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# Creating Space: an evaluation of bitesize coaching

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## Introduction

Oxford Academic Health Science Network [AHSN] were asked by NHS South East Leadership Academy [SELA] to evaluate their bitesize coaching offer. Initial places for this offer were released in December 2020 when 131 staff responded. Due to the high response rate, a second phase was funded and commenced in February 2021. The aim of this evaluation is to understand the perceived utility of the coaching, as seen by those who took part, focusing on the following questions:

- Which members of staff accessed coaching?
- What were the benefits and blockers of bitesize coaching?
- What encouraged people to take up the offer?
- What was the immediate and longer-term impact of the coaching?

Alongside the evaluation, SELA asked organisations about their local coaching offers. The findings of this qualitative evaluation could then be considered alongside the broader coaching offers available, to inform decision making about the future of bitesized coaching.

## Background

Coaching and mentoring have been shown to increase staff feeling valued, recognising that they could develop their roles and potentially leading to positive changes in organisational culture [Steward-Lord et al, 2019]. It has also been identified as being beneficial to NHS staff transitioning into more senior roles enabling them to gain confidence and resilience [Gill, 2017]. Over the last year staff have had to respond rapidly to the Covid-19 pandemic, resulting in transitions in roles and responsibilities. In response, SELA developed the bitesize coaching offer to support frontline staff and senior leaders.

Bitesize coaching is offered as a single, focused, 45-minute session, providing an opportunity to process experiences, develop coping skills and explore strategies to navigate challenging circumstances. Full details of the support offer can be found on the [dedicated website](#). In December 2020, SELA commissioned 60 coaching spaces [cohort one] with two independent coaching companies. All the sessions were allocated within the first five days of communications being released to NHS organisations within the South East. A further 60 spaces were then secured for cohort one. On the back of this, further funding was secured to commission additional sessions creating a second cohort.

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## Methodology

The methodology for the evaluation was agreed by Oxford AHSN and NHS SELA.

### Understanding who took part

Data collected as part of the application process was analysed. SELA collected the following data routinely:

- Number of staff that applied for coaching
- Number of staff who took up the offer
- Number of staff that did not attend the session
- Number of staff that cancelled their session.

The following data was collected by SELA for all expressions of interest:

- Organisation
- Regional STP/ICS
- Salary grade
- Previous coaching experience
- Rationale for requesting coaching
- Communication of offer

### Understanding the views of coachees

To understand the views of coachees, data was collected from an online survey and through semi-structured interviews.

#### Online survey

Coachees in both cohort one and cohort two were asked for feedback after their sessions, using the following questions:

- Did the coaching session meet your need which prompted you to book this session?
- How well did your coaching session begin to support you in continuing to deliver high quality care and support in your communities this winter?
- How helpful was the preparation document you received in advance of your bitesize session?
- How would you rate your experience of bitesize coaching from request through to evaluation?
- Did we meet the agreed response times [initial response – two working days and coaching session booked within five days]?
- Any other thoughts or comments on this offer that you consider useful for us.

This information was collected by SELA and shared anonymously with Oxford AHSN.

#### Semi-structured interviews

Cohort two bitesize coachees were asked upon application if they agreed to be contacted for further follow up. Oxford AHSN received access from SELA to the data set for cohort two coachees. The data used in this report covered mid-February to the end of May 2021. It took multiple email contacts to

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secure interviews and concerns arose that salary grade 6 and below were not adequately represented in those agreeing to be interviewed. The process used is described in Appendix 2. Consequently, an email was sent out to all staff grades 6 and below asking them to respond to the following four questions regarding their coaching.

- Was the bitesize coaching session what you expected? (if not please say in a few words why not)
- Was your session useful? (if yes, can you describe in one sentence why useful/if no can you describe in one sentence why not useful)
- Would you recommend to a friend?
- Anything else that you would like to comment about the session.

No responses were received.

Twenty-four semi-structure interviews were carried out via telephone or Microsoft Teams, using a semi-structured questionnaire [Appendix 1].

Two evaluators independently undertook the interviews, collaborated to compare notes, and agree key themes.

### **Understanding coaching across the South East region**

Human Resource Directors and Operations Managers were emailed by SELA to understand the local coaching offers available to staff. The follow questions were asked:

1. What is your local coaching offer title and a brief description?
2. Who is the offer for? (is this role/band/organisation)
3. What uptake has the offer had and will it be continued?
4. How was the offer communicated?
5. Any feedback that you can share with us on the offer?

### **Data sharing agreements**

A data sharing agreement between Oxford AHSN and the SE Leadership Academy was put in place.

## **Findings**

### **Who took part?**

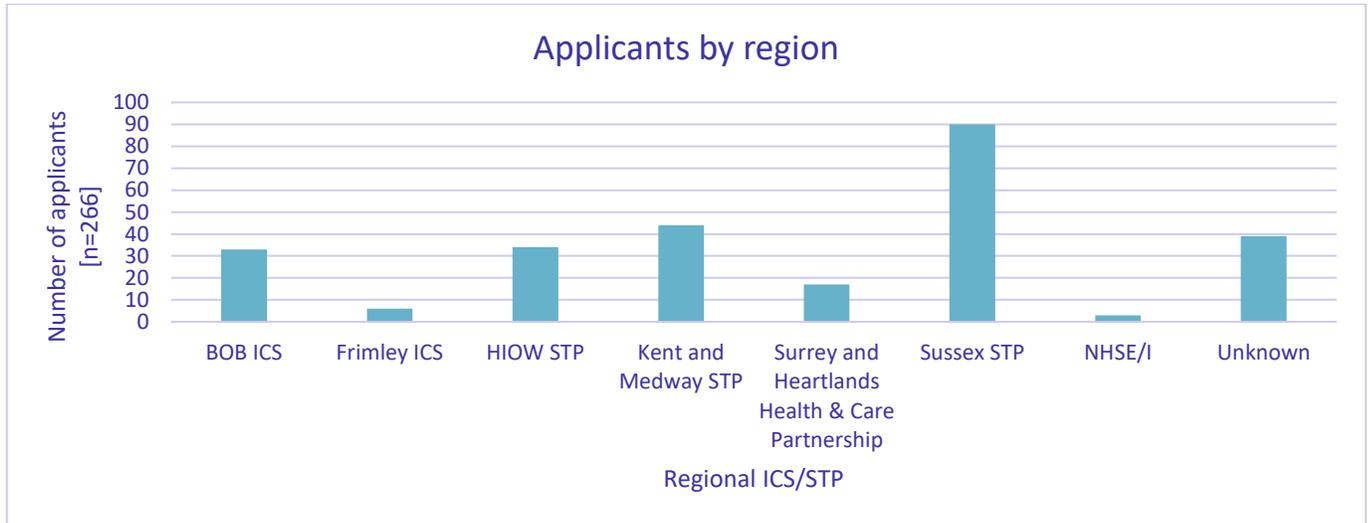
Between December 2020 and May 2021, a total of 229 people undertook bitesize coaching out of 266 applicants. In the first cohort, there was a 94% uptake of coaching sessions [n = 123/131], 8 members of staff declined or did not attend. The second cohort had an uptake of 79% [n=106/135], 29 members of staff were either offered a session and declined, withdrew or no date of coaching was entered.

A wide variety of staff took up the coaching offer including operations managers, nurses, dentistry staff, educators, consultants, and doctors.

**Data from all coachee applications [cohort one and two, n=266]**

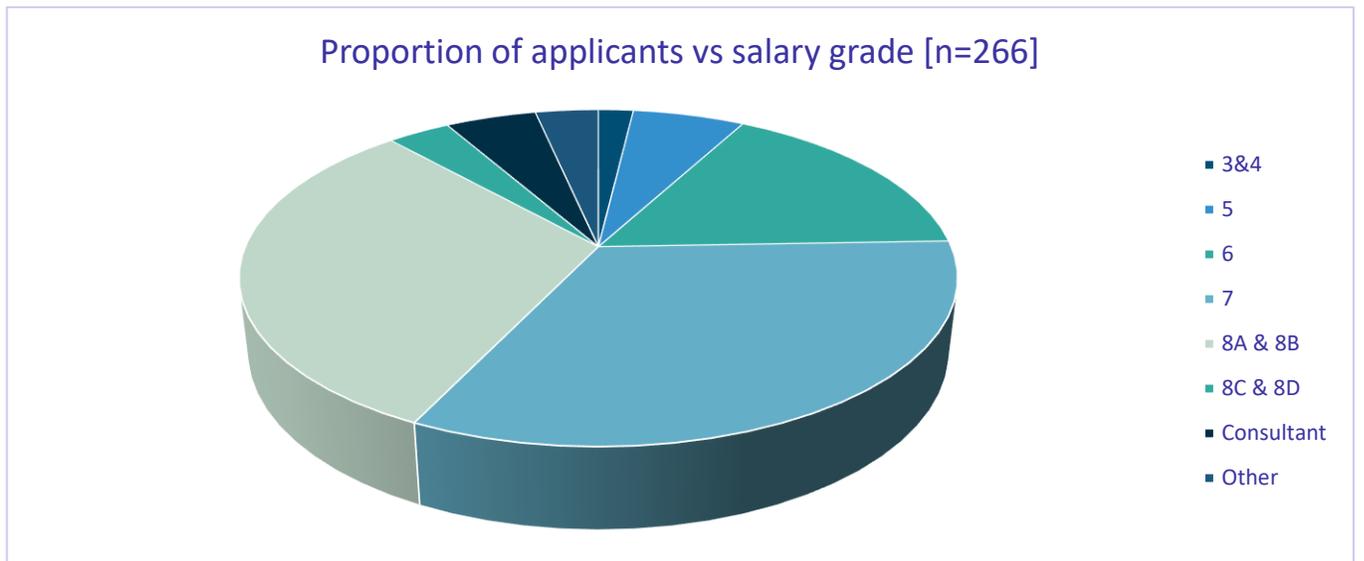
The highest uptake of the offer was from Sussex STP 34% [90/266] and the lowest uptake was Frimley ICS 2% [6/266] [Figure 1].

Figure 1: Applicants by region



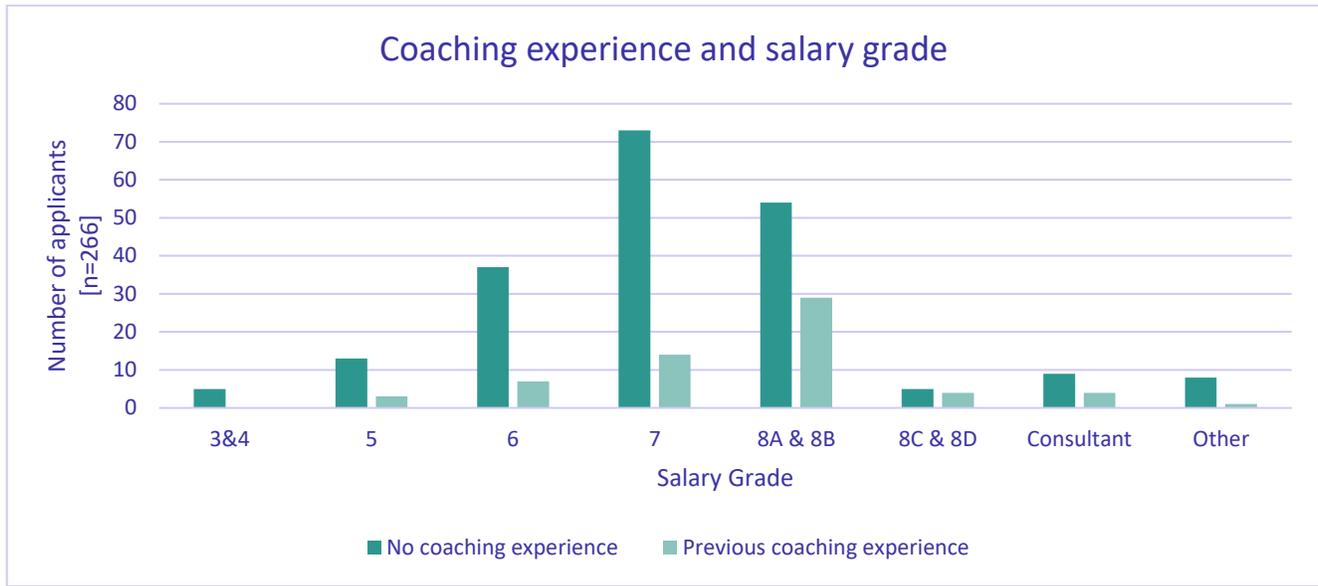
The proportion of applicants by salary grade is shown in Figure 2. The highest proportion of applicants were salary grade 7 [33%] and, 8A & 8B [31%].

Figure 2: Applicants by salary grade



Out of all the applicants 77% [204/266] had no previous coaching experience and 23% [62/266] had some experience including group supervision, manager coaching and professional coaching. The salary grades with the most previous experience of coaching were band 8A and 8B [Figure 3].

Figure 3: Previous coaching experience and salary grade of all bitesize applicants



The breakdown of the same question to those interviewed [n=24] highlighted that staff with a salary grade seven or below had less previous coaching experience than 8A and above [Figure 4].

Figure 4: Previous coaching experience and salary grade of all coachees interviewed



Applicants heard about the offer through different channels [Figure 5], the most common being an email campaign, followed closely by the leadership dispatch communications. Where they stated “other” this included direct email from line managers, internal health and wellbeing updates and internal communications.

Figure 5: How applicants heard about the offer



Of those interviewed [n=24] the majority found out about the offer via internal communications either through word of mouth or emails. Ten coachees stated that the offer communicated internally was only for senior staff [Table 1].

Table 1: Communication of coaching offer to staff to staff interviewed

	Offer to all	Offer only to leaders/managers
Email through leadership teams	0	3
Health and wellbeing emails	3	
Weekly bulletins	7	4
NHSE/I website	1	0
SELA Email	2	0
Word of mouth	1	0
Manager email	0	3

Most coachees interviewed stated that they were unaware of any other internal or external known coaching offers [Table 2].

Table 2: Any offers known of similar coaching offers at the same time of bitesize offer

	Yes	No
Any coaching offers within organisation	4	20
Knowledge of any other coaching offers	1	23

### Views from coachees

Both cohorts were evaluated using an online survey with a 48% [n = 59/123] response rate for cohort one. A response rate for cohort two could not be ascertained as some coachees had more than one session and filled in a second/third evaluation survey. 96% of coachees noted that the response time of two days from the administration team was met, and 98% stated that the session met their needs. Both cohorts felt that the session helped them to continue to deliver high quality care better than expected [Figure 6].

The majority of coachees responding to the survey expressed that their overall experience was either met or exceeded their expectations and supported them to deliver high quality care [Figures 6&7]. This was supported in the interviews.

Figure 6: How well did your coaching session begin to support you in continuing to deliver high quality care and support in your communities this winter?

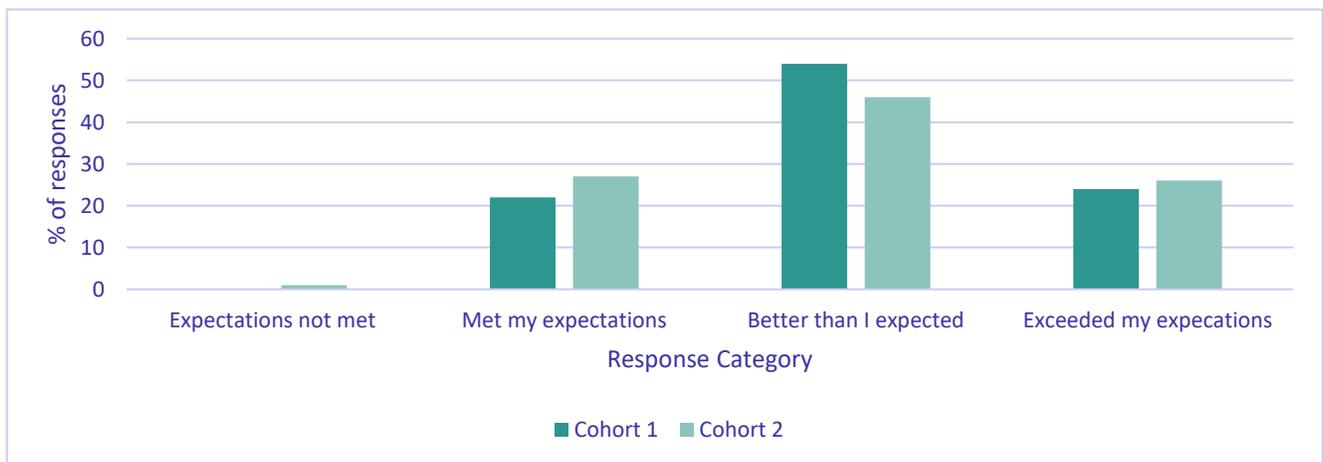
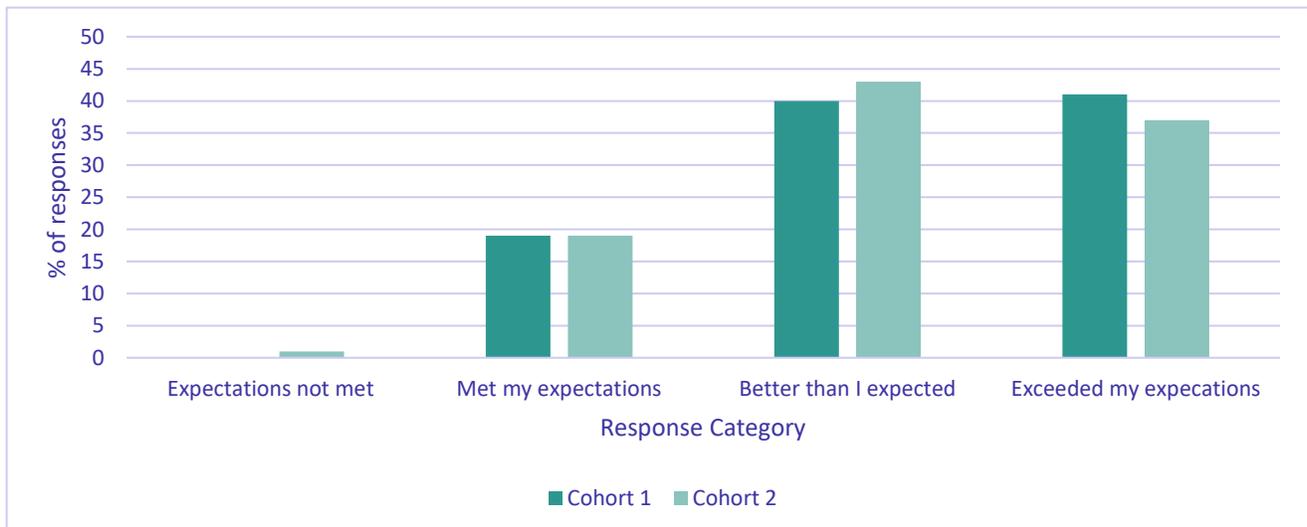


Figure 7: How would you rate your experience of bitesize coaching from request through to evaluation?



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## **Key Themes**

The twenty-four interviewees were a mix of male and female staff from a variety of settings, including secondary care, ambulance trusts, clinical commissioning groups and community care. A breakdown of grading and number of interviewees is noted in Appendix 3. The key themes arising from the interviews are summarised below.

Apart from two coachees who felt that the bitesize session was enough and enabled them to be focused, the majority said that they would benefit from more sessions. Several coachees were offered a second session and stated that they found the follow up session valuable to reflect on the implementation of the strategy agreed. Due to the short nature of bitesize coaching, several people said they felt put on the spot with no time to reflect. One felt that they were sharing something quite personal and then were stopped abruptly to focus on what they had learned.

### **Why staff took up the offer?**

The reasons that staff gave for undertaking bitesize coaching fell into the following broad categories:

- Career progression – considering progression to senior role
- Right job fit – exploring whether the job they are in or thinking of going into is the right fit for their personal and professional aspirations
- Recently appointed to senior role – eg exploring the sense of being an imposter in the role
- Stress and emotion – challenging situations or working relationships that were influencing their working environment/mental health. This included the need to influence others and discover new ways of working.

### **Expert facilitators from outside the organisation**

Staff commented that being able to discuss issues with people they did not know felt freeing. Others mentioned the importance of the facilitators being independent of the organisation they worked for, as they provided a different lens on the issue. The majority commented that they felt that the standard of coaching was high, and that this increased what they got out of the experience.

### **Administration**

Overwhelmingly this was positive, and people felt that it was an easy process to sign up for. One person commented that it would be helpful to leave a mobile number and receive the notification of a session by text, so that they did not have to log onto work emails whilst at home.

### **Was coaching appropriate?**

One of the key issues was discrepancies in what people understood as coaching. Some clearly thought that they would have more direction in the session. One coachee shared that they thought coaching was going to give more strategies rather than a series of questions which they felt they could have asked themselves. Two people thought it was an offer for coach training rather than personal coaching and two coachees highlighted that the coach had stated that counselling would have been more

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appropriate. Having undertaken the bitesize coaching session most coachees found the session sensitive to their culture and current issue.

### **How the session influenced immediate and longer-term change**

The session empowered most coachees to undertake a form of reflection on how they had arrived at certain points in their career or crossroads at work. There were a number who used the session to support a difficult discussion that needed to be undertaken. An overwhelming theme was that staff valued the opportunity to talk and be listened to. Coachees felt validated in their comments and noted that the opportunity to be listened to is rare. One coachee shared that it felt like a gift of time and conversation outside usual patterns and demands. Staff commented that they felt “empowered”, “prepared”, “confident” and more able to believe in themselves after the sessions.

**“It felt like a gift of time and conversation”**

**“We tend to be very good at looking after others and not good at looking after ourselves”**

**“Helped me to see a way forward”**

### **Created space**

The sessions created a feeling of space, many noting that the session gave time to think and to breath in a non-judgmental environment. A senior manager commented that it gave them time to plan a situation rather than reacting to it. It was a space where coping strategies were discussed and gave time to plan and prepare for difficult meetings. One coachee shared that they did not really learn a technique, but that they will now stop and think about how to prepare for situations. Many shared how stressful it has been working in the pandemic and the more stress you are under the less decisions you feel able to make. The coaching session gave one person confidence and space to decide what the right plan would be going forward. Another noted the importance of taking each decision at a time and not always thinking long term. The coaching was a reminder for one coachee about taking each challenge in steps. The space allowed others to think and realise that they had the answer within themselves reflecting on what they already knew.

**“The session brought hope of stability”**

**“It’s given me confidence in myself and headspace to decide what is the right thing to do at this time”**

**“It’s given me time to plan instead of reacting”**

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### **Gave permission**

There were several coachees who were in a situation where work had taken over and self-care had been neglected. In some instances, this was due to not feeling able to be honest with how they were feeling or a sense of not letting the team down. Restrictions due to Covid-19 had caused the separation of usual relationships where “life-giving” conversations would take place. One senior staff member summed it up noting that most of the time had been work focused rather than checking in and catching up with colleagues. The coaching session empowered some coachees to take better care of themselves, giving permission to find it tough and, for example, acknowledge how hard a bereavement had been. Through the session one coachee recognised that they had “Covid loneliness” and put in strategies around allowing themselves to meet with people under government guidance. They noted that as an extrovert they were kinder and calmer in the team. Simply, one person remarked that it was “a real luxury to have something just about me”.

**“It gave me permission to take care of myself”**

**“I’ve missed the community of the hospital and the welfare checks on each other”**

**“A real luxury to have something just about me”**

### **Built longer term strategies**

Due to the variety of coaching scenarios, people developed different skills to take forward. Some developed strategies in dealing with self-doubt, work/life balance and new ways of working. One coachee shared that they had learnt different strategies, enabling them to respond differently. They put visual aids around them to help remember their learning. Several recognised the need to change mindset to help others with their thoughts and behaviour. Several people highlighted the need to have coaching in personal development plans and for it to be encouraged and protected by managers.

**“Lessons learnt have been passed onto teams”**

**“It’s hard to shift away from the way you do things and it’s helped me to do things differently”**

**“If we all do coaching, culture will change”**

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## Understanding coaching across the South East region

To identify other local coaching offers, 90 organisations [65 CCG/NHS trusts, 25 councils] were contacted. A response rate of 14% was received [3 CCGs, 1 Council, 9 NHS Trusts]. Out of these, two did not have any agreed coaching, whereas the others offered a diverse range. Seven of the organisations offered training in coaching, coaching style conversations and reverse mentoring. The majority of these were aimed at management level. Coach training appeared to be popular and there was a waiting list in most areas. Four of the organisations actively offered coaching locally either through local coaches or external companies. One of these organisations offered coaching throughout wave one of the pandemic but had no uptake. Other organisations noted that they actively signposted staff to the SELA coaching offer.

## Conclusion

Coaching has been shown to increase staff feeling valued [Steward-Lord et al, 2019], this evaluation also suggests this. Coachees found the application for bitesize coaching easy and responsive. The majority stated that the session/s had been beneficial and left them feeling more empowered, prepared, and confident. This in turn supported them through a variety of challenges or changes. Whilst the bitesize session helped staff to focus on one thing, some of those interviewed expressed that they would have benefitted from more sessions, to help ensure that what they learnt could be embedded (quite a number of those interviewed did have more than one session).

Some staff interviewed did not understand the difference between coaching, mentoring, supervision, counselling, and supportive leadership. And from some interviews, it seems that an alternative to coaching might have been more appropriate. Most coachees interviewed highlighted the importance of being able to talk to someone outside of their organisation, that this was “liberating and made them feel “safe”.

Although the offer was designed for all frontline staff, less than a third of the applicants were salary grade 6 and below. In some interviews the coachee stated that the offer had been amended locally to reach only senior staff. This may have skewed the picture of who might benefit from coaching as more junior staff were not encouraged to apply. Alongside this, a limitation of the evaluation maybe, as salary grade 6 and below were less represented in the views captured, that their experience were different and potentially not as positive as more senior staff.

The mapping of existing coaching offers within local organisations noted that there was a diverse range of coaching styles offered, from traditional coaching to reverse mentoring. How staff use these offers was not included in the data collected by SELA.

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The overarching theme of this evaluation was that the bitesize session/s created space. Space to think, space to evaluate, space to re-order priorities, space to believe in oneself, space to share that life was tough and space to feel valued as an individual.

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## Appendix One - Semi-structured interview questionnaire

### Introduction to interviews

Thank you for taking the time to talk to us about your experience of accessing Bitesize Coaching via the South East Leadership Academy. Your feedback is very valuable to us as it will help us to understand if and how it has supported you and the work you do. The Oxford AHSN team will review your feedback and use it towards a report that will inform the NHS SELA of the value of this style of coaching.

There are a few things I would like to go over with you about the interview, final report, and confidentiality of your interview.

- Your response will be completely anonymous
- I would like to record and transcribe the interview to ensure accuracy – both will be deleted at completion of the evaluation
- The content of the interviews will only be seen anonymously by other members in the evaluation team and not shared outside of this team
- Your feedback will be included in an evaluation report which will be shared within the NHS SELA and Oxford AHSN. We will not name anyone in the report – we will just refer to the number of people in total and what job role i.e. nurse, physio, domestic etc.
- The report will describe the themes coming out of the interviews and we may use quotes from the interviews, but again these would remain anonymous and simply say that it is a quote from a doctor/midwife/manager etc.

### Questions

1. What is your current role in the hospital? [managerial, clinical, support, contractor]
2. What area do you work in [medical/surgical/executive etc.]?
3. Have you had any coaching in the past?
4. How did you hear about the Bitesize Coaching offer?
5. What led you to sign up for the offer [problem, support, or guidance for future?]
6. Did your hospital have anything similar that they offered you for support?
7. Had you heard of any other coaching offer that could have supported you at this time?
8. How did the coaching session influence you/your work immediately?
9. What difference did the session make in the longer term to you/your coaching goal/your team/work?
10. Did you feel that the session was culturally sensitive for you?
11. Has this experience changed your views on coaching?
12. If the offer came out again is there anything that you would change about it – if yes, what would “brilliant” look like?
13. Would you be likely to access other coaching support in the future from this experience? – explore why yes/no
14. Do you have any other comments or feedback you would like to add which may help to support the wellbeing of staff in the future?

## Appendix Two – Process of selecting interviewees

All coachees in cohort two were invited to be interviewed. The breakdown is captured in Table A.

Table A: Total number of coachees invited for interview and % response rate

Data Summary for interviews	Total	Agreed and interviewed	% asked	% response
Total number on list who signed up for coaching	135			
Total unable to contact due to no coaching offer date entered [18], withdrew or declined offer [11]	29			
Total number eligible to contact	106			
Total contacted [March 2021]	45	13	42%	29%
Total contacted [May 2021]	61	11	58%	18%
Total asked to interview	106	24	100%	23%

### March-April 2021 interviews

In March 2021, forty-five coachees from a variety of backgrounds and organisations were invited to take part in a semi-structured interview. Two declined due to workload, thirty no response and thirteen accepted. A breakdown of grading is noted in Table B.

Table B: Breakdown by salary grade [March-April 2021 invites]

Wave 1 breakdown of salary grade/band	Number invited for interview	Actual number interviewed
Band 3-4	3	0
Band 5	3	1
Band 6	11	2
Band 7	14	3
Band 8A	7	4
Band 8B	4	1
Consultant	3	2
Total	45	13

To ensure that the voice of all staff grades was heard, salary band 7 and below were re-contacted, however, no responses received.

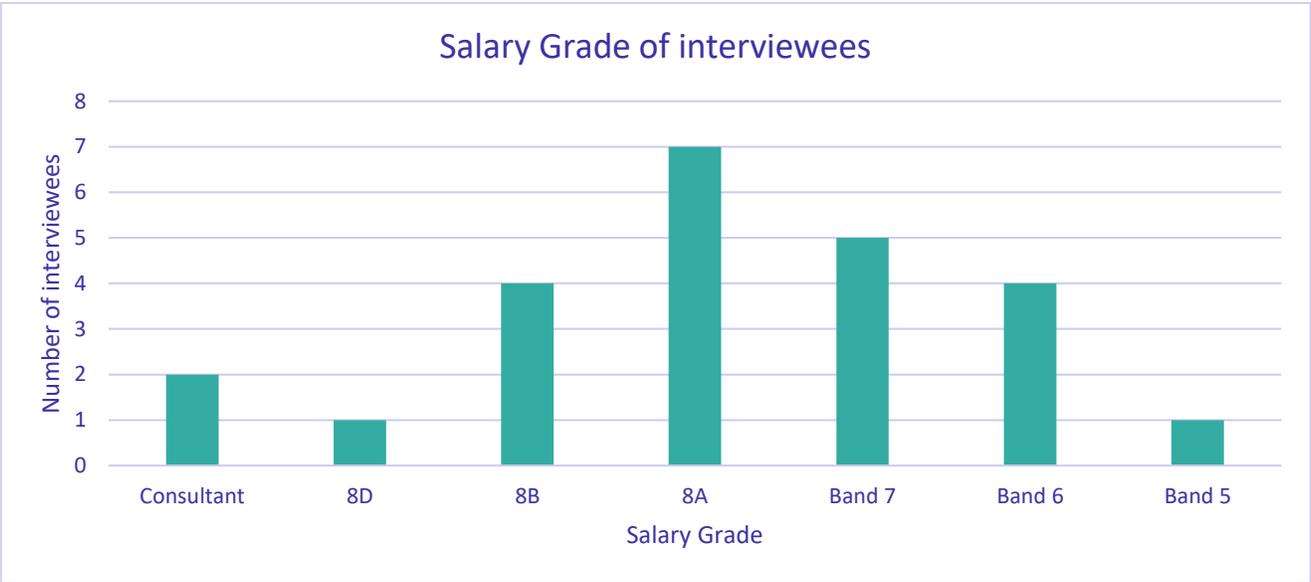
### May-June 2021 interviews

To widen the pool of responses, the remaining coachees were contacted in May 2021. Responses were received from eleven out of the sixty-one coachees and were subsequently interviewed [Table A]. Concerns remained that salary band 6 and below were not equally represented in the interviews [Table C]. An email was sent out to the remaining “no responses” of this group asking them to respond to four questions regarding their coaching. No responses were received.

Table C: Breakdown of all cohort two coachees invited for interview, salary grade 6 and below

Data summary band 6 and below for interviews	Total	Agreed and interviewed	% asked	% response
Total number who signed up for coaching	36			
Total declined offer/withdrew coaching offer	4			
Total blanks/no coaching arranged	8			
Total number eligible to contact	24			
Total emailed in March-April 2021 [contacted twice]	18	3	75%	17%
Total emailed May-June 2021	6	2	25%	33%
Total asked to interview	24	5	100%	21%
Total number emailed questions to glean response [May-June 2021] – email was the second point of contact for this group	17	NA	NA	No responses

# Appendix Three – Breakdown of interviewees by salary grade



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## References

Gill, A., 2017. What is the perceived contribution of coaching to leaders transitioning to more senior roles in the NHS?. *International Journal of Evidence Based Coaching & Mentoring*, 15.

Stewart-Lord, A., Baillie, L. and Woods, S., 2017. Health care staff perceptions of a coaching and mentoring programme: a qualitative case study evaluation. *International Journal of Evidence Based Coaching and Mentoring*, 15[2], pp.70-85.