evercare

Transforming Healthcare

GROWING LEADERS, GROWING SYSTEMS

THE EVERCARE ACADEMY'S EMERGING PATHWAY

Executive Summary

At the Evercare Conference in Lagos, a Nigerian consultant stepped onto the stage to guide a conversation involving colleagues from across the network. His presence was calm, his questions grounded, and his confidence seemed to sit lightly but firmly on his shoulders. What mattered was not that he facilitated well, but that this moment represented a turning point in his own development. Only months earlier, he had struggled to lead even small team discussions. Through repeated learning sessions, coaching conversations, reflective exercises, and practice with peers, he slowly found steadier footing.

The scene in Lagos was a signal of something wider happening across Evercare. People at different levels were beginning to speak with more clarity, lead with more intention, and think more systemically about their work. The Evercare Academy is the attempt to recognise, support, and structure this emerging movement in a deliberate and sustained way.

Introduction

Healthcare systems improve through many tools and methods, but they ultimately move at the pace at which people are able to think, decide, and act together.

Before the Academy had a name, Evercare teams had already been engaged in a rhythm of system improvement known as Healthcare Transformation, Learning Programs and Systems. This work involved looking closely at how patients moved through services, understanding where delays or risks appeared, discussing the underlying causes, and testing improvements. These cycles created a predictable structure for understanding clinical patterns and a shared approach for acting on problems.

They also made one truth clear: the system could only improve at the pace at which people were able to interpret patterns, communicate across roles, and act together.

The Challenge

As these cycles continued across Pakistan, Nigeria, and Kenya, a consistent message surfaced. Technical tools and clinical protocols were necessary, but not sufficient. What repeatedly shaped outcomes was how teams interpreted patterns, how well they communicated, and how effectively they coordinated decisions across roles and departments.

The work of routine improvement revealed a gap. Evercare needed more people who could think openly, frame problems clearly, facilitate conversations, and hold steady when uncertainty appeared. This insight became the foundation on which the Academy rests.

Why the Evercare Academy Exists

The System Reality

What the work revealed

- Strong clinical tools and protocols
- Improvement work exposed communication and coordination limits
- Outcomes shaped by how people think and act together

The Insight

A shared insight emerged

- Healthcare systems improve at the pace of people
- Technical solutions alone are not sufficient

The Response

The Evercare Academy

- Structured reflection, coaching, and peer learning
- Leadership developed through real work
- Capability strengthened across the network

Talent Retention and Home-Grown Leadership

The role of leadership became visible not only in formal positions but in everyday behaviour.

Across the year, a series of small but meaningful changes appeared. Consultants became more comfortable guiding discussions in clinical review meetings. They framed issues with greater clarity and asked questions that drew teams into thoughtful analysis. Nurse managers used reflective tools to navigate difficult conversations and to support colleagues through emotionally challenging situations. Administrative leaders and clinicians communicated with less friction and more understanding of each other's constraints.

Across countries, participants and HR colleagues also described subtle but meaningful shifts. Many spoke about gaining confidence in framing complex situations, feeling more connected to peers, and experiencing a sense of psychological safety that helped them navigate difficult conversations. Leaders noted clearer communication in routine meetings and a willingness among staff to take responsibility for shaping improvements rather than waiting for direction.

None of these shifts were dramatic in isolation. Together, they signaled a quiet strengthening of the network's capability.

Decentralised Decision-Making

Leadership began to express itself as distributed responsibility rather than positional authority.

Participants grew more able to support small tests of change within everyday work. As they practiced framing problems and guiding discussions, they became more capable of supporting improvement without escalation. Over time, these skills began influencing patient care in tangible ways.

The PediTales project offered a powerful example of how leadership development expresses itself in real work. What began as a storytelling intervention for children became a case study in how teams learn to collaborate. Pediatric teams in Pakistan, Nigeria, and Kenya listened to families, adapted stories to their cultures, navigated practical constraints, and learned from each iteration.

> Leadership emerged not through hierarchy, but through honesty, shared responsibility, and steady emotional tone.

Culture, Trust, and Psychological Safety

The emergence of the Academy was greatly influenced by a learning approach introduced through ecap.

Rather than relying on traditional classroom-style teaching, ecap creates spaces where caregivers, administrators, clinicians, and early-career professionals learn through reflection and dialogue. Participants examine their real experiences, explore where communication faltered, and consider what made particular decisions difficult.

Across a year of workshops in Lagos and other locations, ecap sessions became spaces where participants practiced the fundamentals of leadership: seeing clearly, communicating openly, understanding context, and working through discomfort. One-to-one coaching deepened this work. WhatsApp groups supported continued connection. Regular check-ins helped identify where further support was needed.

> Over time, people learned best when they felt safe to reflect, encouraged to express uncertainty, and supported in moments of ambiguity.

Scenario Planning and Adaptive Leadership

As the Academy matured, people began to demonstrate a growing ability to remain thoughtful under pressure, to respond rather than react, and to hold difficult situations with steadiness.

Through repeated exposure to real challenges, participants learned to:

- Slow down decision-making under uncertainty
- Frame problems more clearly
- Explore alternatives before acting
- Adapt through learning rather than command

> Leadership increasingly expressed itself as adaptive presence rather than control.

Regional Case Studies

Pakistan:

Leadership development supported consultants and nurse leaders to lead clinical discussions with greater confidence and analytical depth.

Nigeria:

Mid-career clinicians and administrators developed stronger communication and emotional steadiness in high-pressure environments.

Kenya:

Teams demonstrated growing ownership of projects even in the absence of senior leaders.

Cross-country – PediTales:

A shared case demonstrating adaptation, cultural translation, emotional stewardship, and learning across contexts.

Leadership in Practice: Voices from the Frontline

The opening scene in Lagos reflected a deeper shift that colleagues recognised across the system.

Participants described becoming more open, more confident in giving feedback, and more able to see situations from others' perspectives. HR teams observed clearer communication in routine meetings and a stronger willingness to engage in difficult conversations.

Leadership cascaded outward through peer relationships, not formal authority.

Programme Design and Methodology

The Evercare Academy is not a traditional institution with a fixed curriculum. It is a living structure that has emerged through repeated interactions between people, teams, and systems, shaped by the realities of daily work rather than by predefined modules. Over time, a developmental pathway began to take form through practice rather than prescription. Participants learned first to reflect more deeply on their experiences, then to communicate with greater clarity and openness. As this foundation strengthened, they became more able to recognise patterns in their work, frame problems more precisely, and support small tests of change within their own teams. Gradually, learning moved out of the workshop setting and into routine practice, where it could be applied, refined, and sustained.

This approach recognises that leadership is not a fixed trait or a role conferred by title. It is a set of practices cultivated through repeated exposure, thoughtful guidance, and meaningful work, where learning and action remain closely intertwined.

The Emerging Leadership Pathway

Reflection

- Seeing practice clearly
- Making sense of experience
- Naming uncertainty

Communication

- Speaking and listening with clarity
- Framing problems
- Holding constructive conversations

Pattern Recognition

- Understanding systems
- Recognising recurring issues
- Connecting cause and effect

Small Tests of Change

- Learning through action
- Supporting local improvements
- Adapting through feedback

Embedded Practice

- Leadership in daily work
- Acting without escalation
- Shared responsibility across roles

Strategic and System Value

As the Academy matures, it strengthens the network in two essential ways. First, it supports daily practice. Teams interpret information with more nuance. Conversations in review meetings become more grounded. People navigate complexity with a steadier presence. Departments collaborate with a clearer understanding of shared goals.

Second, it prepares Evercare for the next phase of network-wide innovation. The emerging innovation work will require people who are comfortable with uncertainty, able to articulate problems precisely, and willing to learn through iteration. The Academy is already cultivating these qualities.

Looking Ahead

As the Evercare Academy continues to evolve, its greatest value lies in how deeply it remains embedded in everyday practice. Reflective habits, coaching conversations, and peer learning are most effective when they are part of routine operational rhythms rather than separate initiatives. Strengthening alignment with country leadership and HR teams will help ensure that leadership development is recognised, supported, and sustained across the network.

Maintaining the psychological safety that has enabled honest reflection and learning will remain essential, particularly as the Academy becomes a foundation for future innovation and system-wide change.

Conclusion

The Evercare Academy does not claim to build perfect leaders.

It reflects a quieter truth: resilience can be cultivated through practice, reflection, and community. Across workshops, coaching sessions, review meetings, and conference discussions, people demonstrated a growing ability to hold complexity with steadiness and clarity.

As the Academy develops, its integration with leadership and human resources will help ensure that capability building becomes a sustained part of Evercare's long-term talent and leadership pathway.

Acknowledgement

The development of the Evercare Academy has been shaped in close partnership with ecap, whose learning approach, facilitation, and coaching support have played an important role in creating the reflective and dialogic foundations on which the Academy continues to build.

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