

Western Michigan University ScholarWorks at WMU

Dissertations Graduate College

12-2016

Exploration of Peer Learning in a Formal Cohort Healthcare Leadership Development Program

Melinda Marie Gruber Western Michigan University, melindagruber@frontier.com

Follow this and additional works at: https://scholarworks.wmich.edu/dissertations

Part of the Educational Assessment, Evaluation, and Research Commons, and the Educational Leadership Commons

Recommended Citation

Gruber, Melinda Marie, "Exploration of Peer Learning in a Formal Cohort Healthcare Leadership Development Program" (2016). *Dissertations*. 2483. https://scholarworks.wmich.edu/dissertations/2483

This Dissertation-Open Access is brought to you for free and open access by the Graduate College at ScholarWorks at WMU. It has been accepted for inclusion in Dissertations by an authorized administrator of ScholarWorks at WMU. For more information, please contact wmu-scholarworks@wmich.edu.



EXPLORATION OF PEER LEARNING IN A FORMAL COHORT HEALTHCARE LEADERSHIP DEVELOPMENT PROGRAM

by

Melinda Marie Gruber

A dissertation submitted to the Graduate College in partial fulfillment of the requirements for the degree of Doctor of Philosophy Educational Leadership, Research and Technology Western Michigan University

December 2016

Doctoral Committee:

Louann Bierlein Palmer, Ed.D., Chair Sue Poppink, Ph.D. Nancy Vader-McCormick, Ph.D.

EXPLORATION OF PEER LEARNING IN A FORMAL COHORT HEALTHCARE LEADERSHIP DEVELOPMENT PROGRAM

Melinda Marie Gruber, Ph.D.

Western Michigan University, 2016

Many new and emerging leaders will move into leadership positions in healthcare as experienced leaders retire or move to other positions. These individuals need leadership development that supports them in becoming transformational change leaders. This study explored the topic of peer learning as a leadership development approach in a healthcare setting. The purpose was to better understand the role of peer learning in creating transformational leadership and healthcare change leaders.

This study utilized a qualitative case study approach to explore and understand how peer learning supports leadership development. The study focused on the key learning elements of an 18-month cohort-based formal leadership development program for healthcare professionals, the intent of these elements, and participants' responses from three cohorts to these learning elements. The Program Facilitator and the participants of the two active cohorts during the time of study were observed in formal and informal activities. In addition, individual interviews were conducted with 12 individuals, including three from within each of the two active cohorts and three from the previous cohort, the Program Facilitator, Chief Learning Officer and a Senior Leader/Mentor. Training documents and summarized program evaluations were also analyzed.

Overall, participants described aspects of peer learning within the three key elements of the cohort-based leadership program: cohort learning sessions, small group coaching, and action learning projects. This contributed to the sense of community within the program that participants described. Trust, encouragement, and the willingness to share experiences were

developed through the key elements of the program. Participants were also able to develop new networks because of the relationships built during the program. Over time, a sense of belonging was created through the relationships with others going through the program, and transformational learning and leadership were outcomes of the elements of the program. The process included learning from the experiences others shared during the program, as well as developing self-awareness and the ability to reflect. Listening and hearing the experiences and perspectives of others created new awareness and understanding. It was significant to participants that the senior leaders of the healthcare organization were involved in the program, that participants had increased access to them, and that they had personal interactions with them. The amount of time the program involved as well as other work and life pressures were challenging for many of the participants. This study adds to the body of knowledge about peer learning as a leadership development approach in a healthcare setting.

Copyright by Melinda Marie Gruber 2016

ACKNOWLEDGEMENTS

My journey toward this dissertation has had several sharp turns and setbacks over the last few years. Battling cancer, moving into a new and more demanding position in my work life, sending the last of my children to college, and dramatically downsizing into a new house could have been obstacles to end my dissertation efforts. Instead, because of the love and support of so many people, I am at the point of completion.

My mother, Dr. Elaine Stephens, has always been my inspiration to complete this degree. Her encouragement, along with my father, Wes Stephens, and my husband, Clark Gruber, gave me the confidence and support to continue through all the distractions. I am so appreciative of Clark's willingness to take over the household duties and manage our affairs with love and grace while I studied, researched, and wrote.

My deep gratitude goes to Dr. Louann Bierlein-Palmer. As my Advisor and Committee Chair, she walked me through the process of taking a leave of absence during my cancer treatment. She helped usher me back to the program in a way that kept me motivated. Her wisdom, positivity, and encouragement, along with her constructive editing kept me on the right path.

I thank Dr. Sue Poppink for her kind guidance and thoughtful suggestions. As the second on my committee and the professor for several of my graduate classes, her experience with qualitative methods offered my work constructive improvements that made this a stronger piece of work.

Acknowledgements – Continued

I also thank Dr. Nancy Vader-McCormick who dedicated time and guidance to my dissertation process during an unusually busy time in her life. As a committee member and friend, she offered me encouragement and positive feedback to improve my work.

I also wish to acknowledge the research participants and the leadership of the organization where the research occurred. Their willingness to share openly their experiences and knowledge gave me a wealth of insights that I think will be valuable to others as well. I also wish to express gratitude to my employer for financially supporting my further education.

My children, friends, and colleagues also deserve my heart-felt appreciation for their support and encouragement. Our children, Emily, Audrey, Griffin, Carly, Mitchell, and Iza inspired and motivated me when I was tempted to give up. My friends, including Amy and Brent Nichols, cheered me on and helped me look for opportunities to celebrate milestones. Many of my work colleagues, such as Lisa Bartoszek, Dr. Eileen Willits, Sandi Plank, Norma Tirado, and Dr. Linda Beushausen, offered me information, ideas, and positive reinforcement during this process. In particular, Julie Griffin, Gwen Day, and Dr. Karen Kinyon gave me concrete assistance during my research and writing. Finally, I have gained a wealth of insights and positive reinforcement from my longtime mentors, Dr. Robert Harrison and William Marohn.

While I don't want to leave anyone out, I fear I might have. So, in closing, I want to state how blessed and grateful I am for every person in my life who helped me complete this journey.

Melinda Marie Gruber

TABLE OF CONTENTS

ACKNO'	WLEDGEMENTS	. 11
LIST OF	TABLES	/iii
LIST OF	FIGURES	ix
СНАРТЕ	ER	
I	INTRODUCTION	1
	Background	1
	Problem Statement	3
	Purpose Statement and Research Questions	5
	Conceptual Framework and Narrative.	6
	Methods Overview	9
	Chapter I Summary	9
II	LITERATURE REVIEW	10
	Current Adult Learning Theories	10
	Andragogy	11
	Self-Directed Learning.	13
	Transformative Learning	15
	Transformational Leadership	18
	Transformational Leadership in the Workplace	19
	Dimensions of Leadership	20
	Leadership Development	24
	Developing Transformational Leaders	24

Table of Contents – Continued

CHAPTER

	Leadership Development Approaches	27
	Cohort-Based Leadership Development	32
	Healthcare Leadership	35
	Healthcare Leadership	35
	Healthcare Leadership Development	38
	Chapter II Summary	43
III	METHODOLOGY	44
	Research Design	44
	Research Questions	45
	Sample	46
	Recruitment Process.	47
	Setting	48
	HSIRB and Data Storage	49
	Data Collection Methods	49
	Data Analysis	52
	Reflections and Role as Researcher	53
	Limitations and Delimitations	54
	Chapter III Summary	55
IV	RESULTS	56
	Overview of Methods and Research Questions	56

Table of Contents – Continued

CHAPTER

Description of Program Elements	57
Cohort Learning Sessions	58
Small Group Coaching	59
Action Learning Projects	59
Major and Minor Themes	60
Major Theme 1	64
Major Theme 2	71
Major Theme 3	81
Major Theme 4	88
Minor Theme 1	93
Minor Theme 2	96
Chapter IV Summary	99
V DISCUSSION AND RECOMMENDATIONS	02
Analysis of Major Results as Compared to Research Questions1	02
Research Question 1	02
Research Question 21	08
Updated Conceptual Framework	12
Relationship of Study to Literature	16
Transformative Learning1	16
Transformational Leadership1	17

Table of Contents – Continued

CHAPTER

	Leadership Development	118
	Healthcare Leadership	123
	Implications and Future Research	130
	Chapter V Concluding Thoughts	133
REFERE	NCES	135
APPEND	ICES	
A.	Initial and Follow-up Recruitment Emails.	145
B.	WMU HSIRB Approval and Interview Consent Form	147
C.	Permission from Host Site Program Facilitator	151
D.	"Leading Towards the Future" Summary	154
E.	Host Site HSIRB Approval	159
F.	Participant Interview Questions and Protocol.	161
G.	Program Facilitator/Senior Leadership Team Leader Interview Protocol	166
H.	Observation Checklist and Protocol	169

LIST OF TABLES

1.	Role of Peer Learning in Leadership Development Methodology Summary	51
2.	Study Participant Codes	57
3.	Actions Described by Study participants and/or Observed	62
4.	Actions and Themes	63
5.	Affirmative Answers from Program Designers and Participants	65
6.	Actions Observed	67
7.	Theme Summary by Program Elements	99
8.	Study Finding as Related to Previous Research	126

LIST OF FIGURES

1.	Conceptual framework of leadership development through peer learning	7
2.	Updated conceptual framework of leadership development through peer	
	learning	115

CHAPTER I

INTRODUCTION

The most effective leaders start by leading themselves. They seek to improve their abilities, learn from others, and find ways to cope with the anxieties of their positions.

Leadership development that applies adult learning theories and principles can foster meaningful learning for leaders (Brown & Posner, 2001). Yet, many leaders are not familiar with the research on adult learning theories and principles. Instead they may rely on intuition or trial and error.

Learning takes place within an individual but often occurs as the result of social interactions that foster new insights and understanding (Collay, Dunlap, Enloe, & Gagnon, 1998). Transformational leadership development can be created through meaningful interactions among peers when they are creating knowledge through sharing, discussing, and reflecting upon their experiences. Peer sharing, reflecting, and support can greatly impact and inspire leaders (Kouzes & Posner, 2002). Yet, how are opportunities for meaningful peer learning constructed in a healthcare setting and how do we know if they have been effective?

Background

In recent years, the value of leadership development has been a frequent area of study. Investment in leadership development provides a competitive advantage for organizations. In times of economic distress and limited resources, leadership development can have an even greater impact. These are the times, however, when organizations frequently reduce their investment in costly leadership development (McGonagill & Reinelt, 2011). In fact, healthcare is viewed as behind other industries in leadership development and succession planning (Block & Manning, 2007; McAlearney, 2005).

At the same time, experienced leaders are retiring and making room for the next generation. According to the Annie E. Casey Foundation, nonprofit organizations expect to go through significant leadership transitions over the next ten years, with 55% of nonprofit CEOs and executive directors surveyed over 50 years old (Kunreuther, 2005). "Without transformational leaders who are able to inspire and engage people in a shared vision for the future, sustainable healthcare reform is not possible" (Block & Manning, 2007, p. 85).

Organizations and new leaders will need research based strategies to develop leadership skills for top executives.

Discussions of leadership development and peer learning are found throughout writings on self-directed learning. For example, Brookfield (1984) described the social aspect of self-directed peer learning whereby information is exchanged providing learners with peer assessment and creating a setting for consultation and new skill development. Similarly, Nesbit (2012) wrote about the necessity of leaders to embrace self-directed peer learning as a vital leadership competency and to be learning continuously to develop their talents.

Transformative learning can be used to create and strengthen meaningful leadership development programs that develop leaders using approaches that impact at the personal and emotional level. The leadership programs must engage the leaders in critical self-reflection to support meaning making from experiences. These insights can grow leadership mindsets (Brown & Posner, 2001). Given this connection between transformative learning and leadership development, it is significant that Taylor (2007) suggested that there are few studies investigating the effects of transformative learning on changes in learners' professional development perspectives.

Peer learning is a critical aspect of transformative learning and leadership development through the sharing of reflections and perspectives from peers. Peer learning focuses on

cooperation instead of competition. Deep respect can grow from the varied experiences and backgrounds that peers share with one another (Boud, Cohen, & Sampson, 1999). Sharing experiences can create reflective processing that aids the leader in understanding the events from new perspectives and creating new insights about one's needs for leadership development (Nesbit, 2012). It provides relevant and practical assistance for leaders from others who are leaders themselves.

In order to assess the strength of assumptions and perspectives, people must share their thoughts and reflections with each other. Challenging each other's ideas and beliefs helps people learn other views and experiences and, ultimately, the truth (Baumgartner, Lee, Birden, & Flowers, 2003). In a healthcare setting, learning from peers in a supportive way can contribute to new knowledge, self-confidence and a sense of well-being (Bergman, Fransson-Sellgren, Wahlstrom, & Sandahl, 2009).

In healthcare, the peer based, cohort approach to leadership development is based on the concept that people learn best in groups and groups can be used for professional development and ongoing support for learning (Sharlow, Langenhoff, Bhatti, Spiers, & Cummings, 2009). Professional development techniques are most effective when participants have a shared goal, desire to contribute, and are open to authentic, honest sharing (Collay, Dunlap, Enloe, & Gagnon, 1998). These small groups create an atmosphere of collegial learning and support. Peers act as models and provide encouragement for each other to learn and grow. However, very little research has been done to understand the process and the perceptions of participants involved with such activities.

Problem Statement

While learning happens within an individual, it often occurs as the result of social dialogue and interactions that create new ideas, thoughts, and understanding (Collay, Dunlap,

Enloe, & Gagnon, 1998). To develop transformational leadership, social interaction among peers can be used to create new learning though the sharing of ideas, knowledge, and experiences.

Leaders can be greatly impacted and inspired though the support, sharing, and reflection of their peers (Kouzes & Posner, 2002).

In the coming years, a major shift in the leadership of healthcare organizations will take place. Increasing complexity; regulatory, demographic and market changes; and growing leadership demands are taking place at the same time experienced leaders are retiring.

Developing leaders in health care is a need that is gaining attention and is well documented (McAlearney, 2005). A lack of strong leadership can have a significant impact on healthcare system's ability to adapt to the changing environment (Block & Manning, 2007). Effective leadership development programs and support for leaders in healthcare are areas that need further study (Bergman, et al., 2009; Edmonstone & Western, 2002; Hewison & Griffiths, 2004).

Emerging leadership development programs often include aspects of transformative learning, action learning, self-directed learning and peer-mentoring (Edmonstone & Western, 2002). However, there is a need to better understand the role peer learning plays in these leadership development processes and its effect on leadership development. Brookfield (1984) suggested that the social setting for self-directed learning has not had significant study, and Taylor (2008) suggested future study is needed in how transformative learning affects peers. Therefore, my study investigated the topic of peer learning as a leadership development approach in a healthcare setting.

The deficiency I identified concerning this researchable problem is the lack of knowledge about peer learning and professional leadership development practices, especially in a healthcare setting. An increasing need to develop effective healthcare leaders is well documented (McAlearney, 2005). In the coming years, a major shift in the leadership of healthcare

organizations will take place while there will also be tremendous change in the industry.

Experienced leaders will retire while new highly skilled leaders will be needed. Peer learning is a leadership development approach that requires further study.

This study is important to healthcare leaders and leadership development professionals to examine how they use peer learning as a leadership development approach. Leadership development can be costly and the value difficult to measure (Peters, Baum, & Stephens, 2011). Healthcare leaders, as well as those responsible for professional development, may use this study to determine if the role of peer learning in their leadership development plans should be changed to produce new value.

Purpose Statement and Research Questions

The purpose of this study was to explore the topic of peer learning as a leadership development approach in a formal cohort leadership development program for emerging healthcare leaders. Specifically, this case study involved observations and interviews of participants within an 18-month cohort-based leadership development program for healthcare professionals. It provides an in-depth description of the process and functions of key elements of the program that foster peer learning. It also interprets the meaning participants attribute to these key elements through the lens of peer learning.

The primary inquiry that guided my research was how peer learning contributes to leadership development in healthcare leaders. To gain understanding of participants' experiences within a formal leadership development program, research questions for this investigation centered on two areas:

1. How are key elements of an 18-month cohort-based formal leadership development program for healthcare professionals planned and implemented to support peer learning? What are the intended outcomes from these learning opportunities?

2. How do participants describe key learning opportunities and the peer learning process? What changes do participants attribute to these experiences?

Conceptual Framework and Narrative

The conceptual framework for my study, as illustrated in Figure 1, provides a structure to understand the leadership development process though the lens of peer learning. This diagram begins with a funnel representing the concept that overlapping theories of transformative learning combine to create transformational leadership. The research study focuses on the role of peer learning in specific aspects of a cohort healthcare leadership development program. Therefore, while there are likely many additional adult learning theories and leadership development approaches, the conceptual framework for this study emphasizes transformative group learning and transformational learning in a social environment, with healthcare workers engaged in formal cohort leadership training.

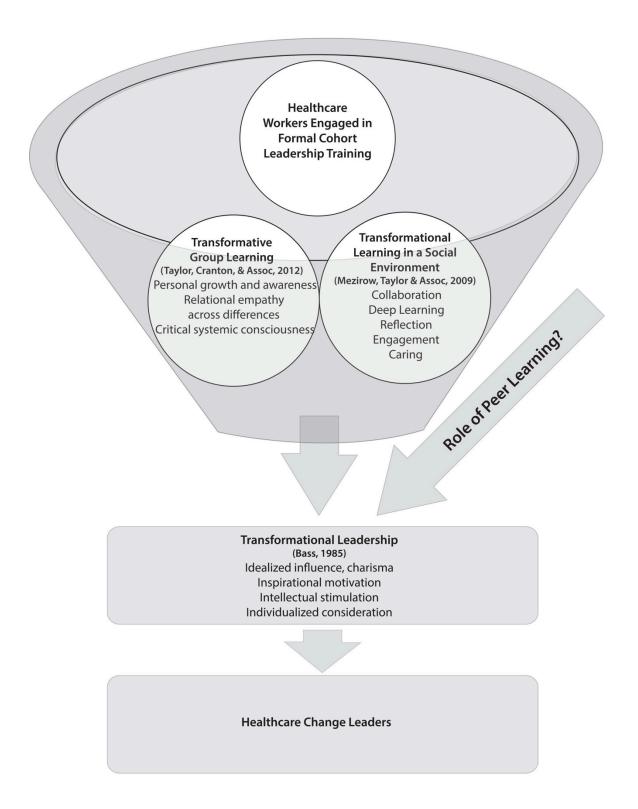


Figure 1. Conceptual framework of leadership development through peer learning.

Transformative learning is a process that creates deep change in an individual. The theory is based on the assumption that individuals uniquely understand their experiences and their world

view is then a result of their perceptions of their experiences. The process of examining, questioning, and revising those perceptions is at the core of transformative learning (Mezirow, 1991; Taylor, Cranton, & Associates, 2012). Formal groups can become engaged in transformative group learning when the environment, process, and dialogue facilitate a means for transformation. Taylor, Cranton, and Associates (2012) described the outcomes of this transformation as:

- "Personal growth and awareness
- relational empathy across differences
- critical systemic consciousness" (p. 359).

While there is a formal component to group learning, there is also a social component that can be developed. Opportunities for non-structured interactions that build trusting relationships can also create the space for transformative learning. Emphasizing the values of: collaboration, deep learning, reflection, engagement, and caring can create social space for engagement that fosters transformative learning (Mezirow, Taylor, & Associates, 2009).

Through combining healthcare workers engaged in formal cohort leadership training with transformative group learning and transformational learning in a social environment, Figure 1 illustrates a visual representation of a large group narrowing to a small group that is moving into transformational leadership. This study sought to understand the role of peer learning in this process.

Transformational leadership focuses on developing individuals to their fullest potential.

Bass (1985) identified four factors of transformational leadership: idealized influence – charisma, inspirational motivation, intellectual stimulation, and individualized consideration.

These factors describe leaders who are strong role models, inspiring people to a shared vision, stimulating creativity and innovation, while giving considering to individual needs and desires.

In the context of the healthcare environment, this diagram culminates with transformational leadership creating healthcare change leaders.

Methods Overview

This study utilized a qualitative case study approach to explore and understand how peer learning supports leadership development. This study focused on the key learning elements of an 18-month cohort-based formal leadership development program for healthcare professionals, the intent of these elements, and participants' responses from three cohorts to these learning elements. The program facilitator and the 21 participants of the current cohort were observed during formal and informal activities. In addition, individual interviews occurred with 12 individuals, including three from within each of the two current cohorts and three one from the previous cohort, the program facilitator, Chief Learning Officer and a senior leader/mentor. Training documents and summarized program evaluations from all participants from the completed cohorts were also analyzed.

Chapter III of this document further describes the research methods and procedures used in this study.

Chapter I Summary

Many new and emerging leaders will move into leadership positions in healthcare as experienced leaders retire or move to other positions. These leaders need leadership development that supports them in becoming transformational change leaders. This study explored the topic of peer learning as a leadership development approach in a healthcare setting. The aim of this study was to have a better understanding of the role of peer learning in creating transformational leadership and healthcare change leaders. A summary of the current literature on these topics will follow in Chapter II.

CHAPTER II

LITERATURE REVIEW

The purpose of this study was to investigate peer learning as a leadership development approach in a healthcare setting. The review of the relevant research and literature is organized into the following major sections. The first section is a summary of adult learning theories. The second section reviews the literature on the concept of transformational leadership. The third section describes research and theories related to leadership development. The forth section identifies research about healthcare leadership and describes some of the studies completed on various types of healthcare leadership development programs. In each of these sections, research and theories are reviewed through the lens of peer learning.

Current Adult Learning Theories

Baumgartner, Lee, Birden, and Flowers (2003) described two major theoretical approaches to learning: behaviorism and constructivism. The behaviorism lens views people as developing a collection of habits in response to positive or negative experiences. The constructivism lens views people as creating new meaning from information and experiences. "To arrive at this new meaning, people create internal cognitive structures to organize their world. Learning is achieved through assimilation and accommodation" (Baumgartner, Lee, Birden, & Flowers, 2003, p. 3). In this section I will explore conceptual frameworks that embrace the constructivism view.

Merriam (2001) explained that the understanding of adult learning is a "mosaic of theories, models, sets of principles, and explanations that, combined, compose the knowledge base of adult learning" (p. 3). Although there are decades of research in adult learning, there remains active debate and discussion regarding the theories and sets of assumptions, as well as how these apply to other cultures and populations. Applications beyond higher education into

professional development also required further inquiry. Additionally, our ever changing, high paced world of communication and distance learning methods are adding another dimension to the study of adult learning theories.

Three themes emerged from my research into adult learning theory: andragogy, self-directed learning, and transformative learning. Based on my reading to date, I will describe each theme; discuss criticisms or areas of debate; and highlight aspects related to peer learning as an aspect of leadership development.

Andragogy

Beginning in 1968, Malcolm Knowles recognized andragogy as a way of discerning adult learning from pre-adult education (Baumgartner, Lee, et al., 2003; Merriam, 2001). It became a pillar theory of adult learning and helped to "define the field of adult education as separate from other areas of education" (Merriam, 2001, p. 5). Knowles' model of andragogy grew from four to six assumptions during the period of 1970 to 1998. These assumptions describe the adult learner as someone who:

- 1. needs to know why there is a need to learn something before learning it;
- 2. shifts from being dependent toward being self directed in their learning;
- 3. has life experiences and knowledge as a learning resource;
- 4. times their learning activities with their social roles and developmental needs;
- 5. seeks learning to solve problems and apply immediately to situations; and
- 6. is internally motivated to learn rather than solely externally motivated.

Based on these assumptions, Knowles' theory is "a program planning model for designing, implementing, and evaluating education experiences with adults" (Merriam, 2001, p.

5). Labeled a transactional model, andragogy describes characteristics of adult learning transactions that can happen in a variety of settings including community education classrooms,

collage campuses, and organizational training and development departments (Holton, Swanson, & Naquin, 2001).

Knowles' assumptions and model have sparked much debate, writing, and discussion on andragogy. Central to the discussion is whether andragogy is a theory or instead a method, technique or set of assumptions (Davenport & Davenport, 1985). In fact, Rachal (2002) reviewed numerous andragogy studies with mixed results indicating that there is a lack of an operational definition for andragogy. Researchers considering a societal or cultural perspective on learning theory have several criticisms of andragogy. Holton, Swanson, and Naquin (2001), described other theorists who "criticizes andragogy for focusing solely on the individual and not operating from a critical social agenda or debating the relationship of adult education to society" (p. 123).

Other writers have added to Knowles' body of knowledge with suggestions to advance the research and theory. For example, Rachal (2002) listed seven criteria for a definition of andragogy that is more researchable than the current form. Holton, Swanson, and Naquin (2001) proposed an expanded model that applies learning outcomes to individual, institutional, or societal growth. Merriam (2001) explained that the discussion of andragogy is useful in exploring definitional and philosophical issues related to adult education as a scientific discipline, but its guide to practice provides its strongest impact.

"Applying adult learning principles and creating conditions that foster transformational learning are essential in the design and delivery of leadership development efforts" (Brown & Posner, 2001, p. 279). Andragogy, as the foundation of adult learning theory, is an aspect of leadership development. The next two themes, however, have even more to offer directly to my areas of interest. It is as if andragogy is the foundational theory from which each of the other themes developed and as a result, there is much overlap among the three themes. The next theme, self-directed learning, is considered the goal of andragogy (Mezirow, 1985, p. 17).

Self-Directed Learning

Discussions of self-directed learning emerged at approximately the same time as andragogy. In fact, Knowles contributed to the writings about self-directed learning (Merriam, 2001). Ellinger (2004) broadly defined self-directed learning as "self-learning in which learners have the primary responsibility for planning, carrying out, and evaluating their own learning experiences" (Ellinger, 2004, p. 159). Work in this area of study led to three main philosophic goals of self-directed learning:

- 1. "to enhance the ability of adult learners to be self-directed in their learning
- 2. to foster transformational learning as central to self-directed learning
- 3. to promote emancipatory learning and social action as an integral part of self directed theory" (Merriam, Caffarella, & Baumgartner, 2007, p. 107).

Exploration of self-directed learning has led to a number of processes, models, instruments and tools. Baumgartner, et al. (2003) described three categories of self-directed learning models. There are sequential models which define chronological steps in the self-directed learning process; next, there are interwoven models which attempt to match the learner's need for self-direction with the opportunities and activities for self-directed learning; finally, there are instructional models which define stages of self-directed learning growth and what type of instruction is needed at each stage. Guglielmino (1977) published the *Self-Directed Learning Readiness Scale* to quantify an individual's readiness for self-directed learning. Comprising 58 Likert-type statements, the *Self-Directed Learning Readiness Scale* is a self-report tool (Field, 1989; Stockdale & Brockett, 2011).

Brookfield (1984) identified four criticisms of self-directed learning theory. The first criticism is that primarily middle class adults were used in research samples. Second, quantitative studies lacking quality measures were used in research of the theory. Next,

individuals were studied without consideration to the social context of their learning and experiences. Finally, there is a lack of discussion of the impacts of this type of learning on societal or political change. In addition to these criticisms, there are numerous calls for more research on the topic and how the research is conducted. "Case studies and experimental research are needed in order to understand how to most effectively implement self-directed learning" (Edmondson, Boyer, & Artis, 2012, p. 46). Although the *Self-Directed Learning Readiness Scale* has made a contribution to the self-directed learning research field, there is debate regarding the validity of the scale (Stockdale & Brockett, 2011).

Discussion of leadership development and peer learning are found throughout writings on self-directed learning. First, Brookfield (1984) described the social aspect of self-directed learning. "These networks served as informational exchanges, provided evaluative indices in the form of peer assessment, and established a setting for the activities of skill models and resource consultations" (Brookfield, 1984, pp. 67-68). Next, Nesbit (2012) wrote about the necessity of leaders to embrace self-directed learning as a vital leadership competency and to be continuously learning to develop their talents. Others such as Guglielmino and Guglielmino (2001) described the critical need for organizations to become learning organization with the self-directed learner as the cornerstone of the learning organization. They list five major benefits to this type of organization: learning is self-managed, not other managed; learning content is individualized instead of predetermined; learning is primarily independent or interdependent rather than dependent; application of learning is primarily immediate, rather than delayed; and the cost to the organization is often reduced (Guglielmino & Guglielmino, 2001). The next theme, transformative learning, builds upon self-directed learning through life changing events and further expands upon the impact of adult learning theory in leadership.

Transformative Learning

Mezirow (1978) introduced transformative learning theory more than 35 years ago. Transformative learning is "a deep structural shift in basic premises of thought, feelings, and actions" (Kitchenham, 2008, p. 104). It is "about change – dramatic, fundamental change in the way we see ourselves and the world in which we live" (Merriam, Caffarella, & Baumgartner, 2007, p. 130). Experience, perceptions and inner meaning, and self-reflection are foundational aspects of this theory. Mezirow (1978) described ten phases of transformational learning:

- 1. a disorientating dilemma;
- 2. a self-examination with feelings of guilt or shame;
- 3. a critical assessment of epistemic, sociocultural, or psychic assumption;
- 4. recognition that one's discontent and the process of transformation are shared and that others have negotiated a similar change;
- 5. exploration of options for new roles, relationships, and actions;
- 6. planning of a course of action;
- 7. acquisition of knowledge and skills for implementing one's plans;
- 8. provisional trying of new roles;
- 9. building of competence and self-confidence in new roles and relationships;
- 10. a reintegration into one's life on the basis of conditions dictated by one's perspective. "Experience, critical reflection, and reflective discourse are the main ingredients in the transformative learning process" (Baumgartner, et al., 2003, p. 20). Since its introduction in 1978, it has developed and expanded. In 2000, revisions to Mezirow's initial theory further defined the theory and expanded upon its distinct elements (Kitchenham, 2008).

Baumgartner, et al. (2003) explained four philosophical approaches theorists use to view transformative learning. First, the developmental approach viewing transformative learning

process as an "intuitive and involving minds, bodies, spirits, and social environments" (Baumgartner, et al., 2003, p. 8). Second, is the emancipatory perspective highlighting the significance of learning for social change. Third, is a view that emphasizes the emotional, soulful, and spiritual aspects of learning. Finally, is Merzirow's approach of "reflection on previously held assumptions about the world to arrive at a new world-view" (Baumgartner, et al., 2003, p. 9).

Transformative learning continues to be an active topic of research and writing. Taylor (2008) recognized that "the focus has shifted somewhat away from the possibility of a transformation in relationship to a particular life event, toward greater interest in factors that shape the transformative experience (critical reflection, holistic approaches, and relationship)" (p. 10). Areas of research and thought include critical reflection, fostering informal transformational learning, and the ability or readiness for this type of learning (Taylor, 2008). Engaging in discussions about shared experiences, reflections and new perspectives without the fear of judgment is a characteristic of a highly developed learner (Merriam, 2004).

Transformative learning has led to discussions about the connections between experiences, emotions, relationships, spirituality, and self-awareness related to learning as a transformative process. "Taking our inner lives seriously within teaching and learning in higher and adult education contributes to and deepens our sense of role in life, but it also can contribute to a deeper appreciation of how meaning in our lives is intimately bound up in our relationships with others and the greater whole" (Dirkx, Mezirow, & Cranton, 2006, p. 129).

Transformative learning can be used to create and strengthen meaningful leadership development programs that develop transformational leaders using approaches that reach the leaders at the personal and emotional level. The programs must engage the leaders in critical self-reflection to support meaning making from experiences. These insights can grow leadership

mindsets (Brown & Posner, 2001). Transformational group learning can happen when the environment, process, and dialogue create a means for transformation. The outcomes of this transformation may include personal growth and awareness, relational empathy across differences, and critical systemic consciousness (Taylor, et al., 2012).

Peer learning is a critical aspect of transformative learning and leadership development through the sharing of reflections and learning from peers. "Talking about events can stimulate reflective processing as it aids the leader in making sense of events and drawing out insights about one's area for improvements and to assist in the development of action plans" (Nesbit, 2012, p. 212). In order to assess the strength of assumptions and perspectives, people must share their thoughts and reflections with each other. Challenging each other's ideas and beliefs helps people learn other's views and experiences and, ultimately, the truth (Baumgartner, et al., 2003).

Although learning and education has long been a field of study, adult learning theory is more recent and therefore there remains much to learn. "The reality is that none of the prominent theories or models of adult learning have been tested well empirically" (Holton, et al., 2001, p. 140). Merriam, et al. (2007) suggested three areas of transformative learning for future research and discussion. The first area of further inquiry is "the emotional and spiritual aspects of transformative learning" (Merriam, et al., 2007, p. 156). The second area to be considered is exploring transformative learning and technology. The third area focuses on transformative learning in the workplace. Brown and Posner (2001) agreed that there is an interest in relating learning and leadership, and that this is of growing interest in the field of leadership development.

Specifically, in my area of interest, Brookfield (1984) suggested that the social setting for self-directed learning has not had significant study. Mezirow, Taylor, and Associates (2009) indicated that transformational learning in a social environment can be developed through

trusting relationships and an engaging environment that emphasizes the values of collaboration, deep learning, reflection, engagement, and caring. Taylor (2008) suggested future study in how transformative learning affects peers.

The next section defines and describes transformational leadership. With the growing need for leaders to learn quickly, adapt, and be flexible, the trend is multiple relationships with peers with the responsibility on the leader to seek out a variety of learning opportunities to develop themselves and others as leaders (Marvinac, 2005). This fits with transformational leadership in that transformational leaders strive to learn, grown and develop their followers.

Transformational Leadership

Burns (1978) described transformational leadership as a leader who understands the needs of their followers and engages them to higher levels of motivation and morality. The relationship develops into mutual trust and stimulation that elevates and changes followers into leaders and may convert leaders into moral change agent. This type of leadership excites people and brings them together for a collective purpose. "The transformational leader taps the needs and raises the aspirations and helps shape the values – and hence mobilizes the potential – of followers" (p. 455). As the word implies, this type of leadership transforms a time, place or way of being. Revolutions, reformations, and social activism are examples of this type of change.

The leadership that created the Declaration of Independence and Constitution are examples used to illustrate transformational leadership. The characteristics of men like Lenin, Gandhi, and Mao who engaged millions of people in social and political change are also used to describe transformational leaders. Martin Luther King is another example that has been used as a transformational leader. His fervent conviction, passion, and zeal are characteristics that are highlighted as necessary to inspire a transformation. King's courage and independence coupled

with his uncompromising and incorruptible commitment to change created a revolution through his bold actions, sermons, and writings (Burns, 1978).

The contrast between transactional and transformational leadership is significant and revealing. Burns (1978) made a case that transactional leadership is one of managing needs, goals, and resources. It uses rewards for services delivered, punishments when there is dissatisfaction, and is often considered traditional management. Conversely, transformational leadership is elevated leadership that inspires people to become more than they believe possible. Great leaders look for ways to create leaders out of their followers. Together they strive for a loftier purpose. The next section describes how this passion is used in the workplace.

Transformational Leadership in the Workplace

In the workplace, transformational leadership takes place when leaders expand and elevate the interests of their employees, when leaders are able to develop broadened awareness and agreement of the mission and vision among their employees, and when leaders create a passion in their employees that drives beyond self-interest for the good of the group or organization (Bass, 1990). Executives often use a variety of leadership techniques, including both transactional and transformational leadership. Evidence has shown that transformational leadership approaches stimulate employees to achieve more while transactional leadership may limit employee effort and satisfaction (Bass, 1990).

Lowe, Kroeck and Sivasubramaniam (1996) found meta-analytical evidence that research findings demonstrated statistically significant relationships between leader effectiveness and transformational behaviors. They also found that transformational leadership is more effective, productive, innovative, and satisfying to followers than in transactional leadership. Bass (1990) found via a survey of 228 employees of 58 managers in a large engineering company, that managers determined to be the most transformational had from 75-82% of their employees

indicate they frequently exerted extra effort on the job, while the least transformational managers had only 22-24% of their employees say that they frequently exerted extra effort.

While both transactional and transformational leadership relationships have a role in accomplishing a goal or achieving a purpose, transformational leadership requires a much deeper relationship between the leader and follower. Transformational leaders often have better and more productive trusting relationships with their employees than those that mainly use transactional leadership approaches (Bass, 1990). When transformational leadership is in place, Burns (1978) suggests that it is much more potent than transactional leadership and provides a higher level of satisfaction for the leader and follower. This type of relationship can take considerable time to develop and a key to success is developing a level of mutual trust and support (Bass, 1990). On the other hand, transactional leadership can provide a quicker response because it is a simpler exchange of one thing for another where less trust and relationship is necessary. An exchange of resources evolves from a transaction to a transformational relationship when there is a shared vision and future (Ganz, 2010). The leadership dimensions ranging from transactional to transactional to transformational are described below.

Dimensions of Leadership

Bass (1985) identified eight dimensions of leadership ranging between the broad domains of transformational and transactional. Transformational leadership contains four key dimensions: idealized influence, which is sometimes called charisma; inspirational motivation; intellectual stimulation; and individualized consideration (Bass, 1985, 1990; Bass & Avolio, 1993: Bass & Steidlmeier, 1999). Each of the four dimensions of transformational leadership is described in the following paragraphs.

Idealized influence. This dimension refers to leaders who have high moral standards and ethical conduct. They are well respected and evoke loyalty. "If the leadership is transformational,

its charisma or idealized influence is envisioning, confident, and sets high standards for emulation" (Bass & Steidlmeier, 1999, p. 187).

Inspirational motivation. The next transformational leadership dimension refers to leaders with foundational values and ideas that generate a strong vision for the future. Behaviors such as encouraging enthusiasm, creating confidence, and inspiring followers with rituals and symbols as well as language are considered part of inspirational motivation. "The inspirational motivation of transformational leadership provides followers with challenges and meaning for engaging in shared goals and undertakings. The inspirational appeals of the authentic transformational leader tend to focus on the best in people – on harmony, charity, and good works" (Bass & Steidlmeier, 1999, p.188).

Intellectual stimulation. The next two transformational leadership dimensions are highly correlated. Intellectual stimulation refers to leaders who confront organizational norms, encourage new ways of thinking, and encourage creativity. "The intellectual stimulation of transformational leadership incorporates an open architecture dynamic into process of situation evaluation, vision formation and patterns of implementation. Such openness has a transcendent and spiritual dimension and helps followers to question assumptions and to generate more creative solutions to problems" (Bass & Steidlmeier, 1999, p. 188).

Individual consideration. This dimension refers to leaders who seek opportunities and growth for others as well as themselves (Bass, 1985, 1990; Bass & Avolio, 1993). "The individualized consideration component of transformational leadership underscores the necessity of altruism if leader is to exert anything more than authoritarian control. The transformation leader treats each follower as an individual and provides coaching, mentoring and growth opportunities. True transformational leaders are concerned about developing their followers into leaders" (Bass & Steidlmeier, 1999, p. 189).

The remaining four of the eight dimensions of leadership are transactional. They are considered transactional because they are focused on monitoring and controlling individuals. The fifth behavior is focused on contingent rewards that are aimed at efforts and performance is exchanged for tangible and intangible support and resources. The next dimension is active management by exception that focuses on setting standards, monitoring performance and using corrective action when necessary. The seventh leadership dimension is passive management by exception and involves leaders only when problems become serious. The last leadership behavior, laissez-faire is a lack or avoidance of leadership (Bono & Judge, 2004).

Most leaders work through a range of leadership characteristics that include both transformational and transactional behaviors (Bass & Steidlmeier, 1999). A leader can work to improve their presiding leadership style from transactional to transformational (Bass, 1990). Transformational leadership can also be fostered in organizations through recruitment, selection, promotion, training, and development to positively impact the health and performance of the organization (Bass, 1990).

Bass (1985) developed a measurement instrument for transactional and transformational leadership behaviors. This tool has been used to research the nature of the relationship between these leadership behaviors and work performance, effectiveness, and satisfaction. While my study will not be using this tool, the research using this tool provides insight into the implications of transformational and transactional leadership behaviors. The instrument, the Multifactor Leadership Questionnaire (MLQ) has been used in a multitude of studies (Lowe, Kroeck, & Sivasubramaniam, 1996). The full range of leadership dimensions, as measured by the MLQ, suggests that every leader uses both the transactional and transformational behaviors, but each tends to display more of one and less of the other (Avolio & Bass, 1993). "Leaders who are more

satisfying to their followers and who are more effective as leaders are more transformational and less transactional (Bass, 1990).

Bass, Avolio, Jung, and Benson (2003) found, via a MLQ survey study of 72 military platoons, transformational leadership behaviors were positively correlated with the transactional contingent reward leadership dimension, however negatively correlated with laissez-faire leadership. Additionally, the transformational leadership behaviors of the platoon leaders positively related to potency, cohesion, and performance. Barbuto (2005) found, via a study of 186 leaders with 759 direct reports from a variety of organizations, that leaders with transformational behaviors have a higher correlation to the source of motivation than did leaders using other leadership behaviors. Further, Shin and Zhou (2003) found, via a study of 290 employees and their supervisors from 46 Korean organizations, transformational leadership behaviors were positively related to employee creativity and intrinsic motivation.

Hinklin and Tracey (1999) identified, in an analysis of the MLQ literature, that many studies have found that the MLQ has empirical shortcomings and the MLQ dimensions are too broadly defined. Additionally, they recognized a lack of empirical evidence for the idealized influence category. Further research is needed on how these dimensions relate to leadership effectiveness and organizational outcomes (Lowe, Kroeck, & Sivasubramaniam, 1996; Hinkin & Tracey, 1999). Bass (1990) found that while applied research in transformational leadership has been plentiful, relatively little testing has been done of the linkage proposed by Bass (1985) to understand how transformational leadership really works. Additionally, more research is needed to understand why transformational leadership is more effective than transactional leadership in a healthcare setting (Bass, 1990).

Changes in the workforce, marketplace, and society in general have created a need for effective leaders that are more transformational and less transactional. In the workplace,

"transformational leaders are expected to enhance the performance capacity of their followers by setting higher expectations and generating a greater willingness to address more difficult challenges" (Bass, Avolio, Jung, & Benson, 2003). Increasingly, professionals see themselves as colleagues and peers rather than rivals, superiors, and subordinates. Transformational leadership fosters this type of relationship (Bass, 1990). With transformational leadership as the frame, the next section describes approaches to leadership development.

Leadership Development

The purpose of my proposed study is to explore leadership development with a specific focus on peer learning. Research into how to access and foster transformative learning found that "as managers improve their ability to learn from experiences in the workplace (e.g., through challenging assignments, role models, hardships and the like) the better or more effective they will be as leaders" (Brown & Posner, 2001, pp. 275-276). Given the realization that more leaders are needed and that individuals can develop leadership skills, leadership development has become a widespread topic of research and practice (Allen & Hartman, 2008; Conger, 1992; Groves, 2007). This section explores the literature around developing transformational leaders, leadership development approaches, and cohort-based leadership development.

Developing Transformational Leaders

Developing transformational leaders requires an understanding of the range of behaviors from transactional and transformational leadership. Leaders often use transactional leadership techniques such as rewarding employees for the services or outcomes, while transformational leadership expands to offering an inspirational vision and relationship that intrinsically motivates employees to deliver at a higher level (Bass, 1990). The combination of five main leadership practices creates transformational leadership: building relationships committed to a common purpose; translating values into sources of motivation through narrative; turning resources into

the capacity to achieve purpose by strategizing; mobilizing and developing resources as clear measurable, visible action; and structuring authority so as to facilitate the effective distribution of leadership (Ganz, 2010).

Leadership development, emotional intelligence, and personal leadership are topics that Burns (1978) discussed as complementary to transformational leadership. However, he expressed concern that current leadership how-to books at the time focused on transactional leadership and were missing the opportunity to create great leaders. "Persons are taught by shared experiences and interacting motivations within identifiable physical, psychological, and socio-political environments. Ultimately, education and leadership shade into each other to become almost inseparable, but only when both are defined as the reciprocal raising of levels of motivation rather than indoctrination or coercion" (p. 448).

Burns (1978) urged leaders to consider if they understand the needs of their followers and if they are authentic in their purpose by using the following steps:

- 1. Clarify your our own personal goal.
- 2. Determine who you are seeking to lead.
- 3. Determine where you are truly seeking to go.
- 4. Assess how you will overcome obstacles to realizing the goal.

He concludes by giving his readers the practical advice of "not to treat pawns like pawns, nor princes like princes, but all persons like persons" (p. 462). This statement summarizes Burns' (1978) theory that leadership is the synergy of a leader-follower relationship in which there is a shared purpose as well as strong motives and values. The relationship is one where the leader truly wants the best for the followers and goes beyond politics or business goals.

Research supports that transformational leadership skills can be learned and fostered through leadership development and training (Mason, Griffin, & Parker, 2014). Adding to the

body of research, Thomas, Jules, and Light (2012) found, via a case study of the second largest utility in the U.S., that leadership development done with a multifaceted approach provided measurable results. The researchers described the role of peer networks to understand new insights as a component of this program. "To transform such experiences into the source of distinctive leadership capabilities, new leaders must be able to share them with other leaders as part of their development" (p. 76). Ashford and DeRue (2012) found, via surveys of U.S. senior executives and human resource professionals, that a lack of leadership talent impedes organizational performance. The researchers proposed a mindful engagement leadership development process including action, feedback, and reflection.

Further, Tourish (2012) found, via a study of 192 organizations using a survey, that regular review of leadership development programs is needed to ensure the outcome of desired behaviors and their positive impact on the organizational performance. Based on his research, he proposed a framework that includes reflection and action as the foundation of leadership development. Jarvis, Gulati, McCririck, and Simpson (2013) found, via a qualitative study of two cohort leadership development programs, peer relationships formed that contributed to both personal and organizational resilience. Additionally, learning and working in small groups built relationships and professional networks that felt supportive to the participants. This study found "relationships and trust as essential to sharing authentic accounts of experience and uncovering collective wisdom, underpinned by an approach to leadership development that values different domains of expertise and the importance on connecting and peer-to-peer spaces" (p. 31).

Mason, Griffin, and Parker (2014), through their qualitative study of 56 leaders participating in a transformational leadership program, found a positive relationship between change in behavior and change in positive affect. The researchers suggested that psychological reactions of leaders should be supported and monitored during development programs to

maximize positive change in transformational leadership behavior. Various leadership development approaches support the needs of individual learners while providing the opportunity for peer learning. In the next section, I explore the most popular approaches.

Leadership Development Approaches

"Effective leader development is best when it occurs within a context for leadership, along with continuing to participate in formalized leadership development programs throughout a career, preferably at key transition points, not just at the early career stage" (Allen & Hartman, 2008). While there are many sources, activities, and ways to deliver leadership development (Avolio, 1999; Day, 2001; Yukl, 2002), Conger (1992), currently there are four main approaches to leadership development programming: personal growth, conceptual understanding, feedback, and skill building. Next, each of these areas is further explored highlighting the common training delivery methods used with each approach.

Personal growth. The connection between leadership development and personal growth is discussed throughout the literature (Allen & Hartman, 2008; Conger, 1992). It focuses on approaches that challenge individuals to examine emotions, beliefs, and values. As people learn more about themselves, the concept is that they are better able to take responsibility for their actions, realize their strengths and potential, and inspire others because of the higher meaning they place on their work.

Allen and Hartman (2008) described common leadership development programs that encourage reflection on behaviors, beliefs, and intent. These interventions include: group reflection, individual reflection, service learning, outdoor management development, low ropes course, teambuilding, fellowship, sabbaticals, developmental relationships, and networking with senior executives. Day and Harrison (2007) found, through studying literature on the evolution of thinking around leadership and leadership development, that relationships with peers are

critical to sustaining leadership development overtime. Further, they stated that the success of a leadership development intervention is greatly enhanced when it includes the team. "True leadership development transcends the focus on the individual leader to also consider the relationship between individuals that can enhance the capacity for shared sense making, learning from shared experiences and collectively enacting the fundamental tasks of leadership such as setting direction, building commitment, and creating alignment" (p. 364).

"Peer learning is a social learning process by which individuals come to a better understanding of their own assumptions and judgment. Through this they are able to develop the ability to judge their accuracy and validity by involving peers as critically reflective mirrors who provide them with images of how their practices look to others" (Mezirow, et al., 2009, p. 133). Mavrinac (2005) found, in her literature review of peer mentoring and application in the academic library setting, that peer mentoring as a learning process complemented transformational leadership and a learning organization culture. Ji and Chuang (2011), through their surveys of 157 Taiwan music departments faculty of colleges and universities, found that peer relation was influential in a transformational culture. Further, their research found deeper professional peer relationships linked with increased perceived transformational culture.

Guldberg (2008) analyzed how peers learn and support one another with professional development in an online setting through a study of 265 students with over 10,000 posts in a sixmonth period. Using mixed methods, the author found "every discussion showed evidence of students seeing things from different perspectives, working together, helping one another, sharing common assumptions and experiences" (p. 41). This research supported the concept that the dialogue process creates new thinking and learning. Gilly (2003) found, via qualitative research of two peer learning groups, that "peer-group learning was relational, collaborative, and

egalitarian" (p. 79). The researcher wrote that an important aspect of peer learning is reflection to create common meaning and consciousness-raising.

McDermott, Kidney, and Flood (2011) found, via interviews with senior leaders in the Irish public, voluntary and private sectors, that formative experiences or individuals were fundamental to their leadership development. Researchers also found that the leaders emphasized leadership as a collective activity involving human and social capital development. Komives, Owen, Longerbeam, Mainella, and Osteen (2005) found, via a grounded theory study on developing leadership identity, a six-stage leadership identity development process. "The essential developmental influences that fostered the development of a leadership identity included adult influences, peer influences, meaningful involvement, and reflective learning" (p. 596). Much of the literature on transformational learning emphasizes the role of relationships as a growth-supporting environment that offers both the means and space in which the dialogical process occurs (Mezirow, et al., 2009, p. 356).

Conceptual understanding. Another approach to leadership development involves understanding the topic of leadership and the most accepted leadership theories (Conger, 1992). Using theory and the belief that leadership is developed through lifelong learning, conceptorientated programs are popular in university programs as well as model-based books and training programs. Allen and Hartman (2008) described common leadership development programs that offer a cognitive understanding of the phenomenon of leadership. These sources of learning include: degree programs, self-paced learning such as workbooks, classroom-based training, and e-learning.

Brown and Posner (2001) explored the relationship between conceptual understanding and leadership through a quantitative study of 312 managers and MBA students. They found support for their theory that transformational learning is related to transformational leadership.

Results indicated that people who were better learners consistently engaged more frequently in leadership practices than those in lower learning categories. Exploring leadership development as a learning process, the authors wrote, "Transformational learning theory can be used to assess, strengthen, and create leadership development programs that develop transformational leaders" (p. 279).

Feedback. Feedback provides a person with more information about their patterns of behavior so the person can understand more about him or herself and reassess what is effective relative to their goals (Conger, 1992). Feedback tools such as the MBTI and 360-degree instruments are common in leadership development programs. When a feedback process is effective, it stimulates feedback dialogue with peers that assists individuals to learn about their strengths and weaknesses so they can improve their leadership skills. Senge (1990) discussed dialogue as a process through which people in groups can give feedback, explore their assumptions, and find ways of creating shared meaning.

Allen and Hartman (2008) list several programs that center on the feedback approach to leadership development and place emphasis on measuring a person's strengths and weaknesses in a range of leadership behaviors. Based on these measures, development interventions are individualized. These programs include: executive coaching, instruments, assessment centers, and 360-degree feedback. Ashford and DeRue (2012) found, via surveys of U.S. senior executives and human resource professionals, that a lack of leadership talent impedes organizational performance. The researchers proposed a mindful engagement leadership development process including action, feedback, and reflection.

Topping (2005) defined, after a literature review, deeper learning as "the acquisition of knowledge and skill through active helping and supporting among status equals or matched companions" (p. 631). Noting that it can be a highly cost effective approach to learning, the

author presents a model synthesized from existing research that emphasizes feedback and reinforcement. Boud, Cohen and Sampson (1999) described, via literature review, assessment practices of peer learning in university courses. They concluded that proper assessment and feedback can foster peer learning, however it must be carefully considered so as not to deconstruct the peer relationship.

Taylor (2009) affirmed that engagement in feedback and dialogue with the self and others is one of the core elements of a transformative approach to teaching and learning. Dialogue is the essential medium through which feedback foster transformation if there is a means for critical reflection to be put into action. When there is deeper understanding of the issues, assumptions and beliefs can be questioned, and thinking can ultimately be transformed. The dialogue is not so much analytical, point-counterpoint dialogue, but dialogue emphasizing relational and trustful communication (Mezirow, et al., 2009).

Skill building. Conger (1992) identified leadership skill building or competency development as an approach that focuses on teaching skills that are needed by leaders such as visioning, communication and motivation. It is less interested in theory and more about acquiring skills or techniques (Carr, 1996). However, learning when, where, and how to apply the skills requires an understanding of their purpose and conditions in which they will be most useful (Snook, Nohria, & Khurara, 2012).

Allen and Hartman (2008) listed programs that identify key leadership skills that need to be taught and offer methods that teach new leadership behaviors. The learner practices the new skill, receives feedback, and refines the technique. These programs include: just-in-time training, development assignments, simulations, games, personal development plans, action learning, job enrichment, job enlargement, and job rotation.

Kram and Isabella (1985) found, via an interview study of 25 relationship pairs, that peer relationships provided a variety of developmental benefits, similar to mentoring relationships. The researchers created a continuum of peer relationships: information peer, collegial peer, and special peer. The developmental functions of the continuum changed as people progress in their career.

Leonard and Lang (2010) found, via four case studies of action learning leadership development at the U.S. Department of Commerce, Boeing, the National Institutes of Health and the US Department of Agriculture, that it is important to have frequent reflection opportunities during active learning leadership development sessions. Discussion about personal learning, planned applications, and further needs for development added to positive development results. Mezirow, et al. (2009) described laboratories for leadership and organizational learning, experimentation, critical reflection, and change.

Carr (1996), an expert in leadership and organizational development, wrote that individuals can learn new leadership insights in an experiential approach focusing on listening, hearing, and responding. The author described learning about leadership in phases and provided a model for learning with the three components: holding, dynamics and group focus. "Leaders who themselves have been transformed can learn from the principles embedded in these and other strategies to create space for others to share in this process and enact transformation within the organization in various ways, such as coaching, mentoring, communities of practice or interest, and learning teams" (Mezirow, et al., 2009, p. 380).

Cohort-Based Leadership Development

The contribution of cohort-based programs to transformative learning has been confirmed by research (Mezirow, et al., 2009; Scribner & Donaldson, 2001). For purposes of my study, the definition of cohort is a group of learners who begin a program together and remain in the

program together as a group until the program is complete (Greenlee & Karanxha, 2010; Lawrence, 2002; McPhail, Robinson, & Scott, 2008; Spaid & Duff, 2009). Created properly and in a supportive environment, cohorts foster collaboration, collective learning, and cohesive working groups improving the learning experience (Imel, 2002; Spaid & Duff, 2009).

Imel (2002) found, via a literature review on adult learning cohorts, best practices in forming and structuring cohorts, research findings on the learning during cohorts, and recommendations for practice. Lawrence (2002) wrote, as an adult and continuing education expert, that cohort learning groups co-created learning that was greater than the sum of each individual's experience. Focusing on cohort members being part of a whole, members have the "opportunity to develop skills in communication, accountability, respect, love, conflict resolution, and commitment" (p. 91).

Spaid and Duff (2009) described, via a case study of one private college, best practices for accelerated cohort college programs. "Each cohort member works collectively and collaboratively toward improving the learning experiences of all the members" (p. 105). The researchers listed nurturing interdependence, mutual respect, critical reflection, moving outside comfort zones, and examination of knowledge as program best practices. Seed (2008) found, via a qualitative case study on the effects of a cohort-based experiential learning program, that the participants perceived value in a cohort and understood building a cohort as building relationships. Additionally, close relationships were perceived as supportive.

McPhail, Robinson, and Scott (2008) found, via surveys and focus groups of 50 cohort doctoral students, that cohorts must be structured and facilitated in such a way as to add value by being in a group. When this is done, participants reported value through being able to share knowledge, dialogue, make sense of new information, and gain a positive outlook. Further, Teitel (2009) found, via surveys of students and faculty in a shared action-research project, that the

cohort design created gains in support and connection among educational leadership students. They also found that an unanticipated benefit in the cohort design was a deeper level of discussions and interchanges among students. "The cohort model has a tremendous and largely untapped potential for developing the kind of collaborative, transformational leaders needed by schools today" (p. 76).

Sharlow, Landgenhoff, Bahatti, Spiers and Cummings (2009) found, in their case study of a Leadership Development Initiative (LDI) in an Alberta health system, how a peer based, cohort approach to leadership development was created, implemented, and evaluated based on leadership theories and practices. The researchers described the assumption for the program as a perceived "need for a supportive environment that encouraged dialogue and reflection to foster growth and development with peers that would assist leaders to meet ongoing opportunities and challenges facing their organization" (p. 319).

Additionally, Greenlee and Karanxha (2010) found, in their survey on group variables of participation, communication, influence, trust, cohesiveness, empowerment, collaboration, and satisfaction in cohort and non-cohort leadership programs, that there is a significant increase in trust, cohesiveness, and satisfaction in the cohort leadership program. Further, Scribner and Donaldson (2001) found, via a case study of a state-wide leadership learning cohort, that transformational learning occurred when people changed perspectives, especially related to team members' self-perceptions as leaders. This learning occurred in reflective ways among peers.

Cohort groups can offer the opportunity for individuals to learn and practice skills with their peers necessary for transformation leadership such as communication, accountability, respect, love, conflict resolution, and commitment (Lawrence, 2002). Research has shown that when the cohort is designed well, it can foster collective knowledge and wisdom through the sharing of multiple perspectives, new understandings, and deep discussion with peers (Gilly,

2003; Lawrence, 2002; Teitel, 2009). Leadership competencies can be enhanced through peer interactions made available through the cohort experience leading to the development of critical thinking, an enhanced knowledge base, changes in perspective, and higher motivation to learn (Lawrence, 2002; McPhail, Robinson, & Scott, 2008; Seed, 2008). Further, long-term supportive professional peer relationships can be created as a result of the cohort environment (Seed, 2008).

Although there is a growing body of research related to the cohort approach to leadership development, Scribner and Donaldson (2001) identified that there is a lack of literature or studies exploring the types of learning that cohort learners experience as well as the role of group dynamics in a cohort learning environment. With an understanding of adult learning, transformational leadership, and leadership development, the next section explores leadership and leadership development in a healthcare setting.

Healthcare Leadership

My study involved participants from within a cohort-based formal leadership development program for healthcare professionals. This section explores the evidence regarding a healthcare leadership crisis, as well as examines what skills and characteristics are needed in future healthcare leaders. It also provides background on healthcare leadership development programs and challenges.

Healthcare Leadership

In my review of the current literature, the healthcare industry seems to be experiencing an unprecedented need for transformational leadership as a result of the complexity of the industry, healthcare reform, and an aging leadership workforce (Dolon 2010; Jarousee, 2011). However, this is not new information. For many years, healthcare leaders and researchers have sensed a looming healthcare leadership crisis, yet few healthcare organizations have made the investments needed to develop strong leaders (McAlearney, 2006). Further, the United States' healthcare

industry faces significant challenges in leadership development and succession planning (Groves, 2007).

Overall, the population is aging and more people are approaching retirement age. In the case of healthcare, hospital CEOs tend to retire between the ages of 55 and 60, and therefore, many of the top hospital systems in the country are likely to have retiring CEOs in the next few years (Thrall, 2001). As aging healthcare leaders begin to retire, the urgency for both leadership development and succession planning are intensified (Block & Manning, 2007). Yet, there is little research evidence on the most effective ways to best prepare future healthcare leaders.

Doody (2002) found in a nationwide study of 1,600 hospitals and health systems that nearly two-thirds of the responding CEOs thought there will be a shortage of healthcare leaders who are prepared for future executive roles. Lack of resources, proper mentoring, and development of opportunities were cited as reasons that the healthcare industry drives away many of its potential candidates for future leaderships. At the same time, the industry has made significant cuts to middle-management roles that provide the experienced leaders who will be needed to meet the coming leadership gap. As a result, healthcare leadership development programs are being created to offer training and experience that was once learned through middle-management roles (Groves, 2007).

While the landscape of the healthcare system is changing rapidly, United States healthcare leaders have been adapting to change for decades. Advancing standards of care and technology, as well as new business models, shifting demographics, and consumerism are many of the aspects of healthcare that are in continual flux. Regulations, cost pressures, access to care, and recruitment of clinicians add to the complexity during this time of healthcare reform (Center for Creative Leadership, 2010). However, the rate of change and the complexity involved mean that healthcare organizations will require new and different leadership skills to navigate the

change that is both necessary and unprecedented since the establishment of Medicaid and Medicare (Dolon 2010; Jarousee, 2011).

"Without transformational leaders who are able to inspire and engage people in a shared vision for the future, sustainable healthcare reform is not possible" (Block & Manning, 2007, p. 85). An absence of strong leadership has impacted the ability of the current healthcare system to implement and sustain needed strategic changes (Bodinson, 2005; Degeling & Carr, 2004). As a result, healthcare organizations are seeking ways to become transformational and are looking at leadership to be change agents.

According to the Center for Creative Leadership (2010), leaders in healthcare must develop the ability to bridge team, organizational, and cultural divisions. These leaders will need to learn to eliminate barriers and silos and expand boundaries through the development of networks and relationships. Healthcare leaders will have to respond to constant and rapid change as well as numerous stakeholders. Diverse strategic goals in quality, service, performance, and finance in addition to quickly changing regulatory and market environments require strong leaders who have energy, enthusiasm, and integrity (McAlearney, 2005, 2006).

Effective leadership is in part a social process that happens laterally across a range of individuals connected to each other in practice (Raelin, 2011). The Center for Creative Leadership (2011) analyzed leadership effectiveness data from nearly 35,000 healthcare professions between 2000 and 2009, via leadership evaluations, and found organizations that have a collaborative leadership strategy and culture, and focus on developing the following six capabilities have an advantage:

- engagement and well-being;
- capacity for complexity, innovation and change;
- boundary spanning;

- talent transformation;
- resource stewardship; and
- collaborative patient care team.

Further, they found that leadership top priorities are to improve the ability to lead people and work as teams; provide future leaders with cross-organizational experiences and learning; and develop leaders who can quickly adapt to change and are resourceful, straightforward, and composed. Problems with interpersonal relationships or difficultly building and leading teams can compromise a leader's ability to succeed. Finally, the Center for Creative Leadership (2010) study found that while healthcare leaders place a high value on the ability to lead others, healthcare leaders are often rated lower in relationship level performance such as building and mending relationships as well as participatory management.

Edmonstone (2011) emphasized the importance of hospital leaders who are considered "nearby" as opposed to "distant" leaders, with "nearby" leaders being more typical of the transformational leadership approach with the following skills: dynamic, active, sociable, open and considerate, expert and intelligent, original and unconventional, and setting high standards. He also stated that future transformational and transactional leaders need to be developed, however, there is not enough information on how many leaders are needed and how to develop them. Further, careful consideration and more evidence are needed to ensure that the use of the best leadership development approaches are used instead whatever is the current training fad.

Healthcare Leadership Development

While there are many examples of successful leadership development and succession planning strategies in private industry, healthcare has not made this a priority until very recently. The need to understand how to best develop healthcare leaders has gained attention in recent years (McAlearney, 2005), and leadership development is critical to the healthcare industry

(Edmonstone, 2011; Grove, 2007). Committed leadership is essential for healthcare systems to deliver quality care (Wessel Krejci, & Malin, 1997).

If healthcare leadership development is to be effective and add value, it must be well planned and led (Edmonstone, 2011). However, evidence suggests that the healthcare industry is behind other industries in its leadership development practices. An understanding of how to develop effective transformational leaders in healthcare is not yet established and many healthcare organizations give little attention to leadership and organizational learning. (McAlearney, 2005).

It is critical that healthcare organizations create conditions that support and enhance new models of leadership. Without these conditions, emerging leaders are likely to become frustrated at the lack of progress and consider leadership development as a waste of time and resources (Hewison & Griffiths, 2004). Effective healthcare leadership development is an ongoing organizational commitment that must be approached as a culture change initiative. It takes the engagement of the entire leadership of an organization to develop and grow a new generation of leaders with the ability to meet the challenges of healthcare reform (Block & Manning, 2007).

Groves (2007) found, via semi structured interviews with 30 healthcare CEOs and 15 healthcare human resource executives, that the following six themes emerged related to integrating leadership development and succession planning:

- developing pervasive mentoring relationships,
- identifying and codifying leadership talent,
- assigning action-oriented developmental activities,
- enhancing high potentials' visibility, leadership development through teaching,
 and
- reinforcing a culture of leadership development.

Further, Groves (2007) identified the specific best practices of healthcare organizations that were focused on preparing people for future leadership positions. They include:

- Developing a mentor network and encouraging mentoring relationships;
- Identifying high potential employees for development as future leaders;
- Engaging leaders throughout the organization in leadership development activities, teaching, and learning experiences;
- Avoiding heir apparent identification and instead developing a diverse pool of leadership candidates;
- Creating opportunities for high potential future leaders to be exposed to the stakeholders, senior leadership, and board members;
- Establishing a supportive leadership development culture through involvement of the CEO and other senior leaders; and
- Continually evaluating and monitoring the organization's leadership development practices.

Ford (2015) suggested that much attention has been placed on leadership qualities, abilities, and competencies without recognition of the complexity of leadership development and that leadership may be co-produced by leaders, peers and followers. This focus may ignore broader contextual factors including encouraging exploration, challenges, and learning collectively among peers, followers, and leaders. Further, Ford identified the need for more exploration of leadership as a social process, as well as a relational and interconnected approaches for leadership development.

One of the critical success factors in healthcare leadership development programs is the understanding and interactions among program staff, participants, and other organizational stakeholders (Edmonstone, 2011). Boaden (2006) concluded that successful leadership

development programs in healthcare include participants as learners, flexible and responsive program design based on context and feedback, as well as a focus on preparing for change. An emerging view of healthcare leadership development is focused on the interpersonal relationships between leaders, followers, and colleagues. This social network and social influence positively impacts team dynamics. It is built through building and mending relationships so that there can be strong dialogue and a sharing of perspectives with others (Edmonstone, 2011).

Bergman, Fransson-Sellgren, Wahlstrom, and Sandahl (2009) found, via surveys and focus groups with 53 participants from two different healthcare leadership development programs, that both programs strengthened leadership. While their approaches differed, the long-term support group approach complemented the initial one-week program. The researchers also found that the participants appreciated the ability to reflect and analyze problems through dialogue with peers. The support group methodology linked to research on mentoring feedback systems, and developmental relationships.

Effective leadership development emphasizes reflection and review of working relationships and the impact of various behaviors to better engage and solve shared problems and situations (Edmonstone, 2011). Reflection, which includes considering experiences, feelings, and theories, is a central aspect of leadership development. To address this need for reflection as part of leadership development, many types of reflection-in-action are used such as dialogue in groups, coaching, mentoring, developmental relationships, and feedback systems (Edmonstone, 2011).

McCallum and O'Connell (2009) identified social capital leaders as those who do not view leadership by title, but rather take a partnership approach with colleagues in leadership development and work as coaches for shared learning while managing the paradox of

collaborating and competing. Jones (2005) concluded after a comprehensive study of leadership development programs for nurses that activity such as workplace mentors, peer supports, leadership development, and reflective time help to create and sustain leadership learning.

Grandy and Holton (2013) found, via a case study of a Canadian health system involving interviews and focus groups with approximately 75 middle managers, that often managers do not have formal leadership development and that they learn by doing. Further, they found an important role for partnerships, mentoring and coaching in leadership development. Although mentoring as part of a healthcare leadership development program is not uncommon in healthcare organizations, it is still evolving as an effective approach. More research is needed to understand whether and how healthcare organizations use mentoring relationships in leadership development (McAlearney, 2005). Leadership development support groups have also been suggested to support leader development (Bergman, et al., 2009).

Healthcare organizations often make the mistake of taking a "one size fits all" approach to leadership development that is less effective than individualizing and contextualizing the learning (Grandy & Holton, 2013). Edmonstone (2011) identified two key obstacles to the development of effective healthcare leaders. The first barrier is related to creating a large-scale curriculum that is unresponsive to individual leadership development needs, is inflexible to organizational needs, and is unresponsive over time. The second obstacle relates to focusing on personal and career development without connecting enough with the larger organizational and system needs and problems. To overcome these barriers, emphasis should be placed on the development of social capital through the leadership development process.

McAlearney (2006) found that healthcare organizations face major challenges in designing and delivering leadership development. Often it is not a top or strategic priority.

Complex external and internal environments as well as time and economic pressures often result in a lack of commitment to leadership development.

Chapter II Summary

Concepts of peer learning are woven throughout the relevant research in adult learning theories, transformational leadership, leadership development and healthcare leadership. Brown and Posner (2001) identified the importance of applying the theories of adult learning to create an atmosphere for transformational learning in creating leadership development for transformational leadership. The connection between leadership development and peer learning are found through the literature (Brookfield, 1984; Guglielmino & Guglielmino, 2001; Mezirow, 1991; Nesbit, 2012). Evidence suggests that a key aspect of transformational learning and leadership development occurs through peer learning. Critical self-reflection to gain new insights can leads to strong leadership experiences and development (Brown & Posner, 2001). Dialogue with peers creates a means for this leadership development and transformation (Nesbit, 2012; Taylor, et al., 2012). By comfortably challenging each other's beliefs and ideas, individuals can learn new perspectives and come closer to the truth of the matter (Baugartner, et al., 2003).

Given the need for transformational healthcare leaders, effective leadership development in healthcare is becoming critical to the industry (McAlearney, 2005). Evidence suggests that key aspects of healthcare leadership development should include workplace mentors, peer supports, leadership development, and reflective time to help create and sustain leadership learning (Jones, 2005). Cohort groups can offer the opportunity for learners to dialogue, reflect and practice skills with their peers that lead to new perspectives and understandings (Gilly, 2003; Lawrence, 2002; Teitel, 2009). While peer interactions and learning emerge as an important aspect of the leadership development of transformational healthcare leaders, research is lacking on the role of peer learning in leadership development programs in a healthcare setting.

CHAPTER III

METHODOLOGY

A review of the literature suggests a deficiency exists in the research on the role of peer learning in leadership development practices, especially in a healthcare setting. Meanwhile, the literature identifies an increasing need to develop strong healthcare leaders. In particular, while there is evidence that peer learning has a role in transformational learning, and transformational learning has a role in leadership development, research is lacking on how leaders in a healthcare environment interpret their experiences when involved in formal cohort leadership development opportunities related to their peer learning experiences.

The purpose of this qualitative study was to investigate the topic of peer learning as a leadership development approach in a healthcare setting. Through the lens of peer learning, it sought to interpret the role and meaning that planners and participants attribute to specific aspects of the program and their experience.

Research Design

This qualitative case study gathered information on the role of peer learning in specific elements of a formal cohort-based leadership development program for healthcare professionals in one Midwest healthcare system. The specific learning opportunities include cohort learning sessions, small group discussions, and action learning projects. Data was examined to explore the role of peer interaction during and after the leadership development program. This data was obtained from several sources, including program planning materials, program evaluations, personal interviews, and observations. The data was then analyzed to identify and understand the themes that emerge.

Qualitative research provides an understanding of a social setting or activity from the perspective of the participants. It is commonly used in studying leadership development in

healthcare (Grandy & Holton, 2013), and it involves collecting data directly from those involved in the study (Gay, Mills, & Airasian, 2012). Qualitative research is conducted to explore and understand the meaning individuals or groups assign to situations, and the case study approach investigates a topic through cases within a bound system or setting such as a leadership development cohort (Creswell, 2009).

A qualitative case study approach allowed this researcher an in-depth investigation and understanding of the data through multiple forms such as interviews, observations, and documents (Creswell, 2013). For purposes of this study, the participants of a healthcare leadership cohort were chosen through a convenience sample. Gay, Mills and Airasian (2012) defined a convenience sample as based on whoever is available or volunteers to participate. A qualitative methodology using personal interviews has been selected for this study because the impact of leadership development programs has been studied by a number of researchers, and most investigated the participants' self reported impact as a result of participating in leadership development. My research aids in developing an understanding of the meaning and implications of peer learning in leadership development.

Research Ouestions

The primary inquiry guiding my research was how peer learning contributes to leadership development in healthcare leaders. To gain understanding of participants' experiences within a formal leadership development program, questions for this investigation centered on two areas:

- 1. How are key elements of an 18-month cohort-based formal leadership development program for healthcare professionals planned and implemented to support peer learning? What are the intended outcomes from these learning opportunities?
- 2. How do participants describe key learning opportunities and the peer learning process? What changes do participants attribute to these experiences?

Sample

This study focused on the leadership development learning elements through 55 participants involved across three cohorts within a formal 18-month, cohort-based leadership development program for healthcare professionals in one Midwest community. The subjects in this study were all employed by one health system. The health system owned three hospitals, 34 physician practices, outpatient surgery, regional cancer center, rehabilitation centers, two long-term care facilities, home care, hospice services, and other ancillary health services. It employed over 4000 individuals and was the county's largest employer. The health system was a not-for-profit, community owned organization. It was accredited by the Joint Commission on Accreditation of Healthcare Organizations and had received national recognition for safe, high-quality care. The leadership development program was designed by the health system to build leadership within the organization.

There were three cohorts consisting of formal and informal leaders who applied and were accepted into the program. One cohort was held from August, 2013 to February, 2015 and involved 18 participants. The second cohort began August, 2014 and concluded February, 2016, and involves 16 participants. The third cohort began in August 2015 and will conclude in February, 2017, and has 21 participants. The program facilitator and the 21 participants of the third cohort were observed during formal and informal activities. In addition, individual interviews occurred with 12 individuals, including three from within the current cohort and three from each of the two previous cohorts, the program facilitator, Chief Learning Officer and a senior leader/mentor. Training documents and summarized program evaluations from all participants from the completed cohorts were also analyzed.

Recruitment Process

Prior to recruitment of those to be interviewed, approvals were obtained from the Human Subject Institutional Research Boards of Western Michigan University and the health system that hosted my study. The sample was selected based on the first responses to the Recruitment Email (Appendix A) until three participants from each cohort were identified. The inclusion criterion for all participants was that they must still work for the health system. For those in the cohort that ended in February, 2015, they must also have completed the program, while subjects in the second and third cohorts must intend to complete it. Additionally, individual interviews were conducted with the program facilitator, Chief Learning Officer, and the Senior Leader who oversaw the budget for this program.

A recruitment email was distributed to the individuals on the list by the program facilitator. It invited interested participants to telephone or email the researcher of their willingness to learn more about the study. There were enough interested participants to conduct the study within one week of the recruitment email.

Once three participants from each cohort volunteered to learn more about the study, the researcher contacted each participant to answer any questions and confirm their willingness to be involved in the study. After the participants agreed to volunteer for the study, the researcher arranged a time and place to interview the participants. The researcher met with the participants, explained the study, reviewed the informed consent, and answered all questions. Only after informed consent was obtained did an interview proceed. Appendix B contains the Western Michigan University HSIRB approval and consent form that was used.

One formal cohort leadership development session and one small group session occurring as part of cohort three will be observed as part of this study. A waiver of consent by participants was requested and granted as there was minimal risk to the participants, the observation did not

adversely impact the rights of the subjects, and the observation could not be practically carried out without the waiver. Permission from the program facilitator was provided on the letterhead of the host site (Appendix C). The observation was focus on behaviors, frequency, and duration of peer interactions. Activities during the session were also be documented.

Setting

The leadership development program was designed by the health system to build leadership within the organization. According to the "Leading to the Future" A Leadership Development Program Executive Summary (Appendix D), the program's stated purpose is to:

- "Provide ongoing development opportunities to align leadership attitudes, behaviors and competencies with the health systems strategic direction, strategies, and future leadership requirements; and
- Impact succession planning by developing high potential leaders who are competent, creative and aligned to the critically important business of the health system."

The program structure of the leadership development program includes four elements:

- "A customized, personal development plan for each participant focused on their career aspirations and developmental needs based on a 360 assessment as well as other assessment tools;
- 2. Cohort learning-based skill building sessions
- 3. Continued intersession learning through the use of small coaching groups, action learning projects, and learning assignments; and
- 4. Program evaluation, involving metrics and a follow-up 360 assessment."

My study focused on three elements of this program: the cohort learning sessions, the small group sessions, and the action learning projects. These elements are further described and shown in a diagram in Appendix D.

HSIRB and Data Storage

Western Michigan University Institutional Review Board (HSIRB) protocols were followed. Permission to collect data on this leadership program at the health system was granted by top leadership, and this research proposal was also presented to and approved by the host health system's Institutional Review Board (Appendix E). Informed consent was obtained from each subject and steps were taken to ensure confidentiality. Participants were informed of the right to withdraw from the study at anytime without any reason and without any recourse. Subject names were kept in a secure file in the researcher's home and their names were coded to protect their identity. The data was kept in a locked cabinet at the home of the researcher. Electronic files with identifying data were password protected.

Data Collection Methods

In-depth interviews, observations of one formal leadership development cohort program session, one small group session, the action learning report out of Cohort two, and a review of participant evaluations from the three cohorts were used to collect data. I also had access to the program plan and facilitator guide. Creswell (2013) indicated that multiple data collection procedures assist the researcher in building an in-depth picture of a given case, and may include: documents and records, interviews, observations, and physical artifacts. This data provided insight into the process of peer learning within specific elements of the program and their perceived value.

The documents and records that were used in this study included the program planning materials and the evaluations from all participants in both cohorts completed midway through the program and after the program. These data provided insight into the process of the cohort leadership development program.

Interviews were conducted using the topical or guided approach with open-ended questions allowing the participant's perspective to unfold during the discussion (Marshall & Rossman, 2011). Interview guides for the nine program participants with three from the cohort that ended in February, 2015, and three from the current two cohorts, were developed with questions aligned with the research questions, and based on the literature on peer learning process and leadership development (see Appendix F). The interviews took place after the conclusion of the 18-month for the first cohort, and during the 18-month program for second and third cohorts.

After identifying volunteers who were interested in participating in the study, arrangements were made for a private space for an interview to take place. A mutual date and meeting time was determined for each volunteer. Times and locations were flexible to accommodate the needs of each study volunteer. Interviews were audio recorded. The length of the time, location, and length of each interview was noted as well as any comments when the audio recorder is off. All interviews were transcribed verbatim and returned to the participant for any additions and/or clarification.

The cohort leadership development program facilitator, Chief Learning Officer, and a senior leader/mentor were also interviewed using the same approach with a focus on how he or she encouraged peer learning, the process and function, and the perceptions of change in participants as the result of peer learning. Interview guides for the facilitator, Chief Learning Officer, and the senior leader/mentor were developed (see Appendix G). Finally, observations from one formal leadership cohort session, one small group session, and the action learning projects report out of cohort two focused on identifying peer interactions were used as further material for analysis. Formal cohort class time was one-day each quarter with small group sessions monthly. An observation checklist was developed (see Appendix H).

A pilot study was conducted to improve the interview instruments. Two participants who had completed the cohort-based leadership program were interviewed for the pilot study. These participants were not used as subjects in the study. The interview instruments were not changed as a result of the pilot study, however, the researcher adjusted interview techniques slightly to improve the comfort that participants had in responding. Table 1 offers a summary of the methodology for this study.

Table 1

Role of Peer Learning in Leadership Development Methodology Summary

Role of Peer Learning in Leadership Development Methodology Summary						
Data Sources	Program Documents	Evaluation Feedback Form	Personal Interviews		Observation	
Sample	3 learning elements – planning documents and facilitator guides	Participants (3 cohorts – one complete, two in session)	Program planners: 1 program leader, 1 Chief Learning Officer, 1 senior leader teacher/mentor	Program participants: 9 participants (3 from each cohort)	1 formal-cohort session and 1 small group session (3 nd cohort); 1 action learning report out (2 nd cohort)	
Data Collection Instrument	Document review	Evaluation Worksheet	Question Guide, Transcripts	Question Guide, Transcripts	Observation Worksheet	
Focus of Analysis	Program purpose, description of key elements that foster peer learning, theory behind planned activities	Perceptions of the key elements of the program that foster peer learning and changes in leadership behaviors	Role and process of peer learning in the planning and implementation of key elements of the program	Process of peer learning in the key elements of the program	Interactions of peers	

Data Analysis

In a case study, the analysis of the data involves creating a detailed description of the case and its setting (Creswell, 2013). Four forms of analysis were used to interpret the data in this study. First, categorical aggregation was used to look for a collection of leadership development and peer learning themes that emerged from the interview data. Second, direct interpretation of the data was used to analyze the peer interactions during an observations of a formal cohort leadership development session, a group session, and an action learning project report out. This enabled the researcher to identify patterns in the process of specific elements of the program that foster peer learning. Next, using participant interviews and program evaluation data, cross-case synthesis among the three cohort leadership development programs was used to seek similarities and differences between the three cohorts. Finally, naturalistic generalizations were sought that can be applied to the topic of leadership development and peer learning.

I will use Creswell's (2013) approach to data analysis including:

- 1. creating and organizing files for the data;
- reading through the interviews and observational notes while making notes in the margins, reviewing audio recordings, and forming initial codes about peer learning and leadership development;
- 3. describing the formal cohort leadership development sessions, the setting, and their context;
- 4. using categorical aggregation to identify themes and patterns of leadership development and peer learning;
- using direct interpretation to develop naturalistic generalizations of what the researcher learned; and

6. presenting an in-depth image of the two formal cohort leadership development cohorts using representations of the analyzed data.

Multiple strategies were used to validate the data. Creswell (2013) suggested that researchers use at least two techniques from his list of eight common strategies: prolonged engagement, triangulation, peer review, negative case analysis, clarifying research bias, member checking, thorough descriptions, and external audits.

My study utilized triangulation from the data collected, participant checking and clarifying, and thorough descriptions of key elements of the cohort leadership development program as validation strategies. "In triangulation, researchers make use of multiple and different sources, methods, and investigators, and theories to provide corroborating evidence" (Creswell, 2013, p. 251). In this study, data from different sources such as interviews, observations, and documents was used to provide validity to the findings. Participant checking and clarifying was conducted by soliciting "participants' views of the credibility of the findings and interpretations" (Creswell, 2013, p. 252). This was conducted by asking participants to review their interview transcripts. Finally, using thorough descriptions, the reader is able to make judgments regarding the transferability of the study.

Reflections and Role as the Researcher

At the time of this research, I served as the President and Chief Executive Officer of a health care organization that is affiliated with a larger health system. I had a leadership team that consists of approximately 15 individuals. These individuals were physicians, nurses, social workers, and business professionals. Many of these individuals were new to leadership and were seeking development opportunities. My organization, at the time, offered the opportunities for self-study and group leadership development. We also provided leadership coaches for

individuals. My hope was that through this study new understandings would emerge of how peers learn leadership from each other and how it could be encouraged.

My development as a healthcare leader comes from a variety of sources. As a lifelong student, I have always been a self-directed learner. However, it has only been in the last ten years that I have learned to fully appreciate the importance of the social aspects of learning. Through mentoring and learning from my peers, I found accelerated personal and professional growth. Given the transformational learning and leadership growth that I experienced through interactions with my peers, I anticipated themes to emerge from this study that are similar. I also anticipated that this would not be the case for all individuals and I wanted to seek to understand under what conditions peer learning was not useful or effective.

Limitations and Delimitations

There were several limitations and delimitations to this research study. Marshall and Rossman (2011) stated "all proposed research projects have limitations" (p. 76), and these limitations generally stem from the study's conceptual framework and design. Three limitations to this study were identified.

First, there were likely many influences that affect the participants' understanding of their leadership development. Self-study, employment, and personal events likely made it difficult for participants to relate their leadership attitudinal and behavior changes to what they experienced in the cohort-based leadership development program.

A second limitation of the study was that observations of the formal cohort leadership development session, group session, and action learning report out may have been distracting to participants and the facilitator leading to subtle changes in the process and interactions.

A final limitation is that the leadership development perceptions and changes described by the participants were self-reported.

A delimitation exists in that this study only examines three leadership development program cohorts of healthcare professionals in one geographic area, and the results may not be generalizable. There may be local societal norms that are different from other geographic areas.

Chapter III Summary

This purpose of this study was to learn from the experiences of participants in a cohort-based leadership development program for healthcare professionals in one Midwest healthcare system in order to better understand the role of peer learning in leadership development.

Qualitative research design and methodology was used to collect and analyze data that informed the role peer interactions and learning play in leadership development practices. Data was collected from a variety of sources including program evaluations, program materials, personal interviews, and observations following the process described in this chapter.

CHAPTER IV

RESULTS

The purpose of my study was to investigate the topic of peer learning as a leadership development approach in a healthcare setting. This chapter serves to introduce the research findings of this qualitative case study. It also presents themes that were identified during the data analysis. The findings will be discussed based on the research questions in the next chapter.

Overview of Methods and Research Questions

A qualitative case study was conducted through analyzing program documents, evaluation feedback, personal interviews and observations to seek to understand the role and meaning that program planners and participants attribute to specific aspects of the leadership development program, and their experiences through the lens of peer learning. The questions for this investigation centered around two areas:

- 1. How were key elements of an 18-month cohort-based formal leadership development program for healthcare professionals planned and implemented to support peer learning? What were the intended outcomes from these learning opportunities?
- 2. How did participants describe key learning opportunities and the peer learning process? What changes did participants attribute to these experiences?

Participant interviews were assigned a number based on the cohort and the order of the interviews. Table 2 lists the code for each study participant.

Table 2
Study Participant Codes

Study Participant Code	Explanation		
coh1.part1	Cohort 1, interviewee 1		
coh1.part2	Cohort 1, interviewee 2		
coh1.part3	Cohort 1, interviewee 3		
coh2.part1	Cohort 2, interviewee 1		
coh2.part.2	Cohort 2, interviewee 2		
coh2.part3	Cohort 2, interviewee 3		
coh3.part1	Cohort 3, interviewee 1		
coh3.part2	Cohort 3, interviewee 2		
coh3.part3	Cohort 3, interviewee 3		
PL	Program Leader		
CLO	Chief Learning Officer		
SL	Senior Leader		

The following sections describe the key elements of the 18-month cohort-based formal leadership development program for healthcare professionals and offer a thematic summary of the findings.

Description of Program Elements

My study focused on three specific elements of a formal cohort-based leadership development program for healthcare professionals in one Midwest healthcare system. Studied through the lens of peer learning, the three elements are: cohort learning sessions, small group coaching, and action learning projects. Data was collected through document review, observations, and interviews.

Cohort Learning Sessions

The cohort learning sessions of this leadership development program were conducted quarterly during an 18-month cycle, each for a full-day. The designers of the program intended to create a learning environment and experience for participants that expanded awareness of self and others, as well as shifted participant attitudes and beliefs resulting in transformational leaders. The sessions were planned with a focus on specific leadership theories and concepts, tools, practices, and resources. A professional program facilitator led each session with assistance from other leaders in the organization who served as leader-teachers.

Each cohort learning session had a title and comprehensive agenda. The program facilitator had a leader guide that included the purpose for the session, work that each participant should complete prior to the session, learning objectives, a list of materials and handouts, and a description of the room setup. A "session at a glance" page summarizing the content and activity with the time needed and approximate start and stop times was provided. Additionally, the leader guide had a thorough description of each activity, including scripting to introduce each topic and activity, questions to ask, names of the leader-teachers, the intention of each activity, activity time frames, and other notes. Time in the agenda was allotted for large group, small group, and paired discussion.

Each participant was provided with a booklet of materials for the day's learning content. The materials included: learning objectives; agenda; articles and web links supporting materials the teacher-leaders present; space for notes, observations, and questions for reflection; and a bibliography.

The cohort learning session I observed began at 8:00 a.m. and ended at 5:00 p.m. The room was setup with horseshoe style seating, a screen for presentations, and inspirational posters. Work from prior sessions was displayed on the walls such as agreed upon group guidelines and

participants' definitions of leadership. Participants were provided meal tickets and given an hour for lunch. The session closed with assignments for the period between cohort learning sessions.

As the researcher, I observed this cohort learning session for the third cohort in January, 2016.

Small Group Coaching

Small coaching group sessions were scheduled in the months that cohort learning sessions were not held. The groups consisted of four to six participants from the program and one senior leader of the organization. The purpose of the groups was to support the learning from the cohort learning sessions and assignments, coaching, and relationship building.

Scheduled by the senior leader, the one-hour meetings did not have a formal agenda or meeting place. Participants were randomly assigned to a group and senior leader. The group stayed together for the 18-month program; however, a different senior leader was assigned to the group approximately half way through the program.

The program facilitator provided each senior leader with a coaching guide for each small group coaching meeting. The guide included goals for the meeting, current program reading, bullet points of content from the last cohort learning session, and reminders of good coaching practices. Additionally a suggested meeting outline was provided with suggestions for sharing experiences and discussion questions. I observed a small group coaching session for cohort three in April, 2016.

Action Learning Projects

The action learning projects were intended to benefit both the organization and the program participant. The action learning projects had to meet basic criteria:

- 1. project must start something new or make meaningful changes in a current practice;
- 2. project must be led by the program participant;
- 3. project needs a deadline within the timeframe of the program;

- 4. a specific goal or objective must be identified and tied to organizational goals;
- 5. project must include additional individuals outside of the program;
- 6. it can not be a project that has already started;
- 7. project should represent a challenge to the participant; and
- 8. participant's senior leader must approve the project.

Program participants began to research and explore possible action learning projects within the first three months of the 18-month leadership program. After identifying an action learning project, participants had to submit a brief description of the project; list of partners and their skills; project charter with goals, outcomes, stakeholders, timeframe, budget, measures of success, project phases, and needed resources; and the signature of the senior leader approving the project. Within approximately six months of the leadership program, participants started to work on their action learning projects. Supplemental project management material was provided as part of the program. Progress reports were required during the program. These reports included a summary of key accomplishments to date, upcoming tasks and milestones for the next period, and any issues or challenges.

The last cohort learning session of the program focused on the participants presenting their action learning projects along with their key leadership insights from the project.

Colleagues, supervisors, and senior leaders for each participant were invited to watch the presentations. I observed the action learning presentations for cohort two in February, 2016.

Major and Minor Themes

Raw data analysis involved a preliminary assessment, the creation of analytical memos to capture impressions and reflections, and categorical aggregation to identify major and minor themes. Using the peer learning literature and the data, coded data was sorted into 10 actions (i.e., things participants did as part of the leadership program as either described via interviews

or observed by the researcher) which include: sharing ideas, knowledge, and expectations; providing encouragement to others; hearing perspectives different than their own; seeking practical assistance from each other; giving and receiving feedback; trusting relationships and environment; opportunities for reflective processing; change management skills; senior leadership interactions; and leadership growth. Cross-case synthesis among the three cohort leadership development programs was also applied to identify similarities and differences. Table 3 illustrates by data source where the 10 actions were discussed in interviews or observed.

Table 3

Actions Described by Study Participants and/or Observed

		Data Source											
Actions	1.1	1.2	1.3	2.1	2.2	2.3	3.1	3.2	3.3	PL	CLO	SL	Obser
Sharing ideas, knowledge, & experiences	X	X	X	X	X	X	X	X	X	X	X	X	X
Providing encouragement to others	X	X	X	X	X	X	X	X	X	X	X	X	X
Hearing perspectives different than their own	X	X	X	X	X	X	X	X	X	X	X	X	X
Seeking practical assistance from each other	X	X	X	X	X	X				X	X	X	X
Giving & receiving feedback	X	X	X		X	X	X	X	X	X	X	X	X
Trusting relationships & environment	X	X	X	X	X	X	X	X	X	X	X	X	X
Opportunities for reflective processing	X	X	X	X	X		X	X	X	X	X	X	X
Change management skills & challenges		X	X	X	X		X	X		X	X	X	X
Leadership growth	X	X	X	X	X	X	X	X	X	X	X	X	X
SL Interactions	X	X	X	X	X	X	X	X		X	X		X

Note: Obser=observations; SL=senior leadership

During the analysis of the data, four major themes and two minor themes arose. The four major themes included: (1) key elements of the leadership program support peer learning; (2) a sense of community grew from developing trust, encouraging each other, and sharing experiences; (3) the leadership development program created opportunities for transformational learning of leadership thinking and skills; and (4) listening to and hearing experiences and perspectives of others created new understanding. Minor themes were: (1) the significance of

senior leaders involved in the program was impactful for participants; and (2) time was a challenge for many participants.

Each of the described or observed actions used for analysis of the data correspond to multiple themes. Major themes were identified when at least 100% of program participants and designers discussed the theme at least once in their interview. Minor themes were determined when at least 75% mentioned the subject at least once in their interview. Each theme is illustrated using information from reviewed documents, quotes from the program designers and participants, and observations. Table 4 depicts the links between the actions and themes.

Table 4

Actions and Themes

			Themes		
Actions	Community	Learning	Listening to Perspectives	SL Significance	Time
Sharing ideas,			-	-	
knowledge, &	X	X	X	X	
experiences					
Providing					
encouragement to	X	X		X	X
others					
Hearing perspectives					
different than their		X	X		
own					
Seeking practical					
assistance from each	X	X	X	X	
other					
Giving & receiving	X	X	X	X	
feedback	11	71	11	11	
Trusting relationships &	X	X	X	X	
environment	11	71	11	11	
Opportunities for	X	X	X		X
reflective processing	11	71	11		11
Change management		X	X		X
skills & challenges		-1			
Leadership growth	X		X		
SL Interactions	X	X	X	X	

Note: SL=senior leader

Major Theme 1: Key Elements of the Leadership Program Support Peer Learning

Three of the individuals responsible for the program design, the program facilitator, Chief Learning Officer, and senior leader, were interviewed to understand the design of the program. Nine cohort participants were interviewed to understand their experience with the three key elements of the program described earlier in this chapter: cohort learning sessions, small group coaching, and action learning projects. Individuals responsible for the leadership program design were asked if specific aspects of peer learning were intentionally designed into each of the key elements of the program. They were also asked if they could describe examples, by key elements, of how participants learned from their peers and grew as leaders. Participants were asked if they experienced specific aspects of peer learning in each of the key program elements. They were also asked to provide examples of how each element contributed to their growth as a leader and how they learned from their peers. Building on Table 3, Table 5 provides the percentage of affirmative answers from the program designers and participants to questions regarding specific aspects of peer learning within each of the three elements.

Table 5

Affirmative Answers from Program Designers and Participants (via interviews)

Question	Cohort Lea	rning Sessions -	Small Gro	up Coaching -	Action Learning Project -		
	%			%	%		
	Designers	Participants	Designers	Participants	Designers	Participants	
Shared ideas,							
knowledge, and experiences	100	100	100	100	100	100	
Provided							
encouragement to others	100	100	100	89	100	100	
Heard perspectives							
different than their own	100	100	100	100	100	89	
Sought practical							
assistance from each other	100	78	100	89	100	78	
Gave and received							
feedback	100	100	100	100	100	89	
Trusting relationships							
& environment	100	100	100	89	100	89	
Opportunities for							
reflective	100	89	100	100	100	89	
processing							
Learned from peers	100	100	100	89	100	100	
Contributed to							
leadership growth	100	100	100	100	100	89	

Fostering peer learning is not one of the stated goals of the program and it is not identified in the program structure of the leadership development program. Yet, the designers of the program described their desire to create a cohort environment and experience in the Proposal for Leading Toward the Future (2013) that supported peer learning:

We want to create a different learning environment and experiences for participants.

When people have a different experience, it expands their awareness of self and others and allows them to see more than they did before. This expanded awareness leads to shifts in one's attitudes and beliefs, transforming the way people see the world as well as how they participate in it, resulting in new leadership behaviors and ways of leading. (p.

The program leader articulated the intent of the cohort as an aspect of the leadership development program to support peer learning stating, "relationships are critical in an intensive program like this, so having it in cohorts, it was really about people relying and getting to know each other inside the cohort and really building those relationships." The program leader described how she designed specific activities providing people the opportunity to learn from one another. In addition to participants learning from each other within the cohort, graduates from past cohort leadership programs are asked to participate in the teaching of new cohort programs as leader-teachers. The program leader shared that she started each cohort leadership program by explaining:

We're going to be learning together and from each other's experiences and we'll come out in a much more positive place at the end, but it's not because anyone of us holds all the information or all the learning, me included.

The Chief Learning Officer further described the implicit desire for peer learning with the program, stating, "we wanted to have good interaction and facilitation and really drive change." Through environment and experiences, the Chief Learning Officer shared what she had observed as participants of the leadership development program did a role playing activity and how they learned from their peers:

Talking through some of those interactions with those people in the group setting helps, so you have the experience which helps bring the emotion and the feeling which helps people understand the need for change better than just telling them that they need to change.

The senior leader described her rationale for a cohort approach to leadership development as supporting peer learning and leadership development:

If you're going to accomplish something, you have to do it as part of a team and the cohort approach gives us the opportunity to have people collaborate in their own development, then in the development of others which ultimately is a lot of what leaders do, develop others.

In addition to interviews, I observed each of the three key elements of the cohort-based leadership program between January and April, 2016. Using an observation checklist and notes, I documented specific actions that fell into actions used throughout the analysis. Table 6 displays actions that the researcher observed.

Table 6

Actions Observed

Categories	Cohort Learning Sessions – 1/2016	Small Group Coaching – 4/2016	Action Learning Project – 2/2016
Shared ideas,			
knowledge, and experiences	X	X	X
Provided			
encouragement to others	X	X	X
Heard perspectives different than their own	X	X	
Sought practical assistance from each other	X	X	X
Gave and received feedback	X		X
Trusting relationships and environment	X	X	X
Opportunities for			
reflective processing	X		X

Three subthemes were also identified, each connected to the key elements of the leadership development program: (1.1) Cohort learning sessions encouraged peer learning; (1.2) Small group coaching sessions fostered peer learning; and (1.3) Action learning projects put peer

learning into action. Each of the sub-themes will be described in the context of the prominent theme.

Sub-theme 1.1: Cohort learning sessions encouraged peer learning. All study participants described learning from their peers during the cohort learning sessions. Specifically, participants described gaining new insights, gaining awareness of their peer's work and challenges, and learning from situations and experiences their peers shared. A participant from cohort one explained how new insights were gained from peers during the cohort learning sessions, "each of us comes with our own set of experiences and so by sharing those we were able to help each other problem solve and give insights as to what was going on" (coh1.part1).

In cohort two a participant described learning about peers in the program, their work, and challenges:

A lot of individuals in our particular cohort were informal leaders. You just get the opportunity to be in their shoes and hear what they're facing day-to-day and that's clinical and nonclinical. You get a whole new appreciation for what their work life is kind of like and what some of the barriers are and the programs that they are dealing with. (coh2.part2)

A second participant from cohort two, further described learning about peers:

You have a group of people together and they're all sharing different experiences and different perspectives. It's just been interesting to hear those different perspectives of their work, of what their work environment's like, and just kind of their thoughts and perceptions of kind of where we're going as an organization. (coh2.part1)

Graduates from previous cohorts were encouraged to participate as leader-teachers to serve as role models, "creating a safe environment for learning and feedback, and building

networks" (Proposal for Leading Toward the Future, 2013, p. 9). A cohort two participant described learning from leader-teachers from the previous cohort:

I learned from my peers things that they did when they were coaching each other. When cohort one would come in and do some presentations it was nice to hear what they had learned in class and how they had used that in their job. Just that sharing of information all around I think is good in any kind of...I'll tell you about a time this happened to me or let me share with you an experience that I had. (coh2.part3)

Sub-theme 1.2: Small group coaching sessions fostered a peer learning. The next sub-theme is the second key element of the cohort-based leadership development program. Study participants described peer learning within their small group coaching sessions. In particular, participants described a more intimate environment that led to deeper sharing, relationships, and coaching.

A cohort one participant described how the small group coaching sessions allowed the group to discuss situations that would have been difficult to share in a large group:

We were able to get into my problems and kind of map out my situation, map out what are my feelings on this. Why am I feeling like that?...We really took a situation and worked it out. In a big group we would never be able to do that. (coh1.part2)

Another participant from cohort one described how close relationships were formed and continued beyond the leadership development program:

We still talk about what things are affecting us, how we can help each other with it. We certainly do. It was just that bonding experience and being able to learn from each other. Sometimes you think that mine's the worst world that could possibly be, and what you find out is that everybody's world is close to the same. (coh1.part3)

A cohort two participant described learning to coach each other as a way peer learning was taking place in the small group coaching sessions:

Situations where you may have to have a difficult conversation with someone. Just hearing how someone else handled it. One of the other people in my small group worked in HR. That take on it was really important to me. Did you consider this? I deal with this every day. Did you try? Then sharing back and forth too, what did I do when I had that situation? A lot of good coaching. (coh2.part3)

In cohort three, a participant shared how the peer learning is something that can be applied:

We're always talking about what we're facing every single time. Somebody has shared what's going on in their department. The things that we're talking about are universal so they might be different people, but they're still...Literally, every single time that we have met, I've learned something that I've been able to apply. (coh3.part1)

Further, a cohort three participant explained learning from peer feedback and suggestions during a small group coaching session:

One of the sessions we went around the table and just talked about things going on in our departments. I brought up a situation and got a lot of feedback on different things I could try or what they felt I may be doing well. That really helps because I did take the suggestions and it did help with the situation I was having. (coh3.part3)

Sub-theme 1.3: Action learning projects put peer learning into action. The next sub-theme is the third key element of the cohort-based leadership development program. Participants described how they were able to learn from peers during their action learning project and the impact of that learning on their projects. In particular, a cohort one participant described learning new resources and contacts from a peer, "I was amazed at the plethora, if you will, of contacts

that they had that I was clueless about...they knew who to call for what, I had no idea" (coh1.part1). Another participant from cohort one described how she requested feedback from peers and how it improved the project so that it was successful:

I have my ideas, that doesn't mean that they're the right ideas. I don't want you guys not to say something because it could hurt my feelings. I am very passionate about this, but I want this to work. I need your input...I have to say it was one of definitely one of, an eye-opening situation that happened for me because I really had to let go of what my presumptions were of how I thought that this should work to actually make the project work...after I started getting their input and accepting their changes, and that's what actually what made the project work. (coh1.part2)

Participants described how peers offered ideas and specific knowledge to assist in the action learning project. A cohort three participant described advice from a peer and how that peer became an invaluable resource for the project:

She kept saying, it's really about the relationships and how you actually sell the technology to them to make them excited for it. It's everybody else that's actually really doing the work. They're the ones that are getting excited for it, they're telling everybody else how its going to work, and they start actually making your job easier and easier by developing and fostering those relationships. She is an invaluable resource for my project. (coh3.part2)

Major Theme 2: The Leadership Development Program Created a Sense of Community for Participants

This major theme describes the sense of community that helped to create an environment for peer learning. One of the stated goals of the formal cohort-based leadership development program was to "develop a sense of community and personal commitment among participants for their leadership development" (Proposal for Leading Toward the Future, 2013, p. 6). The

Program Leader specifically planned time for building relationships, sharing experience, and reflecting for deeper learning. The program leader described how specific elements of the program were designed for "where the relationships are even deeper and more profound." According to the program leader, the tone is set at the beginning of the program with the professional program leader saying, "we're going to be learning together and from each other's experiences and we'll come out in a much more positive place at the end, but it's not because anyone of us holds all the information or all of the learning, me included."

The Chief Learning Officer described the process of the cohorts forming a deeper relationship:

As people continue to meet together and get to know each other, it's usually about six to seven months in that that starts to happen where they actually...they'll provide encouragement for each other, but it's like all of the sudden this change happens where this solid unit is formed. Yeah, they all have their own projects but they're all supporting each other and working at helping each other and they'll see each other in the hallway and yell, 'how's it going?'...I saw it with both cohorts, so it was really interesting to watch. It took about the same amount of time for them to really gel and go to the next level for encouragement, so there's the first level, where you as a person see somebody else do something and you're like, 'Go, you can do it.' then there's the 'I have a relationship with you and you're my friend and I really want to see you win and this and that.' That is a whole level of encouragement that happens organically because they're driving together in this process, and they're all having to do the assignments and they're all having to do whatever it is.

The Senior Leader identified the importance of creating a safe environment to build relationships:

You have to create an environment where people feel safe to share that kind of information and know that it's not going to be used against them and that they can trust each other and they can say things in front of each other and they know that it's not going to be shared outside of the classroom. One of the things that we say at the beginning of the course and every class is we have to treat the information that we hear here as confidential.

During the cohort learning session of cohort three, I observed participants actively supporting each other. There was talking and laughing during break periods. The program leader gave each participant three minutes to share their current leadership journey. In one case, an individual shared how much she was struggling to continue in the program and how unsure she was of her leadership abilities. However, because of encouragement and support she had received from others in the cohort, she decided to continue in the program because she wanted to develop into a better leader and wanted to be with the people in the cohort. During the small group coaching session, I observed the senior leader and the individuals in attendance encourage each other and make personal connections. When I observed the final reports of the cohort two action learning projects, presenters experienced support from their peers who were listening to the presentations. Individuals appeared very engaged, nodding their heads, and asking questions. At the end of each presentation, there was loud applause.

All nine of the interviewed participants and program designers described the theme of a general sense of community in their interviews. A cohort one participant describe the relationship that developed and how it felt within the small coaching sessions groups:

The group I was in, we clicked immediately, the four of us, and as one of the guys said, that wasn't in our group but said he wanted to be in our group, because we were the cool

kids in the cafeteria. Are you kidding? I've never been accused of that before, but really, we supported each other both personally and professionally. (coh1.part1)

As peers in the leadership development program built their relationships with each other, support for each other grew. A participant from cohort two described the value of these peer relationships:

But you always know in the future if you ever to work with this person, you've worked with them in the past and you have a relationship with them. You know how valuable that can be just when you know somebody you feel comfortable with, it makes a huge difference. (coh2.part1)

Another participant in cohort two stated, "I would hope everybody could feel they could easily pick up the phone and ring each other if they needed something after this big time" (coh2.part2). Further, another individual in cohort two described the feeling created within the cohort, "Not feeling like you were the only one doing the program. We became a little family. The camaraderie" (coh2.part3).

A desire to belong to a community was shared by a cohort three participant:

I believe we all want the same things. We all want to have a sense of belonging. We all

want to meaning in our work. We all want to enjoy what we're doing. We all like a sense

of community. (coh3.part1)

This feeling further described by another participant of cohort three, "It's the same people meeting again and again, and discussing the same things. You're developing a bond with them, feeling more comfortable with them, and more willing to share your thoughts and fears" (coh3.part2). The value of this trusting community is illustrated by another cohort three participant, "To know that I have people backing me, or people that will tell me what I need to hear, or even what I don't need to hear. I trust that they will do that" (coh3.part3).

Four sub-themes emerged within this theme. The sub-themes are: (2.1) A sense of community grew from developing trust, encouraging each other, and sharing experiences; (2.2) New networks of people are the result of developing a community; (2.3) Within a community, there is a sense of belonging; (2.4) The sense of community developed over time and continued after the 18-month formal cohort leadership program was complete. Each of sub-themes will be described in context of the major theme.

Sub-theme 2.1: A sense of community grew from developing trust, encouraging each other, and sharing experiences. All study participants described trust, encouragement, and sharing experiences. A trusting environment was significant to the leadership development program participants. A cohort one participant described the importance of establishing trusting relationships and the role of confidentiality when sharing experiences:

Part of working together and building a strong team is establishing trusting relationships. Right now, I 'm a new manager in role and that's part of what I working on right now. It's been over two years that I've been in the Leading Towards the Future group.

Understanding trusting relationships is realizing what you've done previously to build them. Part of Leading Towards the Future, everything was kept confidential. If any of us shared a situation, that should be kept confidential. (coh1.part2)

Another participant from cohort one described how sharing and knowing peers on a personal level helped relationships bond at a deeper level:

We always shared ideas. When we would talk about specific things, whether it was emotional intelligence or systems thinking, coaching or any type of problem solving. I think there wasn't a person in the room that could not bring an issue there to say, 'Hey I need your help, help me handle this. Give me some ideas.' We all shared...Some of my peers were very business like and never let us see their personal side. Some of my peers

were very open and talked about what was going on in their life and their business life. Those folks that let you see the other side of them are the ones we seem to bond with more. It was really great that the people that were in the cohort were from all over the organization and various levels. That was a positive in working with them. (coh1.part3)

A participant from cohort three described the value of the friendships and peer relationships that were formed as a result of the cohort based leadership development program:

I've made some good friends, some really great contacts and I have a whole lot of people that I feel like I can talk to about when issues come up that are going to give me really good advice on things I can build on in the department. (coh3.part1)

Another cohort three participant gave an example of the trusting relationships that were formed allowing for feedback and support:

I remember one of the classes I had an opinion about something and I got an email afterwards and they wanted to discuss my opinion a little more so that's what we did. They wanted to know what was going on, why did I feel that way and how they could help me. That was great. (coh3.part3)

Sub-theme 2.2: New networks of people are the result of developing a community.

This sub-theme describes the networks of peers that were created during the cohort-based leadership development program. Study participants described how they developed and had new access to networks of people previously unavailable. A cohort one participant described the expanded network, how it formed, and its value:

The people I networked with before Leading Toward the Future has quadrupled ... who I'm able to network with now. Because the people that I met in Leading Toward the Future, not only did I meet those other eighteen individuals, I knew a few people. I knew who they were. I didn't work side by side with them in the unit that I was working in. It

opened up doors to not only to those eighteen people but to the people that they knew...It's kind of a network of individuals that we have established that trusting working relationship. If there's situations that we're going through, personally or professionally, that is where those are discussed. The understanding is still this information is kept completely confidential. This is a trusting environment. (coh1.part2) Another participant in cohort one discussed the role each person has in building a network of peers and providing help to each other:

To keep in contact, to keep the relationship fresh. To network. To help ... frequently, somebody will say, "I have this problem and I don't know what to do" and we talk about it. Undoubtedly, one of us will know who the person is she should talk to about it.

Through our networking, we help each other get where we need to go. (coh1.part3)

In cohort two, a participant described building relationships and a network that create a common experience:

There are relationships that we're building with other people in the organization through this program that had we not been a part of it, we probably wouldn't have had a chance to interact with those people that much. Who knows what those interactions will be once we get outside of this program?...You're networking with your peers, and you're learning from each other. You're learning kind of a common language, a common set of core concepts, and I think at the end of the day that kind of makes the biggest difference. (coh2.part1)

Sub-theme 2.3: Within a community, there is a sense of belonging. This sub-theme describes the sense of belonging to something bigger than yourself and the sense of not feeling alone that was described by participants. Study participants discussed the importance of

belonging and not feeling alone in their work. A participant from cohort two describes how hearing the stories and experiences of peers created the sense of not being alone:

So yeah, just that sharing of those stories. How gosh it sort of made you feel, well I am not alone. Which you know you are not alone but hearing how they had reacted to certain situations kind of helped you keep in mind for well, if I come across something like this in the future ... might be the better way to go. (coh2.part2)

Another participant from cohort two discussed the value of the peer relationships and interactions during the program:

Not feeling like you were the only one doing the program...I think one thing I learned right from the beginning and I still think about is you're not in this alone. There's days as a leader where you're just like seriously? How can I deal with this? What did I get myself into? I am really overwhelmed. I don't know if I'm the right person to be doing this. You find out that everybody feels that way. You aren't alone.... That we're all in it together. There's always somebody that's got something going on. Your world isn't as challenging as you think it is sometimes or it is as challenging. That there's a lot of people out there that are willing to talk to you about what you're going through or help you out or whatever. It was a real positive experience. (coh2.part3)

Sub-theme 2.4: The sense of community developed over time and continued after the 18-month formal cohort leadership program was complete. This last sub-theme describes how the sense of community developed over time. Participants described how a sense of community was developed over time. A participant from cohort three stated, "It's the same people meeting again and again, and discussing the same things. You're developing a bond with them, feeling more comfortable with them, and more willing to share your thoughts and fears"

(coh3.part2). Another participant in cohort three shared the point where she felt the shift from a collection of individuals to a team:

I think we all feel comfortable because we're all a team. At some point along the way, we became a team. In fact, we were laughing about it at the last meeting. We had a speaker that came that talked about something they forgot and they talked to us before about that exact topic... As a group, we all collectively looked at each other and we made eye contact and it's like we silently decided that we're going to go with this. We love this person. We are going to collectively just roll with it. We asked all the right questions for their story that they were bringing out and then later we all laughed about it...I thought it was funny that we all collectively silently decided to go with that and we did. We, as a team, collectively did that and that was cool that we all did that and we all supported each other and went with it and then we all laughed about it later that we were able to do even silently, you know what I mean? That was such a cool moment. (coh3.part1)

A third participant for cohort three articulated the importance of meeting as a group and suggested more frequent cohort learning sessions:

I think the biggest thing is, every time we meet, it becomes more and more open and honest. When we do the small group coaching, the leadership book club, every time we meet, and it's the same people and you become more comfortable the more we learn. I would actually like to, rather than quarterly, make it bumped to, maybe not an all day, but maybe do half days monthly, just to get everybody together more, I think that fosters more and more growth between the people. It would allow for more interaction, because you'll find out what's going on, more options for interaction with the groups. That, to me, is where it's ultimately providing the best value, is when we're all together and discussing things openly and honestly. (coh3.part3)

The participants of cohort one described how the sense of community continued after the 18-month formal cohort leadership program was complete. One individual from the first cohort shared how she continues to feel a strong connection with the cohort, "we still depend on each other, support each other even after the Leading Toward the Future cohort group for us was done. Not only were we learning from our instructors, we continue to learn from each other too" (coh1.part2). This participant further shared:

We still watch each other, and when somebody has actually stepped up into a leadership position, we still email each other as a group. Hey look, it's one of ours. So to me that's still encouragement that continues to happen. After we spent those eighteen months together, we still look to see what each other are doing. If there is success in their part of business that we're supporting them. I feel like I have those connections with my Leading Towards the Future group. If I have a question about something, I don't hesitate to ask them. They provide support for me. They provide guidance - I still work with them. (coh1.part2)

Another person from the first cohort explained, "We still talk about what things are affecting us, how we can help each other with it. We certainly do. It was just that bonding experience and being able to learn from each other. Sometimes you think that mine's the worst world that possibly could be, and what you find out is that everybody's world is close to the same" (coh1.part3).

Creating community was the most described theme amongst the participants of the leadership development cohort in this study. The next section describes the next most described on theme.

Major Theme 3: The Leadership Development Program Created Opportunities for Transformational Learning of Leadership Thinking and Skills.

The designers of the 18-month cohort based leadership development program set forth to create a leadership program grounded in best practices yet focused on the needs of the organization. The stated purpose of the 18-month cohort based leadership development program was to:

(a) provide ongoing opportunity for development which aligns leadership attitudes, behaviors, and competencies with organizational strategic direction and strategies and future leadership requirements; (b) impact the financial bottom line by creating leaders who are competent, creative and aligned to the critically important business of the organization (Proposal for Leading Toward the Future, 2013, p. 6).

The Program Leader stated:

The intent was to provide more in-depth leadership development than what we already had in place. We had orientation for new leaders. We also had some very 101 basic supervisory training and this was meant to be more intensive, more thorough and really focused on what we thought leadership was going to be required on down the road as healthcare continues to change.

An outcomes evaluation of the first cohort of the program revealed that 100% of the participants reported knowledge gain. Engagement scores for the participants, participants' teams, and the organization as a whole increased from calendar year 2013 to 2014. The program began and concluded with a 360-evaluation of each participant. The program leader described the results:

The consolidated group reports at the start of the program with those at the conclusion of the program; there are increases in scores across the board: from participants' leaders, peers, direct reports, and partners/customers. Increases vary by skill set which saw the

greatest improvement were interpersonal skills, execution, ethics/personal character, innovation, and knowledge of organizational strategy" (Outcomes Report, 2015, p. 4).

The Program Leader expressed how the learning and transformation impacts others: "...even people who aren't in the program will come up to me and say, 'Oh my gosh, so and so on my team is in that program and you're just having such an impact on their life and by connection my life.' It has been the most exciting work that I have ever done honestly."

The Chief Learning Officer described the learning process she has observed in the program:

One of the things that is early on in the program is getting them up in front of others to talk. For some, they haven't really had to do that much, so one of the first things that they have to do is present a little bit about themselves in a very short manner, in a very specified manner and some people that's very easy to do and for others its not...during that process a lot of times they learn things about each other that they didn't...wouldn't have known otherwise. So that's that beginning again, working together to learn about each other and learn how. Then that process continues so every time they get together, there's another time where they're asked to interact and talk and be pulled out of their shell or whatever that is so they can have a conversation around what they're learning, and we really try to say you have wealth of experiences within you that needs to come out and be a part of this process, because there are things that you know that other people don't know what you're thinking without you having that conversation.

The Senior Leader described the leadership growth as:

Inevitably I think everybody that has gone though the program has seen some level of growth...people that I know have been promoted and have demonstrated higher levels of

leadership. Have taken on a project after graduating from the program. They kind of just step up either within their position or in a new position.

During the cohort learning session of cohort three, I observed participants reflecting on their self-awareness learning. An improvisation performance group led a group of activities to help participants learn flexibility, confidence and trust. After the activity, the Program Leader summarized the learning:

You need to be flexible and make yourself unstuck. Chose not to be frustrated, judgmental, or confused – instead, this is where we are at – now what? Work on being in the flow state. Replace judgment with wonder...I wonder what is really going on? What is exciting about what is going on? Suspend judgment and allow for creativity and innovation. This is about collaborating in a healthy way that gets great results.

When I observed the small group coaching session, participants shared how they were learning from each other and what they were hearing at the cohort learning sessions as well as through their reading and assignments. One individual gave an example of how she felt her learning was impacting the team she leads. She described how she has learned that she was enabling her employees instead of empowering them. She shared that she learned to let go of her fear of not being in control and had to learn to trust her team members. As a result, she shared that her team was happier and she was getting fewer calls on nights and weekends. Each individual who gave a final report of the action learning project from cohort two shared, how they learned during the project, and how this learning transformed their thinking.

All the interviewed participants discussed their learning, reflection, and transformation. A participant in cohort one gave an example of transformational learning during a coaching exercise:

We had a situation where one day we were learning about coaching and one of my peers talked about a situation that occurred in their area. We were ... everybody was just appalled at the way he handled it. He was like, "What? What?" so of course we all made jokes, typical guy. You know, typical guy. We gave him a bad time, but as the day went on, we realized that for who he was working with and what he was doing, he really handled it just fine. It really gave you an eye opener of the particular way that you coach, you're going to have to adjust that to the person you are trying to coach. If it's somebody who can only hear voices, short sentences that leave you nothing but there's no way to save face, no way to ... that may be what you have to do with someone. We did learn from him, I did. It was an eye opener that sometimes you have to change your process and method in order to reach the person you're trying to reach. (coh1.part3)

A participant in cohort two described the value of a leadership development program that brings a variety of people together with different experience to share:

One of the best things about it is it really does, it brings a cross-section of leaders from throughout the entire organization, people who are formal leaders and people who are informal leaders, and it brings them together, gives you an opportunity to learn from each other, share experiences, and as you're going through it and you're learning different concepts, you really kind of get to apply those things together, and you get to see, okay, this is how this person was able to apply it, and so this person was able to apply it, and so. (coh2.part1)

In cohort three, a participant shared the importance of reflection in transformational learning:

I think that's the biggest thing, hearing, 'This is what I've been doing, but after this conversation I realize this is what I should be doing,' and there's so much you can take

away from that. A lot of times it takes weeks for it to process, and you'll be like, 'Oh, that's right, Jill was having an issue similar to this and talked about it and this is how she dealt with it, and this is how she wished she would've dealt with it.' You get so many takeaways from their experiences. (coh3.part2)

Another participant of cohort three described what he has learned through feedback and reflection with his peers during the leadership development program:

Certain situations where you have to look at the individual, their personality, their learning style and really consider that in terms of their job, in terms of making a plan for improvement of them. That's what I've learned a lot. Also my communication style versus what other people may need. I've learned a lot that sometimes I do need to probably slow down or let them speak a little more. Sometimes they won't speak and I need to prompt them a little more to speak out about things. (coh3.part3)

Two sub-themes emerged within this theme. The sub-themes are: (3.1) The learning process involved the sharing of experiences; and (3.2) An important part of the learning process included self-awareness and reflection. Each of sub-themes will be described in context of the major theme.

Sub-theme 3.1: The learning process involved the sharing of experiences. Participants described the examples where they felt that they learned from the experiences that were shared during the program. An individual from cohort one stated:

I am definitely a hands on learner, and being able to relate situations was definitely a big part of how I grew as an individual. It definitely contributed quite substantially. To use examples, that seems to stick better with me than just giving me the tools. Yes, I want the tools, but I need to have something to connect the tools like usually an experience. (coh1.part2)

A participant from cohort three stated:

Everybody comes and they all have their stories about what the issues they're dealing with in their particular section of the hospital and then we all contribute ideas, solutions to each other. I think we're actively learning from each other and by having the cohort, you're not just experiencing your experience, you're in a sense experiencing their experience. You're getting a much broader picture of what could happen and what to do about it when it does. (coh3.part1)

Sub-theme 3.2: An important part of the learning process included self-awareness and reflection. Participants described learning about themselves and reflecting on what they've learned as an important part of the transformational learning process. A participant from cohort one described their transformation:

I didn't believe it would be as beneficial as what it was for me. I kind of when they ... I was in the first cohort, I should do this because this will probably look really good on paper. I didn't realize the effect it would have on me as I developed as a leader. Just working with other people, working with individuals, getting to know myself, I didn't realize how much I would learn so much about who I was when it came to personality type, when it came to what type of leader I was. As a leader now, that has helped me just knowing I'm a servant leader. That's been identified. I know this is my personality type. It just has helped me understand some of the reasons of what makes me tick to help understand who I'm working with. (coh1.part2)

A cohort two participant described the amount of reflection involved in the process:

There was much reflection going on, much much much. Matter of fact one of my closing remarks yesterday was ... there was an article that we had to read - it was fairly early on in our cohort. There was an article that had asked the question, if you can't answer why

any one would want to be led by you then you should maybe really think about why you're doing this. That was a gut check for me to stop thinking about why I want to be a leader and start thinking why others would want me to be their leader. And just really spinning that around. It's not about me, it's about the team. (coh2.part2)

Another individual from cohort two described learning about yourself and others through the transformational process:

You go in to Leading Towards the Future thinking that you're going to improve yourself pretty much - which you do. You also, and I personally feel like I looked at the people that I worked with, and how could I help them? It's more of a servant leader type experience. Understanding where people are coming from. Why they do what they do. How could we work together better as a team? You grow in understanding others. You grow in understanding yourself. More so in team dynamics and learning about other people. It's real interesting. I think we all thought okay we're going to be really better leaders when we come out of it. We are, but we are because we see what everyone else is about. It was a very cool experience. (coh2.part3)

A participant from cohort three described how reflection is now incorporated into their leadership practice:

Actually, as time has gone on, I take more of those things that we've talked about in the past and then I stop and reflect before I even act, you know what I mean? I'm incorporating it even if I realized it or not. Not only like what we've done in the cohort situation, but we're learning from those small group coaching sessions because we're telling exactly what's going on in our situation today. (coh3.part1)

This person further describes the need to incorporate feedback for transformational growth:

I think we have to take all that feedback and those things that we learned about ourselves and then try to grow from it and then to create the kind of atmosphere that we want for our department, for people to be happy and to flourish and to do good, quality work and stay forever, hopefully. (coh3.part1)

Major Theme 4: Listening and Hearing Others Experiences and Perspectives Created New Understanding and Transformation

While not one of the stated goals of the leadership development program, a review of documents related to the program revealed that the program was developed, in part, to address issues feedback from employee related to leadership attitudes and behaviors. The feedback listed in the Proposal for Leading Toward the Future (2013) included: individuals not feeling heard or recognized; negative feedback without positive reinforcement; leaders lacking empathy and understanding; and silo mentalities. The Program Leader described how sharing ideas, knowledge and experiences; hearing perspectives other than your own; and giving and receiving feedback were imbedded into the program: "We make sure that there's something in each single class. Usually that's how I start out the class by having them sharing experiences." Further, specific assignments were made by the program leader "where they are asked to go out and talk to someone and or multiple someones and get those different perspectives." In addition to the program elements examined in this research study, the program leader also gave written feedback on each assignment to each participant.

The Chief Learning Officer stated that the sharing ideas, knowledge, and experiences, as well as hearing perspectives different than your own, was intentionally built into the activities and elements of the leadership development program:

You only see things from one perspective and sometimes seeing things from a whole other perspective gives you an innovative, totally out of the box creative idea that you wouldn't have had if you wouldn't have had that time when you were sharing ideas and

thoughts from somebody across the organization that you wouldn't know otherwise besides from being in this program.

Actively giving and receiving feedback was also intentionally designed within the program. The Chief Learning Office described the 360 degree review process included in the overall program, lessons on coaching, and the importance of actively seeking feedback. "As a leader, people are less likely to come to you that work for you to give you feedback unless you are actively pursuing it and asking for it."

The Senior Leader described sharing ideas, knowledge, and experiences as "a core foundation of the program." Adding, "there is a mixture of levels of experience so that there can be a rich sharing of experiences and questions at different levels." The senior leader attributed having multiple presenters as an aspect when participants hear perspectives different from their own. The Senior Leader also described the importance of teaching people how to listen to and understand feedback. "They get it from all kinds of people that they work with and they have to learn how to receive that feedback in a manner that's going to help them. That is kind of the foundation of the program because it says these are the things that I have to be focusing on…"

During the cohort learning session of cohort three, I observed participants actively listening to each other. The program leader used question prompts to draw out different perspectives. During the small group coaching session, I observed the individuals listen to each other's experiences and perspectives related to the topic of discussion. When I observed the final reports of the action learning projects from cohort two, participants shared how they begin with one plan and had to make adjustments based on hearing feedback and other perspectives.

All 12 of the interviewed participants and program designers described this theme in their interviews. Participants describe a transformation in their leadership as a result of listening and gaining new perspectives. From cohort one, a participant described his transformation:

I learned about myself that I can come off very confident and not everyone that I work with likes that. I guess I learned how to present myself a little differently so that ... I always felt that I was open to listening to other people, but other people didn't always believe that I was. That was their perception and that was the reality. To build those relationships, I changed what I do sometimes, making it more about them. When you're working and building a relationship, it's all about the other person, it's not all about you. We frequently made the comment to each other throughout the cohort, throughout whatever, 'It's not all about you'. (coh1.part3)

This participant from cohort one further described the realization that listening is work: I always thought I listened. I thought I might have heard them, but maybe I didn't listen as well. I learned a lot about listening. I've changed my ways of doing things a lot. For our small group, we very much learned to listen to each other and we would say the hard things to each other. (coh1.part3)

A participant from cohort two shared that listening was a skill that needed to be improved on:

One of the things I came into the program wanting to focus on was just listening, trying to be more ... It's interesting. I get trained as kind of a reporter writing for newspapers and writing before ... Writing and marketing before I came over into recruitment, and recruitment involves a lot of listening as well. I felt like my skills in that area were pretty good, but I think there was some instances where maybe I was hearing different messages than what was trying to be communicated to me, so I tried to be a lot more thoughtful when I'm listening to other people talk, and even just observing, observing things like body language and those types of things. (coh2.part1)

Another participant of cohort two described the transformation they witnessed in another participant:

It was also real interesting to see with one of the people in my small group the change in the 18 months. From the way he came in and how I portrayed him. Even how he talked about himself. To where he is now at 18 months. I actually told him on the last day of class. I said I'm just amazed. Your whole attitude and personality has done a 180. It was really interesting. He was just kind of blunt. Sort of like, I don't know if he even really wanted to be in the program. I got the gist that he was told that he should come to this. Then he really transformed in to a much more caring, kind, understanding person. I think if we can all look at what we're doing in the eyes of other people who view us. That was a real good experience. (coh2.part3)

A cohort three participant offered examples of how learning to listen has helped with relationships, problem solving skills, engagement:

Before this, I would've said my biggest flaw was I do have a temper. If I find out that someone has done something wrong that's going to negatively affect our patients, I've had a hard time not getting angry about that and now, actually I think I see that if that situation occurs, it's a much bigger problem than one small event, you know what I mean? It's a whole bunch of layers that went wrong that contributed to that person making that error and so it's my job to make sure that I have tackled all those layers so that that doesn't happen...I do have someone in my department that in our meetings and things like that, they will tend to come up with ideas and the ideas they tend to be pretty flawed and then all of the other techs will shoot that down and they get annoyed at that person for having flawed ideas, for not thinking things through as well as some of the rest of the group, but I started doing that process in our meetings now and I can already see

the tone is changing even for the other people in the department because they see me going, 'Oh, that's a good idea. I love the idea of this. How about if we take that idea and then we ... Let's take that part that's a great idea. How can we build on that?'...Then the rest of the group you can see they're like, 'Oh wait, things have changed.' You know what I mean? I feel like that is actually even bringing that person back into the fold of the department because their idea is accepted and then the rest of the techs are now helping to build on it rather than to be like, 'Oh no,' rolling their eyes or sighing or changing their body language, leaning back and away from the table, annoyed, exchanging glances. It's changed the tone of the department meetings. (coh3.part1)

Another cohort three participant shared feedback on listening skills and its impact on the team: Probably the biggest change is in how I listen. One of the things that I realized is that I was very interruptive, because I would always assume I would know where the person was going, and at the end taking it, and it was one of the feedback items that I received. You have to let the person finish, because even in the first meeting I got that, they kind of split us up in between introverts and extroverts, and I'm obviously on the extrovert side and the introverts, especially the ones that knew me, were like, "You're always interrupting." You have to listen all the way through. Receiving that feedback was some of the best critical feedback that I've ever received. When you allow the person to finish talking, it's rather enlightening in how much more you learn... I've realized, just working with my team, that since I've started doing that (listening), they're more willing to come seek me for help or ask me for an opinion or something. It was one of the feedbacks I actually got from my manager as well, that since I started the Leading Towards the Future, that I've been much more approachable and easier to work with. It's definitely doing something to help me out. (coh3.part2)

This concludes the four major themes. The next section describes the first of two minor themes.

Minor Theme 1: The Significance of Senior Leaders to the Program and Their Impact on Participants

The Proposal for Leading Toward the Future (2013) included the role of the senior leadership team of the organization in the program architecture. It stated:

To successfully create and implement this initiative requires not only commitment and support from the Senior Leadership Team (SLT), but their integral involvement in several ways:

- 1. Enable the development and growth of other leaders by creating the expectation of leadership development as a standard for all leaders
- Identify key SLT members to sit on the Leadership Development Advisory Council (LDAC) with other Lakeland leaders
- 3. Participate in the leadership development program as a part of their own learning journey
- 4. Continue the learning journey by committing to grow and share their own leadership capabilities through becoming a leader teacher, coach and/or mentor after appropriate preparation (p. 6).

The Program Leader specifically designed the small group coaching sessions so that program participants built relationships with senior leaders:

I wanted them to not only have that relationship, but also have visibility in the leadership's eyes. The idea was that there would be a senior person, senior leader who would be able to answer questions and help ask questions. I thought about doing it in this way so they could share their own experience.

The Chief Learning Officer described the importance of the senior leadership team approving the leadership program and agreeing to actively interact with program participants. She further described the involvement of senior leaders in the program as an opportunity for program participants:

It's been really enriching for them to hear perspectives and thoughts and interact on a personal level with somebody that they may not have had a chance to do, and so rubbing shoulders with other leaders in the organization that you may be in a totally different building and you may never have really met them gives you a whole different perspective on whatever it is you're talking about much less who you are and what kind of leader you are and how...just giving them the opportunity to have those interactions and conversations...

The Senior Leader interviewed for this study did not identify or discuss the role of senior leadership with the program. In observing the three key elements of the leadership program, senior leaders were actively involved in each element. During the cohort learning session of cohort three, I observed a Senior Leader offering encouragement to the group and sharing their own experiences as part of presenting on a specific topic. During the small group coaching session, I observed the senior leader ask questions, share their own experiences, and offer support. However, one of the participants of the group was noticeably nervous around the senior leader. When I observed the final reports of the action learning projects from cohort two, senior leaders were present for the presentations of the program participants. Senior leaders offered encouragement and applause.

Eight out of nine participant interviews discussed the significance of senior leadership involvement and interactions as part of the leadership development experience. Cohort participants enjoyed great visibility with senior leaders of the organization and valued the

support of senior leadership. A participant in cohort one described how impact of the interest of senior leadership felt to her and how she felt it gave her additional opportunities:

I was able to sit back and see that we all have the respect of senior leadership. My boss shared with me that they were impressed with my application, so I saw people that I didn't know actually kind of reaching out to me in several ways and I was very appreciative of that...by virtue of the fact that it (Action Learning Project) was an assignment that senior leadership supported, it opened those doors that might've been a little bit harder to open otherwise. (coh1.part1)

Participants also valued building relationships with senior leaders. Another participant of cohort one described the impact of getting to know senior leaders:

SLT were brought into those groups to give us real life examples and learning experiences which then made me as a person actually support my leadership structure in this organization better. I felt like I knew them more, I felt like I understood kind of some of where their decision making, how that happened, or the knowledge that they had to bring to the table. (coh1.part2)

There was also a sense of support and guidance that developed as a result of senior leader involvement with the leadership development program. A participant from cohort one described the interaction with the senior leader during the small group coaching sessions:

We could see immediately that our success was her success...It was absolutely a wonderful experience to have somebody just guide you and not that you were getting it yourself, but to know that somebody was there to help you. (coh1.part3)

A cohort two participant shared the value of senior leader insight and an example of how a senior leader supported a discouraged participant to stay in the leadership development program despite being behind in the work:

You're talking with people in administration, executives, VP's, that sort of thing, who have a ton of experience, so it's great just to be able to hear from them, hear their experiences, hear their advice, and I think that really helps. As you're trying to work through a situation, you can rely on the advice of somebody else who's maybe been there before. It's insightful...I think we both tried to encourage her, but she (senior leader) is like, 'You know, have you thought about doing this? Here's what you can do if you ever need anything. If you need any advice, you can call me. I'm happy to talk with you.' The way that she handled the situation was really neat to see and you could tell it made that person feel better. (coh2.part1)

A participant from cohort three described specific leader advice he received from a senior leader as part of the program and that he found valuable:

His point was when you have to do some difficult talks, its better to get them over with. It's better for the other person and it's better for you to get it over with. I found that I don't put anything off and I think it helps everyone to be more happy...Literally, every single time that we have met, I've learned something that I've been able to apply. (coh3.part1)

Minor Theme 2: Time was a Challenge for Participants

The application for the leadership program described the time commitment to be successful. It also required a letter of support from the applicant's leader supporting the application and time commitment. There are reading and writing assignments with deadlines outside of the time commitment for the cohort learning sessions, small group coaching, and action learning program.

During the cohort learning session of cohort three, 20 out of 22 program participants were in attendance. The two that were not in attendance were ill and had contacted the program

leader to be excused. The program leader acknowledged the amount of time individuals were putting into readings, assignments, and attendance. During the small group coaching session, 2 of 5 participants attended. Not every individual had let the senior leader know if they could attend. There was not any other discussion of the challenge of time with this group. When I observed the final reports of the action learning projects from cohort two, the Program Leader acknowledged the time dedicated to the projects by the program participants.

According to the Program Leader, in cohort one, one person had to delay completing the leadership development program. This person rejoined cohort two and has completed the program. In cohort two, one person did not complete the program because of workload and two others left the organization before completing the program. Five others delayed completion of the program. Of these four, two are now in cohort three; one plans to begin the next cohort; one is completing an MBA program and plans to rejoin after graduation; and one does not plan to complete the program. In the cohort three, one person has had to postpone participation because of life events and another has exited the program due to health reasons.

While none of the program designers discussed the challenge of time, seven out of nine participant interviews discussed the challenge of managing their time and finding a work-life balance.

Participants from each cohort described the challenge of time. A cohort one participant described some of the other time commitments that individuals had to balance: "I'm still blown away by the number of people that were going to school in addition to doing Leading Toward the Future, they had young families, some people were in the process of getting married, probably getting divorced" (coh1.part1).

Participants shared that the small group coaching sessions helped to mitigate the feelings of time pressure and reflect on learning. A participant from cohort one shared, "I think the small

groups are what forced us to slow down and do that (reflection). Had they have not been there I don't think it would've happened because we're all just so busy" (coh1.part1). A cohort two participant explained further:

One of the focuses that we've had with small group coaching sessions is just some of the challenges with keeping up with the workload, trying to balance your work at work, your work from Leading Towards the Future, and then obviously all of us have personal lives outside of work. I have kids. Other folks have different things, different commitments that they have outside of work, so it's a challenge. (coh2.part1)

While time may seem like a challenge, a cohort two participant suggested the program be structured differently so that the group would meet more often:

Pretty much everybody makes it to the quarterly sessions, but it's a full day. It's an 8-hour day. It's intensive. You do learn a lot from it, but I think one of the challenges is you have this great day where you're getting all this good information, but then you kind of go off and you're doing your readings and your assignments and working on your project, and you may not have a chance to come together to really talk about those things again until its like the next quarterly session. I almost wondered if we could meet for two or three hours once every few weeks and break apart that day a little bit and have different sessions, and then I think you're kind of constantly reinforcing it over time instead of cramming. (coh2.part1)

Finally, a cohort three participant summarizes the general feelings that participants shared about the challenge of time:

It's very time consuming and there's a lot to it and there's a lot of your own free time spent reading news articles and books and all that kind of stuff, but I think the information you get in these 18 months is really phenomenal. (coh3.part1)

Chapter IV Summary

This chapter detailed four major themes and two minor themes that distilled from document review, observations of the three key program elements, and interviews with three individuals involved in the program development, and interviews with nine cohort participants. Table 7 offers a summary list of the major and minor themes and sub-themes, and the elements to which each applied.

Table 7

Theme Summary by Program Elements

	G 1	G 11 G	
Themes and	Cohort Learning Session	Small Group Coaching	Action Learning Project
Sub-themes	Session	Coaching	Troject
M1. Key elements of the leadership development program support peer learning.	X	X	X
1.1 Cohort learning sessions encouraged peer learning.	X		
1.2 Small group coaching sessions fostered peer learning.		X	
1.3 Action learning projects put peer learning into action.			X
M2. The leadership development program created a sense of community for participants.	X	X	X
2.1 A sense of community grew from developing trust, encouraging each other, and sharing experiences.	X	X	X
2.2 New networks of people are the result of developing a community.	X	X	X
2.3 Within a community, there is a sense of belonging.	X	X	
2.4 The sense of community developed over time and continued after the 18-month formal cohort leadership program was complete.	X	X	
M3. The leadership development program created opportunities for transformational learning of leadership thinking and skills.	X	X	X
3.1 The learning process involved the sharing of experiences.	X	X	X

Table 7 - continued

Themes and	Cohort Learning	Small Group	Action Learning
Sub-themes	Session	Coaching	Project
3.2 An important part of the learning process included self-awareness and reflection.	X	X	
M4. Listening and hearing others experiences and perspectives created new understanding and transformation.	X	X	X
m1. The significance of senior leaders to the program and their impact on participants.	X	X	X
m2. Time was a challenge for many participants	X	X	X

Overall, participants described elements of peer learning within the three key elements of the cohort-based leadership program: cohort learning sessions, small group coaching, and action learning project. This contributed to the sense of community within the program that participants described. Trust, encouragement, and the willingness to share experiences developed through the key elements of the program. Participants were also able to develop new networks because of the relationships that were being built during the program. The sense of belonging created through the relationships with others going through the program developed overtime.

Transformational learning and leadership were outcomes of the elements of the program. The process included learning from the experiences others shared during the program. It also involved developing self-awareness and the ability to reflect. Listening and hearing others experiences and perspectives created new awareness and understanding.

It was significant to participants that the senior leaders of the healthcare organization were involved in the program, that participants had increased access to them, and that they had personal interactions with them. The amount of time the program involved as well as other work and life pressures were challenging for many of the participants.

In the next chapter, I will relate the findings to the research questions and conceptual framework, recommend future research, and discuss the implications for practice.

CHAPTER V

DISCUSSION AND RECOMMENDATIONS

This chapter offers an analysis of the study results for each research question and the conceptual framework. It also discusses the implementations of the study and suggests future research.

Analysis of Major Results as Connected to Research Questions

My study attempted to understand the role and meaning that peer learning played in the program design and participant experiences of three key elements within a cohort-based leadership development program at a health system in the Midwest.

Research Question 1

My first research question asked how key elements of an 18-month cohort-based formal leadership development program for healthcare professionals were planned and implemented to support peer learning. Secondary to this question was an investigation of the intended outcome from these learning opportunities. The findings will be discussed by each of the three key elements: cohort learning sessions, small group sessions, and action learning projects.

Cohort Learning Sessions. I started by reviewing the Proposal for "Leading Toward the Future" (2013) to learn how the leadership development program designers planned and implemented the cohort learning sessions to support peer learning. In this document, the program planners wrote:

We wanted to create a different learning environment and experience for participants.

When people have a different experience, it expands their awareness of self and others and allows them to see more than they did before. This expanded awareness leads to shifts in one's attitudes and beliefs, transforming the way people see their world as well

as how they participate in it, resulting in new leadership behaviors and ways of leading.

(p. 9)

The cohort learning sessions were designed to use peers as teachers during the formal daylong meetings. Participants of the program were a mixture of emerging leaders without leadership roles and formal leaders such as supervisors, managers, and directors. It was planned that sessions would be co-facilitated by leader-teachers and the program leader. It was designed to give participants the opportunity to test ideas and possible solutions to challenges they face with leader-teachers. These leader-teachers could also serve as coaches and advisors outside of the day-long sessions. One of the stated rational in the Proposal for "Leading Toward the Future" (2013) document was that using leaders as teachers creates a special environment for learning and development for the learners. This occurred by role modeling, creating a safe environment for learning, offering feedback, and building networks.

The cohort learning session that I observed was titled "Leading Toward the Future: Understanding Healthcare from Different Perspectives" and had a spiral bound detailed program prepared for participants. The session offered a number of opportunities to offer feedback and listen to new perspectives. In addition to the program leader, leader-teachers led aspects of the day. Additionally, each participant shared three things learned so far during their leadership journey.

My interview and observational data showed that peer learning was indeed an aspect of the cohort learning sessions (Sub-theme 1.1). Further, study findings showed that the program designers intended to create an environment during the cohort learning sessions that was supportive of peer learning by creating a sense of community for participants (Theme 2.0). Study findings also indicated that the cohort learning sessions were an aspect of creating opportunities for transformational learning of leadership thinking and skills (Theme 3.0). Specifically,

opportunities for sharing experiences were incorporated into the cohort learning sessions (Subtheme 3.1). The data showed that part of the transformational learning process included self-awareness and reflection (Sub-theme 3.2) during the cohort learning sessions. Additionally, data collected from documents, observations, and interviews demonstrated that listening and hearing the experiences and perspectives of other participants to create new understanding and transformation during the cohort learning sessions (Theme 4.0) was intentionally planned and facilitated by the program designers.

Small Group Sessions The Proposal for "Leading Toward the Future" (2013) offered a plan of how the program designers would create and implement the small group sessions to support peer learning:

In the months between cohort learning sessions, each learner meets with their small group of 6-8 learners for monthly progress checks, coaching, and relationship building. The discussion is facilitated...as a guide whose role is to:

- Connect discussion back to the learning content and answer questions
- Encourage sharing, problem solving and collaboration between learners
- Ask important questions to catalyze discussion, sharing and deeper thinking
- Create a coaching network among the leaders. (p. 10)

The small group coaching session that I observed was not well attended; however, there was rich dialogue among those present. A Senior Leader of the health system facilitated the discussion. While the program proposal did not designate Senior Leaders as the facilitators of the small group coaching sessions, this was a decision that was made in implementing the program. Participants of the small group were a mixture of emerging leaders without leadership roles and formal leaders such as supervisors, managers, and directors. The program proposal did

emphasize, however, that for the leadership development program to be successful, Senior Leadership Team (SLT) commitment, support, and involvement is critical.

My data showed that peer learning was an aspect of the small group coaching sessions (Sub-theme 1.2). Further, study findings showed that the program designers intended to create an environment during the small group coaching sessions that was conducive of peer learning by creating a community and coaching network for participants (Theme 2.0 and Sub-theme 2.2). Study findings also indicated that the small group coaching sessions were an aspect of creating opportunities for transformational learning of leadership thinking and skills (Theme 3.0). Specifically, opportunities for sharing experiences were incorporated into the small group coaching sessions (Sub-theme 3.1). The data showed that part of the transformational learning process included self-awareness and reflection (Sub-theme 3.2) during the small group coaching sessions as well. Additionally, data collected from documents, observations, and interviews demonstrated that listening and hearing about the experiences and perspectives of other participants to create new understanding and transformation during the small group coaching sessions (Theme 4.0) was intentionally planned and facilitated by the program designers. Further, the research revealed that the program planners deliberately planned for and encouraged active involvement of Senior Leaders during the small group coaching sessions (Emergent Theme 1.0).

Action Learning Projects The Proposal for "Leading Toward the Future" described the concept of the action learning projects in the following way:

The real world projects can reap the greatest potential benefit for...and the learners. Each learner will identify a real world project (with the assistance and support of their manager/director) where they can practice newly learned concepts and tools they have identified in their personal development plan. (p. 10)

In the Leading Toward the Future Outcomes Report (2015), the following data was presented:

Return on Investment in Action Learning Projects:

- This cohort addressed 11 organizational projects as part of the Action Learning Projects component. These projects ranged from implanting an automated microbiology system to achieving accreditation for the Out of Center Sleep Testing and Diagnostic Imaging Centers to converting the nutrition floor stock ordering process from manual/paper to electronic methods.
- While these projects may have been completed without the influence of the leadership
 development program, the quality of the project and the focused time to work on
 them within this timeline created a sense of urgency and movement toward
 completion.

Examples of the financial impacts of select participants' projects:

Affordable Care Act: Integration, Enrollment, Impact and Beyond

- In four fiscal quarters, the project had an impact of \$1.4 million of capture revenue
- Cost savings: ~\$2 million of billable services went from the deficit/loss and was converted into revenue/gross profit
- The project impact continues to grow with each passing fiscal quarter

 Nourishment Floor Stock Ordering Electronic Conversation
 - Labor savings in overtime per month: \$1,800/year
 - Materials and supplies savings: \$520 year

Diagnostic Imaging Centers for Excellent (DICOE) Accreditation Project

• While accreditation is not directly tied to reimbursement currently, it is highly anticipated in the near future. Currently, ACR accreditation is required for

out-patient reimbursement from Medicare for specific tests. DICOE accreditation is a step above individual modality accreditations.

Microbiology Automation Project

- With a price tag of just under \$300,000 for the first phase
- Increase accuracy of identification and detection of drug resistance, reduce costs and eliminate waste, increase productivity
- Time savings: decrease time from 6 18 hours to 10 minutes
- Increase quality: increase accuracy to 93.6%
- Cost savings: resulting in a cost per test of \$3.02 from \$5.80. (pp. 3-4)

I observed the action learning project reports at the end of cohort two. There was much excitement among the participants. Senior Leaders and other Director and Manager level people attended the reports of their respective participants. Participants described the goals and objectives of their projects, what they accomplished, what they learned, and what still needed to be accomplished.

My data showed that peer learning was a component of the action learning projects (Subtheme 1.3). The study findings showed that the program designers intended to create new networks for peer learning for participants (Sub-theme 2.2). Study findings also indicated that the action learning projects were an aspect of creating opportunities for transformational learning of leadership thinking and skills (Theme 3.0). Specifically, opportunities for sharing experiences as well as self-awareness and reflections were incorporated into the action learning project process (Sub-themes 3.1 and 3.2). Study findings indicated that listening and hearing the experiences and perspectives to create new understanding and transformation during the action learning projects and (Theme 4.0) was intentionally planned and facilitated by the program designers. Further, the research revealed that the program planners purposely planned for and

encouraged support and involvement of Senior Leaders during the small group coaching sessions (Emergent Theme 1.0).

Research Question 2

My second research question asked how participants described key learning opportunities and the peer learning process. Secondary to this question was an examination of changes participants attributed to these experiences. The findings will be discussed by each of the three key elements: cohort learning sessions, small group sessions, and action learning projects.

Cohort Learning Sessions To consider how the participants described the key learning opportunities and peer learning process of the leadership development program, I focused on the data from interviews and outcomes documents. A graduate of cohort one described the aspect of leader teachers for future cohorts:

It's kind of interesting that ten of us volunteered to be at the cohort two graduation. We wanted to live that encouragement and that excitement of finishing, to be part of that with them. Gwen asked us to help with classes that she needs help with, or to help with coaching sessions for the next cohort. We really appreciate that, to be able to give back what we've learned to help somebody else get to where we are, and maybe even farther, you know? (cor1.part3).

The research revealed that the cohort learning sessions encouraged peer learning (Sub-theme 1.1) through using other leaders as teachers.

My study also suggested that informal peer learning took place as well through the sense of community that was experienced by participants (Theme 2.0). A participant from cohort two explained:

It's just reaching out, emailing, talking, the formal session. I met with one of my classmates and we talked about a situation she needed help with before class. In the class

too, I mean it gives you a tool, you need to be able to feel comfortable doing that because some people just don't feel comfortable reaching out when they need something, whether it's huge or something little. (coh2.part2)

Study findings indicated that a sense of community among the participants grew over time as a result of developing trust with one another, encouraging each other, and sharing experiences together during the cohort learning sessions (Sub-theme 2.1). Some program participants experienced an expanded network of people as a result of building relationships in the cohort learning sessions (Sub-theme 2.2). Because the leadership development program was an intense experience over 18-months, participants described the sense of belonging to a special community (Sub-theme 2.3) and some shared that the feeling of community continued after the program ended (Sub-theme 2.4).

My study findings indicated that program participants learned new leadership concepts or learned to think of leadership in new ways during the cohort learning sessions (Theme 3.0). Participants discussed learning from experiences that peers shared (Sub-theme 3.1). Specifically, participants discussed an increase in self-awareness (Sub-theme 3.2) as the result of the learning during the cohort learning sessions. Further, the study findings indicate that when participants listened to peers and heard their experiences, it created new learning (Theme 4.0) during the cohort learning session. A participant from cohort one shared how the cohort learning session contributed to leadership growth:

How they [Cohort Learning Sessions] contributed was seeing things from a different perspective, like 20 different perspectives because we were all able to talk about how we've seen something or how it affected us. Where we see our weaknesses were, where we see the positives were, what our roadblocks are, and then just learning from each other that there's different stakeholders many times than what we see in our own small

departments and such. It really gave you an early on systems approach to learning about a particular item or a particular area that we were going to start learning about. (coh1.part3)

While participants of the leadership develop program responded positively to the cohort learning sessions, some of the participants felt the challenge of time and the time commitment required to attend the full-day sessions each quarter (Emergent Theme 2.0).

Small Group Coaching My study found that the small group coaching sessions fostered peer learning (Sub-theme 1.2). Some participants shared how the small, informal, and intimate coaching groups created an environment of trust, encouragement, and sharing (Sub-theme 2.1). One participant from cohort one shared the feeling of belonging to the small group and the relationships that were built (Sub-themes 2.2 and 2.3):

The group I was in, we clicked immediately, the 4 of us, and as one of the guys said, that wasn't in our group but said he wanted to be in our group, because we were the cool kids in the cafeteria. Are you kidding? I've never been accused of that before, but really, we supported each other both personally and professionally. (coh1.part1)

My study findings demonstrated that the small group coaching aspect of the leadership development program created opportunities for transformational learning of leadership thinking and skills (Theme 3.0). Specifically, participants described new learning from sharing experiences, feedback from others to gain better self-awareness, and time to reflect with each other during the small group coaching sessions (Sub-themes 3.1 and 3.2).

This research also revealed that during the small group coaching sessions, participants had the opportunity to listen and hear others experiences and perspectives that created new understandings (Theme 4.0). Interestingly, the study found that participants felt it was significant that Senior Leaders of the organization facilitated the small group coaching sessions and took a personal interest in the participants (Emergent Theme 1.0). Similar to the cohort learning

sessions, some participants found that time was a challenge to attend the small group coaching sessions (Emergent Theme 2.0) although they found value in the time with peers.

Action Learning Projects. Study findings revealed that the action learning projects put peer learning into action. A participant from cohort one, described the experience:

It (Action Learning Project) made me develop my own personal skills and actually be accountable of saying okay, this is my project. This is what I want to do. It was nice because we were able to pick it. We were able to pick something that was meaningful to us, but then it was also a project that I was able to lead. I had to get staff members involved to make it successful. I learned a lot along the way, for example, things that I thought. Oh this will work great. I had the idea that this plan was going to work, so then I had to take it ... Like I actually had to take input from my team, and I had to go back and rework it which was something I never had to do. I wasn't in a manager role at the time. I think personally, it definitely helped me develop my skills. How do you work a project like that? How do you work a process improvement? What steps you had to take? With a cohort, they kind of helped us prepare for that - they gave us the tools we needed to get started and actually held us accountable to see it through. (coh1.part2)

The research also demonstrated that a sense of community grew among peers through the work and sharing of the action learning projects (Sub-theme 2.1). Further, some study participants shared how the action learning projects helped them to expand their working network (Sub-theme 2.2). Participants shared their learning experiences with each other (Sub-theme 3.1) during cohort learning sessions as well as during the final report out. Several participants described how they had to listen and hear other perspectives to make their action learning projects successful (Theme 4.0).

The interest and support that senior leaders gave to participants during their action learning projects seemed significant to participants (Emergent Theme 1.0). A senior leader had to approve the project before it could begin. Although most participants found the action learning projects to be an important learning opportunity, many participants found it was difficult to devote the time needed for the project (Emergent Theme 2.0).

Updated Conceptual Framework

When considering the conceptual framework that I described in Chapter 1 and the results of my study, I found that the emphasis on transformative group learning and transformational learning in a social environment align the findings of my study. The diagram illustrated in Figure 1 begins with a funnel representing the concept that combining theories of transformative learning can create transformational leadership.

My study revealed that the leadership development program created a sense of community among participants (Theme 2.0) creating a space for peer learning. When reflecting on the conceptual framework, the funnel could also represent the sense of community that grew from developing trusting and encouraging relationships, and sharing experiences (Sub-themes 2.1). It also illustrates the sense of belonging to a community (Sub-theme 2.3) that developed over time (Sub-theme 2.4), bringing participants closer together to share in transformational learning.

The word community is often used to describe a collection of individuals that are bound by something, for example, location, faith, or ethnic background. In this case, the group was bound by their leadership development journey. Yet the word also seems to means something more profound. Peck (2010) wrote that if we chose to use the word "community" in a meaningful way, we must only use it to describe a group of people who have learned how to communicate honestly, whose relationships go deeper than their masks of composure, and who

have developed a significant commitment to celebrate and mourn together, enjoy each other, and make each others' conditions their own. My study found that the environment created by the program created this type of community for participants (Theme 2.0). Based on my study findings, I have updated the conceptual framework to illustrate the role of community in the process (see Figure 2 later in this section).

The next component of my conceptual framework was the transformational learning process that happened as a result of the concepts represented in the funnel. The process of transformational learning is the result of examining, questioning, and revising perceptions (Mezirow, 1991; Taylor et al., 2012). Transformational learning can be fostered when the values of collaboration, deep learning, reflection, engagement, and caring are used to create social space for peers to engage with each other (Mezirow et al., 2009). My study found that the role of peer learning in a formal leadership development cohort involved transformative group learning with an environment, process, and dialogue to facilitate it (Themes 1.0, 2.0, and 3.0). Further the role of peer learning was found in the transformational learning that developed through listening to others' perspectives and developing new understandings (Theme 4.0). Based on my study findings, I have updated the conceptual framework in Figure 3 to better illustrate the role of peer learning within this process.

The next part of my conceptual framework is the creation of transformational leadership. "Transformational leadership can be taught and learned" (Bass & Riggio, 2006, p. 134). It involves developing individuals to their fullest potential. Bass (1985) classified four elements of transformational leadership: idealized influence – charisma, inspirational motivation, intellectual stimulation, and individualized consideration. These elements describe leaders who are role models, inspire people to a shared vision, stimulate creativity, and give care to individual needs and desires. While my study did not specifically look for these qualities in the participants of the

leadership development program, many participants shared how they were transformed as a leader as a result of the program. Others in the study shared how their relationships with team members and others they work with had improved and grown as a result of the program.

In the context of the healthcare environment, my conceptual framework culminates with the creation of healthcare change leadership. The Leading Toward the Future Outcomes Report (2015) revealed that 72% of the cohort one participants had made either upward or lateral movement since the beginning of the program, and 23% have moved upward more than once since the program finished. During the same time, 28% of the participants took leadership roles in community organizations or activities in additional to their current positions. These findings illustrate the development of healthcare leaders within my conceptual framework.

Figure 2 depicts my revised conceptual framework based on my research findings. This new conceptual framework better illustrates the sense of community and belonging as part of the environment where peer learning takes place. It also includes the transformational learning and leadership thinking skills that can develop in part from gaining new understandings from others' experiences and perspectives. The significance of senior leaders involvement in the process and the commitment of time are included within the diagram. Transformative group learning (Taylor et al., 2012) and transformational learning and social environment (Mezirow et al., 2009) are actions that further enrich an atmosphere where peer learning takes place. The sense of community develops overtime and not every healthcare worker engaged in formal cohort leadership development may experience it in the same degree. Therefore, the cohort group is not in the funnel but instead moving into it.

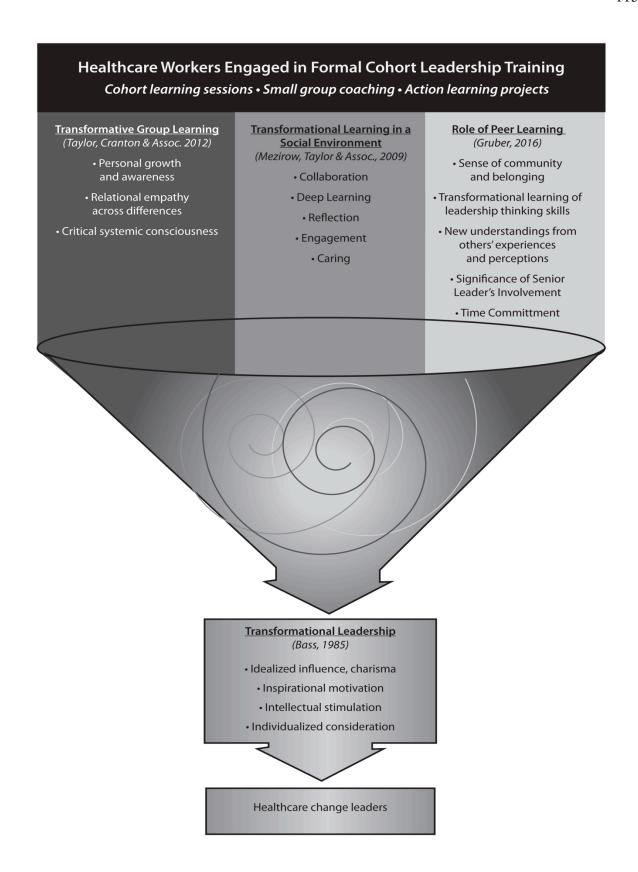


Figure 2. Updated conceptual framework of leadership development through peer learning.

Relationship of Study to Literature

Aspects of peer learning are found throughout the relevant research in transformational learning, transformational leadership, leadership development, and healthcare leadership. This section discusses the relationship of the results from my study to the relevant literature and existing studies.

Transformative Learning

Mezirow (1978) introduced transformative learning nearly 40 years ago. Kitchenham (2008) described it as a deep shift in thinking, feeling, and actions. Merriam et al. (2007) explained transformative learning as a dramatic change in how one sees themselves the world around them. Sharing experiences, understanding new perspectives, and self-reflection are fundamental elements of this theory. Engaging in dialogue about experiences, reflections, and new perspectives in an environment without judgment are typical of a transformative learning experience (Merriam, 2004). In my study, participants described an environment of trust, encouragement, and sharing of experiences that created a community of transformative learners (Sub-themes 2.1 and 3.1; Theme 4.0).

When developing a leadership development program to develop transformational leaders, the program must engage the leaders in critical self-reflection to help make new meaning from experiences (Brown & Posner, 2001). In a group setting, transformational group learning involves the environment, process, and dialogue to create personal growth and awareness, relational empathy across differences, and critical systemic consciousness (Taylor et al., 2012). My study found that the designers of the leadership development experience planned opportunities for transformative learning of leadership thinking and skills (Theme 3.0). Study participants described how the leadership development included the sharing of experiences (Subtheme 3.1) as well as self-awareness and reflection (Sub-theme 3.2).

Through the sharing of experiences, perceptions, and reflection, peer learning is a critical aspect of transformative learning. Nesbit (2012) described how leaders talking about events could stimulate reflection and assist the leader in making new meanings and insights from the experience. Merzirow et al. (2009) suggested that transformative learning in a social environment can be encouraged through trusting relationships and values of collaboration, deep learning, reflection, engagement, and caring. In my study, this describes the sense of community and belonging that developed over time among participants (Theme 2.0).

Transformational Leadership

Marvinac (2005) described the influence of multiple relationships with peers to foster a variety of learning opportunities to develop themselves and others to learn quickly, adapt, and be flexible. Transformative learners who strive to be transformational leaders assist in the learning, growth, and development of their peers and followers. Burns (1978) explained transformational leadership as a leader who understand the needs of their followers and inspires them to rise to higher levels of motivation. This relationship must include mutual trust and stimulation that creates change agents. Transformational leadership in the workplace takes place when leaders are able to inspire a shared mission and vision among employees and encourage the passions of employees toward the good of the organization (Bass, 1990). Leaders often use both transactional and transformational leadership approaches. Evidence has shown the transformational leadership styles inspire employees to achieve more while transactional leaders may limit employee satisfaction and effort (Bass, 1990). In my study, several participants described how their approach with employees had changed to become more transformational (Theme 3.0).

Transformational leadership often involves deep, trusting, and productive relationships between leaders and employees (Bass, 1990). This type of relationship often takes time to

develop and produces a higher level of satisfaction for both leader and employee (Bass, 1990). Barbuto (2005) found, via a study of 186 leaders with 759 direct reports from a variety of organizations, that leaders with transformational behaviors have a higher correlation to the source of motivation than did leaders using other leadership behaviors. Further, Shin and Zhou (2003) found, via a study of 290 employees and their supervisors from 46 Korean organizations, transformational leadership behaviors were positively related to employee creativity and intrinsic motivation. In my study, an emergent theme was the significance that program participants placed on the attention of senior leaders (Emergent Theme 1.0). Additionally, data in the Leading Toward the Future Outcomes Report 2015 reported that the average engagement score for the teams of program participants increased from 42% in 2013 to 50.4% based on August 2014 survey data.

Transformational leaders in the workplace are expected to enhance the performance of their employees by setting higher goals and inspiring an increased willingness to address changes that must be accomplished (Bass et al., 2003). Increasingly, transformational leaders are more likely to see themselves as colleagues and peers rather than rivals, superiors, and subordinates. Their behaviors often foster supportive and encouraging relationships (Bass, 1990). Findings from my study supported the building of trusting and encouraging relationship as part of the transformational leadership process (Sub-theme 2.1). As a result, a sense of community among participants was found to be part of the leadership development program (Theme 2.0).

Leadership Development

With transformational leadership as the desired outcome of leadership development, this section discusses approaches to leadership development in relationship to study findings. The combination of five key leadership approaches generates transformational leadership: building relationships committed to a common purpose; translating values into sources of motivation

through narrative; turning resources into the capacity to achieve purpose by strategizing; mobilizing and developing resources as clear measurable, visible action; and structuring authority so as to facilitate the effective distribution of leadership (Ganz, 2010). Leadership development, increasing self-awareness, and personal mastery are topics that Burns (1978) discussed as corresponding to transformational leadership. In fact, Burns stated:

Persons are taught by shared experiences and interacting motivations within identifiable physical, psychological, and socio-political environments. Ultimately, education and leadership shade into each other to become almost inseparable, but only when both are defined as the reciprocal raising of levels of motivation rather than indoctrination or coercion. (p. 448)

As leaders learn from the experiences of their role models, challenging assignments, and others' perspectives they become better leadership (Brown & Posner, 2001). In my study, an important aspect of the learning process included learning through increased self-awareness (Sub-theme 3.2) and hearing about the experiences and perspectives of other participants (Theme 4.0).

Research has shown that transformational leadership skills can be learned and developed through leadership development (Mason et al., 2014). Peer networks and relationships are an important aspect of the leadership development process. Thomas, Jules, and Light (2012) described, via a case study of the second largest utility in the U.S., the role of peer networks to understand new insights as a component of this program. Further, they discussed how new leaders must be able to share their experiences with other leaders as part of their leadership development. Jarvis, Gulanti, McCririck, and Sampson (2013) found, via a qualitative study of two cohort leadership development programs, peer relationships formed and contributed to both personal and organizational resilience. Furthermore, learning and working in small groups built relationships and professional networks that felt supportive to the participants. Additionally, this

study found that trusting relationships are essential to sharing authentic experiences to create new wisdom that is critical to leadership development. In my study, peer learning was an aspect of the key elements of the leadership development program (Theme 1.0). The participants formed a community that had an environment of trust so that experiences could be shared (Subtheme 2.1). Further, new networks of peers were developed through the leadership development program (Sub-theme 2.2).

Mason et al. (2014), through their qualitative study of 56 leaders participating in a transformational leadership program, found a positive relationship between change in behavior and change in positive affect. Allen and Hartman (2008) described common leadership development programs that encourage reflection on behaviors, beliefs, and intent. Day and Harrison (2007) found, through studying literature on the evolution of thinking around leadership and leadership development, that relationships with peers are critical to sustaining leadership development overtime. In my study, findings from the Leading Toward the Future Outcomes Report (2015) showed that the leadership skill sets that saw the greatest improvement were interpersonal skills, execution, ethics/person character, innovation, and knowledge or organizational strategy. Further, the sense of community that developed among peers within the cohort-based leadership program continued after the 18-month program was complete (Subtheme 2.4).

Peer learning is a social learning process where individuals grow in understanding of their own assumptions, biases, and judgments. As a result, they are better able to question their accuracy and validity by involving peers as "critically reflective mirrors who provide them with images of how their practices look to others" (Mezirow et al., 2009, p. 133). In my study, there were several examples of participants coming to new understandings about themselves and their practices through dialogue with peers. Within the key elements of the leadership development

program, the cohort learning sessions encouraged peer learning through activities and lessons (Sub-theme 1.1). The small group coaching sessions further fostered peer learning though facilitated dialogue and reflection (Sub-theme 1.2). Finally, participants described how peer learning helped to make their action learning projects more successful (Sub-theme 1.3).

Guldberg (2008) analyzed how peers learn and support one another with professional development in an online setting through a study of 265 students with over 10,000 posts in a sixmonth period. Using mixed methods, the author found that each discussion had evidence of students viewing things from different perspectives, supporting each other, learning together, and sharing experiences. Gulberg's research supported the concept that the dialogue process among peers creates new thinking and learning. Gilly (2003) found, via qualitative research of two peer learning groups, that peer-group learning was relational and collaborative. The researcher wrote that an important aspect of peer learning is reflection to create common meaning and consciousness-raising. Similarly, in my study the learning process involved the sharing of experiences among peers (Sub-theme 3.1). An important aspect of the peer learning process was reflection (Sub-theme 3.2). Further new understandings were formed as a result of hearing others' perceptions and experiences (Theme 4.0).

Leonard and Lang (2010) found, via four case studies of action learning leadership development at the U.S. Department of Commerce, Boeing, the National Institutes of Health and the US Department of Agriculture, that it is important to have frequent reflection opportunities during action learning leadership development sessions. Discussion about personal learning, planned applications, and further needs for development added to positive development results. Mezirow et al. (2009) described laboratories for leadership and organizational learning, experimentation, critical reflection, and change. In my study, action learning projects were a key element of the leadership development program. Participants described how these projects

helped them to grow as leaders and how learning from their peers was important to having successful projects.

Spaid and Duff (2009) described, via a case study of one private college, best practices for accelerated cohort college programs. The researchers listed nurturing interdependence, mutual respect, critical reflection, moving outside comfort zones, and examination of knowledge as program best practices. Seed (2008) found, via a qualitative case study on the effects of a cohort-based experiential learning program, that the participants perceived value in a cohort and described creating a cohort as building close relationships. Additionally, these close relationships were perceived as supportive. In my study, all participants described their relationships among their cohort peers as supportive and encouraging. The cohort-based leadership development program created a sense of community among the participants (Theme 2.0). Further there was a sense of belonging that involved trusting and encouraging relationships (Sub-themes 2.3 and 2.1).

Additionally, Greenlee and Karanxha (2010) found, in their survey on group variables of participation, communication, influence, trust, cohesiveness, empowerment, collaboration, and satisfaction in cohort and non-cohort leadership programs, that there is a significant increase in trust, cohesiveness, and satisfaction in the cohort leadership program. Further, Scribner and Donaldson (2001) found, via a case study of a state-wide leadership learning cohort, that transformational learning occurred when people changed perspectives, especially related to team members' self-perceptions as leaders. This learning occurred in reflective ways among peers. My study of a cohort based leadership development program supported these findings. The cohort approach created a community for participants (Theme 2.0). All study participants discussed the importance of trusting relationships (Sub-theme 2.1).

Research has shown that when the cohort is designed well, it can foster collective knowledge and wisdom through the sharing of multiple perspectives, new understandings, and deep discussion with peers (Gilly, 2003; Lawrence, 2002; Teitel, 2009). Leadership competencies can be enhanced through peer interactions made available through the cohort experience leading to the development of critical thinking, an enhanced knowledge base, changes in perspective, and higher motivation to learn (Lawrence, 2002; McPhail et al., 2008; Seed, 2008). Further, long-term supportive professional peer relationships can be created as a result of the cohort environment (Seed, 2008). In my study, the design of the cohort based program included cohort learning sessions, small group coaching, and action learning projects. Each of these elements supported the peer learning process (Theme 1.0). Findings showed that transformational learning of leadership thinking and skills involved the sharing of experiences (Theme 3.1). Participants described meaningful dialogue involving perspectives and experiences of other participants that led to new understandings and transformation (Theme 4.0).

Healthcare Leadership

My study involved a cohort-based formal leadership development program for healthcare professionals. This section discusses my study in relation to the evidence regarding a healthcare leadership crisis, what skills and characteristics are needed in future healthcare leaders, and healthcare leadership development programs.

The healthcare industry is experiencing an unprecedented need for transformational leadership as a result of the complexity of the industry, healthcare reform, and an aging leadership workforce (Dolon 2010; Jarousee, 2011). Doody (2002) found in a nationwide study of 1,600 hospitals and health systems that nearly two-thirds of the responding CEOs thought there will be a shortage of healthcare leaders who are prepared for future executive roles. Healthcare is in constant flux with advancing standards of care and technology, new business

models, shifting demographics, and consumerism changing the landscape. Additionally, regulations, cost pressures, access to care, and recruitment of clinicians increase the complexity of the environment (Center for Creative Leadership, 2010). Given the rate of change and the complexity involved, healthcare organizations will require new and different leadership skills to traverse the changes that are both necessary and unprecedented since the establishment of Medicaid and Medicare (Dolon 2010; Jarousee, 2011). In my study, the designers of the leadership development program identified succession planning and the need for transformational leaders as key reasons for creating the program. In the Proposal for Leading Toward the Future (2013), the program designers recognized that leadership development and effective leadership would play a critical role in reaching future organizational goals. In fact, the documents states:

To be successful, our leaders must not only act as the architects of the strategy, setting the best course for organizational success, but also must continually work to implement strategic directives while also acting as translators to the rest of the organization. Of course, this occurs at different levels within the organization, but underscores the fact is that leadership is needed throughout for strategic and business success. (p. 4)

Transformational leaders are imperative to sustainable healthcare reform because people must be inspired and engaged in a shared vision for the future (Block & Manning, 2007). An absence of strong leadership has impacted the ability of the current healthcare system to implement and sustain needed strategic changes (Bodinson, 2005; Degeling & Carr, 2004). In my study, the program designers identified during their interviews that transformational leadership was a desired outcome of the leadership program. However, the original proposal for the program does not specific use the words transformational leadership. Nevertheless, the

description of purpose, goals, and outcome measures supports transformational leadership development.

According to the Center for Creative Leadership (2010), leaders in healthcare must develop the ability to bridge team, organizational, and cultural divisions. These leaders must learn to eliminate barriers and silos and expand boundaries through the development of networks and relationships. In my study, participants identified new networks and the building of relationships as outcomes of the leadership development program (Sub-theme 2.2).

Groves (2007) identified, via semi structured interviews with 30 healthcare CEOs and 15 healthcare human resource executives, best practices of healthcare organizations that were focused on preparing people for future leadership positions. They included: a mentor network; developing high potential employees as future leaders; engaging leaders in leadership development activities, teaching, and learning experiences; exposing high potential future leaders to stakeholders, senior leadership, and board members; senior leader involvement in leadership development; and ongoing evaluation of leadership development practices. In my study, the designers of the leadership development program created a program that connected participants to new networks of individuals (Sub-theme 2.2). The program proposal identified that the leadership development program would address the need to engage and develop high potential employees. Further, the program designers purposefully build the program to include senior leaders in the leadership development process. Specifically, senior leaders taught aspects of the cohort learning sessions and facilitated small group coaching session. Each program participant interviewed in the study discussed the significance of senior leader involvement and attention during the program (Emergent Theme 1.0).

Bergman et al. (2009) found, via surveys and focus groups with 53 participants from two different healthcare leadership development programs, that both programs strengthened

leadership. While their approaches differed, the long-term support group approach complemented the initial one-week program. The researchers also found that the participants appreciated the ability to reflect and analyze problems through dialogue with peers. In my study, the three elements of cohort learning sessions, small group coaching sessions, and action learning projects supported peer learning (Theme 1.0). The sense of community that developed among the participants created an atmosphere of trust, encouragement, and sharing among peers (Sub-theme 2.1).

Effective leadership development emphasizes reflection and review of working relationships and the impact of various behaviors to better engage and solve shared problems and situations (Edmonstone, 2011). Reflection, which includes considering experiences, feelings, and theories, is a central aspect of leadership development. To address this need for reflection as part of leadership development, many types of reflection-in-action are used such as dialogue in groups, coaching, mentoring, developmental relationships, and feedback systems (Edmonstone, 2011). In my study, participants described the opportunity and importance of reflection in each of the three key learning elements (Theme 1.0). Further, I found through participant interviews that an important part of the leadership development process involved increased self-awareness and time for reflection (Sub-theme 3.2).

Table 8 offers a summary of my findings and their relationship to previous research discussed in this section.

Table 8
Study Finding as Related to Previous Research

Gruber (2016)	Previous Research
Major Findings	
M1. Key elements of a	Affirms with Marvinac (2005) in the trend of multiple
leadership development	relationships with peers to see out learning opportunities.
program can support peer	
learning.	Adds and affirms to Thomas et al. (2012) in that peer networks

Table 8 - continued

Gruber (2016)	Previous Research
Major Findings	formed and provided new understanding as a component of a
	leadership development program.
	Adds and affirms to Allen and Hartman (2008) in the description of leadership development programs that encourage reflection on behaviors, beliefs, and intent.
	Affirms with Day and Harrison (2007) in the relationship with peers and sustained leadership development.
	Affirms with Lawrence (2002) and Teitel (2009) in that cohorts can foster peer knowledge and wisdom sharing through sharing perspectives and dialogue.
	Adds and affirms to Edmonstone (2011) in that dialogue in peer groups, coaching, and developmental relationships emphasize leadership development reflection.
1.1 Cohort learning sessions can encourage peer learning.	Adds and affirms to Jarvis et al. (2013) in that peer relationships formed and provided support and resilience.
	Affirms with Mezirow (1978); Kitchenham (2008); and Merriam, et al. (2007) as related to transformational learning.
	Affirms with Brown and Posner (2001) designing leadership development programs for transformational learning.
	Affirms with Mezirow et al. (2009) in that peers provide a reflective lens from which to learn from.
	Adds and affirms to Guldberg (2008) in that dialogue among peers creates new thinking and growth.
	Adds and affirms to Gilly (2003) in that peer-group learning is relational and collaborative.
1.2 Small group coaching sessions can foster peer learning.	Adds and affirms to Jarvis et al. (2013) in that meetings in small groups build supportive relationships.
	Affirms with Mezirow et al. (2009) in that peers provide a reflective lens from which to learn from.
	Adds and affirms to Guldberg (2008) in that dialogue among peers creates new thinking and growth.
	Adds and affirms to Gilly (2003) in that peer-group learning is relational and collaborative.
1.3 Action learning projects can put peer learning into action.	Affirms with Mezirow et al. (2009) in that peers provide a reflective lens from which to learn from.

Gruber (2016)	Previous Research
Major Findings	
	Adds and affirms to Guldberg (2008) in that dialogue among peers creates new thinking and growth.
	Affirms with Leonard and Lang (2010) in the need for peer reflection opportunities as part of action learning.
	Adds and affirms to Mezirow et al. (2009) descriptions of leadership learning laboratories with experimentation and reflection.
M2. A leadership development program can create a sense of community for participants.	Adds and affirms to Nesbit (2012) research on transformative leadership development through peer sharing.
	Adds and affirms to Merzirow et al. (2009) research on transformative learning in a social environment.
	Adds and affirms to Bass (1999) that transformational leaders often foster supportive relationships.
2.1 A sense of community can grow from developing trust, encouraging each other, and sharing experiences.	Adds and affirms more depth to Merriam (2004) in that sharing experiences is part of the transformational learning process as well as the sense of a trusting community that developed to further facilitate the process.
	Adds and affirms to Bass (1999) in that transformational leaders often foster supportive relationships.
	Adds and affirms to Ganz (2010) five key approaches to create transformational leadership.
	Affirms with Jarvis et al. (2013) in that trusting relationships are essential to sharing authentic experiences.
	Affirms with Spaid and Duff (2009) in that nurturing relationships of mutual respect are an aspect of cohorts.
	Adds and affirms to Seed (2008) in the value of a cohort to build close and supportive relationships.
2.2 New networks of people can be the result of developing a community.	Adds and affirms to Thomas et al. (2012) in that peer networks formed and provided new understanding as a component of a leadership development program.
	Adds and affirms to Jarvis et al. (2013) in that the cohort built relationships and extended professional networks.
	Affirms with Center for Creative Leadership (2010) and Groves (2007) in that new networks are needed for future healthcare leaders.

Table 8 - continued

G 1 (2016)	D : D 1
Gruber (2016) Major Findings	Previous Research
2.3 Within a community, there can be a sense of belonging.	Adds and affirms to Seed (2008) in the value of a cohort to build close and supportive relationships.
2.4 The sense of community can be developed over time and continued after a 18-month formal cohort leadership program is complete.	Adds and affirms to Day and Harrison (2007) in the relationship with peers and sustained leadership development.
	Adds and affirms to Bergman et al. (2009) in that participants appreciated the long-term support approach to leadership development.
M3. A leadership development program can create opportunities for transformational learning of leadership thinking and skills.	Affirms with Mezirow (1978); Kitchenham (2008); and Merriam et al. (2007) as related to transformational learning.
	Affirms with Brown and Posner (2001) designing leadership development programs for transformational learning.
	Affirms with Burns (1978); Bass (1990); Bass et al. (2003) as related to the value of transformational leadership skills and behaviors.
	Adds and affirms to Mason et al. (2014) in that transformational leadership skills can be learned and developed.
3.1 The learning process can involve the sharing of experiences.	Affirms with Merriam (2004) in that sharing experiences is part of the transformational learning process.
experiences.	Affirms with Taylor et al. (2012) in that transformational group learning involves sharing experiences.
	Affirms and adds to Guldberg (2008) in that dialogue among peers creates new thinking and growth.
3.2 An important part of the learning process can include self-awareness and reflection.	Affirms with Burns (1978) in the importance of self awareness and personal mastery as aspect transformational leadership.
	Affirms with Taylor et al. (2012) in that transformational group learning involves self-awareness and reflection.
	Affirms with Mezirow et al. (2009) in that peers provide a reflective lens from which to learn from.
	Adds and affirms to Edmonstone (2011) in that dialogue in peer groups, coaching, and developmental relationships emphasize leadership development reflection.
M4. Listening and hearing others experiences and perspectives can create new	Affirms with Mezirow (1978); Kitchenham (2008); and Merriam et al. (2007) as related to transformational learning.
understanding and	Affirms with Burns (1978) in the aspect of transformational

Table 8 - continued

Gruber (2016) Major Findings	Previous Research	
transformation.	leaders learning for others experiences.	
	Affirms with Brown and Posner (2001) in that leaders learn from others' perspectives.	
	Affirms with Taylor et al. (2012) in that transformational group learning involves sharing experiences.	
	Affirms with Mezirow et al. (2009) in that peers provide a reflective lens from which to learn from.	
	Affirms with Lawrence (2002) and Teitel (2009) in that cohorts can foster peer knowledge and wisdom sharing through sharing perspectives and dialogue.	
m1. The role of senior leaders to a program and their impact on participants is significant.	Adds and affirms to Barbuto (2005) and Shin and Zhou (2003) in the impact that leaders and their behaviors have on their employees.	
	Affirms with Brown and Posner (2001) in that leaders learn from the experiences of their role models.	
m2. Time was a challenge for many participants	Affirms with Groves (2007) in that senior leaders are an aspect of leadership development. No literature found	

Implications and Future Research

Healthcare leaders and leadership development professionals should examine how they use peer learning as a leadership development approach. While the concept of peer learning is not new and is woven throughout the literature, it has been the subject of very little research and scrutiny. Leadership development can be expensive and the value difficult to evaluate (Peters, Baum, & Stephens, 2011). Healthcare leaders, as well as those responsible for professional development, may use the findings in my study to determine if the role of peer learning in their leadership development plans should be changed to produce new value. At the same time, questions of power and influence should be considered when promoting peer learning as a means

of leadership development. Further research could be conducted to learn the impact of power, roles, and influence on peer learning relationships.

The role of peer learning as an aspect of transformational learning and transformational leadership development is found throughout relevant research (Brookfield, 1984; Guglielmino & Guglielmino, 2001; Mezirow, 1991; Nesbit, 2012). Brown and Posner (2001) identified the importance of creating an atmosphere for transformational learning in building leadership development programs that desire to foster transformational leadership. Healthcare leaders and professional development designers may use the findings in my study to consider how to design a program that creates a sense of community to support peer learning in their leadership development plans. Critical self-reflection to develop new insights can lead to transformational leadership experiences and development (Brown & Posner, 2001). Dialogue with peers creates a means for this leadership development and transformation (Nesbit, 2012; Taylor et al., 2012). Although aspects of my study could be viewed as a program evaluation, its findings and implications are far broader. By using the findings of my study, healthcare leaders and leadership development professionals can learn about the key learning elements that were in place to support peers challenging each other's beliefs and ideas to learn new perspectives. Further research into the environment and activities that facilitate peer learning would provide addition evidence for leadership development professionals.

The sense of community and feeling of belonging were findings in my study. "Community is something more than the sum of its parts, its individuals members" (Peck, 2010, p.1). Professionals creating leadership development programs may use my study to consider how to design an environment the builds a sense of community and feelings of belonging. Common language, shared purpose, trust and support are just a few of the intertwined aspects of humanity that take place in a community. In my study, individuals felt supported and as if they were not

alone in their efforts to learn and understand new perspectives. Further study into the impact of a sense of community in leadership development may prove valuable.

In healthcare, the peer-based, cohort approach to leadership development is based on the concepts that professional development can be more efficient in groups, some people learn best in group settings, and there is ongoing support for learning from the group (Sharlow et al., 2009). Professional development techniques are most effective when participants have a shared goal, desire to contribute, and are open to authentic, honest sharing (Collay et al., 1998). The leadership development elements studied in my research further support evidence that small groups create an atmosphere of collegial learning and support. Peers acted as models and provided encouragement for each other to learn and grow. Healthcare leaders and leadership development professional may find it helpful to use the findings of this study when considering a cohort approach to leadership development and considering the elements that would be beneficial in its design. It would also be useful to have further investigation into the best practices of peer-based, cohort leadership development learning programs for healthcare professionals. The role of senior leaders within these programs would also benefit from further research on the impact and return on investment.

The need for transformational healthcare leaders and effective leadership development in healthcare is becoming critical to the healthcare industry (McAlearney, 2005). Evidence suggests that key aspects of healthcare leadership development should include workplace mentors, peer supports, leadership development, and reflective time to help create and sustain leadership learning (Jones, 2005). Cohort-based programs can offer the opportunity for peers to learn through dialogue, reflection, and skills practice that lead to new perspectives and understandings (Gilly, 2003; Lawrence, 2002; Teitel, 2009). My study offers findings on the role of peer interactions and learning as an important aspect of the leadership development process of

transformational healthcare leaders. It could be built upon by following the individuals in the cohort leadership program to learn how the leadership career paths of the participants develop over time. Additionally, a transformational leadership scale could be used pre- and post-program to quantifiably measure the change in transformational leadership qualities in participants. Also, more could be learned about the type of individual that is most impacted by the peer learning process. Further research into the impact of the sense of community and feeling of belonging among leadership development groups could provide value. As well as further exploration into the significance of senior leadership involvement in leadership development programs could build on my study. Finally, further study could be conducted on the sense of lacking time to develop as a leader to build upon my findings.

Chapter V Concluding Thoughts

My study explored the topic of peer learning as a leadership development approach in a formal cohort leadership development program for emerging healthcare leaders. Study findings supported past research that peer learning is a critical aspect of transformative learning and leadership development through the sharing of reflections and perspectives from peers. Findings also supported past research that peer learning focuses on cooperation instead of competition, and can be deeply impactful for individuals. Deep trust and respect can be developed from the varied experiences, perspectives, and backgrounds that peers share with one another (Boud et al., 1999). Sharing experiences and having time for reflective processing aids leaders in understanding events from new perspectives and creating new insights about their own leadership development needs (Nesbit, 2012). The opportunity to learn from peers provides relevant and practical assistance for leaders from other leaders.

My inquiry considered how a leadership development program was designed and implemented to support peer learning as well as how participants experienced the peer learning

process. Reviewing the literature, I considered peer learning behaviors and actions as categories to analyze my data. During this process, new categories that represented peer learning were found. These new categories included learning change management, senior leaders within peer learning, and time challenges/commitment. It adds to the body of research on peer learning and leadership development in several ways. First, my study offers further evidence of the role of peer learning in transformational leadership development. Next, my study provides a description of three leadership development elements that included peer learning. Additionally, my research further reveals the value of the learning environment and the sense of belonging to a community that can be created in a leadership development program. Further, my research reveals the significance that developing leaders place on the involvement of organizational senior leaders. It also broadens the traditional definition of peers to include learning from individuals in various organizational roles including senior leadership. Finally, my study provides insights into the challenge of time when developing as a leader as well as the value participants found from committing time to the peer learning process. These findings were consistent across the three cohorts I studied.

In closing, while my study affirmed the role of peer learning as a means of leadership development, the most meaningful finding for me was the role of belonging to a community. The participants of this study seemed to be transported out of their normal worlds and mundane work to a special, life-altering time period of new relationships and experiences. Through the deeply trusting and caring relationships that were built over time, participants were able to share authentically at a new and transformative level. As a result, they learned and grew as individuals as well as leaders. It was fascinating to learn about and witness this spirit of community in a leadership development program.

REFERENCES

- Allen, S. J., & Hartman, N. (2008). Leader development: An exploration of sources of learning. *Organizational Development Journal*, 26(2), 75-87.
- Ashford, S. J., & DeRue, D. S. (2012). Developing as a leader: The power of mindful engagement. *Organizational Dynamics*, 41, 146-154.
- Avolio, B. J. (1999). Full leadership development: Building the vital forces in organizations.

 Thousand Oaks, CA: Sage Publications, Inc.
- Barbuto, J. E. (2005) Motivation and transactional, charismatic, and transformational leadership:

 A test of antecedents. *Journal of Leadership and Organizational Studies*, 11(4), 26-40.
- Bass, B. M. (1985). *Leadership and performance beyond expectation*. New York, NY: Free Press.
- Bass, B. M. (1990) From transactional to transformational leadership: Learning to share the vision. *Organizational Dynamics, Winter*, 19-31.
- Bass, B. M., & Avolio, B. J. (1993). Transformational leadership: A response to critiques.

 Leadership theory and research: Perspectives and directions (pp. 49 80). San

 Diego, CA: Academic Press.
- Bass, B. M., Avolio, B. J., Jung, D. I., & Benson, Y. (2003). Predicting unit performance by assessing transformational and transactional leadership. *Journal of Applied Psychology*, 88(2), 207-218.
- Bass, B. M., & Riggio, R. E. (2006). *Transformational Leadership*. New York, NY: Psychology Press.
- Bass, B. M., & Steidlmeier, P. (1999). Ethics, character and authentic transformational leadership. *Leadership Quarterly*, 10(2), 181-217.

- Baumgartner, L. M., Lee, M. Y., Birden, S., & Flowers, D. (2003). *Adult learning theory: A primer*. Columbus, OH: Center on Education and Training for Employment, 392.
- Bergman, D., Fransson-Sellgren, S., Wahlstrom, R., & Sandahl, C. (2009). Healthcare leadership. *Leadership in Health Services*, 22(2), 161-175.
- Block, L. A., & Manning, L. J. (2007). A systemic approach to developing frontline leaders in healthcare. *Leadership in Health Services*, 20(2), 85-96.
- Boaden, R. J. (2006). Leadership development: Does it make a difference. *Leadership & Organization Development Journal*, 21(1), 5-27.
- Bodinson, G. W. (2005). Change heathcare organizations from good to great. *Quality Progress*, November, 22-29.
- Bono, J. E., & Judge, T. A. (2004). Personality and transformational and transactional leadership: A meta-analysis. *Journal of Applied Psychology*, 89(5), 901-910.
- Boud, D., Cohen, R., & Sampson, J. (1999). Peer learning and assessment. *Assessment & Evaluation in Higher Education*, 24(4), 413-426.
- Brookfield, S. (1984). Self-directed adult learning: A critical paradigm. *Adult Education Quarterly*, 35(59), 59-69.
- Brown, L. M., & Posner, B. Z. (2001). Exploring the relationship between learning and leadership. *Leadership & Organization Development Journal*, 22(6), 274-280.
- Burns, J. M. (1978). Leadership. New York, NY: Harper & Row, Publishers.
- Carr, W. (1996). Learning for leadership. *Leadership & Organization Development Journal*, 17(6), 46-52.
- Center for Creative Leadership. (2010). Addressing the leadership gap in healthcare: What's needed when it comes to leader talent? Retrieved from www.ccl.org/leadership/pdf/.../addressingleadershipGapHealthcare.pdf.

- Center for Creative Leadership. (2011). *Collaborative healthcare leadership: A six-part model* for adapting and thriving during a time of transformative change. Retrieved from www.ccl.org/Leadership/landing/healthcare/library.aspx.
- Collay, M., Dunlap, D., Enloe, W., & Gagnon, G. W. (1998). *Learning circles: Creating conditions for professional development*. Thousand Oaks, CA: Corwin Press, Inc.
- Conger, J. A. (1992). Learning to lead: The art of transforming managers into leaders, San Francisco, CA: Jossey-Bass.
- Creswell, J. W. (2009). *Research design: Qualitative, quantitative, and mixed methods approaches* (3rd ed.). Thousand Oaks, CA: Sage Publications.
- Creswell, J. W. (2013). *Qualitative inquiry & research design: Choosing among five approaches* (3rd ed.). Los Angeles, CA: Sage Publications.
- Davenport, J., & Davenport, J.A. (1985). A chronology and analysis of the andragogy debate. *Adult Education Quarterly*, 35(152), 152-159.
- Day, D. V. (2001). Leadership development: A review in context. *The Leadership Quarterly*, 11(4), 581-613.
- Day, D. V., & Harrison, M. M. (2007). A multilevel, identity-based approach to leadership development. *Human Resource Management Review*, 17, 360-373.
- Degeling, P., & Carr, A. (2004). Leadership for the systemization of health care: The unaddressed issue in health care reform. *Journal of Health Organization and Management*, 18(6), 399-414.
- Dirkx, J. M., Mezirow, J., & Cranton, P. (2006). Musings and reflections on the meaning, context, and process of transformative learning: A dialogue between John M. Dirkx and Jack Mezirow. *Journal of Transformative Education*, 4(123), 123-139.
- Dolan, T. C. (2010). Leadership skills for healthcare reform. *Healthcare Executive*, 25(5), 6.

- Doody, M. (2002). Future healthcare leaders you need to know. *Healthcare Financial Management*, *56*(11), 98-100.
- Edmondson, D. R., Boyer, S. L., & Artis, A. B. (2012). Self-directed learning: A meta-analytic review of adult learning constructs. *International Journal of Education Research*, 7(1), 40-48.
- Edmonstone, J. (2011). Developing leaders and leadership in health care: A case for rebalancing? Leadership in Health Services, 24(1), 8-18.
- Edmonstone, J., & Western, J. (2002). Leadership development in health care: What do we know? *Journal of Management in Medicine*, 16(1), 34-47.
- Ellinger, A. D. (2004). The concept of self-directed learning and its implications for human resource development. *Advances in Developing Human Resources*, *158*, 158-177.
- Field, L. (1989). An investigation into the structure, validity, and reliability of Guglielmino's self-directed learning readiness scale. *Adult Education Quarterly*, *39*(3), 125-139.
- Ford, J. (2015). Going beyond the hero in leadership development: The place of healthcare context, complexity and relationships. *International Journal of Health Policy and Management*, 4(4), 261-263.
- Ganz, M. (2010). Leading change: Leadership, organization, and social movements. Boston, MA: Harvard Business Press.
- Gay, L. R., Mills, G. E., & Airasian, P. (2012). *Educational research: Competencies for analysis and applications* (10th ed.). Boston, MA: Pearson.
- Gilly, M. S. (2003). The heart of adult peer-group learning: Living the learning together.

 Midwest Research to Practice Conference in Adult, Continuing, and Community

 Education.

- Grandy, G., & Holton, J. (2013). Leadership development needs assessment in healthcare: A collaborative approach. *Leadership & Organization Development Journal*, 34(5), 427-445.
- Greenlee, B. J., & Karanxha, Z. (2010). A study of group dynamics in educational leadership cohort and non-cohort groups. *Journal of Research on Leadership Education*, *5*(11), 357-382.
- Groves, K. S. (2007). Integrating leadership development and succession planning best practices. *Journal of Management Development*, 26(3), 239-260.
- Guglielmino, L. M. (1977). *Development of the self-directed learning readiness scale*. (Doctoral dissertation, University of Georgia).
- Guglielmino, P. J., & Guglielmino, L. M. (2001). Moving toward a distributed learning model based on self-managed learning. *SAM Advanced Management Journal*, 66(3), 36-43.
- Guldberg, K. (2008). Adult learners and professional development: Peer-to-peer learning in a networked community. *International Journal of Lifelong Education*, *27*(1), 35-49.
- Hewison, A., & Griffiths, M. (2004). Leadership development in health care: A word of caution. *Journal of Health Organization and Management, 18*(6), 464-473.
- Hinkin, T. R., & Tracey, J. B. (1999). The relevance of charisma for transformational leadership in stable organizations. Journal of *Organizational Change Management 12*(2), 105-119.
- Holton, E. F., Swanson, R. A., & Naquin, S. S. (2001). Andragogy in practice: Clarifying the andragogical model of adult learning, *Performance Improvement Quarterly*, *14*(1), 118-143.
- Imel, S. (2002). Adult learning in cohort groups. *ERIC Practice Application Brief, 24*. Jarousee, L. (2011). Leadership in the era of reform. *Trustee, 64*(1), 30-31.

- Jarvis, C., Gulati, A., McCririck, & Simpson, P. (2013). Leadership matters: Tensions in evaluating leadership development. Advances in Developing Human Resources, 15(1), 27-45.
- Ji, C. C., & Chuang, C. M. (2011). Leadership, peer relationship, and transformational organizational culture: A relational approach to a Taiwan college music faculty sample. *International Journal of Music Education*, 30(1), 18-31.
- Jones, K. (2005). Leading an empowered organization (LEO): Does the course work? *British Journal of Community Nursing*, 10(2), 92-96.
- Kitchenham, A. (2008). The evolution of John Mezirow's transformative learning theory. *Journal of Transformative Education*, 6(104), 104-123.
- Komives, S. R., Owen, J. E., Longerbeam, S. D., Mainella, F. C., & Osteen, L. (2005).Developing a leadership identity: A grounded theory. *Journal of College Student Development*, 46(6), 593-611.
- Kouzes, J. M., & Posner, B. Z. (2002). *The leadership challenge*. San Francisco, CA: Jossey-Bass.
- Kram K. E., & Isabella, L. A. (1985). Mentoring alternations: The role of peer relationship in career development. *Academy of Management Journal*, 28(1), 110-132.
- Kunreuther, F. (2005). Up next: Generational change and the leadership of nonprofits. *Executive Transitions Monograph Series*, 4.
- Lawrence, R. L. (2002). A small circle of friends: Cohort groups as learning communities. *New Directions for Adult and Continuing Education*, 95, 83-92.
- Leonard, H. S., & Lang, F. (2010). Leadership development via action learning. *Advances in Developing Human Resources*, 12(2), 225-240.

- Lowe, K. B., Kroeck, K. G., & Sivasubramaniam, N. (1996). Effectiveness correlates of transformational and transactional leadership: A meta-analytic review of the MLQ literature. The *Leadership Quarterly*, *7*(*3*), 385-415.
- Marshall, C., & Rossman, G. B. (2011). *Designing qualitative research* (5th ed.). Los Angeles, CA: Sage Publications.
- Mason, C., Griffin, M., & Parker, S. (2014). Transformational leadership development:

 Connecting psychological and behavioral change. *Leadership & Organization*Development Journal, 35(3), 174-194.
- Mavrinac, M. A. (2005). Transformational leadership: Peer mentoring as a value-based learning process. *Libraries and the Academy*, *5*(3), 391-404.
- McAlearney, A. S. (2005). Exploring mentoring and leadership development in health care organizations. *Career Development International*, 10(6/7), 493-511.
- McAlearney, A. S. (2006). Leadership development in healthcare: A qualitative study. *Journal of Organizational Behavior*, 27, 967-982.
- McCallum, S., & O'Connell, D. (2009). Social capital and leadership development: Building stronger leadership through enhanced relational skills. *Leadership and Organization Development Journal*, 30(2), 152-166.
- McDermott, A., Kidney, R., & Flood, P. (2011). Understanding leader development: Learning from leaders. *Leadership and Organizational Development Journal*, 32(4), 358-378.
- McGonagill, G., & Reinelt, C. (2011). Leadership development: a framework for supporting strategic investments. *The Foundation Review*, *2*(4), 57-72.
- McPhail, C. J., Robinson, M., & Scott, H. (2008). The cohort leadership development model: Student perspectives. *Community College Journal of Research and Practice*, *32*, 362-374.

- Merriam, S. B. (2001). Andragogy and self-directed learning: Pillars of adult learning theory.

 New Directions for Adult and Continuing Education, 89, 3-13.
- Merriam, S. B. (2004). The role of cognitive development in Mezirow's transformational learning theory. *Adult Education Quarterly*, *55*(60), 60-68.
- Merriam, S. B, Caffarella, R. S., & Baumgartner, L. M. (2007). *Learning in adulthood: A comprehensive guide*. San Francisco, CA: Jossey-Bass.
- Mezirow, J. (1978). Perspective transformation. Adult Education, 28 (2), 100 109.
- Mezirow, J. (1985). A critical theory of self-directed learning. *New Directions for Continuing Education*, 25, 17-30.
- Mezirow, J. (1991). *Transformative dimensions of adult learning*. San Francisco, CA: Jossey-Bass.
- Mezirow, J., Taylor, E. W., & Associates. (2009). *Transformative learning in practice: Insights from community, workplace, and higher education*. San Francisco, CA: Jossey-Bass.
- Nesbit, P. L. (2012). The role of self-reflection, emotional management of feedback, and self-regulation processes in self-directed leadership development. *Human Resource Development Review*, 11(203), 203-226.
- Peck, M. Scott. (2010). The different drum: Community making and peace. Simon and Schuster.
- Peters, L., Baum, J., & Stephens G. (2011). Creating ROI in leadership development.

 Organizational Dynamics, 40, 104-109.
- Rachal, J. R. (2002). Andragogy's detectives: A critique of the present and a proposal for the future. *Adult Education Quarterly*, *52*(210), 210-227.
- Raelin, J. (2011). From leadership-as-practice to leaderful practice. *Leadership*, 7(2), 195-211.

- Scribner, J. P., & Donaldson, J. F. (2001). The dynamics of group learning in a cohort: From nonlearning to transformative learning. *Educational Administration Quarterly*, *37*(5), 605-636.
- Seed, A. H. (2008). Cohort building through experiential learning. *Journal of Experiential Education*, 31(2), 209-224.
- Senge, P. M. (1990). *The fifth discipline: The art and practice of the learning organization*. New York: Doubleday/Currency.
- Sharlow, J., Langenhoff, P., Bhatti, A., Spiers, J., & Cummings, G. (2009). Learning together: A cohort approach to organizational leadership development. *Leadership in Health Services*, 22(4), 317-328.
- Shin, S. J., & Zhou J. (2003). Transformational leadership, conservation, and creativity: Evidence from Korea. *The Academy of Management Journal*, 46(6), 703-714.
- Snook, S., Nohria, N., & Khurana, R. (2012). Teaching leadership: Advancing the field. *The handbook for teaching leadership. Los Angeles: Sage*.
- Spaid, R., & Duff, E. D. (2009). Working adults in accelerated cohorts: More than a learning community. *The Journal of Continuing Higher Education*, *57*, 104-109.
- Stockdale, S. L., & Brockett, R. G. (2011). Development of the PRO-SDLS: A measure of self-direction in learning based on the personal responsibility orientation model. *Adult Education Quarterly*, 61(2), 161-180.
- Taylor, E. W. (2007). An update of transformative learning theory: A critical review of the empirical research (1999-2005). *International Journal of Lifelong Education*, 20(2), 173-191).
- Taylor, E. W. (2008). Transformative learning theory. New Directions for Adult and Continuing Education, 119, 5-15.

- Taylor, E. W. (2009). Fostering transformative learning. *Transformative learning in practice: Insights from community, workplace, and higher education*, 3-17.
- Taylor, E. W., Cranton, P., & Associates. (2012). *The handbook of transformative learning: Theory, research, and practice*. San Francisco, CA: Jossey-Bass.
- Teitel, L. (2009). Understanding and harnessing the power of the cohort model in preparing educational leaders. *Peabody Journal of Education*, 72(2), 66-85.
- Thrall, T. (2001). A leadership vacuum. *Hospitals and Health Networks*, 75(9), 44-47.
- Thomas, R. J., Jules, C., & Light, D. A. (2012). Making leadership development stick. *Organizational Dynamics*, 41, 72-77.
- Topping, K. J. (2005). Trends in peer learning. Educational Psychology, 25(6), 631-645.
- Tourish, D. (2012). Developing leaders in turbulent times: Five steps towards integrating soft practices with hard measures of organizational performance. *Organizational Dynamics*, *41*, 23-31.
- Wessel Krejci, J., & Malin, S. (1997) Impact of leadership development on competencies.

 Nursing Economics, 15(5), 235-241.
- Yukl, G. (2002). Leadership in organizations. Saddle River, NJ: Prentice Hall, Inc.

Appendix A

Initial and Follow-Up Recruitment Emails

Initial Email Invitation to Participate

My name is Melinda Gruber and I am completing my doctoral dissertation from Western Michigan University. The results of this study will be used for my dissertation and may also be presented to the senior leadership team at a mid-sized healthcare system. It may also be used in the future for publication.

I am sending you this email to invite you to participate in my study because you are currently or were part of the Leading Towards the Future program. If you volunteer for this study, it will involve a private interview with me lasting approximately one hour. The interview will focus on your thoughts about your leadership development and the role of peer learning in specific elements of the Leading Towards the Future program. We will schedule a time and place to meet at your convenience. All the information collected from you is confidential. Your name will not appear on any documents in which this information is recorded.

This is not mandatory and others within the organization will not know whether or not you participated in the interview. Further, your decision to participate or not will in no way be used to evaluate your performance in the organization.

Thank you for your consideration. Please respond to this email within a week to let me know if you are interested in learning more and potentially volunteering for my study.

Follow-up Email

My name is Melinda Gruber and I am completing my doctoral dissertation from Western Michigan University. The results of this study will be used for my dissertation and may also be presented to the senior leadership team at a mid-sized healthcare system. It may also be used in the future for publication.

Last week you were sent an email inviting you to participate in my research project involving the Leading Towards the Future program. If you volunteer for this study, it will involve a private interview with me lasting approximately one hour. The interview will focus on your thoughts about your leadership development and the role of peer learning in specific elements of the Leading Towards the Future program. We will schedule a time and place to meet at your convenience. All the information collected from you is confidential. Your name will not appear on any documents in which this information is recorded.

This is not mandatory and others within the organization will not know whether or not you participated in the interview. Further, your decision to participate or not will in no way be used to evaluate your performance in the organization.

Thank you for your consideration. Please respond to this email within a week to let me know if you are interested in learning more and potentially volunteering for my study.

Melinda Gruber

Appendix B

WMU HSIRB Approval and Interview Consent Form

WESTERN MICHIGAN UNIVERSITY



Human Subjects Institutiona

Date: December 22, 2015

To: Louann Bierlein Palmer, Principal Investigator

Melinda Gruber, Student Investigator for dissertation

From: Amy Naugle, Ph.D., Chair My Naugle

Re: HSIRB Project Number 15-12-34

This letter will serve as confirmation that your research project titled "Exploration of Ped Learning in a Formal Cohort Healthcare Leadership Development Program" has been **approved** under the **expedited** category of review by the Human Subjects Institutional Review Board. The conditions and duration of this approval are specified in the Policies of Western Michigan University. You may now begin to implement the research as described in the application.

Please note: This research may **only** be conducted exactly in the form it was approved. You must seek specific board approval for any changes in this project (e.g., *you must request a post approval change to enroll subjects beyond the number stated in your application under "Number of subjects you want to complete the study)." Failure to obtain approval for changes will result in a protocol deviation. In addition, if there are any unanticipated adverse reactions or unanticipated events associated with the conduct of this research, you should immediately suspend the project and contact the Chair of the HSIRB for consultation.*

Reapproval of the project is required if it extends beyond the termination date stated below.

The Board wishes you success in the pursuit of your research goals.

Approval Termination: December 21, 2016

Western Michigan Univer: H.S.I.R.B. Approved for use for one year from

DEC 21 2015

HSIRB Office

Western Michigan University Department of Education Leadership

Principal Investigator: Dr. Louann Bierlein Palmer

Student Investigator: Melinda M. Gruber

Title of Study: Exploration of Peer Learning in a Formal Cohort Healthcare Leadership

Development Program

You have been invited to participate in this research study that also serves as Melinda M. Gruber's dissertation for the requirements of the Degree of Doctor of Philosophy in Education Leadership. This consent document will explain the purpose of this research project and will cover all of the time commitments, the procedures used in the study, and the risks and benefits o participating in this research. Please carefully read this consent form and ask any questions if yo need more clarification.

What are we attempting to learn from this study?

This research is intended to explore information that adds to the body of knowledge on peer learning and leadership development practices.

Who participates in this study?

Twelve Leading Toward the Future participants including three from within each of the current cohorts and three from the previous cohort, the program facilitator, Chief Learning Officer and a senior leader/mentor will be included in the study. Subjects must be employed by Lakeland Health System and have either completed the program or are currently involved in the program with the intent to complete it.

Where will this study take place?

Interviews will place at convenient locations in St. Joseph, MI.

What is the time commitment for participating in this study?

The interview with you should take no longer than one hour. We will only meet one time for you to complete the interview.

What will you be asked to do if you participate in this study?

You will be asked to participate in one in-depth interview, no more than one hour in length. The interview questions will focus on key learning elements of the Leading Toward the Future program and your learning experiences with your cohort. Your interview will be audio recorded so that your comments can be transcribed. Once it is transcribed, you will be asked to review the transcription to ensure that it is accurate. Your name and identity will remain confidential for an results of the study published or presented.

Western Michigan University
H.S.I.R.B.
Approved for use for one year from this dat

DEC 21 2015

HSIRB Office

What if you want to stop participating in the study?

You can choose to stop participating in the study at any time for any reason. You will not suffer any prejudice or penalty by your decision to stop your participation. You will experience no consequences if you choose to withdraw from this study. The investigator can also decide to stop your participation in the study without your consent.

If you have any questions prior to or during the study, you can contact the student investigator, Melinda Gruber (269-313-2514 or Melinda.m.gruber@wmich.edu or primary investigator, Dr. Louann Bierlein Palmer at l.bierleinpalmer@wmich.edu. You may also contact the Chair, Human Subjects Institutional Review Board (269-387-8293) or the Vice President for Research (269-387-8293) if questions or problems arise during the course of the study.

This consent document has been approved for use for one year by the Human Subjects Institutional Review Board (HSIRB) as indicated by the stamped dated and signature of the board chair in the upper right corner. Do not participate in this study if the stamped date is older than one year.

I have read this informed consent document. The riagree to take part in this study.	sks and benefits have been explained to me. I
Please Print Your Name	
Participant's Signature	Date
Researcher's Signature	Date

Appendix C

Permission from Host Site Program Facilitator

November 23, 2015

To Whom It May Concern:

Melinda Gruber has permission to complete research for hor dissertation entitled: Exploration of Peer Loaming in a Formal Cohort Healthcare Leadership Development Program at Lakeland Health System in St. Joseph, Ml. This includes the observation of a Leading Towards the Future session. She will be given access to aggregate program evaluation data and program planning materials and session outlines.

Gwen Day Coordinator/Consultant, Organization Development Lakeland University Lakeland Health 1234 Napier Avenue St. Joseph, MI 49085



Appendix D

"Leading Toward the Future" A Leadership Development Program
Executive Summary

"Leading Toward the Future" – A Leadership Development Program Executive Summary

Purpose/Goals

The purpose of this intensive and comprehensive leadership development initiative is to:

- Provide ongoing development opportunities to align leadership attitudes, behaviors and competencies with the organization's strategic direction and strategies and future leadership requirements
- Impact succession planning by developing high potential leaders who are competent, creative and aligned to the critically important business of the organization

The goals for this program are to:

- Grow leaders' capabilities to meet future leadership requirements, aligned to the organizations Strategic Goals & Objectives
- Align leadership attitudes, behaviors and competencies with the organization's Core Values, strategies and direction
- Utilize experiential learning methods combined with practical application and coaching
- Create interaction opportunities with Senior Leadership through use of Leader-Teachers

Leader-Teachers

Why use leaders as teachers?

- 1. Helps drive business results by ensuring strategic business alignment between senior leaders, learning programs, and learners.
- 2. Stimulates the learning and development of the learners. This occurs by role modeling, creating a safe environment for learning and feedback, and building networks.
- 3. Improves the leadership skills of leader-teachers by:
 - a. Sharpens their ability to articulate ideas, strategies, and values
 - b. Models desired behaviors
 - c. Moves out of their comfort zone themselves and experience extended personal development (role modeling)
 - d. Expands their own networks by meeting and interacting with learners not in their business unit
- 4. Strengthens the organizational culture, communications, and commitment.
- 5. Promotes positive business and organizational change.
- 6. Reduces costs by leveraging top talent in creative ways.

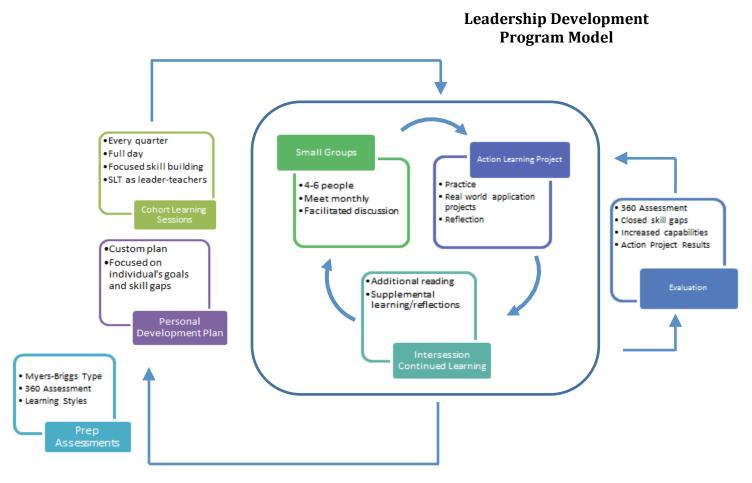
Program Structure

This is an intensive leadership development program designed to develop both a breadth and depth of skills and capabilities for individual leaders' personal development and to impact the organization, not just following the completion of the program, but during the program itself.

It has four elements (see model below):

- A customized, personal development plan for each participant focused on their career aspirations and developmental needs based on a 360 assessment and other assessments
- 2. Cohort learning-based skill building sessions taught by the organization's leaders in partnership with the organization's education team
- 3. Continued intersession learning through the use of small coaching groups, action learning projects, and learning assignments
- 4. Program evaluation, involving rigorous metrics and a follow-up 360 assessment

Each element is described in detail on the next page.



Personal Development Plan

A personal development plan will be co-developed with each participant based on their career aspirations, personal feedback from a 360 degree leadership skills assessment, and recent performance review information.

Cohort Learning Sessions

The learning sessions will be full-day sessions once quarterly for 18 months (skipping October every year due to performance management responsibilities). The content will be focused on specific

concepts, tools and practices to develop the targeted leadership competencies. Sessions will be co-facilitated by "leader-teachers" and the organization's learning professionals. Learners will have the opportunity to test their ideas and creatively explore possible solutions to problems and challenges they face with leader-teachers and learning professionals who can serve as short-term coaches and advisors in and outside the classroom.

Intersession Learning and Coaching

Competence cannot be developed through classroom teaching and practice alone. A great deal of learning will happen in between the cohort learning sessions through facilitated discussions and coaching in small groups, practice through active learning (real world) projects, and additional reading, writing and reflection assignments.

Small Group Coaching

Each learner meets with their small group of 6-8 learners for monthly progress checks, facilitated discussions, coaching and relationship building. The discussion is facilitated by a learning professional (perhaps with a senior leader partner for the first session – graduate leader in subsequent sessions).

Active Learning (Real World) Projects

Active learning projects can reap the greatest potential benefit for the organization (and the learners). Each learner will identify a real world project (with the assistance and support of their manager/director and SLT member) where they can practice newly learned concepts and tools they have identified in their personal development plan.

Additional Assignments

Additional reading, writing and reflection assignments will also be required of learners during the intersession months. This will include books, articles, and project progress reports and reflections.

Evaluation

To ensure success, the program will be evaluated using quantitative and qualitative metrics and focus on both the participants and the organizational outcomes.

Outcomes	Effectiveness	Efficiency	
Leader engagement	Business alignment	Number of participants	
Leader retention	Program quality/Value	% of employees in program	
Associate engagement	Knowledge gain	Total investment	
Leader performance changes	Application to job	Investment/participant	

Other Leadership Programs

Currently, the organization offers several leadership development programs, divided into three segments: Leadership Orientation, Overall Leadership Development, and Targeted Leadership Development.

Lakeland Leadership Institute

Leadership Orientation

- Lakeland Leadership Academy
- Orientation Coaching
- New Leader Cohort Meetings

Overall Leadership Development

- Leadership Development Series
- New Leader Cohort Meetings
- Leadership Book Club
- Harvard ManageMentor

Targeted Leadership Development

- Stepping Up to Leadership (I & II)
- Leading Toward the Future

Management Essentials: Building the Foundation Leadership Revitalization: Fulfilling Lakeland's Vision: High

The Role of the Senior Leadership Team

To successfully create and implement this initiative requires not only commitment and support from the Senior Leadership Team (SLT), but their integral involvement in several ways:

- 1. Enable the development and growth of other leaders by creating the expectation of leadership development as a standard for all leaders
- 2. Identify key SLT members to sit on the Leadership Development Advisory Council (LDAC) with other Lakeland leaders
- 3. Participate in the leadership development program as a part of their own learning journey
- 4. Continue the learning journey by committing to grow and share their own leadership capabilities through becoming a *leader teacher*, coach and/or mentor with appropriate preparation and planning

Appendix E

Host Site HSIRB Approval

Lakeland Hospitals Niles and St. Joseph IRB #1

To:

P.I.: Louann Bierlein Palmer, Ed.D.

Student Investigator: Melinda M. Gruber

Re:

Exploration of Peer Learning in a Formal Cohort Healthcare Leadership Development

Program

Date:

January 11, 2016

This is to inform you Lakeland Hospitals Niles and St. Joseph, IRB# 1 has approved the above research study to be conducted at Lakeland Health and has approved Western Michigan University IRB to be the IRB of Record.

According to WMU IRB the approval period is from 12/21/15 to 12/21/16. Your Lakeland IRB study number is MMMC# 1562. Please be sure to reference this number in any correspondence with this IRB.

Lakeland Hospitals Niles and St. Joseph, IRB #1 must be copied on all material.

All protocol amendments and changes to approved research must be submitted to the IRB and not be implemented until approved by the IRB except where necessary to eliminate apparent immediate hazards to the study subjects.

Completion, termination, or if not renewing the project - send a final report upon completion of the study.

The IRB operates in compliance with GCP and applicable laws and regulations, to the best of its knowledge. The IRB consists of members of the clinical and scientific communities, non-scientists, as well as members of the community as required by Federal regulations to assure a fair and thorough review process.

Please call me if you have any questions about the terms of this approval.

The IRB wishes you success with this research.

Jann Totzke, IRB-Chairperson

Lakeland Hospitals Niles and St. Joseph, IRB# 1

Appendix F

Participant Interview Questions and Protocol

Participant from Current Cohort Interview Questions and Protocol

Interviewee Number:

Date: Time: Location:

Interviewer:

You have been invited to participate in the research project entitled: Exploration of Peer Learning in a Formal Cohort Healthcare Leadership Development Program. This research is intended to gather information that adds to the body of knowledge of leadership development and peer learning.

Demographic Questions:

Male/Female: Age: Ethnicity:

Current job title: Years worked in this position:

Level of education:

- 1. What do you think is the purpose(s) of the cohort aspect of this leadership development program, Leading Toward the Future?
- 2. At this point in the program, how do you think the following elements are contributing to your growth as a healthcare leader?
 - cohort learning sessions
 - small group sessions
 - action learning projects
- 3. Describe situations during each of the following elements in which you have opportunities to learn from your peers.
 - cohort learning sessions
 - small group sessions
 - action learning projects
- 4. At this point in the program, are any of these items taking place during the cohort learning sessions, small group sessions, or action learning projects? If participant answers yes, ask them: describe when and how it affected your growth as a leader.

YES NO

- Participants share ideas, knowledge, and experiences
- Participants provide encouragement to each other
- Participants hear perspectives different than their own
- Participants seek practical assistance from each other
- Participants give and receive feedback

- Participants build trusting relationships
- Participants engage in reflective processing
- 5. Are you experiencing any changes from building relationships with others during the cohort sessions of the Leading Toward the Future program? Have any of these changes affected your level of engagement at work? Please explain.
- 6. Are you experiencing any challenges that interfere with your level of participation and involvement with others during the cohort sessions of the Leading Toward the Future program?
- 7. Do you currently voluntarily interact or meet with peers from Leading Toward the Future outside of the formal program sessions and, if so, for what purpose?
- 8. Please provide any other comments you would like to make about what you are learning or not learning from your peers at this point in time during the Leading Towards the Future program.

Thank you for participating in this interview. All the information collected from you is confidential. Your name will not appear on any documents in which this information is recorded.

Participant from Previous Cohort Interview Questions

- 1. Now that you have completed the leadership development program, Leading Toward the Future, what do you think was the purpose(s) of the cohort aspect of this leadership development program, Leading Toward the Future?
- 2. How do you think the following elements contributed to your growth as a healthcare leader?
 - cohort learning sessions
 - small group sessions
 - action learning projects
- 3. Describe situations during each of the following elements in which you had opportunities to learn from your peers.
 - cohort learning sessions
 - small group sessions
 - action learning projects
- 4. Reflecting back upon the program, did any of these items take place during the cohort learning sessions, small group sessions, or action learning projects? If participant answers yes, ask: please describe how it affected your growth as a leader.

YES NO

- Participants shared ideas, knowledge, and experiences
- Participants provided encouragement to each other
- Participants heard perspectives different than their own
- Participants sought practical assistance from each other
- Participants gave and received feedback
- Participants built trusting relationships
- Participants engaged in reflective processing
- 5. Have you experienced any changes from building relationships with others during the cohort sessions of the Leading Toward the Future program? Have any of these changes affected your level of engagement at work? Please explain.

- 6. Did you experienced any challenges that interfered with your level of participation and involvement with others during the cohort sessions of the Leading Toward the Future program?
- 7. Do you currently voluntarily interact or meet with peers from your Leading Toward the Future and, if so, for what purpose?
- 8. Please provide any other comments you would like to make about what you learned or did not learn from your peers during the Leading Toward the Future program.

Thank you for participating in this interview. All the information collected from you is confidential. Your name will not appear on any documents in which this information is recorded.

Appendix G

Program Facilitator/Chief Learning Officer/Senior Leader Interview Protocol

Program Facilitator/Chief Learning Officer/Senior Leadership Leader Interview Protocol

•		-		•
ln	terviewee	\sim	บบท	her:
111	LUIVIUWUU	1.	unn	IJOI.

Date: Time: Location:

Interviewer:

You have been invited to participate in the research project entitled: Exploration of Peer Learning in a Formal Cohort Healthcare Leadership Development Program. This research is intended to gather information that adds to the body of knowledge of leadership development and peer learning.

Demographic Questions:

Male/Female: Age: Ethnicity:

Current job title: Years worked in this position:

Level of education:

- 1. Please describe the purpose of developing and implementing the cohort aspect of this leadership development program, Leading Toward the Future?
- 2. How are the following elements designed to contribute to the growth of healthcare leader?
 - cohort learning sessions
 - small group sessions
 - action learning projects
- 3. In your role, describe situations during the each of the following elements in which you had opportunities to observe participants learning from their peers.
 - cohort learning sessions
 - small group sessions
 - action learning projects
- 4. Did you intentionally design any of these items into your healthcare leadership program? If participant answers yes, ask them: describe it has affected the leadership growth of participants.

YES NO

- Participants share ideas, knowledge, and experiences
- Participants provide encouragement to each other
- Participants hear perspectives different than their own
- Participants seek practical assistance from each other
- Participants give and receive feedback
- Participants build trusting relationships
- Participants engage in reflective processing

- 5. What activities were present in the Leading Toward the Future program to build relationships among those who participated?
- 6. When meeting with the Leading Toward the Future cohort or small groups from the cohort, what processes did you use to support peer learning?
- 7. Can you give one or two examples when participants in the Leading Toward the Future group learned leadership skills from others in the group?
- 8. Did your involvement in Leading Toward the Future teach you new benefits of connecting with your peers for leadership development? If so, please give an example of benefits and ways to connect with peers.
- 9. Please provide any other comments you would like to make about how you witnessed learning or the lack of learning among participants during the Leading Toward the Future program.

Thank you for participating in this interview. All the information collected from you is confidential. Your name will not appear on any documents in which this information is recorded.

Appendix H

Observation Checklist and Protocol

Observation Checklist and Protocol

Observations of a formal cohort Leading Toward the Future session and a small group session will be conducted.

- 1. Behaviors, frequency, duration will be noted of the following items:
 - · Participants share ideas, knowledge, and experiences
 - Participants provide encouragement to each other
 - Participants hear perspectives different than their own
 - Participants seek practical assistance from each other
 - Participants give and receive feedback
 - Participants increase knowledge of each other
 - Participants engage in reflective processing
- 2. Each activity during the session will be documented identifying the activity, duration, and behavior of participants.