# Neta – Leadership Driving Change in Health

## A Program Evaluation Study

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# Abstract


## Background

Launched in 2023, the "Neta – Leadership Driving Change in Health" program is intended for nurses and allied health professionals holding mid-management positions in healthcare organizations. The program was developed by JDC-Tevet in collaboration with the Nursing Administration at the Ministry of Health and the "Atudot LeIsrael" Senior Division at the Prime Minister's Office. The program aims to strengthen participants' management and leadership skills, deepen their understanding of the healthcare system, build their professional networks, and foster a broad understanding of their role as leaders of change. The one-year program combines theoretical and practical learning, peer learning, and self-initiated change projects. JDC-Tevet commissioned the Myers-JDC-Brookdale Institute to evaluate the program's first two cohorts.

## Objectives

The study evaluated the Neta program in relation to three of its main objectives: developing participants' leadership skills, building a professional network among program participants and graduates, and promoting participants' occupational mobility.

## Method

The study was conducted from 2024-2026 using mixed methods. A survey administered immediately after the end of the program was completed by 58 of the 60 participants (97%). A follow-up survey conducted about six months later was completed by 58 participants (97%). A second follow-up survey, conducted about one year after program completion among Cohort A graduates, was completed by 29 respondents (97%). A separate questionnaire was conducted among the participants' direct supervisors, of whom 27 (45%) responded. The study also included ten in-depth interviews with participants, program facilitators, and Ministry of Health staff, as well as a comparative review of the professional literature on leadership development programs in healthcare systems in various countries.

## Main Findings

- **Operating model.** A comparison of Neta with programs in other countries showed that it combines features of several leadership training models, including applied learning, activities within organizations, and a professional network connecting different organizations. The network is key element of the program's design.
- **Program implementation and participants' expectations.** All respondents reported that the program met "all" or "most" of their expectations. Participants in Cohort B provided more positive assessments of the time allocated to studying the subject areas and applying what they had learned. Program facilitators attributed this to changes introduced after Cohort A, which served as a pilot, including earlier and more structured incorporation of work on the change projects.
- **Leadership development and a systems perspective.** Among respondents, 94% reported that the program contributed to a "great" or "very great" extent to their understanding of leadership, and 90% reported changes in their management and leadership practices. Participants perceived the program as helping them develop leadership capabilities and changing how they understood their role in the healthcare system. Direct supervisors described similar changes, but their responses were treated as supplementary evidence because of the low response rate (45%).
- **Knowledge, tools, and professional networking.** On average across the two cohorts, 94% of respondents reported that the program provided them with new knowledge, and 85% reported acquiring management tools to a "great" or "very great" extent. All respondents reported that the program contributed to developing a shared professional language and a peer network, and 78% reported that the program helped them establish connections with professional organizations to a "great" or "very great" extent. At the six-month follow-up, the peer network was also the most frequently cited contribution (59%).
- **Change projects.** The projects focused on improving organizational and management processes and quality of care, developing human resources, and strengthening the nursing profession. In Cohort A, the percentage of participants reporting that their project had reached the implementation and integration stage rose from 50% about six months after program completion to 76% after one year. In Cohort B, 34% reported reaching this stage about six

months after completing the program. The study did not provide sufficient evidence to explain the differences between the cohorts.

- **Occupational mobility.** Among Cohort A participants, 40% reported being promoted to a new position about six months after completing the program, and this percentage rose to 55% one year after completion. Among Cohort B participants, 28% reported being promoted within about six months of completing the program.
- **Areas for further development.** Participants called for greater emphasis on practical application and more in-depth coverage of the community, continuity of care, and management tools, along with opportunities to become more familiar with central administrative units and decision-makers.

## Limitations and Future Directions

The evaluation findings indicated a perceived contribution of the Neta program to developing participants' understanding of leadership, broadening their systems perspective, acquiring knowledge and tools, and networking. The findings also indicated progress in implementing change projects and promotion after program completion. However, because the study relied on self-reports, lacked a comparison group and direct measurements before training, had a low response rate among supervisors, and covered a short follow-up period, the observed changes cannot be attributed solely to Neta. Thus, the program's broader and longer-term effects at the organizational and healthcare system levels cannot be assessed.

Based on the evaluation findings, we recommend the following action items:

- Expanding the focus on the community, continuity of care, and cooperation between organizations
- Strengthening the practical component by allocating more time to practice, individual guidance, and work on change projects
- Deepening the involvement of direct supervisors, senior managers, and decision-makers
- Maintaining and developing the alumni network through follow-up meetings and learning communities
- Continued follow-up with program graduates to assess the change projects' progress, occupational mobility, and longer-term organizational and system-level effects.