Learning from Excellence
Community Event

A call to learn from what goes well in healthcare

Programme  16 November 2017
Welcome

On behalf of the Learning from Excellence team, West Midlands Patient Safety Collaborative and Appreciating People, we would like to welcome you to our first Learning from Excellence Community Event.

The interest we have received in the lead up to today’s event has been brilliant and we would like to thank you for registering your interest and being here today.

Since LfE was implemented in 2014, the initiative has grown from an idea to a social movement. As the initiative spreads and takes roots in different centres, it is important to create and maintain links between all the participants.

Today’s event will bring together like-minded teams and individuals from across the NHS to start a formal Community of Practice around LfE. The conference will comprise a whole day of networking, punctuated by short provocative presentations from our invited speakers.

The main aim of this meeting, and the community of practice, is to allow us to learn from one another, through sharing of experiences and ideas, whilst maintaining the original aims of the initiative: to improve quality of care and to improve staff morale through positive feedback.

We believe that studying excellence in healthcare can create new opportunities for learning and improving resilience and staff morale. We want to encourage this approach in healthcare and we aim to enable other health organisations in the region and nationwide to adopt Learning from Excellence and Appreciative Inquiry in their work of practice.

Finally we would like to extend our thanks to Appreciating People, for coaching us in the art of Appreciative Inquiry; our invited speakers, for sharing their wisdom; and the West Midlands Patient Safety Collaborative, for sponsoring this event and many of the LfE activities and growth.

We hope you have a fantastic day.

Please get involved either through discussions with your neighbours, visiting the poster presentations and information stands, or questions to our speakers and faculty. If you are on Twitter, don’t forget to use the hashtag #LfEConference and tweet your videos and photos from the day. Please stay in touch with us when you get back to work and keep us posted on your Learning from Excellence and Appreciative Inquiry projects.

Adrian Plunkett, Consultant Paediatric Intensivist at Birmingham Children’s Hospital and Emma Plunkett, Locum Consultant Anaesthetist at University Hospitals Birmingham NHS Foundation Trust.
What is Learning from Excellence?

Learning from Excellence is a philosophy built on the idea that we can learn as much from what goes well as we can from what goes wrong. In practical terms, LfE comprises a very simple peer-reporting system for capturing excellence, alongside Appreciative Inquiry (or appreciative interviewing) to explore and understand this excellence.

The subject matter of LfE is not exclusively rare episodes of excellence – in fact, we have found that the majority of excellence reports are focused on everyday activities. The reports are like short stories of excellent moments or “everyday excellence”. As the initiative has developed, we’ve come to realise that tapping into these episodes of everyday excellence can lead to a richer understanding of our day to day work. This can open the door to understanding what works well in the “system”, by shining a light on our strengths and assets. Whilst the traditional approach to safety in healthcare is to avoid harm and error, LfE allows us to capture and understand a hitherto unstudied part of our system.

LfE was originally designed as the “antidote to incident reporting”, in order to help offset some of the negativity associated with adverse incident reporting. But in practice, LfE is a complementary approach to the traditional approach to safety and quality improvement. LfE does not necessarily comprise a single methodology, but we advocate a simple reporting system in combination with Appreciative Inquiry and appreciative interviewing.

Other “versions” and iterations of positive reporting exist throughout the NHS – e.g. FERF, excellent incidents and others. Although there is some variation in how these initiatives are delivered, there is a single philosophy underpinning all these endeavours. We now have an exciting opportunity to bring them together into a single Community of Practice. The envisaged core aims of this community are consistent with the core aims of LfE: to improve quality of care, through identification and amplification of our strengths; and to improve staff morale through appreciation and positive feedback.

These are some of the steps used for Learning from Excellence and Excellence Reporting (ER).

1. **Collaborate:** Share the concept with colleagues
2. **Report:** Excellence Reporting (ER) could be via paper, web form, voicemail or app
3. **Feedback:** Send a copy of the report to the reporters and recipients
4. **Learn:** Select some reports to study in more detail LfE approach: interview with ER reporter/recipient using Appreciative Inquiry (AI) methodology.
   - **Define:** Topic & purpose
   - **Discover:** What happened & how
   - **Dream:** Imagine what could be
   - **Design:** How to amplify excellence
   - **Destiny:** Co-creating positive change
5. **Share:** Share widely what you have learned through your ERs & AI meetings
6. **Amplify:** The 4 E’s of Excellence Quality Improvement: Explore, Engage, Enhance and Evaluate
7. **Nurture:** Grow and develop your project

If you would like to find out more information about Learning from Excellence, visit: www.learningfromexcellence.com.
Programme for the day

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<th>Time</th>
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<td>09:00</td>
<td>Registration</td>
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<tr>
<td>09:30</td>
<td><strong>LFE: The Story so Far</strong></td>
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<td>10:00</td>
<td>Appreciative Conversations on Excellence</td>
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<td>10:15</td>
<td><strong>Suzette Woodward:</strong> Safety II</td>
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<td>10:45</td>
<td>COFFEE</td>
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<td>11:15</td>
<td><strong>Neil Spenceley:</strong> Workplace Culture</td>
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<td>11:45</td>
<td><strong>Andy Bradley:</strong> LFE, The Antidote to Shame</td>
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<td>12:15</td>
<td>LUNCH</td>
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<td>13:15</td>
<td>How we set up LFE systems (Q&amp;A with poster presenters)</td>
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<td>14:10</td>
<td><strong>LFE: What’s Next?</strong></td>
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<td>14:30</td>
<td>Community Connections, Compassion Circles (and COFFEE)</td>
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<td>15:00</td>
<td>Appreciative Conversations on co-creating</td>
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<td>15:15</td>
<td><strong>Chris Turner:</strong> The Importance of Civility</td>
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<td>15:45</td>
<td>Summary and Close</td>
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Profiles of speakers:

**Dr Suzette Woodward,**
Director of Patient Safety, National Patient Safety Agency and National Campaign for Safety II, NHS England

Dr. Suzette Woodward, Dprof, MSc, PGDMS, RSCN, RGN is an internationally respected patient safety expert who has a background in paediatric intensive care nursing. She’s worked for 35 years in the NHS, the last fifteen years at a national level in Patient Safety. She earned a Doctorate in Patient Safety which won the prize of the year and built upon the knowledge gained in an MSc in Clinical Risk.

Her current role is National Director of Sign Up to Safety campaign; leading on behalf of the Secretary of State for Health in England. At an international level, she has worked with WHO and health ministries across the world. She has been named as one of the top 50 inspirational women in the NHS in 2013; top 50 nursing leader in 2014 and top clinical leader in the NHS in 2015.

**Dr Emma Plunkett,**
Consultant Anaesthetist

Emma is a Locum Consultant Anaesthetist at two NHS Foundation Trusts in Birmingham. Her main clinical interests are obstetric anaesthesia and pre-assessment for surgery.

In 2015, Emma introduced the concept of Learning from Excellence at University Hospitals Birmingham and she is working with the West Midlands Patient Safety Collaborative to raise awareness of LfE and to develop a community of practice around it.

She has recently trained in Appreciative Inquiry and is learning to apply its principles at work and at home.

**Dr Adrian Plunkett,**
Consultant Paediatric Intensivist

Adrian has been a Consultant Paediatric Intensivist at Birmingham Children’s Hospital since 2009, and is the current Clinical Lead for PICU. He founded Learning from Excellence at BCH in 2014 and has supported its introduction in many other organisations.

He is leading the positive reporting and Appreciative Inquiry in Sepsis [PRAISe] study.
a Health Foundation funded QI project.

Clinically, Adrian’s main interests are advance care planning, palliative care, epidemiology, metacognition and improving the management of children with severe sepsis and septic shock.

**Peter Jeffries, Patient Safety Programme Manager, West Midlands Patient Safety Collaborative**

Peter joined WMAHSN after working at Birmingham Children’s Hospital NHS Trust as the Chief Medical Officer’s Senior Projects Manager. He was part of the team at Birmingham Children’s Hospital working on safety in clinical handover as part of the Health Foundation’s Safer Clinical System Programme.

He has worked in acute trusts in the West Midlands since 1997 in a number of roles, including in operational management, strategy and service improvement. Peter has programme and project managed a number of significant service improvement, quality and safety projects.

**Dr Chris Turner, Consultant in Emergency Medicine**

Chris is a Consultant in Emergency Medicine, working in a tertiary trauma centre in the West Midlands. He feels passionately about the importance of civility in medicine and has been working hard to increase awareness of its impact.

Over the last 10 years of investigating incidents he has come to believe in people rather than processes. He is a passionate believer in evidence based improvements, trusting in professionalism and that making the workplace better for staff makes it better for patients.

**Andy Bradley, Founder, Frameworks 4 Change**

Andy sees Learning from Excellence as powerful because it focuses on the recognition and appreciation of excellence enabling people to continually cultivate the ground for success and to be resilient to the inevitable challenges that emerge.

Andy is interested in exploring the pride that is integral to the Learning from Excellence process and the potential for this pride to be the antidote to shame. For Andy’s work on the flow of compassion in health and social care in the UK and the US, he is recognised by NESTA and The Observer Newspaper as one of Britain’s most Radical thinkers.

**Dr Neil Spenceley, Consultant Paediatric Intensivist**

Neil has been the Clinical Lead for the Paediatric Intensive Care Unit in Yorkhill Children’s Hospital since 2012. Following Undergraduate Medical training in Edinburgh, he moved to the West of Scotland to pursue a career in paediatrics. While working for the Newborn Emergency Transport Service in Sydney, Australia, he developed an interest in PICU and subsequently trained in the specialty in the West of Scotland. After completing a fellowship in Vancouver, he returned in 2007 to become a Consultant.

Neil’s interests include oxygen delivery, cardiac critical care and transport. His other main interest is patient safety and he is a Fellow of the Scottish Patient Safety Programme.

**Suzanne Quinney, Appreciating People Co-Director**

Suzanne is an Organisational Development Practitioner, specialising in a strength based approach to change. She is an experienced facilitator/trainer and event organiser, and practiced in the use of World Cafe and Open Space Technology.

She offers seminars and masterclasses on Appreciative Inquiry and Positive Psychology, and organisational learning. Co-Author of highly recommended training resources and articles on Appreciative Inquiry, she speaks at national events and international conferences. To date, she has collaborated with the West Midlands Patient Safety Collaborative in training 20 cohorts of NHS staff and six groups of staff from Care Homes.
Poster presentations

Here are a list of all the posters that will be on display at today’s conference highlighting how healthcare organisations across the country are using LfE/AI.

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<tr>
<th>Title</th>
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<tr>
<td>Learning from Excellence [LfE] launch in maternity at Heart of England NHS Foundation trust.</td>
<td>Hayley Butler</td>
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<td>Introducing a Learning from Excellence pilot scheme in a busy Radiotherapy Department</td>
<td>Michelle Bradley &amp; Rebekah Knight</td>
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<td>Learning from Excellence in Salford Royal Critical Care</td>
<td>Louise Dean</td>
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<td>Quality Improvement Methodology to Improve Learning from Excellence at Plymouth Hospitals NHS Trust</td>
<td>Gemma Crossingham</td>
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<td>Learning from Excellence in the Royal Hospital for Children Theatre Suite, Glasgow</td>
<td>Alyson Walker</td>
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<td>PRAISE: Promoting Appreciative Inquiry – Striving for Excellence at Great Ormond Street Hospital</td>
<td>Peter Sidjwick</td>
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<td>A Quality Improvement Approach to Learning from Excellence in Walsall Healthcare</td>
<td>Hesham Abdalla</td>
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<td>Excellence reporting at Chelsea and Westminster Hospital</td>
<td>Tessa Davis</td>
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<td>Sharing Outstanding Excellence [SOX] at Salisbury NHS Foundation Trust</td>
<td>Anna Woodman &amp; Katrina Glaiser</td>
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<td>Excellence on Tour</td>
<td>Lisa Pritchard</td>
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<td>You’re Greatix - Implementing Excellence Reporting across a Major Trauma Network and a Teaching Hospital Trust</td>
<td>Anna Greenwood</td>
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<td>Introduction of Excellence Reporting to City Hospitals Sunderland: The first six months</td>
<td>Sarah Gibb</td>
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<td>A Staff Morale Survey and the introduction of Excellence Reporting on Southmead Central Delivery Suite [CDS].</td>
<td>Sophie Scutt</td>
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<td>From incidents to excellence in Western Australia</td>
<td>Sarah Gibb</td>
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<td>Cambridge Community Services [CCS] Audit of the Greatix reporting system used as a pilot for 12 months (March 2016 – March 2017)</td>
<td>Arden Dierker Viik</td>
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<td>A Grand Design</td>
<td>Karen Johns</td>
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<td>The Impact of Learning from Excellence and AI training on Organizational Performance in Healthcare – A Protocol.</td>
<td>Maartje Kletter</td>
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<tr>
<td>Positive Reporting and Appreciative Inquiry in Sepsis [PRAISE] – a quality improvement project protocol.</td>
<td>Alison Jones &amp; Adrian Plunkett</td>
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<td>Knowledge sustainability through process visualisation</td>
<td>Tom Rose</td>
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<td>Caring For Carers</td>
<td>Jane Pollock</td>
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<tr>
<td>Us and them, me and you, we. Regulatory relationships in care homes</td>
<td>Edel Roddy</td>
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<td>Compassion fatigue and self-compassion in acute medical care hospital nurses</td>
<td>Kate Upton</td>
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<td>Learning from positive practices</td>
<td>Marianne Patterson</td>
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<td>Co-creation</td>
<td>Angela Green</td>
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There will also be stands on the following topics:

- Nic Blackwell on Communities of Practice
- SPACE
- AHSN Network
- Learning from Excellence
- Reflections Book Launch
- Vox-Pop filming/interviews
- Compassion Circles
Appreciative Inquiry is a rich and rewarding philosophy and an immensely practical process which can be incorporated into your work (and life) in many ways - ranging from just changing your questions and making them both more curious and more appreciative, to new ways of doing things like team building and strategic planning. It is about noticing and building upon our strengths and assets – doing more of what works, what enlivens and supports us.

These are the key assumptions behind AI:
1. In every situation something works… find it and let it flourish.
2. What we focus on becomes our reality... if we focus on possibilities we find possibilities – if we focus on problems we find problems.
3. There are always multiple realities – different ways of seeing.
4. The way we ask questions either creates or denies possibilities. So be mindful how we do this.
5. The language we use creates our reality.
6. When we carry forward to the future some of our old ways - then they should be the very best of our old ways.
7. Value differences – diversity nourishes creativity and resilience – seek it out and welcome it.
Here are some quotes from LfE participants who participated in AI training:

I have learnt........
✔️ To Listen deeply, our actions have an impact on the situation and on others;
✔️ To worry less about the problems/challenges - by focusing on strengths/positives we can really improve
✔️ that the benefits of positivity are innumerable - the answer is in the room
✔️ about a refreshing approach to enhancing the culture across out teams, and doing this with colleagues who will help to champion this is really valuable!

By closely examining excellent practice, you are looking at what has worked brilliantly. In-depth questioning about what made it work so well can help others understand how to repeat it. Whilst going through these details of excellent practice, the skills and abilities used should be identified, named and given to the person who accomplished it. Once these skills are named and accepted by the person who performed them, they then become a resource to that person, as well as a learning item for the observers.

There are a number of well documented benefits of using AI, most notably:

- The emphasis on ‘building on what works’ and on people’s strengths.
- The assumptions lying behind it, and its generativity
- The way it encourages co-creativity and co-design, and is whole system.
- Fostering solutions and actions that are “owned”.
- It encourages people and organisational resilience and well-being.
- It overlaps with and supports many of the characteristics of Safety II environments.

Suza Trajkovski, a Specialist Neonatal Nurse and Academic at the University of Western Sydney, Australia, asserts and demonstrates the power of AI as a healthcare research approach which moves beyond (negative) problem-focused towards positive inquiries.

Her conclusion is that AI is an “engaging, inclusive, and collaborative” way of exploring issues pertinent to healthcare, especially so because it aligns neatly with the current health sectoral interest in the Safety II paradigm. Indeed, if you work within the healthcare sector, can you think of a reason why you should not be appreciative in your approach?