
Reciprocal Peer Coaching: A Critical Contributor to Implementing Individual Leadership Plans

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Billions of dollars are spent annually on programs to develop organizational leaders, yet the effectiveness of these programs is poorly understood. Scholars advise that value is enhanced by the development of individual leadership plans at program completion, followed by implementation experience with subsequent coaching and reflection. The literature discusses coaching on specific skills in individual plans; research is lacking regarding coaching's value for the individual plan implementation process as a whole. In addition, there is scant literature concerning the use of reciprocal peer coaching in leadership development. This article presents the findings of research aimed at understanding the experience of individuals who completed a leadership development program, prepared individual leadership plans at completion, and then engaged in a process that included reciprocal peer coaching to help them implement their plans. The major contributions of the study concern the importance of the support structure provided, the nature of the benefits identified from giving as well as receiving coaching, and the specification of a transformational learning process regarding both the implementation of individual leadership plans and engagement in reciprocal peer coaching. While the study was conducted in a medical educational setting, the findings have implications for leadership development programs in other areas of education, as well as other organizational settings.

In the United States alone, over \$25 billion—or almost half the overall training investment—was spent on executive and management development in 2010 (*Training Magazine*, 2010). Despite this level of investment, programs have been criticized for their lack of connection with theories of leadership development (Allen & Hartman, 2008) and the lack of rigor applied to estimating their financial return (Avolio, Avey, & Quisenberry, 2010). There are relatively few investigations of program impact: fewer than 100 studies in the

past 100 years, reporting a wide range of effect sizes (Avolio et al., 2010; Avolio & Luthans, 2006).

Leadership scholars advise that successful development programs provide an opportunity for practice with feedback and incorporate appropriate follow-up activities, such as individual goal setting, formal progress reviews, coaching, and opportunities for reflection (Antonakis, Cianciolo, & Sternberg, 2004; Ladyshevsky, 2007; Sashkin & Sashkin, 2003; Yukl, 2010). Coaching, in particular, has gained popularity in the past 10 years as a tool to reinforce the individual's learning during leadership development programs (Hunt & Weintraub, 2007). While executive coaching is a \$1 billion a year industry and all coaching is estimated at \$2 billion per year (International Coach Federation, 2012), coaching by internal experts and especially by peers is untapped as a method of leadership development. There is also scant literature on the use of reciprocal peer coaching. In addition, the literature considers coaching related to leadership development in terms of developing specific individual leadership skills (such as clarity of communication); its application to the implementation of an entire individual leadership plan is not discussed in the literature.

This article reports on the yearlong implementation of individual leadership plans supported by reciprocal peer coaching, journaling, and discussion. Qualitative inquiry was chosen to provide an understanding of the implementation experience (What is the experience of implementing an individual leadership plan?) and the specific contributions of coaching and reflection (How does each contribute?). The context was a leadership development program for medical school faculty during which training was provided in teaching skills, educational scholarship, and educational leadership, and an individual leadership plan (ILP) was developed upon completion. The leadership activities involved in these individual plans concern curricular matters for medical and health science students, residents, and fellows: (a) leading the development of medical and health science courses and curriculum within departments, (b) leading the improvement of medical and health science clinical training within and across hospitals and other health care delivery sites, and (c) leading the establishment/refinement of national standards for medical and health science education.

The findings indicate the importance of structuring the process of plan implementation support, and the emotional, functional, and developmental benefits of both receiving and giving reciprocal peer coaching. Of additional interest is the depiction of the ILP implementation and reciprocal peer coaching experience as a transformational learning process.

Theoretical Background

Three areas of scholarship are material to this study's focus of understanding the experience of implementing an individual leadership plan and the related contributions of coaching and reflection. The literature on leadership development provides definitions and frameworks for considering various approaches

to enhancing individual leadership ability. The literature on coaching generally, and peer coaching specifically, provides insight into the requirements for effective support relationships. The literature on medical education fellowships explores the context of the study.

Leadership Development

It is often remarked that there is no generally accepted definition of leadership in the literature, no prevailing paradigm for studying it, and little agreement on how to best develop it (Hackman & Wage, 2007). For the purpose of this study, we adopted a definition that broadly encompasses many of the facets of leadership found in the literature: “Leadership is a process whereby an individual influences a group of individuals to achieve a common goal” (Northouse, 2010, p. 3). There are many theories of leadership; the broad categories that can be formed around these theories include (a) concepts of the leader’s behaviors, traits, and skills; (b) concepts regarding the relationship between leaders and followers (e.g., power, participation); and (c) concepts about the process of leading (e.g., impacting change, culture). Emerging theories of leadership combine these concepts and incorporate perspectives from complexity science (Uhl-Bien, Marion, & McKelvey, 2007).

How one approaches leadership development is in part dependent on one’s theory of leadership: Should development focus on the skills or behaviors of the designated leader, on the interactions with followers, or on the process of leading in organizations? Thus, like leadership, leadership development has many meanings in the literature. Day (2001) distinguishes between management development and leadership development, with the former focused on task performance and the latter on collective engagement. He also differentiates leader development, which is focused on the individual, from leadership development, which is focused on all within an organizational community. Most of the leadership development literature does not draw these clear distinctions and uses the term *leadership development* to refer to both individuals and the collective, as we do here, but we caution that this study regards *individual* leader development.

Approaches to leadership development are often discussed in terms of how they are delivered (e.g., formal training, developmental activities, self-help; Yukl, 2010) or the methods they employ (e.g., cases, simulations, job rotations, project assignments, coaching, feedback instruments, action learning; Hernez-Broome & Hughes, 2004; Hrivnak, Reichard, & Riggio, 2009). These depictions leave programs open to the criticism that they lack connection with theories of leadership development (Allen & Hartman, 2008).

Six theories and models of leadership are identified as those most commonly used in leadership development practices in organizations. The first five, leader–member exchange (LMX) theory, situational leadership, transformational leadership, servant leadership, and authentic leadership, focus on the

leader–follower relationship (Ardichvili & Manderscheid, 2008). The sixth, and most recent, complexity theory concerns the joint interactions of all in organizations. While popular, the six vary considerably in the research-based evidence that supports their application; some also lack a strong theoretical base. Ardichvili and Manderscheid (2008) also identify emerging methods and techniques in leadership development practice, including the use of popular culture and media, leader assimilation interventions, and three principles psychology. These methods focus on leaders' understanding of their own behaviors and are not widely known in the HRD field.

Viewing the trajectory of leadership development practices over time, we see the movement from specific skill development to a focus on the ability to recognize behaviors, patterns, and themes at the individual, workgroup, and organizational levels. Johnson (2008) takes this a step further, arguing that successful leaders have mental models that allow them to deal with complex challenges and, accordingly, leadership development should focus on the acquisition of new mental models. His suggestions for doing this build off of the transformative learning process (Mezirow, 1991). Specifically, Johnson (2008) calls for HRD professionals involved in leadership development programs to provide real-time on-the-job opportunities that challenge meaning structures (i.e., via “disorienting events” such as materially changed job scope and/or responsibilities), provide feedback, support critical reflection, develop new ways of understanding and acting, and encourage participants to take responsibility for their own development by seeking out developmental opportunities. Thus, the learning process as well as the content learned is important to leadership development.

The process-content interface is articulated by Allen and Hartman (2008) who advocated matching the various learning settings and techniques with Conger's (1992) four primary approaches to leadership development: conceptual understanding, skill building, feedback, and personal growth. This focuses logically on the objectives of the leadership development program (which relates to one's definition of leadership) and then on the delivery setting and methods that enable achievement of the objectives. For example, conceptual understanding can be achieved through degree programs and self-paced learning; skill building through simulations, job rotations, and personal development plans; feedback through coaching and assessments; and personal growth through reflection, team-building, and developmental relationships (Allen & Hartman, 2008).

Of particular importance to this study is the role of personal (or as we refer to them, “individual”) development plans. These self-developed and self-managed plans gained popularity in the 1990s as a way to encourage individual responsibility for career development (Higson & Wilson, 1995; Tamkin, 1996). Although individual development plans are popular, there is limited literature on them (Allen & Hartman, 2008). They are more expensive to properly develop than anticipated, often not reviewed, and frequently not

followed due to lack of consequences (Tamkin, 1996). Thus, recommendations for effective use of individual development plans include building in support mechanisms and systems to ensure their use, including linkage to performance management (Allen & Hartman, 2008; Tamkin, 1996).

Allen and Hartman (2008) further note that leadership development should be ongoing and encompass all four of Conger's (1992) primary approaches working in concert, since no single source of learning is appropriate at all times. For example, individual development plans (skill building) follow classroom-based learning (conceptual understanding) and are supported with coaching (feedback) and individual reflection (personal growth). This view is consistent with that of other scholars who stress the importance of postprogram goal setting and implementation support via coaching and reflection (Antonakis et al., 2004; Ladyshewsky, 2007; Sashkin & Sashkin, 2003; Yukl, 2010). These combined strategies progressively increase the development of specific leadership competencies (Ladyshewsky, 2007).

Peer Coaching

Coaching is widely recognized as a tool to reinforce learning in leadership development programs (Hunt & Weintraub, 2007). Consistent among the multiple definitions of coaching in the literature is that it is "facilitation activity or intervention" for the purpose of "helping individuals to improve their performance in various domains, and to enhance their personal effectiveness, personal development and personal growth" (Hamlin, Ellinger, & Beattie, 2008, p. 291). Hamlin et al. note the consistency of conceptual commonality across definitions of coaching regardless of the market segment targeted (i.e., executive coach, workplace coach, life coach) or the focus of the activity (i.e., individual, group, organization). They further liken the activities of professional coaching to contemporary practices of HRD, noting that the approaches of both are strikingly similar (i.e., learner centered, experiential, self-directed). It is important, however, to differentiate coaching from mentoring, a term it is often used in combination with. Coaching involves practical, goal-focused, one-on-one support. Mentoring is typically a committed long-term relationship in which a senior person supports the personal and professional development of a junior colleague (Hernez-Broome & Hughes, 2004).

Coaching can be provided formally or informally, by internal or external experts, or by peers. Most leadership coaching is provided by external experts; coaching by internal experts and by peers is untapped as a method of leadership development (Hunt & Weintraub, 2007). However, peers may provide coaching implicitly, with neither coach nor coachee labeling it as such (Hamlin et al., 2008). Accordingly, the literature on leadership coaching is concentrated around externally provided executive coaching. This literature indicates a significant positive association between executive coaching and individual

performance, self-efficacy, organizational commitment and performance, leadership, and conflict resolution (Baron & Morin, 2009).

The following structural elements are generally considered essential for success in any type of coaching: voluntary participation; selection of one's own coach and what to work on; coaches trained in listening and questioning; a safe environment; time allocated for coaching; face-to-face contact; subsequent feedback by the coach; and reflection by the coachee (Hunt & Weintraub, 2007). Baron and Morin's (2009) unique study addressing the links between the executive coach-coachee relationship and coaching success found the following variables of importance to coaching effectiveness: the coachee's motivation to transfer, their perception of supervisor support, the amount of coaching received, and the coach's facilitation of learning and results (i.e., developing a plan, tracking progress, using a structured approach). Given the conceptual similarities across the types of coaching (Hamlin et al., 2008), these findings could be material to the relationship developed among peer coaches that is required for coaching effectiveness.

According to Hunt and Weintraub (2007), two studies involving peer coaching, one within a financial organization and one within a pharmaceutical company, indicated different benefits depending on the origin of the coach. Peer coaches garnered a higher commitment than external coaches, as they built on existing friendships and participants were concerned about not letting down the peer. Those with peer coaches from the same business area continued coaching longer, but those with coaches from different areas reported gaining new perspectives and took more risk.

The concept of peer coaching originated in the field of education over 25 years ago as an on-site dimension of staff development (Showers & Joyce, 2003). Teachers who had a coaching relationship—in which they planned together, observed each other, and pooled their experiences—practiced new skills and strategies and applied them more frequently than their coachless counterparts. Three kinds of support were provided: procedural (e.g., suggesting strategies and alternatives), affective (e.g., offering reassurance about effectiveness, confirmation of strengths, and encouragement of risk-taking), and reflective (e.g., questioning strategies and future changes) (Swafford, 1998). Based on the literature, peer coaching has been used by teachers at all levels—elementary, middle school, high school, and higher education—and among school counselors to enhance skill development and application. Only one example was located of peer coaching in implementing professional development plans, and that involved graduate students in a school administration program (Gottesman, 2009). The coaching centered on specific skills or behaviors identified for development, not the entire plan, and involved addressing incidents as they arose versus proactive planning to achieve the desired outcomes. The highest satisfaction from the process was reported when peers were from different school districts.

In the health sciences, peer coaching has been embraced by nursing for the past decade. It is seen as having great potential for nurses' clinical development and is used to promote teaching excellence and scholarship in nursing (Eisen, 2001; Jacelon, Zucker, Staccarini, & Henneman, 2003; Waddell & Dunn, 2005). Medicine has recently used peer coaching to enhance clinical teaching, while adopting more traditional mentoring of a junior faculty member by an experienced colleague to encourage scholarship (Farrell, Digioia, Broderick, & Coates, 2004; Files, Blair, Mayer, & Ko, 2008; McLeod & Steinert, 2009; O'Keefe, LeCouteur, Miller, & McGowan, 2009; Sekerka & Chao, 2003). In both professions, benefits reported to coachees were similar to those previously discussed: enhanced knowledge and confidence and increased application of new approaches. We found no empirical work regarding the use of peer coaching in relation to aspects of leadership development or ILPs. This is not surprising, as participants rarely leave medical faculty development programs with clearly defined goals for improvement (O'Sullivan & Irby, 2011).

Medical Education Fellowships

Faculty development in medical education began in the 1950s and has progressed in focus (O'Sullivan & Irby, 2011). Initially faculty development was concerned with teaching in specialty areas with shortages. It next addressed the instructional needs of faculty at community-based sites, as well as the needs of students, residents, and fellows with teaching responsibilities. Faculty development then moved to introducing pedagogical reforms such as small group, problem, and team-based learning. Since 1990, longitudinal faculty development programs, such as teaching scholars programs or medical education fellowship programs, have proliferated (Thompson, Searle, Gruppen, Hatem, & Nelson, 2011).

Fellowships in medical education are defined as single cohorts of medical teaching faculty who participate in extended faculty development activity (Searle, Hatem, Perkowski, & Wilkerson, 2006). Offered by almost half of US medical schools, fellowship programs focus on enhancing teaching skills, scholarly dissemination, and curriculum design (Thompson et al., 2011). Despite their growing prevalence, the evaluation of program impact remains limited. Participant satisfaction is the most common form of program evaluation; less than 40% complete peer observations or review portfolios. Longitudinal inquiries suggest changes in participants' knowledge, skills, self-perceptions, and social networks; however, assessment of the quantity and quality of subsequent educational projects, leadership positions, and scholarship is lacking (Hatem, Lown, & Newman, 2009; Lown, Newman, & Hatem, 2009; Searle et al., 2006; Thompson et al., 2011).

Most fellowship programs require completion of a scholarly project. These are commonly the development of specific curricular material or

innovative institutional programs that contribute to quality improvement and patient safety (Hatem et al., 2009). Few fellowship programs require specific activities of faculty after program completion. Less than a quarter require completion of a career development plan or any other longitudinally focused activity (Thompson et al., 2011). Thus, there is ample opportunity to add to the literature on postfellowship completion activities, and, from the earlier review of the leadership development literature, to understand the process of implementing an ILP.

Methods

The study was designed to address the following question: What is the experience of implementing an ILP in a medical academic setting? There were two important subquestions: How does coaching contribute? How does reflection contribute? Given these questions, the study was designed as a phenomenological inquiry, seeking to understand the essence of the experience (Creswell, 2009; Merriam, 2009). In addition, we also wanted to compare the implementation successes of those implementing ILPs with and without implementation support, so the study also fulfilled the requirements of a static-group comparison (Campbell & Stanley, 1963). This article addresses only the experience of the group that received implementation support. As reported elsewhere, this group implemented 23% more of their planned initiatives than the group receiving no implementation support (Goldman, Wesner, Karnchanomai, & Haywood, 2012).

Setting

The setting for the study was the Master Teacher Leadership Development Program (MTLDP), a faculty medical education fellowship program of the George Washington University School of Medicine and Health Sciences. The program is in its 11th year and consists of six courses: adult learning theory and instructional design, curriculum design and change, assessment of learning, qualitative research methods, teamwork, and leadership. The courses lead to a university certificate in leadership development. Faculty responsible for leading education and educational change as course, clerkship, residency, and fellowship program directors are enrolled in the program, which is offered on a cohort basis (i.e., faculty complete the coursework as a group that stays together all year).

Since 2007, each faculty member develops an ILP as their final assignment in the last course, "Leadership in Organizations." This is a one-year plan for the completion of a small number of initiatives aimed at enhancing the faculty member's teaching, educational leadership, and/or educational scholarship (the tripartite goals of MTLDP). Examples of initiatives include changing lecture courses to active learning, developing new curricula, leading a task force or committee, and completing a research study. Plan templates and

guidance are provided by the course leader, who is also the program director (and lead author of this article). Faculty members identify the steps and timing required to complete the initiatives, as well as evaluation mechanisms and required resources. They meet with their supervisors, department chairs, and dean to review plan content and revise it as needed. They are also encouraged to integrate their ILPs with their annual goals and objectives required by the university.

For most faculty completing the MTLDP, the development of this type of a detailed individual plan is a new activity. Faculty members initially require assistance focusing their leadership plans on a few initiatives and differentiating objectives, initiatives, and tasks. After three years of informal discussion with program graduates, it became apparent that faculty members could also benefit from support in implementing their individual leadership plans. Many initiatives were being delayed; some were not started. Faculty members implementing changes to their teaching and conducting scholarly initiatives reported doing so in their “spare” time and attributed completion to their own determination. Those attempting to implement curricular changes reported numerous challenges. Despite earlier approvals, some departments blocked initiatives, promised resources were not made available, priorities were changed, and faculty were given other assignments that utilized their time. Based on discussions with several program graduates and the decanal liaison for MTLDP, the program director developed a process of reciprocal peer coaching followed by journaling and discussion to support the fellowship graduates in implementing their ILPs.

Participants

Faculty from two MTLDP cohorts took part in the study, which received institutional review board approval. The MTLDP cohort that just graduated received the structured, yearlong process of implementation support and is referred to as “the coaching cohort.” All 10 faculty members of that cohort participated in the study. (In addition to providing 100% participation, this number is sufficient for phenomenologically based studies, according to Creswell [2009]). The MTLDP cohort that graduated the year before received no support and is referred to as “the standard cohort.” Nine of 11 members of that cohort participated in the study (we do not know the reasons for non-participation of the two faculty who did not participate). The participants from the two cohorts were similar in their seniority and variety of medical specialties (e.g., emergency medicine, internal medicine, obstetrics/gynecology, pediatrics, as well as health science professions such as medical librarian). The in-class curriculum they received was identical.

The support process for the coaching cohort is depicted in Figure 1. During the leadership course, cohort members formed coaching dyads to help each other develop their ILPs. Some preferred peers within the same specialty or organization; others preferred those with different backgrounds and/or

Figure 1. Repetitive Cycle of Individual Leadership Plan Implementation Support



outside their work environment. Training in coaching was provided by the program director (who has 35 years of experience in leadership development activities), included techniques of active listening with prompts for exploration, and was practiced in the classroom.

After graduation, the coaching cohort participants conducted reciprocal peer coaching followed by monthly journaling. Faculty were encouraged to journal as soon as possible after their coaching sessions, and questions were provided to prompt reflection. After three rounds of coaching and journaling, an interview-discussion was conducted with the program director to provide feedback and additional support. This cycle was repeated three times over the course of nine months, ending one year after the cohort members completed the program (start-up was delayed pending study funding and institutional review board approval). The cycle of support is consistent with the recommendations of Allen and Hartman (2008), in that it is ongoing and encompasses all four of Conger's (1992) primary approaches to leadership development as discussed earlier. The process also includes the aforementioned core elements identified by Hunt and Weintraub (2007) as essential for coaching success. Coaching instructions, journaling prompts, interview discussion prompts, and survey questions were published with the article comparing the results achieved by the two cohorts (Goldman et al., 2012).

Data Collection, Analysis, and Trustworthiness

The study data consisted of three distinct elements: the journals and interview-discussion transcripts of the coaching cohort, and a Web-based survey completed by members of both the coaching and standard cohorts.

Journals and Transcripts. Journals were forwarded to the program director as soon as they were completed. The interview-discussions were unstructured and followed three rounds of coaching and journaling. Participants were asked about successes and challenges with their plans and what it was like for them to both give and receive coaching. Comments made in the journals were discussed when relevant. Initially, different members of the research team were to conduct the interview-discussion. However, time constraints and the preference of the coaching cohort members to be interviewed by someone they knew led to the program director's conducting all of these sessions. Each session was approximately 30 to 45 minutes in length and was audiotaped and professionally transcribed.

The data were prepared for analysis by the second author, who completed the following procedures for sorting and categorizing the data per qualitative methods (Merriam, 2009):

1. Created a journal form and an interview form for each participant to allow the data to be displayed in chronological order and to separately capture data related to giving versus receiving coaching, journaling, and implementing the ILP.
2. Read through every journal and interview transcription several times in coaching pairs, taking one member of the pair at a time, selecting representative verbatim comments, and entering them in the appropriate section on the forms.
3. Recorded her emerging thoughts during the analysis.

All three authors independently reviewed the categorized data, discussed the research questions, and used induction to develop themes about the implementation experience (Moustakas, 1994). The themes were shared, discussed, refined, and then sent to the participants of the coaching cohort, who unanimously confirmed them. The third author then reorganized all of the verbatim quotes under the themes. The other two authors checked to ensure for variation and diversity.

The first author extracted exemplar quotes to prepare the tables, which were checked by the other two authors. All three authors also considered each participant's and coaching pair's comments separately in an effort to associate the value of their coaching experience with various personal and work characteristics. This was done independently and then shared via discussion. Differences in the experience were found to be only individually related. Thus, the procedures used to promote the trustworthiness of the data included

triangulation of data sources (journals and interview transcripts), peer review (on data coding and analysis), member checks (of the themes by the participants), and rich descriptions of finding (in the tables discussed in the next section) (Merriam, 2009).

Survey. Participants from both cohorts completed the Web-based survey approximately one year after program completion. The standard cohort completed the survey as soon as institutional review board approval was granted. The coaching cohort completed it one year later. In both cases, participants accessed survey questions through individual URLs with a statement of consent at the onset. Each survey was preloaded with the individual's leadership plan initiatives. For each initiative, a series of questions was asked regarding the status of implementation, descriptors of the implementation process, successes and what contributed to them, challenges and their causal factors, and what could be done to help implementation proceed.

Survey responses were downloaded into an Excel file by the third author and were regrouped according to the type of initiative (teaching enhancement, new curriculum, educational leadership, and educational scholarship); related comments were summarized. This was checked by the first author. As noted above, a comparison of the survey questions by cohort is the topic of a separate paper (Goldman et al., 2012). We mention the survey here because the descriptive survey responses from the coaching cohort were consistent with their journal and interview comments, and as such, provide another means of triangulation (Merriam, 2009).

Findings

The study findings include descriptions of the implementation experience and the overall and specific contributions of coaching, journaling, and individual leadership plan development. Six major themes are discussed next. Quotations in this section are verbatim. The authors' words are occasionally added in brackets for clarification.

Theme 1: The Experience Was Generally Positive With Some Frustrating Elements

In responding to questions about the overall ILP implementation experience, the participants commented about the structure of the various components. Comments included the following:

I feel good about [the plan itself] because it gives a good framework. . . .
This is the schedule I need to adhere to.

The comments that are in the instructions for the journaling, instructions for the coaching, really help you think.

Peer coaching . . . hooks [you] up with somebody that's going to hold [you] accountable.

Because I had this scheduled time to review my progress [coaching, interviews], I felt a need to articulate what had happened relative to my goals.

I have actually turned down things I would have taken on [previously], because I want to focus my efforts [on my plan].

At the same time, the participants expressed general frustration with the lack of time and resources to devote to plan implementation. They were surprised at the resistance they encountered in getting things done. As one participant noted:

The human factors in getting anything done turned out to loom much more significantly for the way I'd imagined goals.

Theme 2: Most Saw the Overall Value of the Experience as Either Emotional or Functional


As shown in Figure 2, the value each individual participant received from the entire experience fell along a spectrum of emotional only to functional only, with a few experiencing both. The emotional value included confidence and positive motivation in undertaking implementation tasks (from discussions with the peer and the program director), a feeling of being in control of how their time was spent (from saying “no” to things not in their plan), and comfort of a known sounding board (their peer). The functional value included being forced to consider their plan on a regular basis (before meeting with their peer), having a framework of activities laid out (the implementation steps for each initiative), and having specific reflection prompts (the questions used in coaching and journaling).

Based on the literature, we expected those with peer coaches from different work areas to indicate high levels of functional value (new ideas; Hunt & Weintraub, 2007); however, no consistent patterns were identified.

Theme 3: Coaching Provided Emotional, Functional, and Developmental Value

Reciprocal peer coaching was described as “easy” and “nonthreatening.” The support gained from receiving coaching is presented in Table 1. Emotional support included the opportunity to vent, reassurance, and motivation. Functional support included perspectives, ideas, and help with focusing activity and applying training. Developmental support included promotion of reflection and self-help, as well as long-term direction.

Figure 2. Value of the Implementation Experience by Coaching Pairs

Similarities of the Pairs		
Specialty training	<i>Pair 5 Participant 1</i>	<i>Pair 5 Participant 2</i>
Specialty training and organization	<i>Pair 4 Participant 1</i>	<i>Pair 4 Participant 2</i>
Specialty training, organization, and location	<i>Pair 3 Participant 1</i>	<i>Pair 3 Participant 2</i>
None	<i>Pair 2 Participant 1</i>	<i>Pair 2 Participant 2</i>
None	<i>Pair 1 Participant 1</i>	<i>Pair 1 Participant 2</i>
Value		
	Emotional	Functional

Some participants appreciated having coaches from different specialty and organizational backgrounds:

It was mind-opening. She made some suggestions that I would never thought of based on her experience of a similar situation. Her story about how she handled it was encouraging to hear and gives me some confidence in taking the next step.

Our different professional backgrounds require me to articulate my problems better.

Others appreciated coaches with familiarity:

. . . very fortuitous that we are both in the same kind of position [at different organizations]. . . . It is delightful to have someone who actually empathizes.

But there was also the realization of limitations:

We share sometimes a little too much in our thinking and our experiences that someone who is in a different field or a different position would relate differently. We can become jaded by the same challenges, . . . not looking at

Table 1. Verbatim Comments of Support Gained From Receiving Reciprocal Peer Coaching

Emotional

It's a great avenue by which you can vent ... it's cathartic in that regard.
 It's comforting that I'm not alone.

Discussing my plans ... running [them] by someone, is a reassuring affirmation.

It helps motivate you and the next time you want to talk to that person and have something to say about [your initiative].

She was the inspiration behind my coming out with my feelings in that meeting with [a really dominant person].

Functional

My coach helped me take a step back ... look at it from another perspective.
 ... pointed out things I overlooked as being too obvious.

He's been very helpful in terms of giving me focus and a broader idea of how the organization works ... who the people are and how to approach things.

Every time I talk with him I get some kind of idea or thought that is going to make me do something else better or not make the same mistake.

My coach brings up topics from what we've learned [in the program] ... and suggests to me to think about how they are relevant to what I am doing ...

Developmental

He is making me look at my plan and evaluate where I am.

... helped me to see that I accomplished more than I thought. He challenges me.

He's a great listener. He lets me ramble. He helps me think through my own problems.

I asked him more global questions about my career in academics and he gave me a lot of suggestions that were helpful and very concrete.

It forces me to attach meaning to a series of random workplace events and see some future plan coming out of them.

it from an outside perspective to find a creative solution. . . . [Someone not in the same position] might push you more . . . to really ask the right questions to stimulate a new thought and a new way. . . .

Benefits identified from giving coaching are presented in Table 2 and reflect categories similar to those for the support gained from receiving coaching. Emotional benefits included feelings of empowerment and the satisfaction of helping. Functional benefits included being able to offer specific feedback and perspectives. Developmental benefits included learning how to coach: listening and asking effective questions.

Table 2. Verbatim Comments of Benefits Identified From Giving Reciprocal Peer Coaching

Emotional

I felt empowered that I was able to provide some ideas and actually help my peer.

... frustrating to hear about an uphill situation and be supportive and empathic without getting negative.

... it was really a satisfying exercise in listening to someone's struggles when it seems like nobody else ever listens to them, except maybe their spouse ... and you are able to point out things they don't realize ... other solutions ... people they might talk to ... it's like a session of psychotherapy that went well.

Functional

More than anything else, I provided a backboard to bounce ideas off.

I had the feeling it was helpful being outside of the organization and seeing how paralyzed they are by the leadership vacuum.

I'm able to give her feedback specifically and say 'You're not going to solve the problem by doing that ... you're going to have to try a totally different approach and create the incentive [for] people to change.'

I felt I was able to contribute to his goal achievement by talking about using reflective practices ...

Developmental

I had to get out of 'business mode' ... slow down and really think about what was being said ... give someone a chance to formulate their own thoughts.

One has to be careful not to push too hard asking about the other goals ... during some all consuming goals.

I really had to put myself in her environment to make the ideas or suggestions I was offering valid.

... it's hard to get people to think long term.

... it's amazing how just listening and then offering an opinion or two can really affect someone because you assume that they're thinking the exact same thing that you are ... but they're completely off on a different tangent.

There was also a realization regarding the structure supporting the coaching activity:

I think it would be hard to do [regular coaching] without being part of a study—because people would just get into the habit of not keeping in touch.

Theme 4: Journaling Provided an Additional Reflective Opportunity for Those Embracing It

Half of the participants indicated that journaling helped them realize their feelings and accomplishments about the process. A few exemplar comments:

I'm journaling about a lot of things—about how I'm feeling about things and how I'm accomplishing what I want to accomplish: patient interactions and not just work and fellowship.

Journaling was actually pretty positive for me because I went back and looked at [my implementation schedule] and I felt more positive about stuff after thinking about it.

Theme 5: Reflections on the Coaching Process Led to Learning and Change Over Time

As the months of reciprocal peer coaching progressed, participants evolved from an initial state of worry about their effectiveness as a coach, to identifying problems they were having with coaching sessions, to initiating behavior changes in both giving and receiving coaching, to changed perceptions of coaching activities and value. Verbatim reflections on the coaching process are provided in Table 3.

Theme 6: Interview-Discussions Spurred Reflections on the Plan Development Process

The quarterly interview–discussions with the program director spurred participants' reflections on the ILP development process. Similar to the progression of reflections on coaching, participants evolved from initial worries about ILP completion, to detailing specific tasks they were completing, to recognizing the value of having their ILP, to identifying improvements they could make to both their ILP and its implementation. Verbatim reflections on the ILP process are provided in Table 4.

During these sessions, particularly the latter ones, participants made suggestions for improving the overall support process. Some thought coaching sessions could be less frequent after the first few, but all agreed that they should be conducted face-to-face for maximum benefit. Those who engaged in journaling indicated it was most likely to provide value if completed immediately after coaching. One additional idea that surfaced was the possibility of having a large group event where everyone could bring their implementation problems and ideas for sharing. There were no suggestions for deleting any aspects of the support process, even by those who did not fully engage in journaling.

Implementation Results

As previously described, both the coaching and the standard cohorts completed a survey approximately one year after beginning to implement their ILPs. Analysis of that data indicated that the coaching cohort completed or was on schedule for completion of 73% of their planned

Table 3. Verbatim Reflections on the Coaching Process*Worries About Being Effective (onset of process)*

I worry if I can give her good advice or . . . realistic reinforcement.

I feel like I don't have the [content expertise] expertise to coach.

Problems Encountered in Coaching (months 1–3)

I was . . . there as a sounding board and just not sure if that was sufficient.

. . . they've been very one sided . . . I've been doing more of the coaching.

I found coaching to be a little frustrating . . . we had a recurring time when we'd meet and it never happened . . . at least at the time when we would set.

Conversation winded every which way, . . . difficult to tell whose objectives we were focusing on.

Behavior Changes to Improve Coaching (months 4–6)

I'm happy to give advice as opposed to truly coach and say: 'Okay, what's the problem?' So I really try to catch myself.

I was conscious of doing better actively listening.

. . . constantly redirecting ourselves . . . it can be as blunt as, 'okay we're way off topic now . . . let's talk about how this is going to contribute to your goal of 'x.''

I wrote down my ideas in anticipation of the meeting.

. . . Need to put my plan on a spreadsheet. Next time I will have a list of things to discuss.

Changed Perceptions of Coaching (months 7–9)

Our definition of a coach was standing in the way of believing that we were good coaches or coaches at all. Both of us see "coaching" as coming from someone more like a mentor—someone older, more experienced and wiser.

I always complain in my mind, I don't have time to do this . . . when I get the coaching, I realize I need this. When I am in the thick of what I am doing, I lose perspective of the bigger picture.

Receiving coaching was . . . more challenging (from someone worried about giving it) . . . to try and do away with any mental barriers towards things you were being coached about.

initiatives, compared to 50% for the standard cohort (Goldman et al., 2012). Having the structured process of support—reciprocal peer coaching, journaling, and interview-discussions—was credited by the participants as making the difference. Referring to the support process, one participant declared:

Table 4. Verbatim Reflections on the Individual Leadership Plan Process

Worries About Plan Completion (onset of the process)

... if I find that ... in the first quarter I'm not meeting or not even getting close to these goals ... do I need to change them? Do ... I need some help? Do I need to consult someone?

Discussion of Task Specifics (months 1–3)

(all comments were specific to the tasks to be in the individual's initiatives)

Recognition of Overall Value of Having a Plan (months 4–6)

I write it into my week's work and then follow the blueprint. It means that I have things to do each day, when I get home at night. This encourages me with structure.

I think you have to keep—keep doing plans. . . . there's too little planning in general in modern life—realistically people have to do this every three or four months or—or at least modify it because other opportunities come up.

I need to expand it for the next five to ten years down the road as to the things I want to do.

Identification of Improvements for Plan Development and Other Applications (months 7–9)

I wish I had spent more time on my Leadership Development Plan in the beginning. . . . putting a lot more thought into it . . .

I probably should have worked a little bit more closely with my immediate supervisor in the development of my plan because . . . I don't really think that she had as much buy in to see me accomplish those goals as I did.

You have to have a plan that is feasible. You need to think about small changes, baby steps . . . keeping your goals . . . a checklist helps and not to be too grandiose in what you think you can achieve in a short period of time because a year is not a long period of time.

It needs to be a living document, I don't think I realized that until about six months into the process because especially as new opportunities arose and new things came my way it's great to have these opportunities, but it's challenging to remember that they're going to need to modify the plan . . . updating my plan was something that I picked up halfway through.

I took some skeleton of the plan . . . I have the residents put in the goals and objectives and then a calendar underneath . . . especially for people who are still figuring out what they're going to do when they're finishing . . . It's a good way to crystallize 'Hey, these are the things I want to do.'

'Left to my own devices inertia would take over. . . . I would not have accomplished each of the things I have. . . . It's not because I couldn't, but because [the plan] just gets lost in the day-to-day activities.'

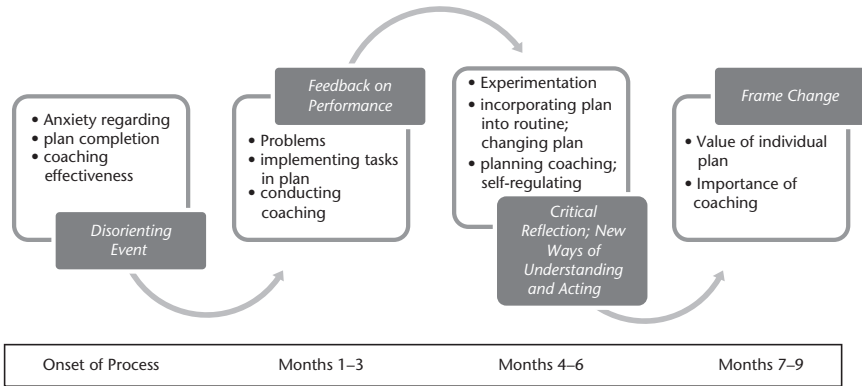
Discussion

The answer to the main research question—What is the experience of implementing an individual leadership plan in a medical academic setting?—is favorable for all members of the coaching cohort. Factors impacting the favorable nature of the experience are consistent with the recommendations of Allen and Hartman (2008) regarding the four-pronged approach to leadership development: the content of the MTLDP provided concepts; ILP development and implementation provided the opportunity for skill building; monthly reciprocal peer coaching provided feedback on implementation progress and skill building in coaching; and monthly journaling and quarterly interview-discussions provided personal growth through reflection. Combined, these approaches provided valuable structure to the experience. The study itself reinforced the structural elements by collecting the postcoaching journals and scheduling quarterly discussions with the participants.

The answer to the subquestion regarding the contribution of coaching indicates that the reciprocal peer coaching provided substantial value. Coaching by peers in monthly reciprocal sessions was the cornerstone to individual progress and personal development; it was discussed more than any other feature of the implementation process and with more energy. The reciprocal peer coaching engaged in here is consistent with the definition and conceptual commonality of coaching across the industry—it helps individuals improve their performance and personal development and was also delivered in a manner consistent with contemporary HRD practices—being learner centered and self-directed (Hamlin et al., 2008). The reciprocal peer coaching contained all of the structural elements considered for coaching success described by Hunt and Weintraub (2007)—voluntary participation, self-directed selection and focus, trained coaches, face-to-face contact, designated time and a safe environment, feedback, and reflection. In addition, it exemplified most of the relational elements identified by Baron and Morin (2009) as important in executive coaching relationships—motivation, facilitation of learning, significant number of sessions. The only element identified by Baron and Morin that was unknown in this study is the degree of perceived supervisor support. The meetings with the program director may have provided a similar sense of importance to the participants.

The identified benefits gained from *receiving* reciprocal peer coaching are consistent with that reported in the general coaching literature (Hunt & Weintraub, 2007), with the following additional contributions noted by the participants: providing motivation and inspiration (emotional support); assistance in organizing work and applying training (functional support); and prompts for self-assessment and providing meaning to events (developmental support). The verbatim comments clearly indicate that the reciprocal peer coaching impacted individual performance and self-efficacy. This is consistent with the value of executive coaching identified by Baron and Morin (2009).

Figure 3. The Individual Leadership Plan Implementation and Reciprocal Peer Coaching Experience as a Transformative Learning Process



Source: Johnson, H. H. (2008). Mental models and transformative learning: The key to leadership development? *Human Resource Development Quarterly*, 19(1), 85–89.

Of great significance were the findings related to the emotional, functional, and developmental benefits identified in Table 2 from giving coaching. These are not at all discussed in the literature, and as such present a unique contribution. The verbatim comments clearly indicate that giving coaching to a peer impacted individual self-efficacy and personal development.

The answer to the subquestion regarding the contribution of reflection indicates that it was valuable. Although only half engaged in journaling, participants indicated that the reciprocal peer coaching sessions encouraged their reflection regarding how they were implementing the specific initiatives in their ILP. The interview-discussions with the program director provided an opportunity for reflection on the use of an ILP overall, as well as on the reciprocal peer coaching process. The findings point to a multistage process of learning to effectively use ILPs as depicted in Table 3 and a similar multistage process of learning to be a coach as depicted in Table 4. These findings are illustrative of the transformational learning that Johnson (2008) suggests leadership development focus on. Figure 3 depicts the process experienced by the study participants as one of transformational learning, where a frame change occurs with respect to their mental models of both ILPs and reciprocal peer coaching.

The disorienting event experienced by the participants concerned the anxiety related to implementing their plan and conducting reciprocal peer coaching. In the first three months of the process, the participants encountered problems which provided feedback on their performance. Reflecting on that feedback led to experimentation with new ways of seeing the problems and new behaviors to deal with them. After an additional three months, the participants realized new ways of seeing ILPs and reciprocal peer coaching.

Limitations

The study findings describe the ILP implementation experience among medical and health science faculty engaging in reciprocal peer coaching, among other activities, at one organization. As such, the findings may not be generalizable to other types of leaders in different industries. We have attempted to address transferability by providing verbatim comments that describe the experience. Readers will need to determine the relevance of these descriptors to their situations. A second limitation is the inability to quantify the impact of each component of ILP implementation support on the individual's performance. While the data spoke to the value of each component in the cycle of support, and the substantial contribution of reciprocal peer coaching, the relative contribution and possible substitution of components is not clear. Finally, the data from this study addressed the experience for individual participants. The impact to the organization was not assessed. The comparison to a cohort receiving no implementation support does indicate that substantially more initiatives were completed, but the comparative value is not known. Thus, future research could consider and compare the salient features and benefits of reciprocal peer coaching in different contexts, quantify the impact of various components to supporting individual leadership plan implementation, and assess the value provided to organizations.

Contributions to the Literature

The study findings support the value of using a structure that incorporates all four of Conger's (1992) approaches to leadership development as adapted by Allen and Hartman (2008) and provides a concrete example of how those approaches can be combined to develop leadership of medical and health science faculty. In so doing, the findings also illustrate the value of applying concepts from the coaching and leadership development literatures to maximize the impact of medical education fellowship programs.

New contributions to the literature from this study include the articulation of the emotional, functional, and developmental benefits received from giving (in addition to receiving) coaching, and specification of a transformational learning process regarding both the implementation of ILPs and engagement in reciprocal peer coaching.

Implications for HRD Practice

For practitioners, including leadership development program directors and others in supporting roles, the findings exemplify the necessity and value of ongoing, structured leadership development activities that utilize Conger's (1992) four approaches as adapted by Allen and Hartman (2008). The findings also suggest that individuals, particularly those new to developing ILPs, require general support in using their plans to guide how their time is spent, as well as with the implementation of specific initiatives in the plans. In

addition, practitioners should be aware of and help facilitate those who engage in reciprocal peer coaching and plan implementation through the various stages of transformational learning associated with these activities.

Perhaps most important to HRD practice is the potential this study identifies for using reciprocal peer coaching in leadership development initiatives. While it may slightly reduce time on work tasks, both giving and receiving reciprocal peer coaching clearly provides emotional, functional, and developmental value to those so engaged. Given the billions spent on leadership development annually, reciprocal peer coaching may provide an effective alternative to costly external resources, and may also provide new opportunities for building the types of relationships required to thrive in complex environments.

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