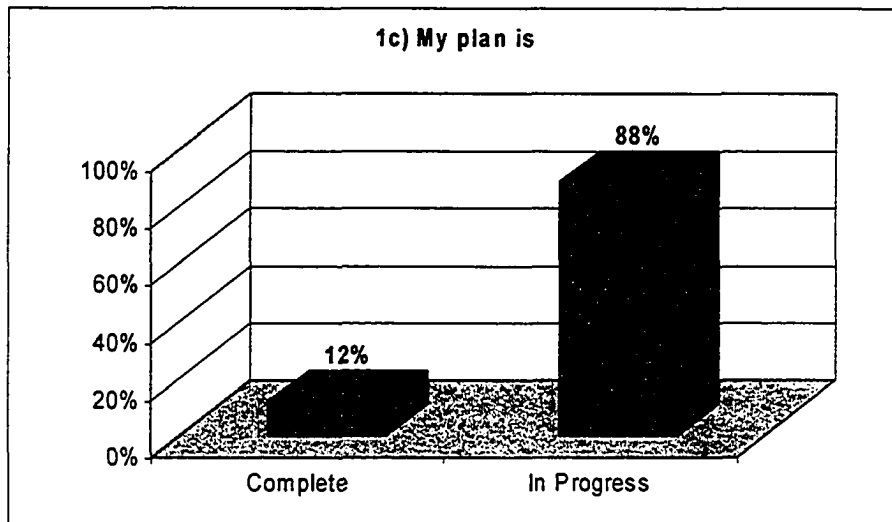
<sup>4</sup> It was noted that critical to the success of these competencies was the need to foster them. i.e. to create an environment in which people want to listen, cooperate and change. Knowledge of the system was also cited as a critical competency.

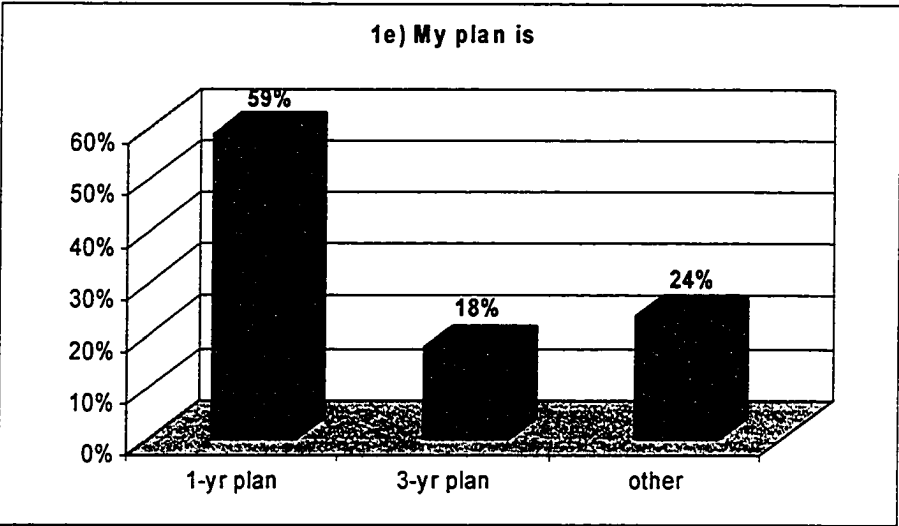
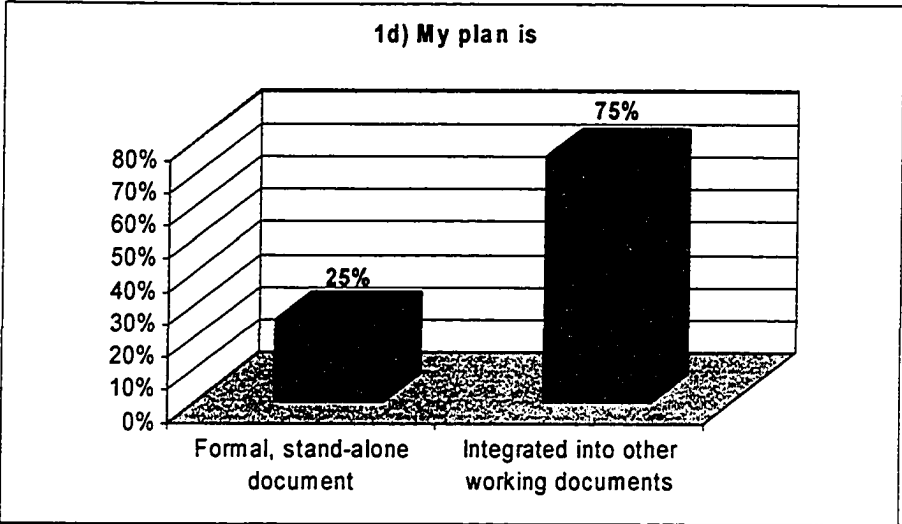
<sup>5</sup> See Synopsis paragraph 2.a.i. (1), i.e. “lack of cohesion / working in silos”.

**SUMMARY OF FINDINGS**

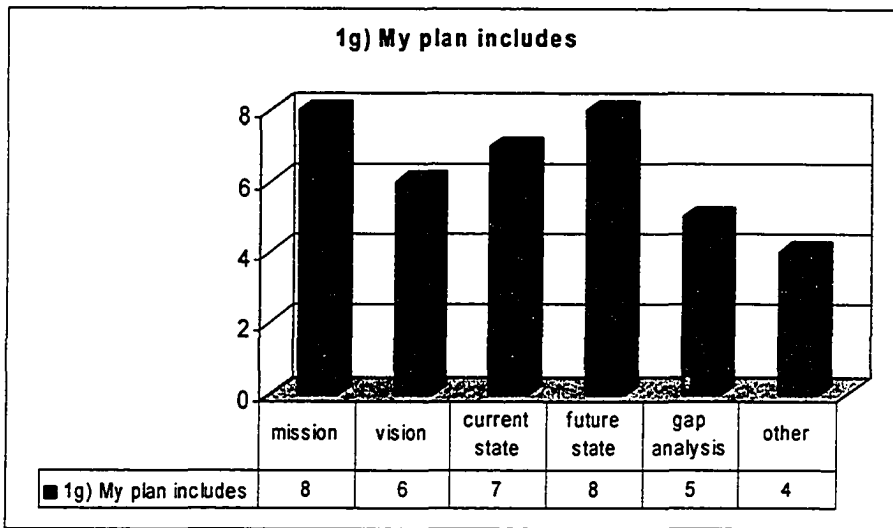


1a) Of those respondents who indicated that they had not begun or developed a plan within dept, 1 indicated that it was for lack of time, 1 indicated that planning was done on a project by project basis.

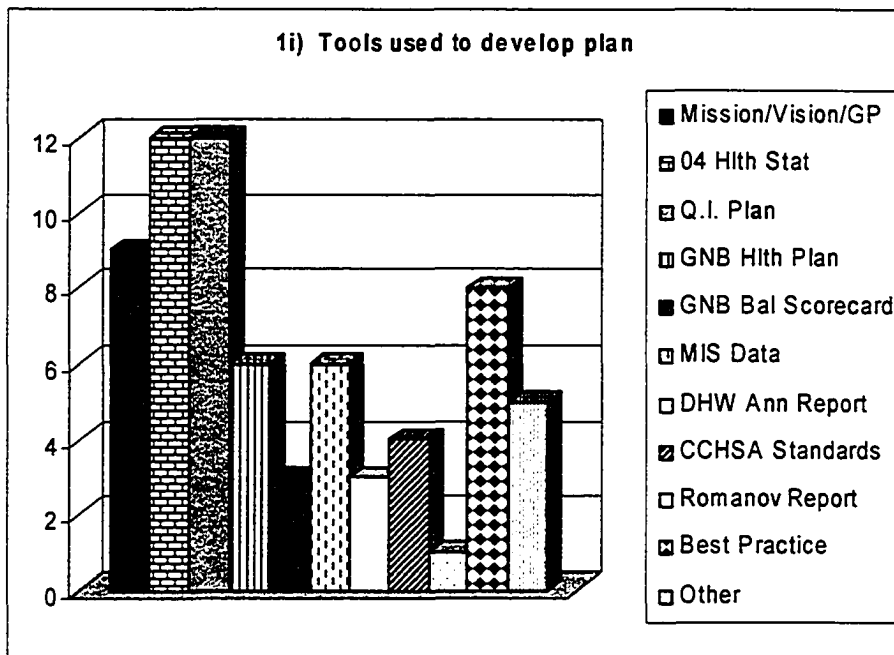




1f) Of respondents who answered "other", no specific timelines were given; in one case a respondent indicated having a variety of options in "draft" format, ready to take out based on the priorities established by mgmt or gvt; in another, the plan is based on a series of "pilots" that will lead to adjustments based on outcomes; the other was based on the closure of a dept/program.



**11% of respondents had included all of these elements in their plan; the other 89% had included 3 or less of these elements in their individual plans.**



**Other Tools Used In Development of Planning**

Staff input through meetings. Generally they see areas to improve upon or add if existing resources permit.

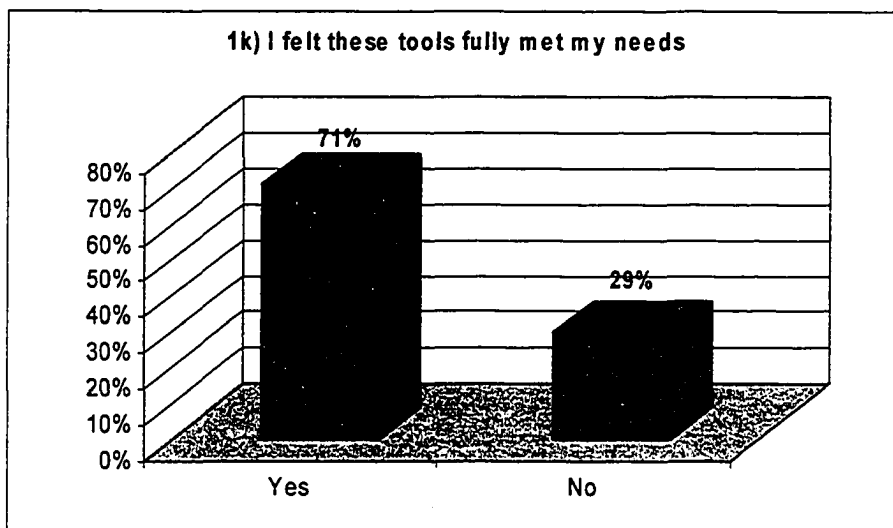
Verbal information.

Non-official information from Provincial Gvt.

Program-specific data information system.

Any wellness-related information.

Given the dept's/program's unique situation, none of the above tools were necessary in planning



**1l) If no, I feel the following tools might be helpful in the development of a plan (feel free to list more than one or stipulate that you do not know)**

Help from the organization

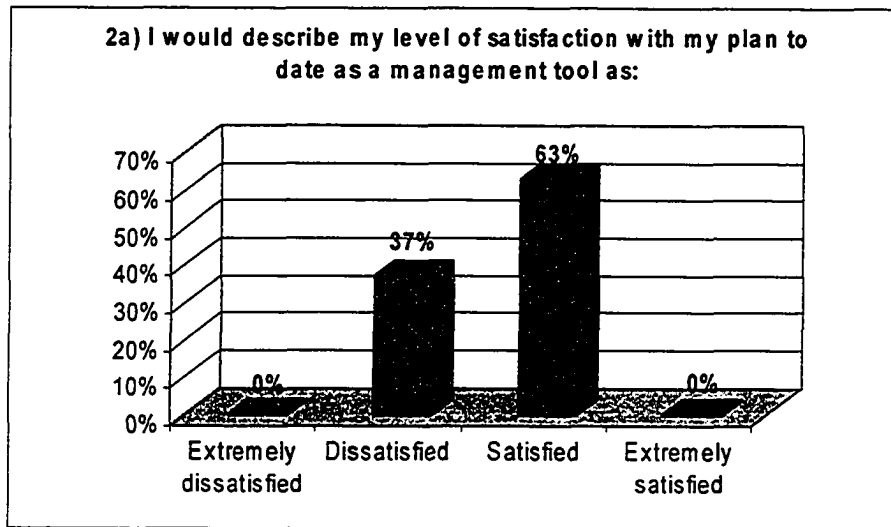
Certainly reports mentioned above would be helpful. Generally though I have reacted to problems with the exception of one program we have initiated in the past.

Canadian and American standards

Comparison with other programs in Province.

The RHA HBP would have been useful had it been received months ago.

Round table discussion with respective vice-presidents during planning process.



**2b) The reasons cited for levels of satisfaction/dissatisfaction were as follows:**

Lack of clear direction/support from organization / uncertainty as to what is expected of mgrs (20% of comments addressed this issue)

More resources (time, people, training) needed to plan properly / make planning a priority (40% of comments addressed this issue)

Lack of cohesion / working in silos (27% of comments addressed this issue)

Segregation of clinical & non-clinical services in planning initiatives (13% of comments addressed this issue)

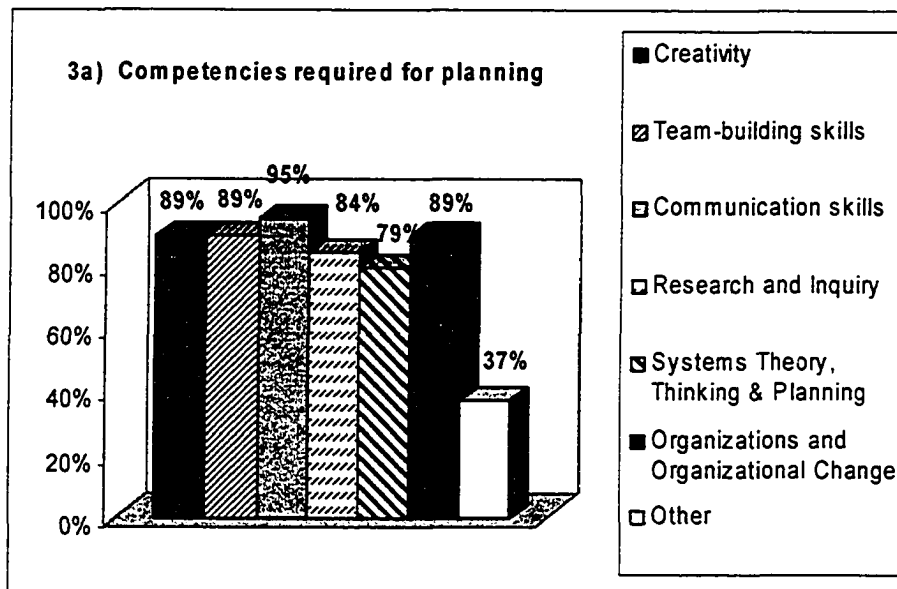
Until approval of individual plans is vetted and communicated by the organization, it is difficult to determine effectiveness of plan (27% of comments addressed this issue)

Individual plan can contribute to achievement of overall organizational plan and strategic initiatives (13% of comments addressed this issue)

Plan fosters appropriateness and continuity of care (13% of comments addressed this issue)

Plan allows for a good visual representation of quality of individual plan objectives and of link to organizational strategies; gives clear direction (13% of comments addressed this issue)





**3b) Of respondents who answered "Other" to question 3a, answers were as follows:**

Crisis management; stress management

Knowledge of the department and the issues within the domain / prior business planning experience

Ability to really listen to others not just 'oh well this is a part of my job what does she have to say today and how long will I have to listen to it' - Managers may have the above skills but may not genuinely portray them to their staff.

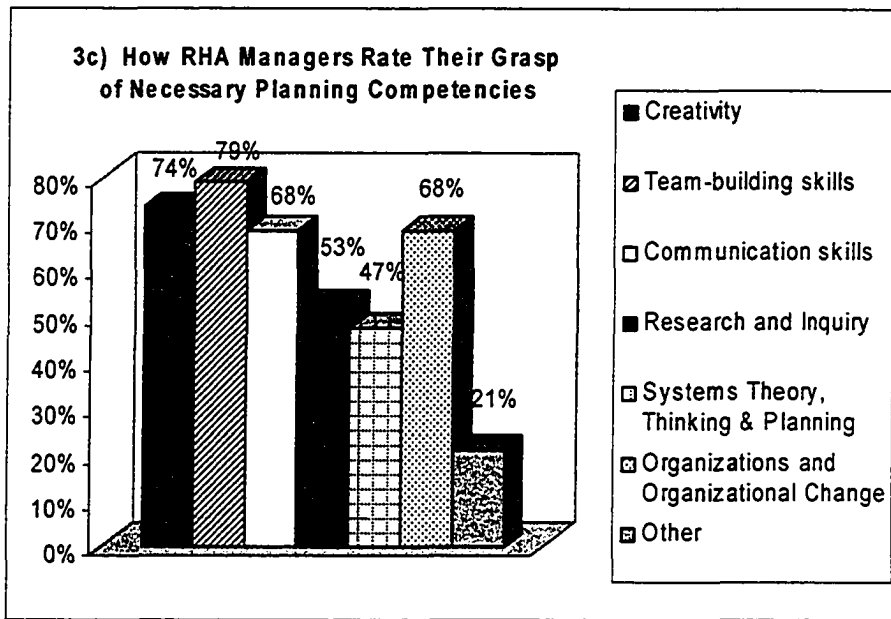
A milieu that supports all these competencies. And a cooperation from all team members even the ones who are independent but a very necessary part of the team

A bit of all of these is necessary.

The DESIRE to want to change ... to improve things. Believing in employees' potential to bring about change. Without this, we are planning in a vacuum, not really believing in it, but doing it because Administration says we should.

Need human resources.

Background, whether in education, instruction or past experience

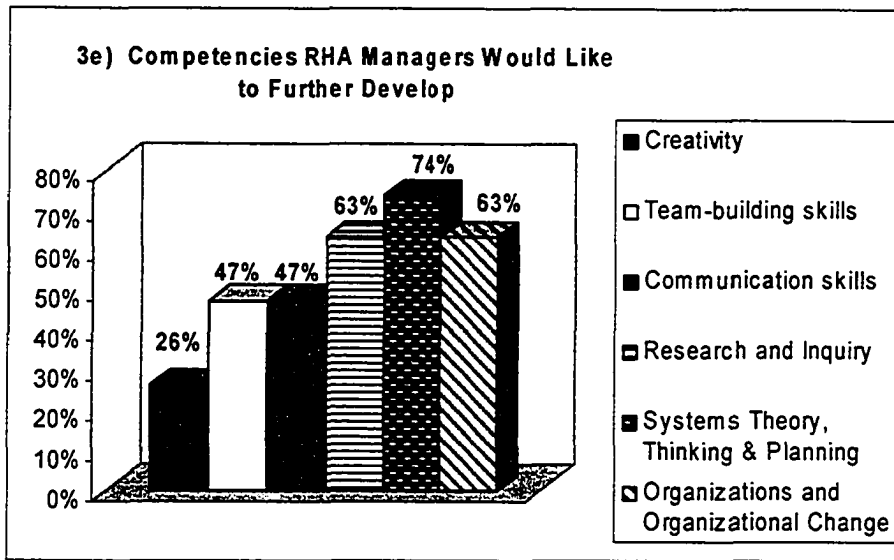


16 % of respondents felt they possessed all six competencies listed in 3c).

68 % of respondents felt they possessed at least 3 or more of these competencies.

16 % of respondents felt they possessed only 1 of these competencies.

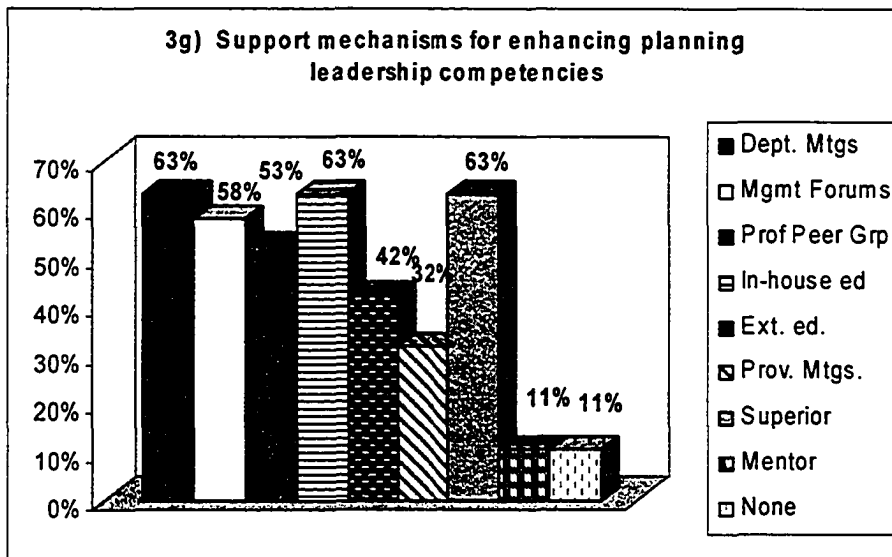
Other competencies respondents felt were necessary to successful planning included knowledge of the field/dept and its issues, organizational skills, and personal attitude/perspective



**Comments re. competencies RHA Managers would like to develop:**

Would like to understand the financial impact of dept plan on dept and on other depts.

Would like training on all, but particularly on creativity and team-building.

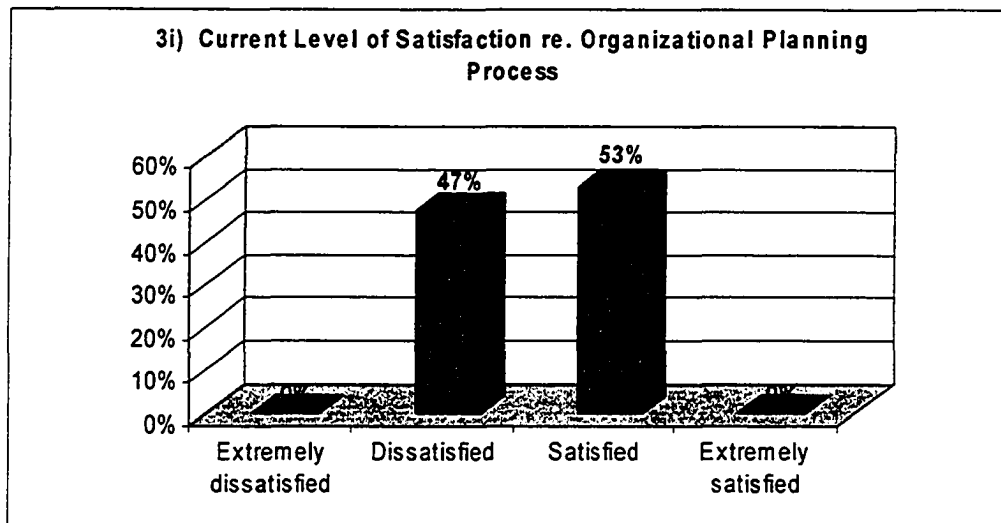


**N.B.**

Only 1 other support mechanism for developing planning leadership competencies was suggested, namely holding more frequent management forum sessions (mentioned once).

At 63%, "Superior" (i.e. mgr/dir), "in-house education" and "departmental meetings" were cited most often as a support for developing planning leadership competencies.

While 11 % of respondents indicated that they had no support in developing planning leadership competencies, half of these identified other support mechanisms in their answer, which would appear inconsistent with the answer of "none".



**3j) The reasons cited for levels of satisfaction/dissatisfaction were as follows:**

21 % of respondents indicated that there is a need for clear direction / coordination from organization.

16 % of respondents indicated that more time is needed to plan.

5 % of respondents indicated that we must evolve the way in which we tackle issues (i.e. change with the times)

32 % of respondents indicated that there is a need to involve and communicate with the right players in the planning process / to stop working in silos.

11 % indicated that we need to work smarter not harder.

5% indicated that there is a need for improved human resource management at the organizational level.

5 % indicated that there are strong support systems in place.

5 % indicated that there is good communication.

**3k) All respondents felt that regular gatherings with their peers to learn about and discuss current planning issues could contribute to increasing their planning leadership competencies within the RHA.**

**31) The ways in which respondents felt these gatherings could contribute to or hinder their ability to increase planning leadership competencies within the RHA were expressed as follows:**

Any gathering must be with a facilitator or mentor, otherwise it is a waste of time and solves no other purpose but to have people argue about this and that. Would help me express my concerns.

Networking is very important, exchanging information. Hindrance is the time to do the actual work as we are constantly multitasking, deadlines to meet at times or on occasion the unavailability of some resources. Also at lot of times the manager is also learning to do the job, this could be time consuming with deadlines to meet. It is also very challenging to do both the clinical aspect and administrative one, as both are important. Managers are expected to perform to the highest standard, and this could be emotionally draining at times.

- better communication - good if members stay on track - good place to brainstorm ,Developing sessions which are partly information and best practice sharing and partly educational sessions. Making sure that the sessions are well organized and planned and that everyone has a chance to be heard.

You can always learn form someone else's methods. At times you may not agree with them but you are able to see another point of view. Leading staff during the changes that are coming will require more skills than I am currently used to and therefore listening to others can only be helpful.

Shared vision shares resources common goals, better understanding of each others roles and functions, better integration shared creativity shared experience.. problem solving

"lead by example" - regular gatherings with my peers shows how each individual person deals with issues and shows how they plan their department around these issues. We can learn from each other as we tap into each others past and present experience in how to deal with problems/issues.

Gatherings could provide the following: support, learning from others' experiences and knowledge, enhanced comfort and confidence level, reduced isolation, relationship and partnership building, ideas.

There is a need for regional gathering but there is also a need for provincial gatherings so that the manager can stay abreast of what is happening in other areas of the province. I am not talking about educational sessions I am talking about managers of similar departments meeting provincial to share ideas. there seems to be a gap between us and others

These meetings would be very useful in a planning context. Everyone would know where their peers are looking to focus their ideas over the next few years. By hearing the rationale and reasoning and others, our own orientation might be influenced, i.e. the whole process might become more cohesive.

Sharing of ideas; perhaps presentations by some managers.

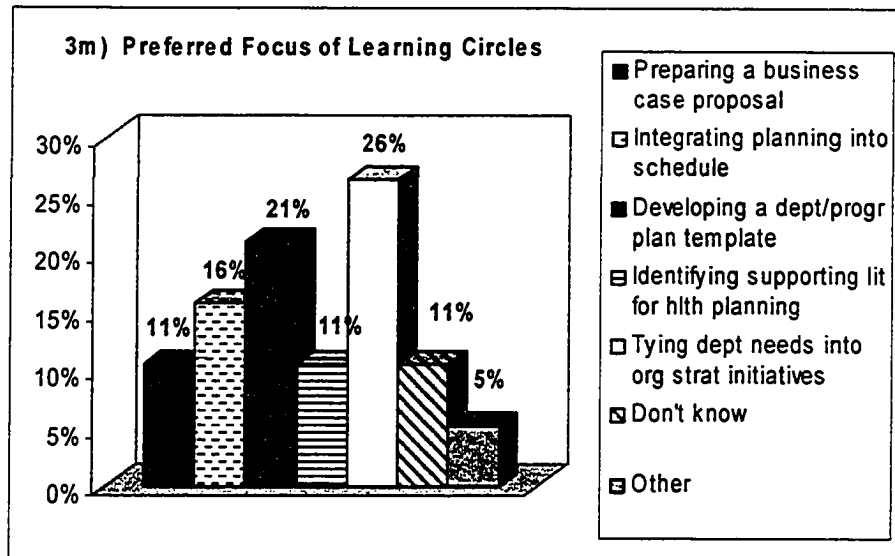
I think I could benefit from the experience, the knowledge and the creativity of other participants.

Each individual is a wealth of knowledge and experience. The sharing of information on various subjects is a cost-effective, effective and enriching means of education. Theory cannot neglect everyday and often unique management operations.

Each individual has different knowledge and experience and it can be interesting to share it. However, the groups should not be haphazard and one individual within the group should possess a lot of knowledge, because I've experienced small gatherings where individuals bicker and do not place belief in others; it is not constructive. A leader must be involved to avoid unnecessary wastes of time.

These meetings could contribute to improving our leadership competencies through sharing by peers.

More regular meetings make it possible to pass the same information along to everyone.



**3n) Under "other", one individual indicated the desire to take part in a learning circle aimed at developing a data gathering program to make it possible to assess the department's effectiveness based on national indicators, evidence-based findings, and best practice guidelines.**

**3o) 58 % of respondents indicated that they would be interested in participating in learning circles aimed at increasing leadership capacity within the RHA by exploring the development of a viable planning model reflective of the needs of RHA Mgmt staff.**

53 % of respondents provided their name and contact coordinates.

5 % of respondents indicated that while they were interested, they preferred to protect their anonymity by not providing their contact information.

5 % of respondents indicated that while they were interested, scheduling conflicts made it impossible to participate on the dates specified.

4 individuals who had not completed the survey before the survey close date contacted the researcher to ask to have the survey re-opened. As such, and following approval by the project supervisor, the survey link was re-opened for a period of 24 hours.

## **CONCLUSION**

Based on the findings herein, a large percentage of RHA middle management staff have their planning initiatives well underway. The findings show a consistency in many of the tools used in planning initiatives, particularly the RHA's 2004 Health Status Profile, their own Q.I. plan, and the RHA's Mission/Vision/Guiding Principles statements. Informal verbal discussions were also noted by several respondents as a useful tool in planning.

It should be noted that while departmental/program mission statements and descriptions of departmental/program future state projections are the most common element found in individual plans, the actual gap analysis<sup>6</sup> piece is the most infrequently included element.

The researcher was impressed to discover that while not all middle management staff had an actual departmental/program business plan, a few had actually put effort into developing a variety of planning options (i.e. to be selected based on future organizational direction), of pilot projects, and of wind-down plans.

This would appear to display a level of commitment to conscientious planning that extends beyond administrative duty.

***Survey findings appear to display a level of commitment to conscientious planning within RHA Middle Management staff that extends beyond administrative duty.***

While the majority of respondents had developed a 1-yr plan, all RHA middle management staff have now been presented with a 3-yr rolling organizational strategic initiatives planning document. This document was provided to middle management approximately 1 week prior to the distribution of the survey, so they likely did not have time to integrate it into their personal plans (this was noted in one respondent's comments). It would be interesting to discover if more 3-yr departmental/program plans will be developed as a result of this most recent organizational tool.

A slim majority of RHA middle management staff expressed satisfaction with their departmental/program plan to date as a management tool. The biggest contributing factor to satisfaction levels was the plan's ability to contribute to continuity of care and to clearly illustrate a clear link between departmental/program objectives and organizational strategic initiatives. A significant percentage of respondents cited increased resources, cohesion and organizational direction as factors that could further contribute to satisfaction.

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<sup>6</sup> Gap analysis is in fact a formal means of identifying and correcting shortfalls between desired and actual levels of performance (i.e. the means of bridging the gap between "where we are and where we want to be").

A variety of “soft” skills were almost unanimously identified as necessary competencies in planning. These included communication, creativity and team-building. RHA middle management respondents consistently identified their grasp of “team-building skills” as being strong. This is conducive to the learning circle premise, which focuses on regularly bringing together a group of individuals to learn about and discuss issues that are important to them and their milieu. This self-assessed penchant towards team-building skills is also made evident in the desire expressed by more than half of survey respondents to take part in the researcher’s proposed learning circles.

***“Soft” skills were almost unanimously identified as necessary competencies in planning.***

Triangulation of results from various questions showed a link between those areas seen as shortfalls within the individual and organizational planning process, those areas identified as weaknesses within individual planning competencies, those areas identified as potential areas for individual learning and the preferred focus of learning circles.

In practical terms, respondents indicated that dissatisfaction with departmental/program plans and the organizational planning process stemmed in large part from a lack of cohesion and working in silos. In conjunction with this, respondents identified “systems theory, thinking and planning” as the competency they grasped the least and the one they would most like to develop. Finally, the majority of respondents identified “tying departmental/program needs into organizational strategic initiatives” as their preferred focus for learning circles.

***Learning circles may contribute to leadership capacity by providing an opportunity to build on those soft skills while fostering a greater understanding of complex systems.***

Together with the desire expressed by middle management to take part in learning circles, the consistency of these responses leads the researcher to believe that there is potential to further explore what contribution learning circles could make to increasing RHA middle managers’ leadership capacity.



## **APPENDIX D:**

### **LEARNING CIRCLE BACKGROUND INFORMATION**

*DIA Letter of Invitation*

April 1, 2005

Dear Survey Respondent:

I would like to thank you for your interest in participating in learning circles being conducted in partial fulfilment of my Master of Arts in Leadership and Training – Specialization in Justice and Public Safety Leadership, offered through Royal Roads University, in Victoria, B.C.

This letter is to confirm your attendance in four (4) learning circles, to be held between April 11 and 22, 2005 (please see detailed agenda below), and to provide you with additional information on session format and content.

Please print this letter and bring it with you to the first learning circle, as you will be asked to sign it and have it witnessed as proof of consent in this action research project.

Please feel free to contact me at any time with any questions you may have regarding this project via e-mail, internal mail, in person, or by calling xxx-xxxx.

#### **Learning Circles: Agenda, Location, Time Requirements, Participants & Expectations**

Participation in learning circles will require involvement in four (4) learning circle sessions lasting two (2) hours each between April 11 and 22, 2005 (see calendar below), and may require individual readings between sessions. At least seven (7) participants will be taking part in these sessions, representing various RHA facilities, professional groups, and official languages.

<i>Monday, April 11</i>	-	<i>1st learning circle</i>
<i>Friday, April 15</i>	-	<i>2nd learning circle</i>
<i>Monday, April 18</i>	-	<i>3rd learning circle</i>
<i>Friday, April 22</i>	-	<i>4th learning circle</i>

*All learning circles will be held in the Soup N' Sweets Restaurant conference room, located at 1 Savoie Avenue (next to the Atlantic SuperStore), Atholville, from 8:00 – 10:00. Coffee and a continental breakfast will be served. Please note that for data compilation purposes, learning circle activities will be recorded*

using audio-visual support. All audio-visual material will be seen exclusively by the researcher and will be stored securely by said researcher for a period of two years following completion of research, after which it will be destroyed. All learning circle background material will be made available in English, but you may express yourself in the language of your choice.

You will be provided with a detailed agenda and any applicable literature and pre-requisite reading material on Monday, April 4, 2005.

As indicated in previous electronic correspondence, the purpose of this exercise is to determine the viability of using learning circles as a means to increase leadership capacity within the RHA by getting managers to learn and share together. The focus of these particular discussions will center around planning issues and concerns.

Your input is extremely valuable to the results of this thesis, in that the learning circle concept falls largely into the realm of an action research approach. That is, the purpose of learning circles is to empower, humanize and give voice to participants, allowing them to increase their understanding of the system within which they work and to address the planning concerns that are most pressing for them. Given that I will be involved and participating in the learning circle as an observer, and perhaps in some or all cases as facilitator, this component of the research will also fall into the domain of phenomenology (study of the development of human consciousness and self-awareness as a preface to philosophy or a part of philosophy, i.e. "perception is reality.") The objective for this part of the research is to arrive at rich and meaningful *qualitative* data.

The learning circle outcomes will be further validated through a post-learning circle survey, in which you will be asked to rate the effectiveness of the learning circle by assigning pre-determined values to the criteria identified in the initial survey as being inherent to a successful 3-year business plan.

Once again, I thank you for your interest in this research, and look forward to sharing with you in this quest for life-long learning.

Christine Cowan, BA  
Researcher

*D1B Letter of Invitation*

**Participant Consent Form**

**Research Project Title:** "WHOSE TURN TO LEAD?" INCREASING THE ORGANIZATION'S LEADERSHIP CAPACITY BY GETTING MIDDLE MANAGERS TO SHARE AND LEARN TOGETHER

**Researcher:** Christine Cowan, Masters Student

**Sponsor:** Jean Boulay, Vice President – Corporate Services

**Supervisor:** Dr. Scott Comber, MBA, Ph.D., professor at Royal Roads University

This consent form is meant to express your informed consent. It describes the research methodology to be used in learning circle activities. Do not hesitate to ask for more elucidation if you feel the need. Please read the information below carefully.

1. The purpose of this research is to explore the effectiveness of learning circles in increasing management leadership capacity.
2. The researcher will use learning circle feedback to gather information for the purpose of action research.
3. You are being asked to participate in four (4) learning circles, each of which will last 2 hours.
4. The learning circle discussions will be recorded using audio, audio-visual, and written support. Recorded information will later be transcribed. All recorded data will be destroyed two years following submission of thesis.
5. Participants may turn off recording devices or ask to have comments struck from the recordings at any point during the learning circles.
6. All data and conversations will be kept anonymous. Any reference to participants will be coded by the researcher to preserve this anonymity.
7. All raw data and conversations will be reviewed only by the researcher. Summary findings of the learning circle results will be shared with participants for validation prior to integration into thesis and/or report-out to the organization.
8. The data from learning circles may be used in other forms such as submissions to professional journals maintaining the same standards of confidentiality and anonymity.
9. You will not receive monetary compensation for participating in the study. However, given that these sessions are being held within the context of your work and during regular working hours, you will receive any regular salary and benefits that would normally be attributed to you for this period of work.
10. You are not expected to incur any financial costs as a condition of or because of participation in the research.
11. Your participation in this study is voluntary and you may withdraw at any time.
12. The researcher, Christine Cowan, is carrying out this research as a student and within the framework of the Master of Arts in Leadership and Training, RRU. Her observations and findings will be made in this learning capacity and not in her professional capacity as RHA Director of Planning and Information Management. She may, however, make limited contribution to learning circle discussions in her professional capacity (i.e. to share her perspective on certain planning issues if called upon to do so by learning circle participants).

Your signature below indicates that you understand to your satisfaction the above information regarding participation in the learning circles. It also indicates your willingness to take part in the learning circles. You are free to withdraw from the project activities and to ask for further information on the project throughout your participation. Do not hesitate to contact Christine Cowan (506) xxx-xxxx regarding any questions surrounding the research matter. For verification as to the authenticity of this research project, you may contact Jean Boulay, VP-Corporate Services & Project Sponsor, (506) xxx-xxxx, or Dr. Scott Comber, MBA, Ph.D. & Project Supervisor (RRU), (604) xxx-xxxx.

Participant Name	Participant Signature	Date
Researcher Name	Researcher Signature	Date
Witness Name	Witness Signature	Date

*DIC Learning Circle Background Information and Agendas*

**Learning Circle # 1**

**April 11, 2005**

**Background Information & Agenda**

**A. All participants are asked to bring a pen and paper.**

**B. Learning circle participants are asked to bring with them any background material they used in the development of their departmental/program plan, their plan, and any other material they are comfortable sharing and feel might be useful to the learning circle premise.**

**C. You are also asked to develop a brief and very simple statement of intent (basic foundation for the circle).**

For example, when asked what topic they would most like to focus learning circles on, the most common answer by RHA managers (33% of all respondents) was “tying departmental/ program needs into organizational strategic initiatives.” The most common answer (by a slim margin) for the leadership competencies required for planning were “Creativity,” “Communication Skills,” and “Research & Inquiry.” When asked what leadership competencies they would like to develop in themselves, the most common answers were “Systems Theory,” “Thinking and Planning,” and “Organizations and Organizational Change.”

Based on this overall feedback, a statement of intent might be worded as follows:

*“In considering the complexities of the evolving healthcare system in which we work, we will develop an innovative and research-based framework by which managers within the RHA can address their planning needs.”*

This is an example only. What is important is that the statement that you develop (based on your needs and assumptions) be a statement that you understand and can communicate to others. During the first learning circle, we will share all statements of intent developed and arrive at one common statement for the group. Please feel free to use the attached document entitled “Initial Summary Results from RHA Management Survey On Leadership Capacity” and the literature review to aid in the development of your statement of intent.

**D. During the first learning circle, participants will also have to agree on ground rules / guiding principles. Feel free to propose ground rules, however for efficiency’s sake, the researcher / learning circle organizer will prepare a list of ground rules to be shared with and revised by learning circle participants during the first learning circle.**

**Agenda – Learning Circles  
April 11, 2005**

**8:00 – 8:15**

- 1. Breakfast, Signing of Consent Forms, and Review of Background Information**

**8:15 – 8:45**

- 2. Overview of RHA Learning Circles**

**8:45 – 10:00**

- 3. Learning Circle Activities**

**8:45            Opening the Circle \***

**8:45-8:55      Check In \***

**8:55-9:00      Hopes & Fears**

**9:00-9:45      Addressing the Concern \* (Question # 1)**

**9:45-9:50      Confirmation of Action Items for Next LC \***

**9:50-10:00    Check Out \***

***\* Items marked with an asterisk represent standing agenda items.***

Encl.: - *Learning Circles, Leadership Capacity and Middle Management ... A Literature Review*  
- *Initial Summary Results from RHA Management Survey On Leadership Capacity*

**Learning Circle # 2  
April 15, 2005**

**Agenda**

**8:00 – 8:15**

- 1. Breakfast**

**8:15 – 8:30**

- 2. Review of Conclusions & Action Items from Previous LC**

**8:30 – 10:00**

- 3. Learning Circle Activities**

**8:30            Opening the Circle**

**8:30-8:45      Check In**

**8:45-9:45      Addressing the Concern (Theme # 2)**

**9:45-9:50      Confirmation of Action Items for Next LC**

**9:50-10:00    Check Out**

**Learning Circle # 3  
April 18, 2005**

**Agenda**

**8:00 – 8:15**

- 1. Breakfast**

**8:15 – 8:30**

- 2. Review of Conclusions & Action Items from Previous LC**

**8:30 – 10:00**

- 3. Learning Circle Activities**

**8:30            Opening the Circle**

**8:30-8:45      Check In**

**8:45-9:45      Addressing the Concern (Theme # 3)**

**9:45-9:50      Confirmation of Action Items for Next LC**

**9:50-10:00    Check Out**

**Learning Circle # 4  
April 22, 2005**

**Agenda**

**8:00 – 8:15**

- 1. Breakfast**

**8:15 – 8:30**

- 2. Review of Conclusions & Action Items from Previous LC**

**8:30 – 10:00**

- 3. Learning Circle Activities**

**8:30            Opening the Circle**

**8:30-8:45      Check In**

**8:45-9:45      Addressing the Concern (Theme # 4)**

**9:45-10:00    Check Out and Final Conclusions / Thoughts by Learning Circle  
Participants**



*DID – Guiding Themes and Questions Booklet*

**THE RESEARCH QUESTION**

***“How could learning circles contribute to enhancing the leadership capacity of Middle Managers of the Restigouche Health Authority?”***

For the purposes of this research, we will be examining *the development of program / departmental plans* as a means of determining the effectiveness of applying learning circles to our organizational context.

As such, and *based on results* (distributed April 4, 2005, revised April 9, 2005) *from the RHA Management Survey on Leadership Capacity*, the organizer has formulated four overarching themes with relevant questions attached to guide learning over the course of the next two weeks. Each learning circle session will address one of these themes, meant to provide an opportunity for participants to share their own personal experience and successes, voice their concerns, and arrive at a plan of action. Remember, we are not meant to be experts, we are here to learn.

The four themes expanded upon over the next few pages are as follows:

- 1) BREAKING DOWN SILOS
- 2) SHARING INDIVIDUAL PLANNING SUCCESSES AND CHALLENGES
- 3) DEVELOPING A MODEL BASED ON OUR EXPERIENCE
- 4) ENSURING PLANNING SUSTAINABILITY

***LEARNING CIRCLE # 1 – BREAKING DOWN SILOS***

***The questions for the first learning circle are aimed at breaking down silos in the planning process*** by using some of the soft skills identified by RHA Middle Management as a necessary competency in planning. As such, members will be asked in turn to take 5 minutes to answer the following questions (remember to wait until you have the talking piece in your possession to speak):

1. What is your name, title, and basic function within the Restigouche Health Authority?
2. What is the primary purpose (mission) of your department/program?
3. How would you describe the link between your department's/program's purpose and the organization's mission (below)?

**RESTIGOUCHE HEALTH AUTHORITY**

**MISSION**

*We work towards wellness for all.*

*As part of the community, we:*

- △ Assist individuals in assuming an active role in their own health;
- △ Promote healthy lifestyle behaviors;
- △ Provide preventative, acute, rehabilitative, and palliative services in the home, community and hospital settings, as well as provincial psychiatric tertiary and forensic services

4. What department(s) do you most often deal with/rely upon in carrying out your purpose & daily operations?

**BONUS QUESTION!** *(bonus question to be asked in second round of circle, if the timeline allows for it)*

5. Based on your experience, do you have any tips and tricks you could share with your colleagues today re. setting time aside for planning activities?

**LEARNING CIRCLE # 1 – BREAKING DOWN SILOS**

While listening to your peers, please note the following where possible:

<b>1. List any individuals, titles or basic functions you were not aware of prior to today's LC.</b>	<b>2. Did you learn anything about a dept's/ program's purpose that you were not aware of prior to today's LC?</b>	<b>3. Were any links described that could help you in tying in your dept's/ program's purpose to the organization's?</b>	<b>4. Was your department considered as a partner by other depts/programs in their daily operations? Had you considered them a partner in your daily operations?</b>	<b>5. Did you hear any tips or tricks that you might use in setting time aside for planning activities?</b>

***LEARNING CIRCLE # 2 – SHARING INDIVIDUAL PLANNING SUCCESSES AND CHALLENGES***

***The questions for the second learning circle are focused on tying departmental/ program planning techniques into organizational strategic initiatives*** by allowing participants to describe how they have proceeded with planning initiatives to date. Remember to wait until you have the talking piece in your possession to speak:

1. Please provide a description of your plan to date and of how you went about developing it (i.e. setting aside time, tools used, individuals consulted, models upon which the plan is based, etc.).
2. Please highlight some of the challenges/successes you experienced in developing your plan to date. (This includes voicing any concerns/questions you would hope to see addressed by your learning circle peers.)
3. Please describe the links you see between your departmental/program plan and the organization's strategic initiatives.

A second round of questions will allow members to establish the links they see between each others' plans to date.

1. Please describe any suggestions/comments made today that brought clarity to your own planning issues. How did they bring clarity?
2. Are there any department/program representatives present that you had not previously considered in your planning process that you might include in future planning initiatives?
3. Is there a planning model in particular that was discussed that you might adapt to your own department/program?
4. Has today's discussion made it easier to tie your own departmental/program initiatives into the organization's?

**LEARNING CIRCLE # 2 – SHARING INDIVIDUAL PLANNING SUCCESSES AND CHALLENGES**

While listening to your peers, please note the following where possible:

1. Idea shared.	2. By whom?	3. Is this a means I had considered before?	4. Can I apply this idea to my own planning process? How?	5. How could this idea impact my planning process (i.e. improve planning effectiveness, break down communication barriers, increase my knowledge of the organization, etc.)

**LEARNING CIRCLE # 3 – DEVELOPING A MODEL BASED ON OUR EXPERIENCE**

*The questions for the third learning circle are focused on developing/perfecting a business plan model that can be shared with RHA middle management in developing departmental/program plans* by allowing participants to reflect on the previous week’s discussion and to consider the overall system within which we work as well as its sub-systems. Remember to wait until you have the talking piece in your possession to speak:

1. What do you feel a departmental/program plan should look like (i.e. what will its components be)? i.e.
  - a. Introduction
  - b. Gap analysis
  - c. Resource requirements, etc.
2. Should the plan be a (i.e.)
  - a. 1-yr plan
  - b. 3-yr plan
  - c. Other
3. What common tools should all RHA middle management staff use to develop their plans? i.e.
  - a. RHA Health Status Profile
  - b. RHA Strategic Plan
  - c. Professional Standards and/or Best Practices, etc.
4. What stakeholders should all RHA middle management staff consider in developing their plans?

a. Internal, i.e. <ol style="list-style-type: none"> <li>i. Other departments/professionals</li> <li>ii. Patients</li> <li>iii. Physicians</li> <li>iv. Etc.</li> </ol>	b. External, i.e. <ol style="list-style-type: none"> <li>i. Volunteer organizations</li> <li>ii. Government</li> <li>iii. Private sector partners</li> <li>Etc.</li> </ol>
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5. What other considerations should RHA middle management staff include in developing their plans? i.e.
  - a. Budget approval
  - b. Best practice, etc.

Based on the feedback from today’s session, learners should leave with a model/template for planning. They will be asked to review this model and provide feedback during the final learning circle session.

**LEARNING CIRCLE # 3 – DEVELOPING A MODEL BASED ON OUR EXPERIENCE**

While listening to your peers, please note the following where possible:

<b>1. What do you feel a departmental/ program plan should look like (i.e. what will its components be)?</b>	<b>2. What should the plan's lifecycle be?</b>	<b>3. What common tools should all RHA middle management staff use to develop their plans?</b>	<b>4. What stakeholders should all RHA middle management staff consider in developing their plans?</b>	<b>5. What other considerations should RHA middle management staff include in developing their plans?</b>

***LEARNING CIRCLE # 4 – ENSURING PLANNING SUSTAINABILITY***

***The questions for the fourth learning circle are focused on communicating the business plan model with RHA middle management and to ensure follow-up on the group's recommendations*** by asking members to share their views on communication strategies. Remember to wait until you have the talking piece in your possession to speak:

1. Do you feel the model developed will meet some of the concerns initially expressed by middle managers within the RHA?
2. Do you feel comfortable sharing this model with other RHA middle management staff? Are you comfortable with submitting this group's concerns and recommendations, including post-learning circle survey results (all non-identifiable) to the RHA Health and Business Planning Steering Committee for approval and follow-up?
3. What support systems do you feel the organization will have to provide to ensure successful development of the plan (based on the model proposed last week)? i.e.
  - a. Resource person
  - b. Clear approval mechanism, etc.
4. How do you feel it should be communicated? i.e.
  - a. Management forum
  - b. Newsletter
  - c. Memo
  - d. Future learning circles
  - e. Etc.
5. What next steps/action items do you feel are critical to ensuring the success of learning circle discussions held up to date?



**LEARNING CIRCLE # 4 – ENSURING PLANNING SUSTAINABILITY**

While listening to your peers, please note the following where possible:

1. Does the model developed meet some of the concerns initially expressed by middle managers within the RHA?	2. Degree of comfort in sharing process/ recommendations developed by LC participants?	3. What support systems will the organization have to provide to ensure successful development of the plan?	4. How should the LC findings be communicated?	5. Critical next steps to ensure success.

THANK YOU!

*DIE Color Codes*

With the exception of the introduction section, at which time you are asked to provide your name, title and role, you are asked to identify yourself using a color code whenever using the talking piece. For example:

“Blue”... “I feel that my business plan is ...”

Your color code is based on the learning circle kit provided to you. Color coding will make it possible to protect anonymity in the transcription of material recorded on the voice recorder. Once transcribed, a number will be assigned to replace each color, so as to ensure proper protection of confidentiality in regards to specific individual comments. The researcher will use these numbers in the preparation of the final report out and thesis findings.

A colored workbook has been provided to you for note-taking. Please hand in any notes at the end of each session. These will be added to all data collected.

All video (visual) recordings will be used to enhance the audio conversation recorded and will be viewed exclusively by the researcher.

Christine Cowan

*DIF Facilitator's Guide*

***FACILITATOR'S GUIDE***

This facilitator's guide is loosely based on a model prepared for the Reconciliation Learning Circle Kit by the Copyright Commonwealth of Australia (1999). It is meant to serve as a guide for individuals interested in facilitating a learning circle.

***1. OVERVIEW***

While the organizer is responsible for identifying a need for the learning circle (LC) on a given topic or concern, his or her role should ultimately evolve into that of sponsor and/or observer for the group. Given the self-led premise of the LC concept, ideally the facilitator will be one (or more, on an alternating basis) of the LC participants.

**The facilitator is not expected to be a subject matter expert or teacher. In fact, too much knowledge on the issue can be problematic, as it may be tempting to “teach” rather than “guide” the group. This goes against the learning session premise, which purports that everyone can learn from others and everyone has something to share with others.**

***2. FACILITATOR'S RESPONSIBILITIES***

- Set a positive tone
- Be organized and familiar enough with the subject matter to keep discussion flowing, while keeping personal opinions and interjections to a minimum.
- Review LC material, action items and agenda prior to next LC.
- Determine what is needed for LC (the learning circle sponsor/ coordinator/ organizer can assist you in making sure these needs are met, i.e. photocopies, flip charts, projectors, video equipment, room reservations, etc.)
- Course correct as necessary, i.e. show flexibility regarding agenda items if conversation is lagging.

Many learning circles often choose to alternate facilitators from session to session. This allows others to develop their skills in this area. ***Remember, you are NOT MEANT TO BE AN EXPERT.*** Your desire, enthusiasm, and interest are all that are required.

### ***3. FACILITATOR'S TIPS & TRICKS CHECKLIST***

These are suggestions you might find helpful in making the meetings run smoothly.

1. Set a friendly and relaxed atmosphere from the start. Open the meeting in a special way, make sure everyone is in agreement on session proceedings, and allow members to “check in” to address any concerns or questions they may have.
2. Make the setting a safe, secure and comfortable one. Generally, you can use the following techniques to achieve this:
  - avoid a sense of competition – don’t make excessive demands on participants to perform but do encourage people to extend themselves and think outside the box
  - make sure participants have opportunities to identify concerns, issues or ideas they don’t understand; increase comfort levels by reiterating that everyone is here to learn
  - value participants’ views by drawing conclusions/summarizing discussion based on their contributions
3. Try to involve everyone in the discussion – avoid letting one person dominate the conversation. Reiterate the talking piece rules and the time allocated for each topic.
4. Encourage everyone to speak in turn, even the quiet ones, by keeping the talking piece moving around the group; remember ... everyone has something to share.
5. Allow for conflict as long as it’s focused on the issue and not the person. This is a safe place to express views, even unpopular views. Often times it can be the unpopular views that bring about a richness of dialogue amongst the group.
6. Try to remain objective and stay impartial when there are disagreements. Your role is to further the discussion and draw out the different viewpoints and to remain objective. If there are strong differences, just summarize and move on.
7. Discourage “bitter” discussions or discussions that attack individuals or groups of individuals by reminding the group of its learning premise. Feel free to question how relevant a comment is if it is bogging down the conversation; ask the individual to wrap their head around those comments and perhaps bring a summary for the next session.
8. Be an active listener. By listening carefully to what people are saying you can help guide the discussion. If you are too busy working out your next speech, you may miss where the discussion is heading.
9. Let pauses and silences occur. It may mean people are reflecting. Count to 10 before trying to answer your own questions to the group or before asking if the person would like to pass the talking piece onto the next person.
10. Do not feel you must provide the answers. If the group asks you a question, throw it back

to them. Invite others to comment on what someone has said, even if the comment was addressed to you. Try to encourage participants to talk to each other, not to you.

11. Help people connect with the issue by encouraging participants to tell their own stories and draw on their own experiences. Always encourage the heart.

12. Foster cooperation among the group – for example by encouraging joint follow-up activities such as research projects, learning tours or field trips, meetings with authorities, etc.

13. Regularly interject to summarize the group's discussion to date. If participants don't seem interested, don't hesitate to move on to the next topic or question.

14. Ask the hard questions, point out issues that people are ignoring, help the group examine its own assumptions.

15. Use questions that encourage discussion rather than yes/no answers, for example 'Could anyone build on/elaborate on that comment/point?' rather than 'Who agrees/disagrees?' or 'Do you agree/disagree.'

16. Make sure there is some closure to each session. An agenda item focused on future action items (to summarize administrative actions and responsibilities) and "checking out" (to summarize participants' feelings about the gathering) can be useful in closing the session.

18. Collect any work done on flipcharts, as it may prove useful in future sessions.

19. Organize who will do what between meetings, for example photocopying, organizing refreshments and so on.

#### **4. THE FIRST MEETING**

Your role and input at the first meeting is perhaps the most important part of your job as facilitator.

A key aim of the first meeting of a learning circle is for people to get to know one another and establish a degree of comfort, and for you to encourage this by seeking to learn more about participants' main interests, and their hopes and fears for these activities. Participants then need to plan and agree on their objectives.

##### **Step One**

The first learning circle should start with a welcome, a confirmation that all participants have any background material with them if applicable (i.e. consent forms, background literature) and an opportunity to converse in an informal fashion.

##### **Step Two**

Participants should be given an overview of the learning circle premise, and how it applies to the particular topic at hand.

- Learning circle structure
- Mtg frequency
- Roles
- Opportunity to adapt/adjust any of these three prior items
- Consensus on the group's intent
- Consensus on the group's ground rules

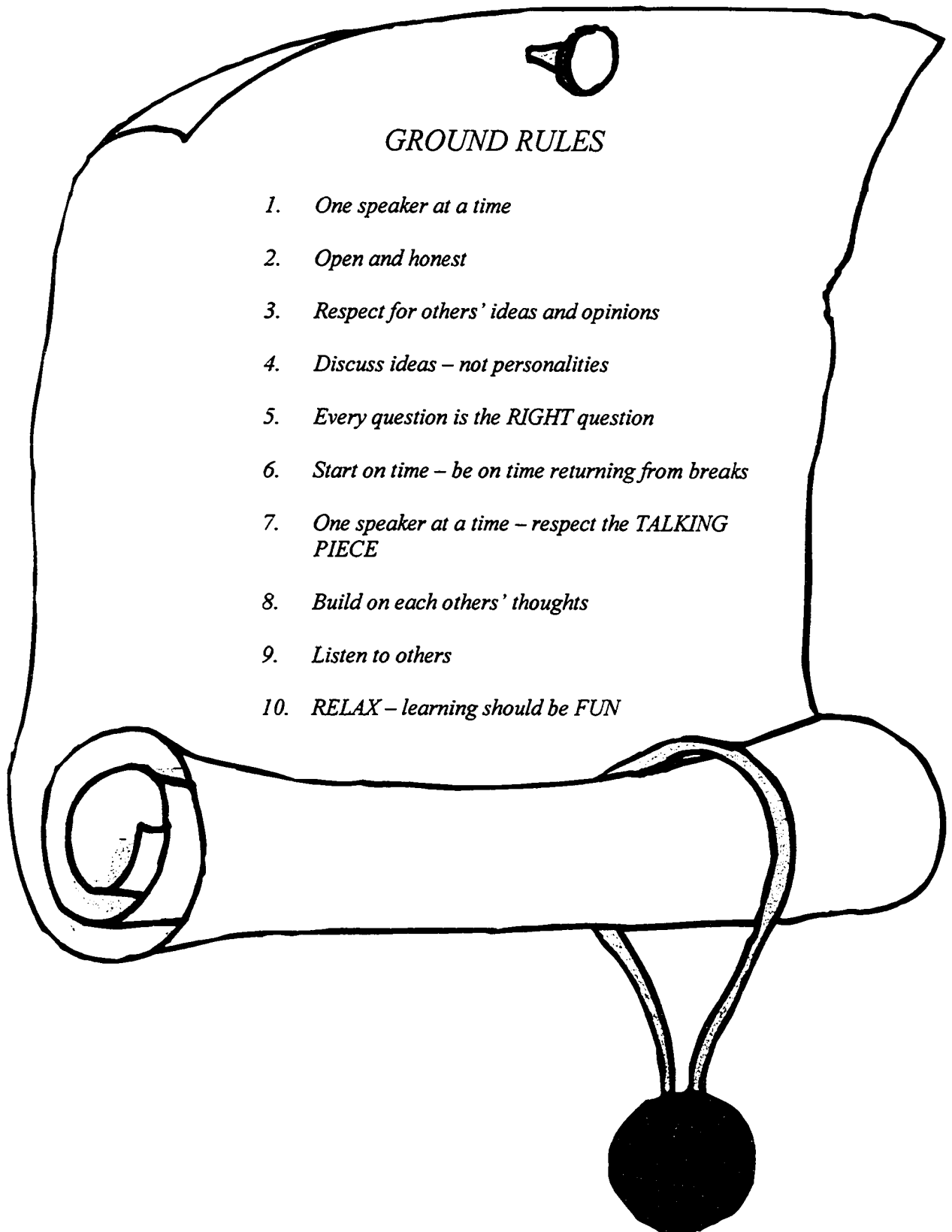
##### **Step Three**

Delving into the subject matter too fast may be disconcerting for some participants, however, there is a need to begin discussing the focus of the group (i.e. group's intent) so as to leave the initial gathering with a sense of accomplishment. A modified and compressed version of the actual learning circle agenda could include:

1. Official opening of the circle
2. Check-in
3. Discussion on hopes and fears
4. Discussion on one theme agreed upon by the group
5. Confirmation of action items for next LC
6. Check-out

The discussion on the first theme can constitute a fairly high-level discussion with which all learning participants are comfortable, so as to encourage participation from all. For example, members can be asked to contribute a little of their background and what they expect to be able to contribute to the group through their experience.

*D1G Ground Rules*



*DIH Acknowledgement*

**What a Contribution You've Made to the System by Being Here**

I just can't help but wonder if you realize what a contribution you are making by just being here today ...

By voluntarily sharing your knowledge, you are contributing not only to developing my learning as a researcher, but to increasing the organization's understanding of itself...

By voicing your concerns and asking your questions, you are opening a door onto a wealth of knowledge that lies hidden within your peers...

By listening with an open and objective ear, you are encouraging the heart and fostering a desire to share and learn together...

Together, we are the system; we are the organization; we represent its concerns, tribulations, hopes, and desires. Together, I hope we will share and learn and grow.

Please accept these wildflowers as a symbol of the hope and beauty that can lie in discovering the unknown.

Thank you,

Christine





## **APPENDIX E: POST-LEARNING CIRCLE**

### **SURVEY RESULTS**

*"WHOSE TURN TO LEAD?" INCREASING THE ORGANIZATION'S LEADERSHIP CAPACITY BY GETTING MIDDLE MANAGERS TO SHARE AND LEARN TOGETHER*

April 29, 2005 Summary Results – Not for distribution

### *Summary Results of Learning Circle Outcomes (Including Post-Learning Circle Leadership Capacity Survey Results)*

*Developed  
For Participants in Learning Circles  
Held Between April 11 and 22, 2005*

#### *Introduction*

The following document integrates a summary of findings and conclusions from learning circle activities, including a summary of results from the Leadership Capacity Post-Learning Circle Survey (distributed April 22, 2005). It is meant to serve as a validation tool for participants as to their learning circle experience. Once validated, it will be shared with the Restigouche Health Authority Health and Business Planning Steering Committee and integrated into the researcher's thesis.

The post-learning circle survey constituted the final action research activity within the framework of a thesis aimed at determining whether learning circles are an effective means by which to enhance leadership capacity. For the purposes of this research, the learning circles focused on planning within the Restigouche Health Authority. The overall action research process was carried out as follows:

- MARCH 24: initial (pre-learning circle) survey (sent to 84 coordinators, managers and directors) to determine middle management's current perspectives and concerns on planning within the Restigouche Health Authority and to solicit voluntary learning circle participants;
- APRIL 11-22: four learning circles held with volunteer participants (10 in all) to share middle management planning experiences;
- APRIL 22: final (post-learning circle) survey (sent to all 10 learning circle participants) to determine effectiveness of learning circles in increasing participants' leadership capacity by sharing and increasing their knowledge of the planning process

An invitation to complete the final electronic survey was sent to all ten (10) learning circle participants. In all, nine (9) responses were received. For this reason, data findings relating to the post-learning circle survey are reported by number of **survey respondents** and not by total number of learning circle participants. The data contained in the survey synopsis and summary is largely **quantitative** in nature. It should be noted that the findings included in the Learning Circles Methodology, Content & Findings section of this document also integrate **qualitative** data derived from the researcher's personal notes and from data recorded throughout the learning circle activities, including "one-of" comments where deemed relevant. The Conclusions section and the researcher's thesis will further expand upon these.

This report-out document is divided into the following sub-sections, which can be consulted individually should the reader so choose:

- **SURVEY SYNOPSIS:**
  - o This section provides a high-level overview of the findings derived from the Post-Learning Circle Survey.
- **SURVEY FINDINGS:**
  - o This section provides detailed Post-Learning Circle Survey results on a question by question basis.
- **LEARNING CIRCLE METHODOLOGY, CONTENT AND FINDINGS:**
  - o This section provides a high level overview of the methodology used to conduct learning circles, as well as a review of issues examined and outcomes derived by participants.
- **LEARNING CIRCLE CONCLUSIONS:**
  - o This section examines and summarizes all aspects of the action research conducted in an effort to determine how learning circles can contribute to enhancing the leadership capacity of middle managers within the RHA. It correlates data retrieved from the researcher's literature review on learning circles, the pre-learning circle survey, the actual learning circles, and the post-learning circle survey.
- **OVERALL CONCLUSIONS:**
  - o This section provides a very brief overall summary of project conclusions.

The researcher would like to acknowledge the time, enthusiasm, patience, diligence and commitment of learning circle participants throughout this exercise. It should be noted that all who took part did so on a voluntary basis, with no prompting beyond the initial one-time request made in the initial survey on leadership capacity. This research would not have been made possible without their willingness to participate and provide feedback.

## ***SURVEY SYNOPSIS***

This section provides a general overview of the survey findings contained within this document.

The post-learning circle survey and synopsis findings are divided into five major sections, namely:

- CONTRIBUTION OF LEARNING CIRCLES TO PLANNING WITHIN THE RHA
- CONTRIBUTION OF LEARNING CIRCLES TO MANAGING WITHIN THE RHA
- CONTRIBUTION OF LEARNING CIRCLES TO LEADING AND LEARNING WITHIN THE RHA
- ENVIRONMENTAL FACTORS THAT INFLUENCED THE EFFECTIVENESS OF LEARNING CIRCLES WITHIN THE RHA
- FUTURE INTEREST IN APPLYING THE LEARNING CIRCLE MODEL TO MIDDLE MANAGEMENT LEADERSHIP CHALLENGES WITHIN THE RHA

1. CONTRIBUTION OF LEARNING CIRCLES TO PLANNING WITHIN THE RHA

- a. **All** respondents indicated that learning circles had contributed **in some fashion to planning capacity**. Of these:
- i. 89% indicated that learning circles had contributed to increasing their **knowledge** of the planning process.
  - ii. Despite the overall consensus noted in (a) above, 11% of respondents indicated that the **overall** contribution of learning circles to planning capacity on the whole was extremely unsatisfactory. The other 89% rated the overall contribution as “satisfactory”.
  - iii. All respondents indicated that learning circles had incited them to integrate additional resources into their planning toolkit for future planning activities. Of these, the most frequently cited documents were **Best Practice Guidelines** and **CCHSA** standards (it should be noted that in the pre-learning circle surveys, access to National and International standards had been identified as a need in planning activities).

***SECTION 1 KEY TAKEAWAY:***

- *100% of respondents felt that learning circles had **contributed to planning capacity**.*

2. CONTRIBUTION OF LEARNING CIRCLES TO MANAGING WITHIN THE RHA
- a. When asked to rate their level of satisfaction with their plan as a management tool **prior** to participation in learning circles, level of satisfaction amongst respondents was fairly equally distributed, with 44.5% indicating satisfaction, and 44.5% indicating dissatisfaction. Only one (1) respondent (11%) claimed extreme dissatisfaction.
  - b. Of respondents, 89% indicated that **following** their participation in learning circles, they believed the development of a plan could contribute to **individual management capacity**. Half of these individuals indicated that this perspective had not changed since participation in learning circles, half indicated that the learning circles had in fact **increased** this belief.
    - i. Of respondents, 89% indicated that following their participation in learning circles, they believed the development of a plan could also contribute to **organizational** success. Once again, half indicated that this perspective had remained unchanged since participation in learning circles, half indicated that following this experience their perception of the contribution to formal planning to organizational success had in fact **gone from negative to positive**.
  - c. One (1) respondent (11%) indicated that their belief in the contribution of a plan to management capacity within the RHA had **decreased**.
    - i. This individual's perception of the contribution of formal planning to **organizational** success also **decreased** following participation in learning circles.

**SECTION 2 KEY TAKEAWAYS:**

- *Learning circles appear to have fostered a **positive change** of attitude towards the planning process and its contribution to management capacity in approximately half of respondents.*

3. CONTRIBUTION OF LEARNING CIRCLES TO LEADING AND LEARNING WITHIN THE RHA
  - a. All respondents indicated that learning circles had contributed to enhancing at least two (2) of the leadership competencies identified by the researcher within the framework of this action research.
    - i. 89% indicated that learning circles had contributed to enhancing their **communication skills** (identified by 95% of initial survey respondents as a necessary competency in planning);
    - ii. 78% of respondents indicated that learning circles had contributed to their **creativity**;
    - iii. 67% of respondents indicated that learning circles had contributed to **team-building skills** and to the **understanding of organizations and organizational change** (both identified by 89% of initial survey respondents as necessary competencies in planning);
    - iv. while 74% of pre-learning circle survey respondents had indicated a desire to further develop “systems theory, thinking and planning”, learning circle survey respondents rated their learning in this area lowest (33%).

**SECTION 3 KEY TAKEAWAYS:**

- *Learning circles contributed **most** to enhancing communication skills.*
- *They contributed **least** to understanding systems theory, thinking and planning.*

4. ***ENVIRONMENTAL FACTORS THAT INFLUENCED THE EFFECTIVENESS OF LEARNING CIRCLES WITHIN THE RHA***

- a. All respondents felt that holding the learning circles **off site** contributed to their **level of comfort** (well-being, freedom of expression, freedom from distractions, etc.). While 89% felt that off-site sessions contributed to their **learning**, 11% felt that it did not affect their learning either positively or negatively.
- b. All respondents felt that the size of the group (10 participants) contributed to their level of comfort and to their learning.
- c. 89% of respondents felt that the **diversity / cross representation** of the group had contributed to **their level of comfort**: 11% felt it had no effect on their level of comfort. 89% of respondents felt it had contributed to their **learning**: 11% felt that it had detracted from their learning.
- d. All respondents indicated that the **agenda** had contributed to the effectiveness of learning circle sessions; reasons cited included allowing for the ability to plan ahead, keeping the sessions focused and on track, and providing structure. Likewise, all respondents indicated that the **weekly themes** contributed to the effectiveness of learning circle sessions, allowing for the minimization of anxiety and the sequencing of discussions. All respondents indicated that the **questions** derived from the themes contributed to the effectiveness of learning circle sessions by spurring ideas amongst participants and pushing them to explore the issues more deeply.
- e. All respondents felt the **talking piece** enhanced their ability to **share knowledge**, particularly in that it allowed each participant to speak freely and without interruption. Some participants did indicate that they found the item intimidating at first. They also all indicated that it had contributed to their **ability to learn**, particularly in that it placed upon participants the responsibility to listen quietly while the holder of the talking piece spoke.
- f. All respondents felt the **background documentation** provided was relevant in that it contributed to their learning. 78% felt that it was sufficient, while 22% felt it was insufficient. None felt it was too lengthy.
- g. Likewise, 78% of respondents felt the **preparatory work** involved between learning circles was appropriate, while 22% felt it was insufficient. None felt it was excessive.

***SECTION 4 KEY TAKEAWAYS:***

- *It would appear that a **diverse group** of approximately 10 participants is conducive to sharing and learning within a learning circle context.*
- ***Structured sessions** appear to enhance the sharing and learning process.*
- *The use of a **talking piece** would appear to contribute positively to the effectiveness of the learning and sharing process.*

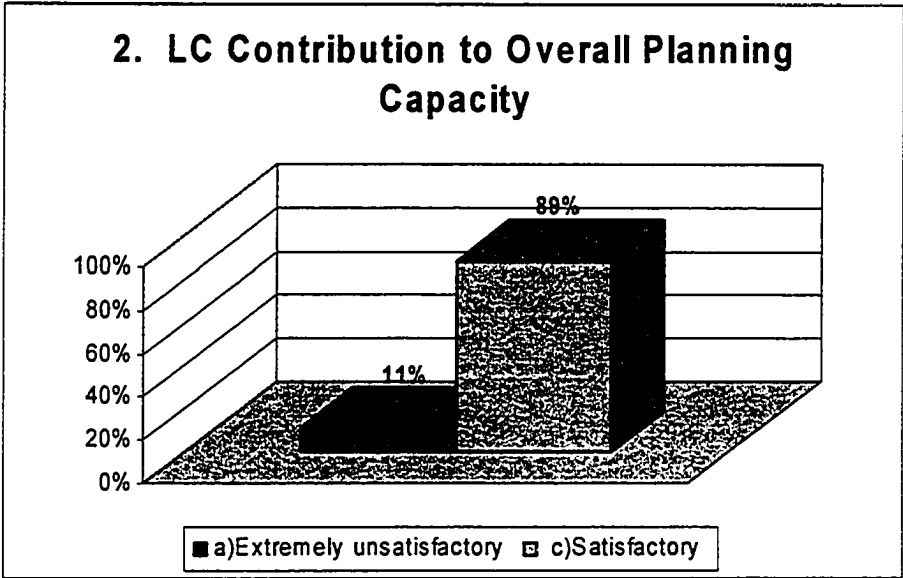
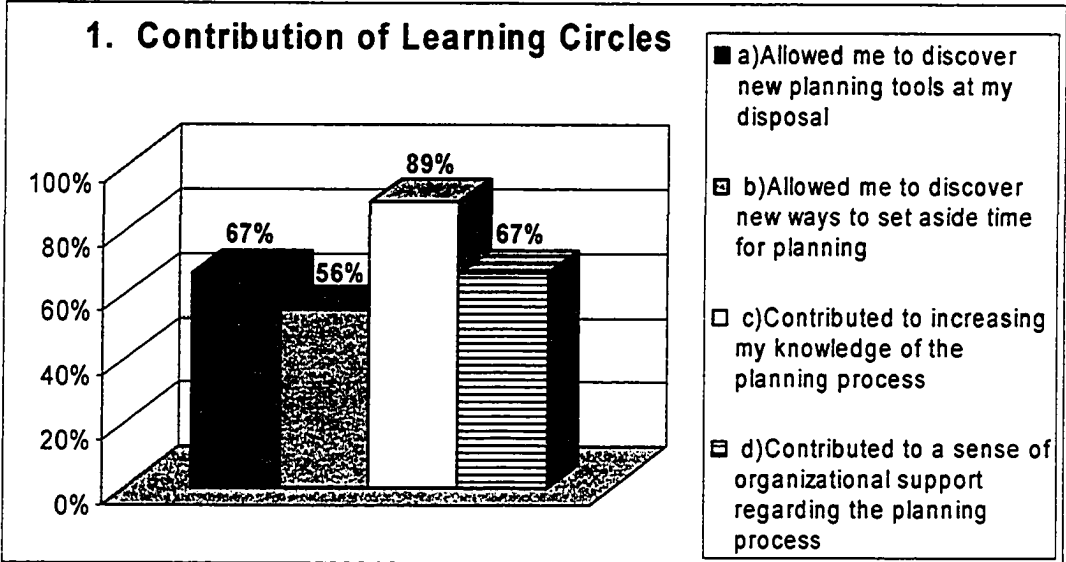
**5. FUTURE INTEREST IN APPLYING THE LEARNING CIRCLES MODEL TO FUTURE RHA MIDDLE MANAGEMENT LEADERSHIP CHALLENGES.**

- b. **All** respondents indicated that they **would participate in future learning circles focused on planning** within the RHA, with the majority (78%) suggesting that the sessions be held once every quarter.
- c. **All** respondents also indicated that they **would participate in future learning circles focused on OTHER middle management challenges** within the RHA, with suggestions for topics including team-building and quality improvement initiatives.
- d. Opinion was varied as to who should be responsible for sponsoring learning circles (i.e. making sure the resources needed are available, e.g. time, material, location, etc.), with 33% of respondents indicating sponsorship should be assumed by VP's, 33% indicating it should be assumed by middle management, and 44% indicating it could be held by others.
- e. Answers also varied as to who should organize and facilitate future learning circles, though most respondents indicated that the organizer should have a keen interest in the topic at hand.

**SECTION 5 KEY TAKEAWAYS:**

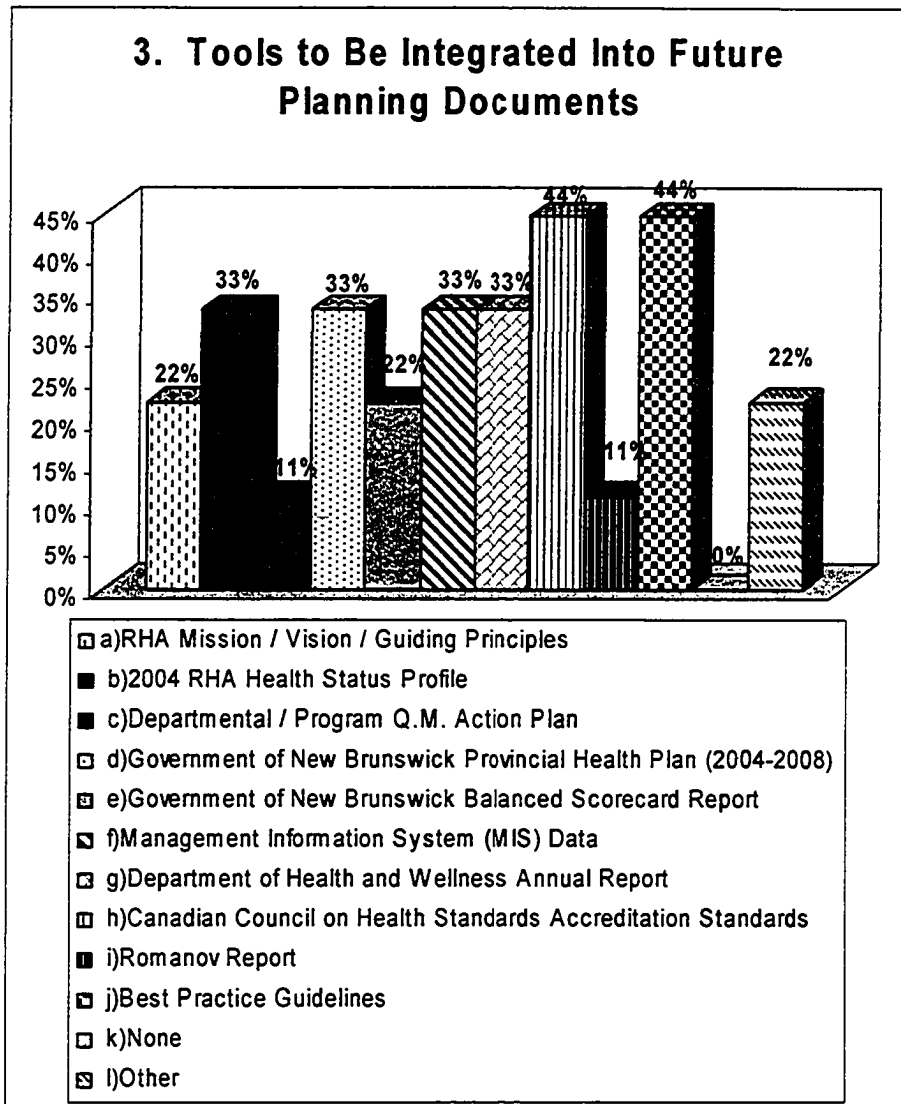
- *All respondents indicated an interest in participating in future learning circles on various topics.*
- *Opinion as to who should oversee the organization, sponsorship and facilitation of future learning circles was varied.*

**SURVEY FINDINGS<sup>1</sup>**

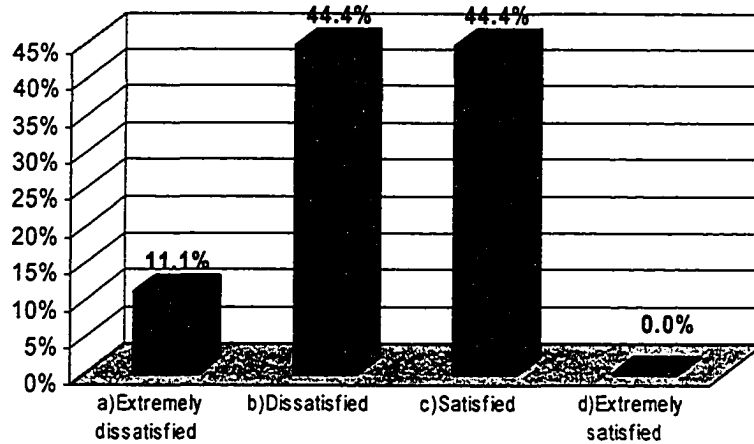


<sup>1</sup> Questions 6 and 9 results were not reported on in this document as no responses were received (both were requests to elaborate on previous question's answer.)

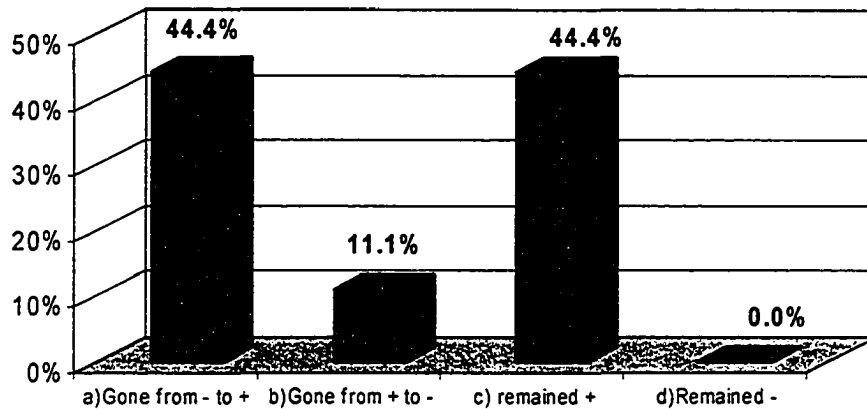




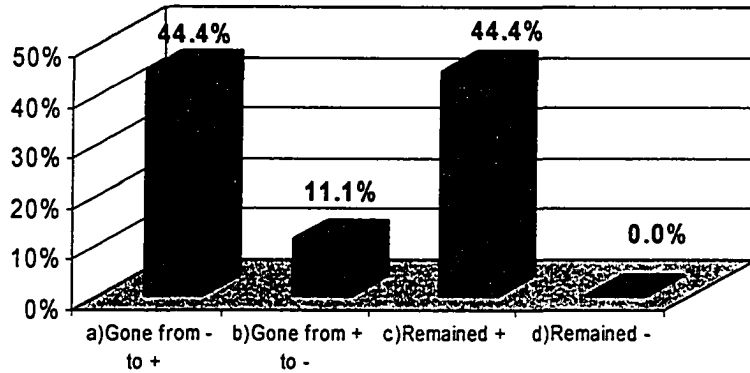
#### 4. Level of Satisfaction With Dept. Planning Tool Pre-LC



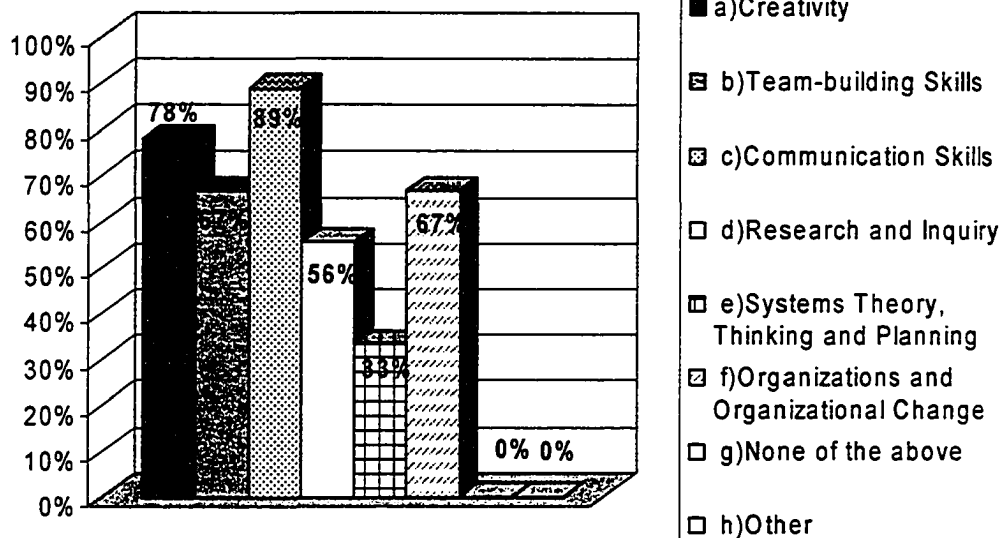
#### 5. Perception that a Plan Can Increase Ability to Lead and Manage Within RHA



### 7. Post-LC Perception that Planning Can Contribute to Organizational Success



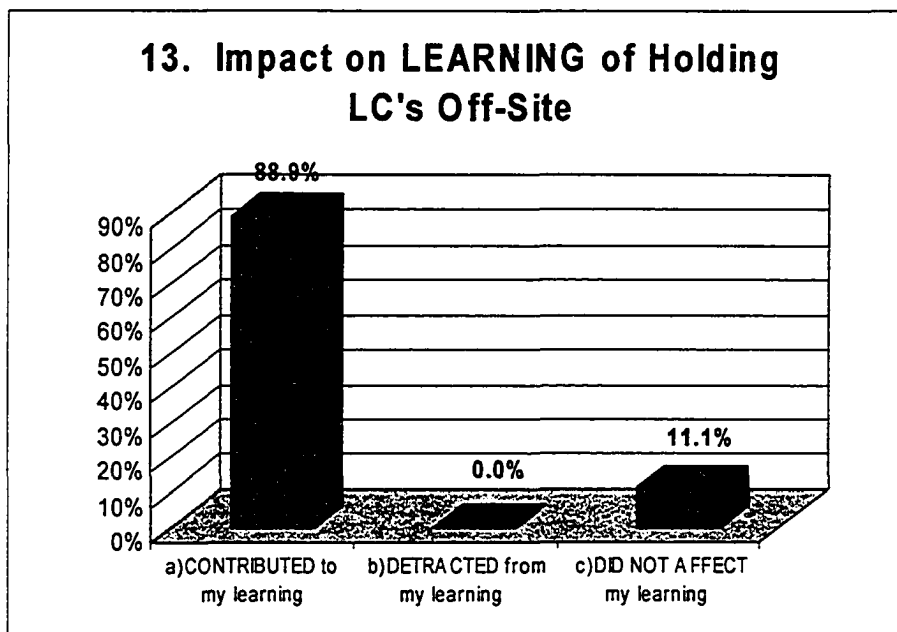
### 8. Leadership Competencies Enhanced by LC



10. EXPECTED (implicit) learning that took place as a result of participation in learning circles:
- The learning that I experienced in this process has enabled me to feel a sense of support and encouragement. Although a work in progress, the planning process is important to the direction of the service provided. I learned how to develop a model that must take into consideration the needs of clients, employees and the RHA. It must be in tune with the mission, vision and guiding principles. I learned that plans could be 1 to 3 years depending on the goals involved. I learned about the format of a planning model i.e. introduction, gap analysis, human resource requirements. It is important to base a plan on bench marks, evidence base practice, standards, and budgetary considerations.
  - I had no expectations going into the learning circle as this was my first experience. I did hope that I would learn something!
  - I realized that everyone is going through the same thing. We all agree that it is very important to take time to plan and to have resource people available.
  - I learned about the planning process; how others make time for planning, how important planning is to the overall scheme of things,
  - It reassured me to see that I am not alone in my challenges and frustration. In addition, I realized that I am not the only one whose plan is still in draft stage.
  - During the learning circles, I expected to get ideas from the other participants that could help me with my planning and also expected that the process would become clearer to me.
  - I learned that if I really want to plan, I have to set time aside. I learned that other managers also sometimes feel guilty about setting time aside for planning. I learned to make better use of the tools made available to me by the Health Authority.
  - Need to involve right players in planning process. Need more planning time or maybe more planning time should be set aside.
11. UNEXPECTED (explicit) learning that took place as a result of participation in learning circles:
- I learned that the planning process need not be complicated nor should it be inflexible and must be adaptable as situations change. I learned that planning should not be done in isolation and that it is important to include stakeholders and partners to various degrees. I learned that I am human and that I have made some discoveries about myself and my role within the learning circle.
  - I feel more organized in what I am doing within the plan. I have a better understand on how to build my plan. I have a great sense of understanding what other groups roles are and how we differ. There isn't one cut and dry table where we all fit. We have different goals, objectives etc. working towards the same mission.
  - I think that all participants tried to share the most information possible. There were no hidden agendas; everything went very smoothly.

- That I'm not the only one having a problem getting planning done. That there are numerous places to find planning tools to assist you
- I learned that certain individuals in the group really take time to explore research and literature before determining their objectives. This made me reflect on the fact that I may rely a little too much on my intuition.
- During the learning circles, I did not expect that with the process I would discover I had more support within the organization. I also learned to involve others more in my planning (i.e. other depts. affected) and that the talking piece would be so helpful in sharing our ideas. I plan to try it at a future staff meeting. I also did not expect to have the confidence that I do in preparing my plan even though I still have questions.
- Getting to know the other participants more. Feeling less isolated as a manager. Becoming more aware of my strengths and weaknesses.
- The effort that all middle management put into their planning, doing a good job and delivering the quality services that is expected of them.

12. All survey respondents felt that holding the learning circles off site had contributed to their LEVEL OF COMFORT (well-being, freedom of expression, freedom from distractions, etc.).



14. All survey respondents felt that holding the size of the learning circle group (10 participants) had contributed to their LEVEL OF COMFORT (well-being, freedom of expression, freedom from distractions, etc.).

15. All survey respondents felt that holding the learning circles off site had contributed to their LEARNING.

16. 89% of respondents felt the diversity/cross representation of the learning circle group had contributed to their LEVEL OF COMFORT. 11% felt it did not affect their level of comfort either positively or negatively.
17. 89% of respondents felt the diversity/cross representation of the learning circle group had contributed to their LEARNING. 11% felt it had detracted from their learning.
18. 56% of respondents felt that food and beverages provided were an incentive to attend learning circle sessions.
19. In regard to food and beverages, participants had the following comments:
  - I believe that the food and beverages were a nice touch but my incentive to attend was based on my learning needs.
  - Regardless if there was food / beverages or not, had no impact on my attending.
  - Having a beverage and something to eat during the sessions made the atmosphere much more friendly and informal. I thought this was a very good way to make people comfortable.
  - I feel that the food and beverages made not much difference to my incentive to be a part of the learning circle. My main incentive was to learn from the others and to find a support to help me do a better job of planning
  - I would have taken part regardless of whether breakfast and coffee were served. However, I am aware that this kind detail had a very positive effect on me, i.e. the idea of going to a meeting during which I could snack and drink my coffee while sharing with others put me in a good mood and made me want to actively participate.
  - It was great to have a lunch during the sessions not that it would be absolutely necessary. I did not expect it but certainly appreciated it. I think that is what made it attractive to me. You feel somewhat appreciated when you are offered something. I think at meetings it is an ice breaker as well.
  - Even without breakfast, I would have participated, but it was nice to share coffee and breakfast with the group while sharing our experience. It made the atmosphere much more relaxed.
20. All respondents felt that the agenda contributed to the effectiveness of the sessions.
21. When asked to elaborate, respondents expressed the following:
  - The agenda provided structure and helped the focus of the group.
  - It was well organized. Without organization, you have confusion.
  - People knew what to expect re. items of discussion and could prepare ahead to answer question. It gave time to think.
  - The agenda was very precise, which kept the conversation to the topic being discussed. Each person shared their ideas on the topic and then it was passed over to the next person. This was a very effective way to keep things on track.

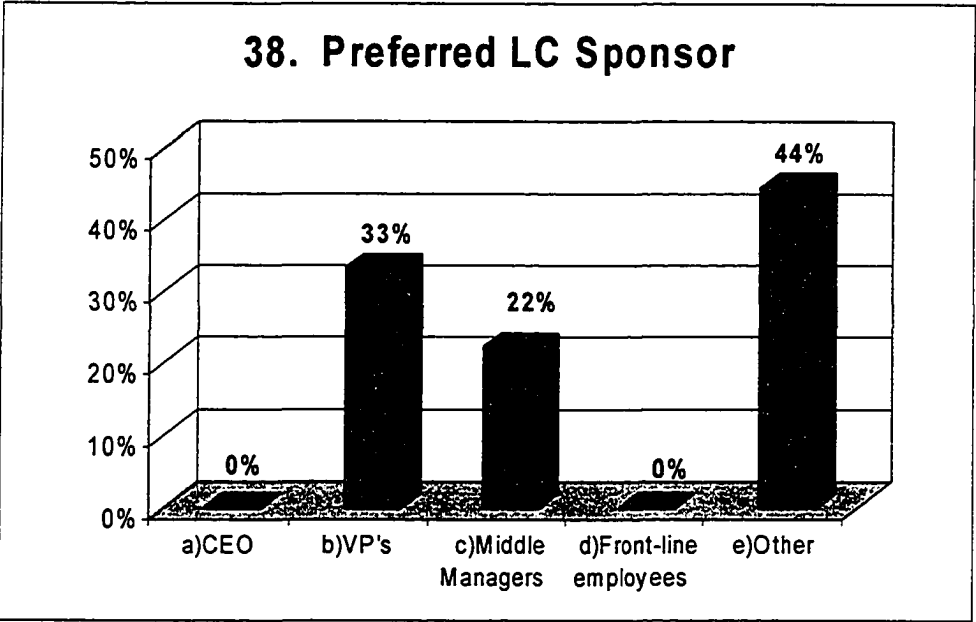
- In addition to situating us re. the work to be done, the agenda was a priceless tool for the facilitator.
  - The agenda was set up prior to each session so you knew what to expect. If we are going to get something out of a session then expectations at the beginning are helpful.
  - The sessions were very well organized. We were treated special each and every one of us.
  - I would have liked to have received an information session on the learning circle process before beginning the sessions so as to have more structure.
22. All respondents also felt the weekly themes had contributed to the effectiveness of the sessions.
23. When asked to elaborate, respondents expressed the following:
- Weekly themes enabled me to understand expectations and minimize anxiety.
  - The subjects of conversation provided made the discussion more lively.
  - The themes provided a frame in which the topic could be discussed and at the same time kept to this specific area.
  - The sequence of the sessions was appropriate and since we are all involved in planning our departments differently with the strategic plan, the themes were very effective.
24. All respondents also felt the questions relating to the themes had contributed to the effectiveness of the sessions.
25. When asked to elaborate, respondents expressed the following:
- The questions relating to the themes contributed to the flow of this process. They helped to spur ideas and maintain focus.
  - With the questions, we had no choice but to answer to the best of our knowledge.
  - They provided a framework in which to develop your thoughts and it helped to formulate your ideas into an actual workable solution to the problems.
  - They guided us to the end result which was a map that we could use in developing our own dept plan.
  - It made us take more time to reflect and prepare more for the group.
26. All respondents felt the talking piece contributed to their ability to share their knowledge.

27. When asked to elaborate, respondents expressed the following:
- The talking piece contributed to my sense of responsibility and also enabled me to own my statements and thoughts. It was empowering.
  - It gave everyone a chance to speak and not be interrupted. It allowed the timid attendees to voice their opinion. Without this, sometimes they will not interrupt a more outgoing person to speak. They often make good listeners and we do not have the chance to profit from their knowledge.
  - Maybe even though I wasn't comfortable with the talking piece, it still helped me share my knowledge with others because of the ground rule stating that talking was limited to the individual holding the talking piece.
  - The talking piece allowed each person an opportunity to give their ideas without interruption from other people. It provided time for each individual to share and be listened to by the rest of the group. This showed respect for each person and gave the person a certain comfort zone to be able to express themselves freely.
  - Once you had the talking piece then you felt on the spot at first but then you realized that you had something to share that someone else might find helpful.
  - Yes, even though overall I also found the talking piece somewhat intimidating. I knew that when it was my turn to speak, I would not be interrupted.
  - It made me realize that we all work under the same umbrella and have the same problems or issues to solve.
28. All respondents felt the talking piece contributed to their ability to learn.
29. When asked to elaborate, respondents shared the following:
- Provided me with a focus and responsibility to listen and acknowledge what others have contributed to me.
  - Less distraction from several conversations going on at once. It also gives the person speaking a sense of confidence that participants were listening and were interested in what was being shared. It gives the listeners a chance to absorb what is being said. Provides a more relaxed environment in the sense that you know you will have your turn to speak, you're not on the edge trying to get a word in.
  - Because we followed the ground rules of this activity very seriously.
  - I had to listen to the other people instead of having my ideas run freely while someone else was speaking. This helped me to listen intently to each person's ideas.
  - The talking piece was a contributing factor in my learning given that it « obligates » each participant to speak and to contribute to the sharing of knowledge. Otherwise, the more shy or self-effacing individuals wouldn't have assumed as large a role, and we wouldn't have been able to benefit as much from what they had to offer.
  - Listening is a great way to learn!
  - Because the person speaking could elaborate on his/her ideas without being distracted and it was easier to keep one's train of thought. The person could

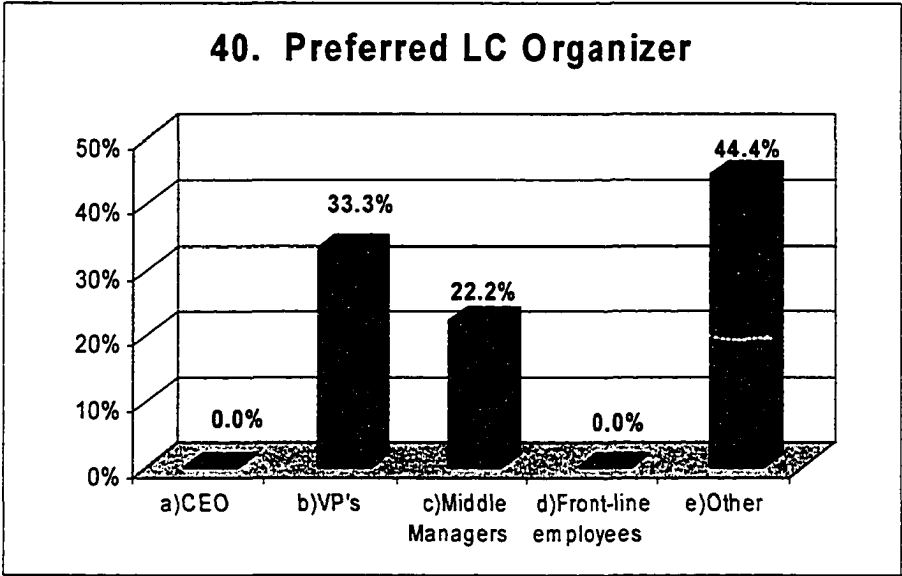


express himself/herself without others deforming his/her ideas (because they thought they had understood) and adding their own ideas.

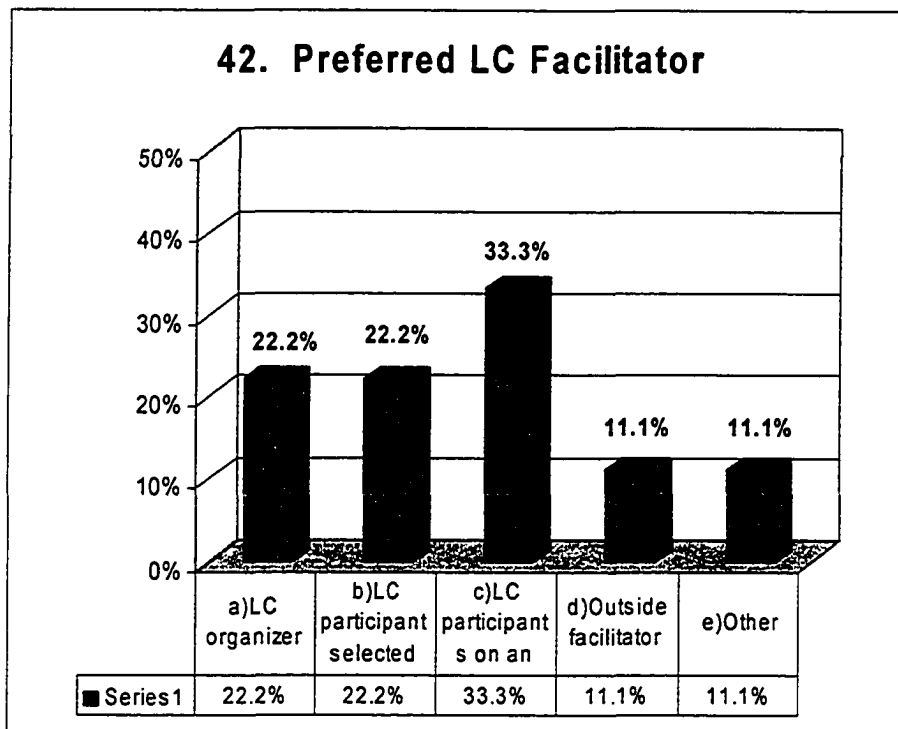
30. All respondents felt that the background documentation contributed to their learning (i.e. made it easier to grasp the subject matter).
31. 78 % of respondents felt the background documentation was sufficient. 22% of respondents felt it was insufficient.
32. 78 % of respondents felt the amount of preparatory work involved between sessions was sufficient. 22% of respondents felt it was insufficient.
33. All respondents indicated that they would participate in future learning circles focused on planning within the Restigouche Health Authority.
34. 78% felt that learning circles focused on planning should be held once every quarter. 22% felt that they should be held once a year.
36. All respondents indicated that they would take part in future learning circles focused on other middle management leadership challenges within the Restigouche Health Authority.
37. When asked to state their top 2 suggestions for learning circle topics, the following answers were received:
  - Strategies for Team Building & Delivering presentations
  - Major changes which occur & Accreditation
  - Personal strategies to deal with change & Performance improvement system
  - Best practice & Outcomes
  - Learning circles could be used to share tips and tricks regarding what works well in certain departments or programs. For example, some managers have effective means of carrying out performance appraisals that tangibly reflect the employee's work over the year. Thanks to certain established strategies, these managers do not spend an inordinate amount of time preparing these appraisals. This is only one example, but I feel that learning circles could be useful in areas where managers frequently encounter problems.
  - Auditing staff charting & Quality indicators.
  - Team building & Communication
  - Attendance & how to motivate employees within their working environment and get the best out of everybody while they are really enjoying their work. This could give them more self esteem and believe that they are part of the decision and that they belong. Policies of the RHA, how they should be applied, respected and followed by everybody (that is dress code, etc.)



39. Of respondents who answered “Other” to question 38, half felt employees at any level of the organization could sponsor a learning circle, while ¼ felt it should be the same person organizing the LC, and ¼ felt it should be the CEO “or” VP “or” middle manager, depending on what the goal and scope of the LC would be.



41. Of respondents who answered “Other” to question 38, half felt that whoever identified the need should be responsible for organizing the LC; ¼ felt it should be an outside facilitator with knowledge of the issue to be examined, and ¼ felt it could be anyone at any level of the organization.



43. Of respondents who answered “Other” to question 42, it was felt that the LC Facilitator should be either the LC Organizer OR the LC participants on an alternating basis.
44. When asked to provide their overall comments on their learning circle experience, respondents indicated the following:
- I feel it is important for all concerned (CEO, VP’s, Middle Managers and Front-line employees) to have an understanding of all of the tools used within the RHA.(Mission, Accreditation and so on). Often we are attempting to fill accreditation's needs etc. and receive comments from front line employees that we are just doing this because! They have a difficult time picturing the RHA's vision. They are not in the same mode as management and middle management. I feel it is our responsibility to get them there. This is a great task. How long it will take and how to get there will be determined by who? I cannot answer that now but feel we are getting closer. This has been a great experience for me. I have learned a great deal and see how I fit into the big picture. I do hope experiences like this one can continue.

- I very much enjoyed this new experience myself, even if at first I was not certain I had much to contribute to the group. In the end, I realized that everyone was going through about the same thing and that we were all there for the same reason: Support amongst ourselves. Thank you so much !
- It was very interesting to take part in this research and was also very constructive because the theme (planning) has been a very controversial topic amongst Health Authority managers over the course of the past few months.
- I enjoyed the experience and at first wondered if it would work in different settings. Initially I thought we were too polite and that there was not much discussion (arguing) going on as in meetings but now I think that the reason was we were in a circle to learn not to pass the buck. After all what does it matter how things were done as long as we recognize that we need to make a change and want to be part of it. The talking piece should be part of many of our meetings, committees, etc.
- Overall, this was a very positive experience, even though it required a lot of time outside the office and a lot of organization because Friday and Monday mornings are harder for me to get out of the office.
- These informal training sessions allow for team building, and help increase support and trust amongst managers as well as providing a training aspect. During these meetings, I realized that managers can find answers to complex situations while having fun. The importance of avoiding work in isolation.

## ***LEARNING CIRCLE METHODOLOGY, CONTENT & FINDINGS***

### **1. METHODOLOGY**

This section looks at how the actual learning circles were carried out, and examines the planning issues discussed and outcomes arrived at by participants.

For the purposes of this study, a total of four learning circles focused on planning within the Restigouche Health Authority were held off-site between April 11 and 22, 2005. In all, ten middle managers from the RHA participated in these 2-hour sessions.

It should be noted that prior to commencing the learning circles upon which the findings herein are based, all voluntary participants were provided with background information and documentation, including:

- An e-mail, a letter, and a follow-up phone call confirming their participation;
- A consent form to participate in learning circles;
- A summary of pre-learning circle survey results, so as to allow participants an overview of current middle management perspectives and concerns on planning within the Restigouche Health Authority;
- A literature review on learning circles, leadership capacity and middle management challenges in healthcare;
- An article on systems thinking (a specific area of concern noted in pre-learning circle survey);
- A series of four agendas for learning circles;
- A learning circle themes and questions booklet;
- A series of ground rules for learning circles;
- A learning circle facilitator's guide;
- Project coding specifications (for protection of participant anonymity);

In all, 9 of the 10 volunteer participants attended the first learning circle, 9 attended the second, all 10 attended the third, and 8 attended the fourth and final learning circle session. Learners represented nursing services, professional services, and support services from the Health Authority (including representatives of Provincial programs). Both men and women were represented within the group, as were both official languages. The learner / researcher facilitated the first session; the three other sessions were facilitated by participants on an alternating and voluntary basis. For these final sessions, the learner / researcher acted as observer, except in those cases where she had been asked to present material prepared by absentee participants.

From the onset, participants in learning circles contributed actively to the process and shared an understanding of their expected learning and sharing outcomes. Case in point, each member arrived at the first session with a statement of intent in hand (based on the information gleaned from the initial survey results, from the literature provided on learning circles, and from their own personal experience). Collectively they combined their statements to arrive at the following statement of intent to guide them through their learning circle activities:

**Statement of Intent**

“We will work together and support each other in developing a uniform planning tool that can guide employees at all levels of the organization.”

Ground rules were also established and were posted during each learning circle:

**Ground Rules**

1. One speaker at a time
2. Open and honest
3. Respect for others’ ideas and opinions
4. Discuss ideas – not personalities
5. Every question is the RIGHT question
6. Start on time – be on time returning from breaks
7. One speaker at a time – respect the TALKING PIECE
8. Build on each others’ thoughts
9. Listen to others
10. RELAX – learning should be FUN

A pocket recording device was used to record the sessions and also served as a talking piece.

“The talking piece is a designated object that is passed hand to hand and grants the holder of the piece the chance to speak without interruption. One person has the floor while other members listen attentively. The purpose of using a talking piece is to guarantee that people are heard, or have the opportunity to be heard.”<sup>2</sup>

All four learning circles were facilitated, the first by the researcher, the last three by volunteer participants.

Agendas were developed for each of the learning circles, each agenda made up of the following items:

1. Breakfast
2. Review of Conclusions & Action Items from Previous Learning Circle
3. Opening the Circle
4. Check In
5. Addressing the Concern (based on daily theme)
6. Confirmation of Action Items for Next Learning Circle
7. Check Out

Outcomes of each of the learning circles (by theme) are summarized below.

2. CONTENT & FINDINGS<sup>3</sup>

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<sup>2</sup> Baldwin, C. (1998). *Calling the circle: the first and future culture*. New York: Bantam Books, p. 67.

<sup>3</sup> All information and anecdotes in this section are derived from the researcher’s personal notes and from

### ***First Session – Breaking Down Silos***

Each session opened with a “check-in” portion, in which participants were asked to voice any hopes, fears, expectations or other that they wanted to share with the group prior to commencing the actual activity. During the first learning circle, focused on breaking down silos, all but one participant opened by stating a desire to learn through this exercise. Two participants also expressed a desire to contribute to the learning of others. The desire to break down barriers and stop working in isolation was also noted, as was a fear of “not fitting in” with the learning circle group.

***“(What I) really liked about the learning circle was ... the environment; the atmosphere is very comfortable, and therefore when we’re concentrating on one individual speaking, that’s what we’re doing. We don’t have to worry about somebody speaking on the side or any other distractions but are actually able to focus on that individual person speaking.”***

The first session was mostly introductory in nature, with the researcher providing an overview of learning circle methodology, and with participants introducing themselves in an effort to break down silos and foster a great understanding of each other’s roles within the organization.

During the check-out portion, members were asked to provide their perception of the process and outcomes for the day. Generally, participants indicated that the initial session had helped them gain a greater understanding of the other individuals seated around the table, and of the issues faced daily by these individuals as middle managers within the Restigouche Health Authority.

One participant indicated appreciation for another’s comment that sometimes you just have to learn to say “no”, i.e. put limits around what is feasible and what is not. Another indicated a keen interest in using the learning circle methodology to learn more about roles within collaborative practice, particularly with regard to orientating the physicians to the roles of various players within the practice.

In their closing comments, participants focused on the learning that had taken place, both in terms of the learning circle process and of getting to know and understand their peers and their planning issues better.

### ***Second Session – Sharing Individual Planning Successes and Challenges***

During the check-in portion of the second learning circle, aimed at sharing individual planning challenges and successes, all participants expressed their enthusiasm at taking part in this process.

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learning circle transcripts.

In regard to challenges faced by managers in terms of planning, almost all participants highlighted time as an issue. The importance of considering all stakeholders and understanding organizational planning tools and guides (i.e. health status profile, quality improvement forms, strategic plan, etc.) was also noted. Some concerns were raised around the lack of clarity in terms of direction, particularly in regards to Provincial vs. Regional mandates. For example, there have been occasions in the past where frustration has arisen when political decisions have not correlated with or taken into account operational requirements, sound management planning or decision-making skills. One participant also noted the difficulty in shifting from a mindset of planning “on the fly” or on a year-to-year basis to planning on a three-year basis.

*Finding the “time” to plan was identified by almost all participants as a significant challenge for middle managers within the RHA.*

In discussing these challenges, participants readily shared any tips they had, i.e. for setting aside time, including leaving pagers with a secretary or assistant, closing the office door, and setting planning time aside before and after meetings.

In terms of successes, participants expressed satisfaction with organizational tools (i.e. health status profile and strategic plan), particularly as a form of validation for their specific planning initiatives. It was noted that while these tools are recognized as planning tools, their value could sometimes be found in the validation and credence they bring to a manager’s planning instincts and intuition (i.e. health status profile). The organization’s overall strategic plan was praised as a useful tool for planning at the departmental level. One participant noted that the efforts from senior management within the organization became obvious after X-mas 2005 with the development of the strategic plan and subsequent information session, and indicated that these obvious efforts by senior management made it easier to buy into the overall three-year planning process and organizational expectations.

*According to one participant, the obvious efforts made by senior management in developing the organization’s strategic plan made it easier as a middle manager to buy into the overall 3-year planning process and expectations.*

*“I am not going to wait, I am going to influence.” – participant asked to elaborate on organizational vs. departmental planning*

Information sharing, i.e. sharing what you know or any tips you have with your peers was highly recommended as one of the best ways of helping others within the organization learn and of increasing personal knowledge. It was recognized that managers need to continuously share their knowledge and expertise, i.e. to make their voice heard. It was noted that this is occurring more frequently and that senior management is beginning to

turn more to its middle managers for advice and to place more credence on their knowledge and expertise. One participant highlighted the fact that system changes and employee turnover at both the Regional and Provincial levels were making it increasingly easier to



have a greater voice in the decisions made at both these levels and to actually have an impact on the system.

Success was also noted in the realization that everything need not be planned out to the “nth” degree and that flexibility should be built into all planning initiatives. In regard to flexibility, most participants felt that while the final outcome of a plan should not normally deviate (e.g. in terms of ultimate objectives), the roadmap must adapt based on changing needs (i.e. “how” to get to where we need to be). Participants also recognized that flexibility is likely to decrease as a plan nears the end of its life cycle.

It was also felt that integration of indicators into planning initiatives could allow for the development of milestones and for course correction if necessary (i.e. by such and such a date, we should have achieved \_\_\_% turnaround time, which will allow us to move on to phase 2; if not, we can review and course correct as applicable). It was also recognized that a plan’s evaluation criteria might change over time.

Finally, it was noted that despite some past planning shortfalls, as an organization we have consistently managed to ensure the quality of services provided to our clients.

In closing, almost all participants indicated that they were leaving with a greater sense of support from their peers as well as an understanding and appreciation of the planning process. They indicated that they felt more comfortable knowing that their concerns were shared by others. One participant indicated not feeling so overwhelmed by the planning process, and another indicated having arrived at the conclusion that it was not necessary to overcomplicate planning matters.

### ***Third Session – Developing a Model Based on Our Experience***

Again, learners opened the third learning circle with a sense of enthusiasm. As a follow-up to the previous session, participants were asked to share what learning they had gleaned from their peers during the second session.

***One participant came to the realization that attendance in learning circles actually addressed a prime planning concern, i.e. “taking the time to learn more about planning requirements”, without fostering any feelings of guilt.***

Lessons learned included integrating a review of pertinent and current literature into the planning process. It was noted that planning could start small and develop over time, that all stakeholders should be considered, that trends could serve as a useful tool in planning, and that planning is time well invested. One participant indicated that the learning

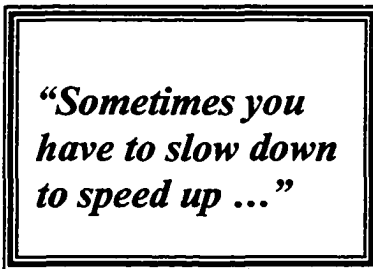
circles, thanks to the input of other middle managers, were helping to “demystify” the planning process. Another commented on the realization that planning must be a deliberate and ongoing effort, i.e. the way we do business, and not a one-time or once-a-year exercise. It was noted that planning must consider the entire system, i.e. while organizational requirements should serve as guide, employee and departmental needs must also be factored

in. As well, participants agreed that the devil is in the details – planning need not be excessively detailed but should serve as a guide. One participant indicated having come to the realization that by taking part in learning circles, the group was actually addressing one of its prime concerns, i.e. taking time to learn about planning, and that there was no need to feel guilty about this. Finally, it was noted that there was value in bouncing ideas off peers and sharing knowledge.

The remainder of the learning circle session then focused on the development of a departmental planning template or model, i.e. the determination of what elements or items should be included in a departmental plan. At the end of the session, items were summarized using the table found on the next page.

#### ***Fourth Session – Ensuring Planning Sustainability***

The fourth and final session opened with a full breakfast and much informal discussion around the learning circle experience thus far. Upon checking in, participants expressed a variety of feelings, including sadness and excitement at seeing the process come to an end, and an expressed interest in seeing similar exercises take place in the future.



Participants indicated that while they felt the planning model developed above had met some concerns expressed by management in the pre-learning circle survey, they did not feel it had addressed them all. It was noted that it was hard to speak on behalf of the entire organization, but that they would start by using the model themselves and expand upon it when developing their own departmental plan.

They did not feel the need to use all elements included in the model, but rather saw it as a grab bag of options that they could pick and choose from.

Participants indicated that much of the model’s value was actually in the background discussions that had gone into developing it, and that it might be hard for non-participants to grasp all the meaning behind it. They thought there could be value in communicating the model developed and the impressions of the learning circle group with the RHA Health and Business Plan Steering Committee, however in general the participants felt that they themselves should be accountable for sharing any learning with their peers, and a few indicated that they would actually like to test the model themselves prior to determining how to share their experience with their peers. It was suggested that this might then present a

1. What do you feel a departmental / program plan should look like (i.e. what will its components be)?	2. What should the plan's lifecycle be?	3. What common tools should all RHA middle management staff use to develop their plans?	4. What stakeholders should all RHA middle management staff consider in developing their plans?	5. What other considerations should RHA middle management staff include in developing their plans?
<p>While the content of each departmental / program plan should ultimately consider who the plan will serve, the plan should serve as a roadmap, i.e. it should be a reference tool to ensure the viability of objectives and should describe how to achieve objectives as laid out.</p> <p>The components listed as being essential to the development of a departmental / program plan are as follows:</p> <ul style="list-style-type: none"> <li>- Introduction, i.e. the “what, where, when, why and how” of the plan;</li> <li>- Mission</li> <li>- Vision</li> <li>- Objectives</li> <li>- Gap analysis (re. resources, needs, objectives), particularly when significant \$\$\$ are attached to gaps, though it was noted that this may be a challenge in direct care</li> <li>- Timeframes around objectives</li> <li>- Budget (level of detail should reflect \$\$\$ attached to the plan)</li> <li>- Statistical data / Literature to support initiatives</li> </ul>	<p>A 3-yr plan allows for the development of a long-term vision and a consistency with the RHA strategic plan's lifecycle. It also allows the time to see results. Renewal of the 3-yr plan and course correction as needed should however occur on a yearly basis,</p> <p>The degree of detail contained within the plan should reflect the needs expressed by the department / program, however, the shorter the time-frame, the more detailed the information should be (i.e. 1<sup>st</sup> yr should be more detailed and precise than 2<sup>nd</sup> yr, 2<sup>nd</sup> yr more detailed than 3<sup>rd</sup>).</p>	<ul style="list-style-type: none"> <li>- RHA Strategic Plan (refreshed)</li> <li>- RHA Mission &amp; Vision</li> <li>- RHA Health Status Profile (refreshed)</li> <li>- Standards (Provincial, National &amp; International Professional &amp; Accreditation Standards)</li> <li>- Current Policies</li> <li>- Budget</li> <li>- Healthcare trends &amp; “better” practice guidelines (evidence-based)</li> <li>- Previous plan</li> <li>- Stakeholder concerns</li> </ul>	<p>ALL internal and external STAKEHOLDERS must be considered in the development of the plan – including everyone who will CONTRIBUTE to the achievement of the plan AND everyone who will BENEFIT from it.</p> <p>This may include:</p> <ul style="list-style-type: none"> <li>- Employees</li> <li>- External Clients (patients &amp; general public)</li> <li>- Internal Clients (Nursing, MD's, specific depts.)</li> <li>- Volunteer organizations</li> <li>- Private sector (based on pre-established criteria), i.e. vendors</li> </ul> <p>Likewise, middle managers as stakeholders should also be considered in strategic decision-making bodies such as at the PAC table</p>	<ul style="list-style-type: none"> <li>- Benchmarking</li> <li>- “Better” practice</li> <li>- Bargaining agreements</li> <li>- Politics and political influences</li> <li>- Budget template (should be provided)</li> <li>- HR capacity (must include vacation, sick time, etc.) and skill levels (for determination of training needs)</li> </ul>

***“While I don’t think I’ll ever be 100% comfortable, the model can’t die here; ... it should be shared, regardless of my comfort level, because in some ways it’s about risk taking.”***

good mentorship opportunity. As for ensuring sustainability, it was noted that there might be value in bringing this learning circle group back together in the future to see how successfully the participants had used and shared the information gleaned.

Most participants agreed that while management forums are a good place to present overall high-level concepts, i.e. any future organizational support of learning circles, it is really in small groups, i.e. with individual Vice Presidents that learning circle participants could share, discuss and elaborate on learning circle outcomes, particularly since smaller

groups make it easier to adapt to individual learning styles.

In terms of next steps in ensuring the success of learning circle discussions held up to date, members felt that future sessions should be held to determine progress, and that a planning resource person be made available to middle management, not just to provide direction but to ask questions and to help people involved develop some kind of comfort level with the process.

The fourth and final learning session closed with participants expressing their appreciation for the learning circle process. One participant elaborated on the feeling of personal discovery that had resulted from the process, and several participants noted the realization that they were not isolated but would have to make an extra and conscientious effort to pursue an interdisciplinary approach to planning and other management issues.

In the final words of one learning circle participant:

***“The sharing of information that has happened here has given me strength, energy. All change is normal and allows for development (... and) these sessions have motivated me to want to bring about change. Many implied objectives have also been achieved through these learning circles, like the sharing of information, respect for the importance of the role of each individual no matter what your discipline, and the realization that issues that may seem insurmountable to an individual become achievable when shared with a group.”***

## ***LEARNING CIRCLE CONCLUSIONS***

### **1. BACKGROUND**

The conclusions arrived at herein are a result of the triangulation of the four research activities conducted within the framework of this action research project. These activities included:

- a. A review of literature on learning circles, leadership capacity and middle management in healthcare;
- b. A pre-learning circle survey on leadership capacity within the RHA (distributed to all RHA middle management);
- c. Learning circle data;
- d. A post-learning circle survey (distributed to all learning circle participants).

The question that ultimately drove this action research project was as follows: “How could learning circles contribute to enhancing the leadership capacity of Middle Managers of the Restigouche Health Authority?”

The sub-questions used in developing the conclusions were as follows:

1. Can learning circles contribute to the planning and visioning skills of middle managers within the RHA?
2. Can learning circles contribute to the leadership competencies of middle managers within the RHA?
3. Can learning circles contribute to the learning (explicit and implicit) of middle managers within the RHA?
4. Can learning circles contribute to the sharing of information by middle managers within the RHA?
5. Are middle managers within the RHA interested in pursuing the concept of learning circles as a forum for developing leadership capacity?
  - a. What are the factors that contributed to participants’ satisfaction/dissatisfaction with learning circles?
6. Will the organization as a whole support the concept of learning circles?
7. What factors are critical to the viability, credibility and sustainability of learning circles?

The initial interest in the concept of learning circles and their potential as a catalyst for enhancing leadership capacity within the RHA can in large part be linked to the fact that they are for the most part self-led and do not rely on a lecturer or an expert to guide the discussions (Learning Circles Australia, 2005). To the researcher, this meant that once the initial action research had been carried out, there was potential to motivate learning circle participants to adopt the learning circle format themselves in exploring further leadership challenges faced by middle managers.

This potential was made obvious during the first learning circle, at the end of which one participant indicated that the learning circles might prove useful in developing the

collaborative practice model currently being implemented by the Restigouche Health Authority (Learning Circle #1 Transcript, April 11, 2005).

## 2. PLANNING WITHIN THE RHA

For the purpose of this study, the researcher chose to focus the learning circles on a current leadership dilemma faced by middle management within the organization, namely tying departmental / program needs into organizational strategic initiatives, i.e. planning.

In regard to strategic planning, Senge (1994) states that successful and shared visions rarely come exclusively from “the top” or from figures of authority. He qualifies this by explaining that to be successful, a vision will be shared, and to be truly shared, this vision must connect the personal vision of individuals from throughout the organization. In other words, building this collective vision will require leaders to share their personal vision, and to request the support of their peers and followers in sustaining this vision. It is important to note that he does not discredit the value of personal vision, stating that personal vision is in fact inherent to leaders and will likely often contribute to them caring about a shared vision. It is however through this development of a shared vision built on personal visions that organizations will ultimately achieve the visionary leadership they so seek.

To relate this back to the application of learning circles in developing planning and visioning skills, Baldwin (1998) explains how by its very premise a learning circle will in a sense devoid individuals of their exclusive ownership of a concept. They will have to relinquish their control of their vision to the synergy of a group, and allow a new holistic vision to emerge. In this sense, learning circles can set the stage for the development of the shared vision recognized by Senge (1994),

Prior to conducting the learning circles, the researcher felt it imperative to determine the current level of satisfaction in terms of middle managers’ current planning initiatives and how this contributed to their ability to lead and manage within the organization. An initial survey on leadership capacity was distributed for the purpose of drawing this virtual line in the sand, and a 23% response rate was received. Results from the initial survey showed that 63% of respondents were satisfied with their planning initiatives to date (Pre-Learning Circle Leadership Capacity Survey, March 24, 2005).

In the post-learning circle survey, respondents commented on their recognition that all RHA staff should understand why we do what we do. They spoke of having achieved a greater understanding of where they fit into the big picture. In the words of one respondent: “We have different goals, objectives, etc. working towards the same mission” (Post-Learning Circle Leadership Capacity Survey, April 29, 2005)

Overall, 89% of post-learning circle survey participants indicated that they considered learning circles had contributed to their overall planning capacity in a satisfactory fashion. More specifically, 67% indicated that the learning circles had allowed them to discover new planning tools at their disposal, 56% that the sessions had allowed them to discover new

ways to set aside time for planning, 89% that it had contributed to their knowledge of the planning process, and 67% that the circles had contributed to a sense of organizational support regarding the planning process (Post-Learning Circle Leadership Capacity Survey, April 29, 2005).

The development of a planning template during the 3<sup>rd</sup> learning circle was further proof as to how the personal knowledge of individuals could be combined to develop a shared vision.

Based on these findings, it would appear that learning circles can in fact contribute to the planning and visioning skills of middle managers within the RHA.

### 3. CONTRIBUTION OF LEARNING CIRCLES TO LEADERSHIP COMPETENCIES WITHIN THE RHA

This section focuses on those areas where learning circles might prove most beneficial to developing leadership competencies and hence enhancing the leadership capacity of middle management within the RHA.

#### *Communication – Breaking Down Silos*

Analysis of the initial survey results showed that of the six leadership competencies<sup>11</sup> cited by the learner/researcher, all were identified by at least 79% of respondents as inherent to the planning process (Pre-Learning Circle Leadership Capacity Survey, March 24, 2005). This showed a correlation between leadership capacity and planning as described by Yukl, who purports that successful leadership will be defined by fostering organizational change through the development of a future vision and attainment of strategies, through the communication of this vision, and through the empowerment of others to carry this vision through (2002).

Of the six leadership competencies, communication was identified most frequently, that is by 95% of respondents, as crucial to planning (Pre-Learning Circle Leadership Capacity Survey, March 24, 2005). Of respondents, 68% felt they possessed communication skills, and 47% indicated a desire to further develop these skills. In tying this back to planning, where dissatisfaction with departmental / program plans was reported to exist (in 37% of cases) it stemmed in large part from a lack of cohesion within the organization and from working in silos, both factors that can result from poor communication as noted by Kouzes & Pozner who cite that "...we're helpless if left to ourselves. Socially and professionally, we need other people" (2002, p. 260).

As a result, the researcher chose to focus the initial learning circle session on breaking down silos. According to the Reconciliation Learning Circle Kit (Copyright Commonwealth of

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<sup>11</sup> Leadership competencies identified by the learner / researcher for survey purposes were the following: 1. Creativity; 2. Team-building skills; 3. Communication skills; 4. Research and Inquiry; 5. Systems theory, thinking & planning; 6. Organizations and Organizational change.

Australia, 1999), encouraging communication is consistent with the aim of most initial learning circle sessions.

Based on the Post-Learning Circle Survey results, it would appear that the learning circle format achieved the purpose of fostering communication, with 89% of participants indicating that learning circles had contributed to enhancing their communication skills (Post-Learning Circle Leadership Capacity Survey, April 29, 2005).

One participant had the following to say about breaking down silos, the communication that took place during learning circles and the unexpected (explicit) learning that resulted from it:

“I have a great sense of understanding what other groups’ roles are and how we differ. There isn’t one cut and dry table where we all fit. We have different goals, objectives, etc. working toward the same mission.” (Post-Learning Circle Leadership Capacity Survey, April 29, 2005).

As a result, it would appear that learning circles can contribute to enhancing communication within the organization, while simultaneously addressing a leadership gap identified in a recent article published by Canadian Healthcare Manager (2004), in which all sixteen Canadian healthcare leaders interviewed identified a need for increased cooperation at all levels of healthcare.

#### ***Developing Other Soft Skills for the Purpose of Enhancing Leadership Capacity***

Pre-learning circle survey results also revealed that 89% of respondents attributed other leadership skills commonly referred to as “soft” skills (namely creativity and team-building) to the success of planning initiatives (Pre-Learning Circle Leadership Capacity Survey, March 24, 2005). Julie T. Chyna (2000) speaks specifically of the need for middle managers to move towards these soft skills in their quest to become successful leaders. This also relates back to 2 of the roles recognized by Boothe & Farquhar (2003) as being inherent to middle managers of the future, namely building relationships and building, leading, and participating in teams.

Based on post-learning circle survey results, it would appear that there is significant potential to increase these soft skills through learning circles given that 78% of respondents indicated that the sessions had enhanced their creativity, and that 67% felt that the learning circles had contributed to their team-building skills (Post-Learning Circle Leadership Capacity Survey, April 29, 2005).

The following are a few excerpts from the Post-Learning Circle Leadership Capacity Survey that relate back to learning circles and their contribution to creativity and team-building:

“I learned that the planning process need not be complicated nor should it be inflexible and must be adaptable as situations change. I learned that planning should not be done in isolation and that it is important to include stakeholders



and partners to various degrees. I learned that I am human and that I have made some discoveries about myself and my role within the learning circle.”

“These informal training sessions allow for team building, and help increase support and trust amongst managers as well as providing a training aspect. During these meetings, I realized that managers can find answers to complex situations while having fun.” (Post-Learning Circle Leadership Capacity Survey, April 29, 2005).

As in the case of communication, it would appear that learning circles can contribute to enhancing creativity and team-building within the organization, hence contributing to two of the five practices of leadership cited by Kouzes & Posner (2002), namely “challenging the process” through creativity, and “encouraging the heart” by building a strong sense of collective identity and community spirit.

### *Other Leadership Competencies*

While Research and Inquiry; Systems Theory, Thinking & Planning; and Organizations and Organizational Change were all identified by RHA middle management as competencies required for planning, the first two rated lowest when it came to middle managers’ grasp of them. Systems Theory, Thinking & Planning was the leadership competency that middle managers most hoped to develop (Pre-Learning Circle Survey, March 24, 2005), but that was least enhanced by learning circles, with only 33% of respondents indicating that learning circles had contributed to this competency (Post-Learning Circle Leadership Capacity Survey, April 29, 2005).

Despite this perception by respondents, answers to related questions on implicit and explicit learning derived from learning circles seemed to indicate a good grasp on Systems Theory, Thinking and Planning. Case in point:

“I learned to develop a model that must take into consideration the needs of clients, employees, and the RHA. It must be in tune with the mission, vision and guiding principles. I learned that plans could be 1 to 3 years depending on the goals involved. I learned about the format of a planning model i.e. introduction, gap analysis, human resource requirements. It is important to base a plan on bench marks, evidence base practice, standards, and budgetary considerations” (Post-Learning Circle Leadership Capacity Survey, April 29, 2005).

This quote would appear to meet the criteria laid out in the definition of Systems Theory, Thinking and Planning provided in the Royal Roads University MALT Program Overview of Competencies (2003, p. 6), which reads as follows:

“The extent to which the leader understands and applies systems theory and systems thinking within and with others as he or she explores relationships among individuals in groups and teams, among groups in organizations,

organizations in national and global settings, and in a variety of local and global ecosystems.”

Of Post-Learning Circle Survey respondents, 56% indicated that learning circles had contributed to their Research and Inquiry Skills and 67% indicated that the circles had contributed to their understanding of Organizations and Organizational Change (April 29, 2005).

The increased awareness around Research and Inquiry Skills is evidenced by one learning circle participant’s acknowledgement that:

“I learned that certain individuals in the group really take time to explore research and literature before determining their objectives. This made me reflect on the fact that I may rely a little too much on my intuition.”

In regard to Organizations and Organizational Change, one learning circle participant noted the following:

“I learned about the planning process, how others make time for planning, how important planning is to the overall scheme of things.”

Based on these results, it is the researcher’s opinion that while there does exist potential to develop these three competencies through learning circles, further and more detailed inquiry would be needed to determine the effectiveness of applying the learning circles format exclusively to the enhancement of these competencies.

#### ***Overall contribution of learning circles to leadership competencies***

Overall, it would appear that the greatest contribution of learning circles to leadership competencies and capacity lies in the realm of enhancing leadership skills traditionally referred to as “soft” skills.

#### **4. CONTRIBUTION OF LEARNING CIRCLES TO LEARNING WITHIN THE RHA**

Peter Vaill espouses the premise that “managerial leadership is not learned; managerial leadership is learning” and that the current and ever-changing systems within which leaders and managers must work require continual learning and hence innovation and creation (1996, p. 126). This section seeks to determine whether learning circles can enhance leadership capacity within the organization by contributing to continual learning within the RHA.

During the second learning circle, held on April 15, 2005, participants were asked to describe their planning efforts to date and to elaborate on any planning challenges and successes they had experienced as middle managers. During the third session, on April 18, 2005, they were then asked to describe any learning they had experienced in listening to the other participants.

All participants actively contributed to the discussions, openly sharing their challenges and successes. During the third session, all participants were very enthusiastic in describing their learning experience and what they had learned about the planning process through listening to their peers. The following briefly describe the key learnings that were noted by participants in relation to planning:

1. Literature reviews, internet searches, and the review of trends can contribute to the validity and reliability of planning initiatives;
2. Planning and research take time; we should make it an essential part of every day without feeling guilty about it;
3. Project management skills can be applied to planning;
4. Employee input can be very valuable in stakeholder consultation;
5. Flexibility and simplicity can facilitate planning while a quest for ultimate perfection and detail can make the planning process much more daunting;
6. Peer consultation is invaluable to planning;
7. All managers have small plans and projects on the go; these can be expanded upon for the purpose of developing three-year plans;
8. Attitude towards planning must change from “don’t have the time” to “must take the time”.

(Learning Circle #3 Transcript and Researcher’s Notes, April 18, 2005)

In the post-learning circle survey, 89% of respondents spoke of the implicit (expected) learning that had taken place as a result of their participation. Some of the respondents indicated having come into the exercise hoping to learn anything they could, and most spoke of the sense of support, solidarity and encouragement derived from the overall learning experience (Post-Learning Circle Leadership Capacity Survey, April 29, 2005).

In regard to explicit (unexpected) learning, 89% of respondents commented, citing learning in terms of self-discovery, peer openness, an appreciation of peers’ roles and support, increased confidence, shared management challenges, and an appreciation for the learning circle methodology (Post-Learning Circle Leadership Capacity Survey, April 29, 2005).

In their final appreciation of the learning circles exercise, one survey respondent spoke of having gained a greater understanding of where they fit into the big picture (Post-Learning Circle Leadership Capacity Survey, April 29, 2005).

All survey respondents indicated that the talking piece, an inherent component of the learning circle format, had contributed to their ability to learn. Of respondents, 89% felt that holding the learning circles off site had contributed to their learning, while 11% indicated it had had no impact on their learning. Similarly, 89% of respondents felt the diversity and cross representation of the learning circle group had contributed to their learning, with 11% indicating that it had distracted from their learning (Post-Learning Circle Leadership Capacity Survey, April 29, 2005). This is in keeping with Collay, Dunlap, Enloe & Gagnon (1998), who maintain that leadership is found within a group as a whole as well as within individuals, and that different leaders and forms of leadership can positively contribute to learning at different times, in different settings, and in different circumstances.

Based on these results, it is the researcher's opinion that learning circles could enhance leadership capacity within the Restigouche Health Authority by contributing to continual learning.

##### 5. CONTRIBUTION OF LEARNING CIRCLES TO SHARING WITHIN THE RHA

Schein (1992, p. 10) maintains that culture within an organization can be seen as the "accumulated shared learning of a given group, covering behavioral, emotional, and cognitive elements of the group members' total psychological functioning". This section seeks to determine whether learning circles can in fact contribute to the sharing of knowledge within the RHA and hence enhance a culture of leadership within the organization.

Collay, Dunlap, Enloe & Gagnon (1998, p. 32) state that learning circle participants will model ways in which to share the "knowledge they have constructed through individual learning and to reconstruct what they know through collaborative learning".

An implicit discovery made by the researcher involved the admission by several participants that prior to the first session, they had harbored a slight fear of "not fitting in" with the group or "not having anything to contribute" to the group. It should be noted that the researcher had not initially considered these anxieties as a potential barrier to the planning and learning process.

However, it would appear that once they had overcome the initial reluctance to speak into a portable recording device (used as the "talking piece" for the purpose of these learning circles), learners grew more comfortable with sharing their experience and with the overall learning circle process. All participants contributed, and the process of only speaking when holding the talking piece was respected by all at all times.

In the words of participants:

"During the learning circles ... I also learned to involve others more in my planning (i.e. other depts.. affected) and that the talking piece would be so helpful in sharing our ideas. I plan to try it at a future staff meeting."

"... the idea of going to a meeting during which I could snack and drink my coffee while sharing with others put me in a good mood and made me want to actively participate."

"The talking piece contributed to my sense of responsibility and also enable me to own my statements and thoughts. It was empowering"

"I very much enjoyed this new experience myself, even if at first I was not certain I had much to contribute to the group. In the end, I realized that everyone was going through about the same thing and that we were all there for the same reason. Support amongst ourselves. Thank you so much!"

(Post-Learning Circle Leadership Capacity Survey, April 29, 2005)

Based on these findings, it would appear that learning circles can contribute to the development of a culture of leadership through shared learning, and hence leadership capacity, as described by Schein (1992).

#### 6. RHA MIDDLE MANAGEMENT INTEREST IN FUTURE LEARNING CIRCLES FOR THE PURPOSE OF ENHANCING LEADERSHIP CAPACITY

Senge (1990) associates learning to change, that is to a re-creation of ourselves, to an ability to extend beyond our perceived limits. Schein (1992) maintains that leaders must recognize the potential for this extension of one's abilities within themselves, and that for this to occur, these individuals must be actively involved in the process of change. Based on this premise, the researcher felt it critical to determine whether there was interest amongst learning circle participants to pursue future learning circle activities for the purpose of learning and leading within the RHA.

When directly asked the question if they would take part in future learning circles focused on planning within the RHA, all survey respondents indicated that they would. They also all indicated that they would take part in future learning circles focused on other middle management leadership challenges within the RHA.

The following statement by a learning circle participant is in keeping with the perceptions noted above that individuals must come to a realization of their potential on their own through active involvement:

“Initially I thought we were too polite and that there was not much discussion (arguing) going on as in meetings but now think that the reason was we were in a circle to learn not to pass the buck. After all what does it matter how things were done as long as we recognize that we need to make a change and want to be a part of it.”

(Post-Learning Circle Leadership Capacity Survey, April 29, 2005)

Subject of interest for future learning circles were as follows:

- Team building (2 respondents)
- Change and dealing with change (2)
- Best practice (tips & tricks) (2)
- Indicators & Outcomes (2)
- Communication (2)
- Performance improvement & employee motivation (2)
- Attendance
- Auditing staff charting
- Accreditation
- Policy application

(Post-Learning Circle Leadership Capacity Survey, April 29, 2005)

Based on post-learning circle survey feedback, it would appear that the following factors did contribute to the success of learning circles to varying degrees:

- Holding the learning circles off-site;
- Size of learning circles (10 participants);
- Group diversity;
- Food & beverages;
- Session structure (i.e. agenda; overarching themes; series of pre-established questions relating to themes);
- Background information;
- Talking piece;

(Post-Learning Circle Leadership Capacity Survey, April 29, 2005)

In developing the conclusions section of this document, the learner / researcher does note that having the sessions facilitated was not factored in as a measure for success, nor were the ground rules, nor were respondents asked to elaborate on further factors that might have contributed or detracted from learning or from level of comfort. This should be noted as a limitation of the research.

One respondent did indicate that additional information on the learning circle process itself, beyond what was provided in the literature review and initial session, would have been appreciated.

In light of the above, it would appear that there is a marked interest on the part of learning circle participants to pursue future learning circle activities for the purpose of learning and leading within the RHA.

#### 7. ORGANIZATIONAL SUPPORT FOR LEARNING CIRCLES AS A MEANS OF ENHANCING LEADERSHIP CAPACITY WITHIN THE RHA

According to a survey administered by Kouzes & Posner (2002) to over seventy-five thousand people around the world, 35% of respondents look to a leader for support. Yukl (2002) further purports that superiors can facilitate conditions for leadership development by supporting their employees. As a result, the researcher feels it is pertinent to determine the level of support that can be expected from the organization in regard to learning circles.

This having been said, it would be presumptuous on the part of the learner / researcher to affirm the degree or type of organizational support that will be forthcoming from Senior Management as a result of this action research project. However, it should be noted that the organization, through the project sponsor (Mr. Jean Boulay, Vice President – Corporate Services), has supported all measures taken and findings made to date. The organization has openly committed (Management Forum on Strategic Planning, October 2004 and January 2005) to supporting middle management in its actions to become more influential in organizational decision-making. In discussions with the learner / researcher, the project sponsor has repeated this commitment, in particular with regard to learning circles. He has

affirmed that time spent on organizational planning, on middle management skills development and on leadership development is time well spent.

By supporting the learning circles carried out for the purpose of this study, the organization incurred various expenses, particularly in terms of the time commitment on behalf of middle management staff. In all, a total of 80 middle management hours (including researcher) were spent in learning circle sessions per se, and it is estimated that an additional 14 hours of middle management time was incurred for completion of the pre- and post-learning circle on-line surveys. It is difficult to estimate the time spent on learning circle preparation by participants, however affording a ball park figure of one half hour of preparation per learning circle per participant would account for an additional 18 hours of middle management time. In all, this represents a total of 112 middle management hours afforded to planning activities by the organization for the purpose of enhancing leadership capacity.

Where lack of time, organizational support and cohesiveness were consistently identified by middle management as a barrier to successful planning initiatives within the Restigouche Health Authority prior to and while carrying out the learning circles, the researcher concludes that the time afforded by the organization to learning circle activities (which aim to break down silos) is an effective, tangible and significant demonstration of organizational support to an identified middle management challenge.

All audio-visual equipment used for the purposes of these sessions was also provided by the organization.

It should be noted that the learner's preparatory time, learning circle material (stationary supplies) and the costs incurred for facilities rental and catering services (approximately \$350) were assumed by the learner. The learner volunteered to pay these costs as the influence of these factors on the success of learning circles was not known, and research into these factors had not shown them to be critical to the success of the learning circles. However, based on post-learning circle results it would appear that these factors did in fact contribute to varying degrees to creating an atmosphere conducive to sharing and learning, and should be considered in the preparation of future learning circles.

Finally, the organization has shown a keen interest in receiving the results of this research through a report-out to the Restigouche Health Authority Health and Business Plan Steering Committee and Corporate Services Committee, for the purpose of sharing, supporting, advancing and helping to sustain any learning that has occurred as a result of learning circles. This would appear to further demonstrate the organization's support of the learning circle premise.

#### **8. ENSURING THE VIABILITY, CREDIBILITY AND SUSTAINABILITY OF LEARNING CIRCLES AS A MEANS OF ENHANCING LEADERSHIP CAPACITY WITHIN THE RHA**

Kouzes & Posner forge a very strong link between credibility and leadership, purporting that credibility is in fact "the foundation of leadership" (2002, p. 32). In light of this, the

researcher felt it critical to determine how the findings of the learning circles could be communicated and supported by the organization in such a way that middle management would not only accept the findings, but truly believe in the potential of learning circles as a means to further enhance leadership capacity within the RHA.

For this reason, learning circle participants were asked during the fourth learning circle to describe what support systems they felt would be essential to ensure the successful development of their plans, how to communicate learning circle findings and how to ensure that learning circle outcomes are successful (i.e. sustainable).

The questions around this section could perhaps have been clearer, that is to say that participants wondered if the questions developed for the fourth learning circle relating to these issues addressed the plan template developed or the actual learning circle activities. However, following some discussion, all agreed that the plan itself was but a measure of the learning circle process, and that the process itself was what should be measured.

In terms of communicating learning circle findings (i.e. the plan template), participants expressed a desire to see the model fine tuned, and for the large part felt that they themselves had a significant role to play and responsibility in sharing their learning and what they had gleaned from the template with their peers. It was also noted that the sharing of these findings should be done on an individual basis or at the very least in small groups, allowing for individual learning styles. Means suggested for sharing this information in small groups included calling future learning circles, setting up or using existing multidisciplinary groups, developing planning mentors, and identifying resource persons to assist with application of the planning template to departmental/program plan development. It should be noted that participants even identified some of their peers seated around the table as strong leaders and potential future mentors / resource people. One participant also suggested that regular follow-ups be made by resource people to make sure that all managers are on the right track, and that this might be carried out through general management forums, which in the view of participants are larger and better suited to higher level issues.

(Learning Circle #4 Transcript and Researcher's Notes, April 22, 2005)

In terms of communicating learning circle findings, it was suggested that a newsletter describing the learning circle experience might be worthwhile, though participants agreed that written communication should be supported by verbal measures as well so as to take into account the various learning and communication styles of various individuals. Participants were comfortable with reporting the validated learning circle findings out to the RHA Health and Business Plan Steering Committee.

(Learning Circle #4 Transcript and Researcher's Notes, April 22, 2005)

As to critical next steps in ensuring the success of learning circle discussions and process, participants suggested holding a follow-up learning circle on planning progress in three months to determine how effective the learning had actually been. The learning circle could consist of a mix of current participants and new middle management representatives. It was felt that the session would have to be well organized and facilitated, and that the learning circle process would have to be properly outlined for new participants. Here again, it was



felt that communication of validated findings and support by the RHA Health and Business Plan Steering Committee for the process would be critical to ensuring the success of the process.

(Learning Circle #4 Transcript and Researcher's Notes, April 22, 2005)

As a result, it is the opinion of the researcher that future sustainability, viability and credibility of learning circle findings can be determined by allowing learning circle participants to use and share the information gleaned, by submitting a report-out document on learning circle results for the RHA Health and Business Plan Steering Committee, and by holding a future organizationally sponsored learning circle on planning progress.

## ***OVERALL CONCLUSIONS***

In all, this action research project will have spanned a period of approximately seven months (from the time of proposal submission to report finalization). It has been supported throughout by Royal Roads University, through the Project Supervisor, Mr. Scott Comber, Ph.D., and by the Restigouche Health Authority, through the Project Sponsor, Mr. Jean Boulay, Vice President – Corporate Services. The researcher would be amiss to neglect the additional and enthusiastic contribution of and support by RHA middle management staff and the Health and Business Plan Steering Committee.

While the process of analyzing outcomes and reporting out on findings has been delayed and undermined somewhat in light of the researcher's recent health issues, it is her sincere hope that the findings herein will render justice to the initial intent of this project, i.e. to determine how learning circles could contribute to enhancing the leadership capacity of Middle Managers of the Restigouche Health Authority by applying the learning circle concept to a current Middle Management challenge, namely planning.

In summary, the project's conclusions are as follows:

1. Can learning circles contribute to the planning and visioning skills of middle managers within the RHA?

**Based on learning circle outcomes (development of planning template) and findings, it would appear that learning circles can in fact contribute to the planning and visioning skills of middle managers within the RHA.**

2. Can learning circles contribute to the leadership competencies of middle managers within the RHA?

**Overall, it would appear that the greatest contribution of learning circles to leadership competencies and capacity lies in the realm of enhancing leadership skills traditionally referred to as "soft" skills.**

3. Can learning circles contribute to the learning (explicit and implicit) of middle managers within the RHA?

**Based on learning circle outcomes and findings, it is the researcher's opinion that learning circles could enhance leadership capacity within the Restigouche Health Authority by contributing to continual learning.**

4. Can learning circles contribute to the sharing of information by middle managers within the RHA?

**Based on learning circle findings, it would appear that learning circles can contribute to the development of a culture of leadership through shared learning, and hence leadership capacity.**

5. Are middle managers within the RHA interested in pursuing the concept of learning circles as a forum for developing leadership capacity?

**It would appear that there is a marked interest on the part of learning circle participants to pursue future learning circle activities for the purpose of learning and leading within the RHA.**

6. Will the organization as a whole support the concept of learning circles?

**It is the opinion of the researcher that the time afforded by the organization to learning circle activities is an effective, tangible and significant demonstration of organizational support to an identified middle management challenge. The organization's support of the learning circle premise would appear to be further evidenced by its keen interest in receiving the results of this research through a report-out to the Restigouche Health Authority Health and Business Plan Steering Committee and Corporate Services Committee for the purpose of sharing, supporting, advancing and helping to sustain any learning that has occurred as a result of learning circles.**

7. What factors are critical to the viability, credibility and sustainability of learning circles?

**It is the opinion of the researcher that future sustainability, viability and credibility of learning circle findings can only be determined once learning circle participants have had the opportunity to use and share the information gleaned, once this report-out document on learning circle results has been submitted to the RHA Health and Business Plan Steering Committee, and once a future organizationally sponsored learning circle on planning progress has been held.**

*“Success is often the result of taking a misstep in the right direction.”*

(Al Bernstein, BrainyQuote, 2005)

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Author Note

During the course of this project, the author reverted from the name of Christine Cowan to her birth name of Christine Raymond. Many of the appendices refer to the author as Christine Cowan.