09.15 **WELCOME**

09.30

A BETTER WORKFORCE CULTURE

Camilla Kingdon, Consultant Neonatologist and President RCPCH
Alex Gillespie, Associate Professor, department of Psychological and Behavioural Science, London School of Economics

10.30am break

10.45

SUPPORTING EACH OTHER

Dhruv Parekh, Consultant Intensivist, University Hospitals Birmingham
Hena Syed-Sabir, Psychologist, Birmingham Women's and Children's NHS FT

11.45am break

12.00

INSPIRATION AND JOY

Dr Glaucomflecken, comedian and Ophthalmologist
Frank Turner, musician

1.00pm break

13.30

PUTTING AI INTO PRACTICE

Margaret Moore, Co-founder and chair of the Institute of Coaching
Lindsey Godwin, Robert P. Stiller Chair of Management & the Academic Director of the Cooperrider Center for Appreciative Inquiry at Champlain College
The "TREX" team, Thames Valley Reporting Excellence Team

2.45pm break

15.00

BEING SAFER TOGETHER

Don Berwick, President Emeritus and Senior Fellow, Institute for Healthcare Improvement
Suzette Woodward, Patient Safety Advisor

16.30 **CLOSE**

POSTER SESSON ONE: Early Morning & Lunch Breaks

1.1 **YOKOTEN Sessions - Boundaryless sharing, learning, and celebrating excellence** Claire Knibb

1.2 **Paediatric GLEE (Greatix, Learning from Excellence Everywhere) Project** Maeve Murray

1.3 **Learning From Excellence: Improving the wellbeing of the scheme users AND providers** Emily Skinner

1.4 **Praise You Like I Should: Introduction of Learning from Excellence (LfE) to Temple Street PICU** Sean Casey

1.5 **Giving praise - is it an instant reward? Praise based intervention in a hospital theatre department** Róisín O'Sullivan

1.6 **Priming the pump of excellence reporting : What worked for us** Ifeyinwa amene

1.7 **I can’t stop smiling – Feedback from implementing LfE in a maternity department using a QI approach** Paryaneh Rostami

1.8 **Setting up an excellence system shouldn't be this hard**! Jessica Scott

1.9 **Learning from Excellence Implementation in the Children's Hospital at Dartmouth Hitchcock's ICN** Corinne Lizotte

1.10 **Learning from Excellence: A National Quality Improvement Team's Story** Jonathan O'Reilly

1.11 **Implementation of an excellence reporting system (GREATix) in theatres** Laure Martin

1.12 **Learning from Excellence: a Qualitative Thematic analysis of staff-reported work-placed excellence from 2 NHS Trusts** Helen Ord

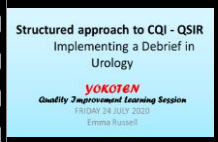
YOKOTEN:

A Platform to Share Learning from Excellence, Innovation and Achievements

Ground-breaking introduction of interactive Yokoten Sessions into the Healthcare setting

NHS
Kettering General Hospital
NHS Foundation Trust

*YOKOTEN SHOWREEL: Examples of presentations shared at previous Yokoten Events



Our Inspiration

Yokoten: a Japanese word for 'learning through lateral spread' or 'transfer of knowledge and practices from one operation to another', used mainly in automotive manufacturing and supports sharing improvements and best practice from one part of the workplace to all

Aim to Discover

July 2020, we developed regular Yokoten sessions at Kettering General Hospital NHS Foundation Trust to provide a platform for organisation-wide learning from and celebrating of excellence.

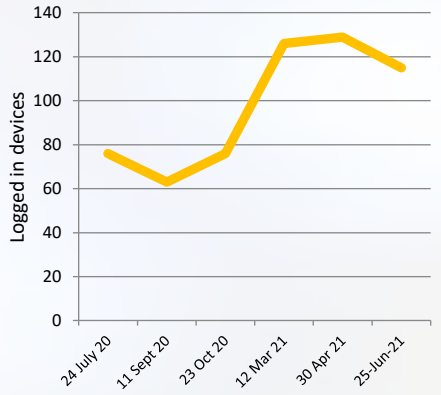
Yokoten aspires to be: credible, inclusive, accessible, non-onerous, and **fun**

'Share your sparkle so the whole of KGH can shine'

Design and Concept

Focus on…	…to achieve
Patient first commitment	Aligning our 'True North'
Small individual ideas to complex multidisciplinary projects invited	Promoting a positive culture of continuous quality improvement
Including initiatives which did not go well initially, but 'turned it around'	Encouraging ownership, learning from experience, accountability
Sharing of QI initiatives widely	Replicating best practice
Multidisciplinary interaction	Generate new ideas to refine projects
Organisation-wide engagement	Promotes networking and inclusivity
Clinical & non-clinical, frontline & behind the scenes teams presenting together	Demonstrating collaborative working
All healthcare providers and regulators being welcome to attend	Sharing our commitment to Quality & Safety
Presenting to a large and diverse audience	Enhanced confidence and exposure
Celebrating success, progress and awards	Improved staff morale through appreciation
National and international guest speakers and special events	Learning from experts

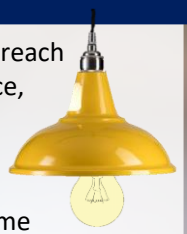
Attendance



Unexpected Benefits

- ✓ Building individual and organisational resilience and staff morale
- ✓ COVID enforced virtual hosting facilitated the ability to reach a wider, diverse audience
- ✓ Creating positivity, buzz & bonding (breaking traditional boundaries) amongst all staff and proving to be a culture change tool
- ✓ Positively impacting on enhancing confidence of our service users as communication Team use Yokoten platform as a tool to identify positive stories
- ✓ International adoption in healthcare through social media and networking

Delivery



- Hosted via MS Teams, allowing unlimited reach
- Diverse far-reaching system-wide audience, including our regulators CQC and NHSE
- GDPR compliant
- 6-8 presentations per session
- Formal and informal presentations welcome
- 'Short and Sweet' – average of 3 slides per presenter
- Interactive format, real time Q&A and via chat box,
- Earlier session recording made available to all staff

Learning from Excellence

Boundaryless Yokoten has provided an opportunity for all staff groups; clinical and non-clinical, across the whole organisation from frontline to back office and up to the Board to come together and talk about their/team's proud moments at work, their successful and not so successful quality improvement initiatives.

The Dream…

- Increase in frequency of Yokoten events without compromise of quality
- Waiting list of presenters/projects to showcase excellence, including external healthcare providers
- Yokoten 'Show reals'/Bitesize Specials/Highlights/ Tic-toc videos to support further learning through sharing and spread – 'Grab and Go'
- Creation of supporting newsletter highlighting excellence, positivity and shared learning
- Continued positive staff feedback reporting how Yokoten continues to inspire, and drive improvement in delivering excellence in patient care

Dedicated to excellence

Author: Dr Rabia Imtiaz, Interim Medical Director & Claire Knibb, CQI Project Manger

Northern Health and Social Care Trust

Care • Compassion • Community

Paediatric Glee (Greatix – Learning from Excellence Everywhere) Project

Emma Barbour, Pharmacist and Maeve Murray, Paediatric Practice Educator. NHSCT

Discover

- We are excellent at:
  - Reporting incidents
  - Learning from them

BUT..

- No formal system to:
  - Enable learning from good practice
  - Say thanks and spread GLEE!

Dream

- Anonymised way to let colleague know they have done a great job
- Quality Improvement methodology to improve process
- Interrogate and report findings
- New opportunity for learning and improving staff morale
- Focus on including EVERYONE

Design

- Questionnaire to staff examining morale
- Oversight group of multidisciplinary representatives convened
- Resources developed to support reporting and data collection
  - Nominee Letter and GREATix Certificate
  - Greatix email and database
- Piloted, then rolled out throughout Paediatrics

So far…

- 100+ nominations to date (over 12 month period)
- 20 different themes coded - most prevalent:
  - Going over and above
  - Child and family at centre of care
- Nomination example:

Staff member the first to teach and implement a new policy to support a child with a new method of feeding to return to school.

Destiny

- Regular Paediatric Newsletter
- Learning presented trust wide
- Developing new processes to collate data more easily
- Support other areas in trust to implement
- Improve reporting system – Look at a Regional electronic system for all areas in all trusts in Northern Ireland

Nominees gleefully tell us..

Receiving this nomination has made my day/week/month

This means more than you will ever know….

Made me feel good about myself

…..over the moon someone took the time to say thanks

I am genuinely touched and grateful

Email:
emma.barbour@northerntrust.hscni.net
maeve.murray@northerntrust.hscni.net
Twitter: @emmabarbour7 / @maeveymint

Working together · Excellence · Openness & Honesty · Compassion

#teamNORTH

Learning From Excellence: Improving the Wellbeing of the Scheme Users ***and*** Providers

Dr Katherine Drewek and Dr Emily Skinner Contact: emily.skinner3@nhs.net

DISCOVER

The LFE scheme was launched in May 2020 in our paediatric department at St. Helier Hospital to improve **wellbeing** during the Covid-19 surge.

A survey at 4 months reported improvement in **morale, teamwork,** and **patient safety.**[1] Due to its popularity we expanded to include more staff groups and collaborated with colleagues at our Epsom site.
We received over 250 nominations during a 15-month period.

The Problem: With increasing nominations, our system of processing email and paper forms, creating certificates, and sending a monthly bulletin proved very **time-consuming** for our team.

DREAM

An **efficient** system that multiple departments will want to employ.

LFE members will spend their time reviewing **themes of excellence** and sharing these with others, rather than admin.

Repetitive & boring tasks will be automated.

DESIGN

An online reporting system led to a significant **workload reduction** in processing nominations.

We created a computer program which can generate and automatically send certificates to nominees in **under 4 seconds per recipient!**

DESTINY

We have presented at Trust-wide meetings and are collaborating with our Patient Safety Manager.

We hope to **share** our process with other LFE teams and encourage efficiency.

1. Skinner *et al.* (2021) 'Learning From Excellence: Sharing Success, A Quality Improvement Project.' *Arch Dis Child.* 106: A326 – A327

Praise You Like I Should: Introduction of Learning from Excellence (LfE) to Temple Street PICU

S. Casey, L. McIlmurray, O.McGowan, K. Gilleese, H. Bruell, S. O'Keefe, R. Cunney, J. Fitzsimons
PICU, Children's Health Ireland at Temple Street, Dublin

Discover

- Performance assessment in healthcare traditionally uses a Deficit-Focused approach
- Everyday excellence is often overlooked, missing opportunities for learning and negatively impacting staff morale
- LfE is designed to redress that balance, by learning from positive events

Dream

To use Learning from Excellence (LfE) to achieve 4 interdependent aims;

1. Increase deliberate recognition of excellence among PICU staff (target >50%)
2. Increase staff morale (target self-reported levels >50%)
3. To better understand what staff value as excellent/important
4. To share learning points from excellence reports at weekly staff meetings

Design

An MDT of LfE Champions was assembled from all sectors of our PICU staff

1. An electronic LfE reporting system was designed using QR code cards (Figure 1)
2. An LfE poster board was installed to educate staff and demonstrate anonymised reports
3. LfE reports are explored at weekly department safety huddles
4. Pre- (n= 82) and post-implementation (n= 49) surveys were conducted (Table 1)

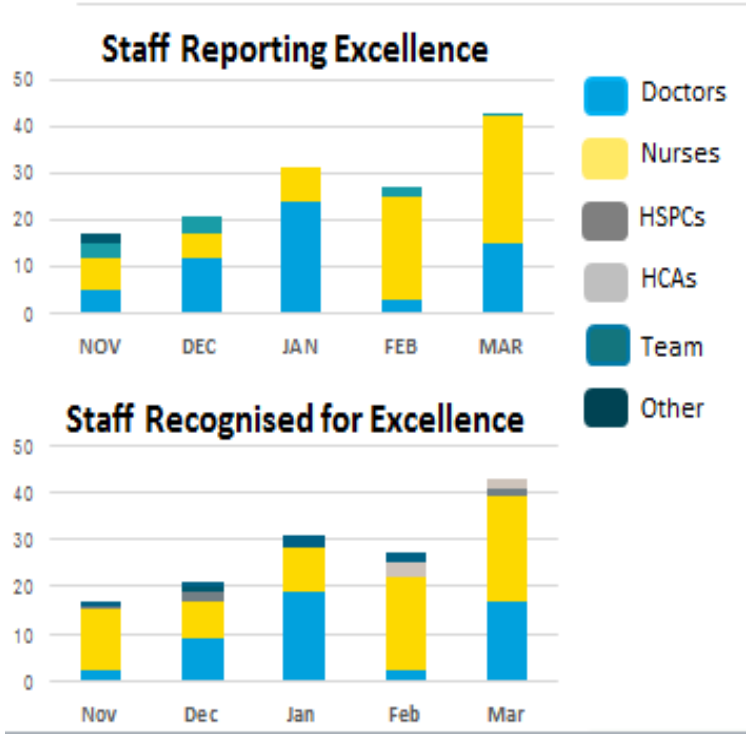
Figure 1. LfE QR Code Card

Figure 2. Sample LfE Certificate

Table 2. Survey Results summary

Survey Results
• 72% of staff have received positive feedback
• Significant improvement in staff morale (self-reported values increased from 27% to 59%)
• 98% staff feel LfE has had a positive impact

Table 1. LfE report issued



Destiny

Appreciative Inquiry
We aim to introduce AI structures when discussing LfE reports at safety huddles

Using LfE to target Specific Themes
E.g. Civility in the workplace

Expansion of LfE across all CHI Sites

Giving praise – is it an instant reward?
Praise based intervention in a hospital theatre department

R O'Sullivan, R Sun, R Dhesi.
St Mary's Hospital, Imperial College Healthcare NHS Trust.

Introduction

Being conscious of the pressure in healthcare recently, we performed a survey within our own theatre department in November 2020. We then introduced a praise-based intervention. Our follow up survey revealed some changes in attitudes and some lessons for how to deliver praise-based interventions.

Description

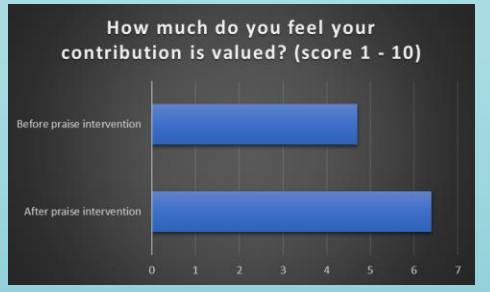
Our initial survey revealed that many respondents felt undervalued and were lacking motivation in work. We introduced one intervention: a system for nominating colleagues for great work. We encouraged staff to nominate colleagues for awards using the trust 'Make a Difference' scheme and distributed certificates and badges to staff who had been nominated.

Follow up survey revealed that morale had increased within the theatre department and that the degree to which individuals felt their contribution was valued had increased.

Poster with QR code for staff to nominate colleagues

Certificate received by nominees

When asked specifically about the impact of the awards. Nearly two thirds of staff who received an award reported that it increased their motivation and job satisfaction. Some staff reported that it did not affect, or even worsened, their motivation. Reasons cited were praise being given out too freely or not being specific enough, devaluing the awards given to people who have gone 'above and beyond'.



However, overall responses were positive, with participants indicating that they liked to be recognized for their work.

Discussion

Findings from our project are in keeping with the literature, which suggests that, in order for praise to be an effective motivator, it should be specific and contingent upon success[1]. In future we will develop a separate system for general praise and reserve announcements for an outstanding contribution to the department.

References

1. O'Sullivan R, Dhesi R. Giving praise: the instant reward. Anaesthesia News June 2021; 407: 10-11.

Priming the pump of excellence reporting (what did and didn't work for us)

Ifeyinwa Amene, Samsudeen Abdulwahab, Olaitan Elugbaju, Hannah Bolan, Rachel Larking, Subhra Thapa
UHCW ED

On changing to an internet/app-based approach, the excellence reporting system at the UHCW Emergency Department had suffered a significant reduction in reports. We wished to get some understanding of how we might raise the profile of this again.

We used appreciative inquiry to identify what was going well
-people like getting them
-the cards are pretty
and effort/impact assessments as to how we might improve the utilisation of the cards.

Future cycles

Our next identified cycles include larger posters , reintroduction of a paper based alternative and publishing an anonymous breakdown of the things people have been nominated for- the idea being that this will encourage those who are more data driven to see where value is perceived in the department.

Conclusions

The small steps we took to re-energise the brilliance box were successful, however we think they could have been even more so if we had made some minor changes (in italics below the cycles) to how we did them. As we approach winter we are excited about implementing our new changes

Cycle 1
personal, 1 to 1, discussions

if doing this again we would document how many discussions and also literally show people how to use the app.

Cycle 2
small posters (A4) created and distributed in staff areas

This had minimal impact. If doing this again we would make the posters A3 at least and get senior nurse buy-in to ensure they could be put up in staff areas.

Cycle 3
mentioning at morning handover

if doing this again we would get one of the staff who are involved to raise the profile of the programme as otherwise the message can be lost in the sea of other information being discussed.

“I can’t stop grinning” – Feedback from implementing LfE in a maternity department using a QI approach

Michelle Chunger, Sarah Keighley, Louise Dowell, Katharine Goldthorpe & Paryaneh Rostami

Blackpool Teaching Hospitals NHS
NHS Foundation Trust

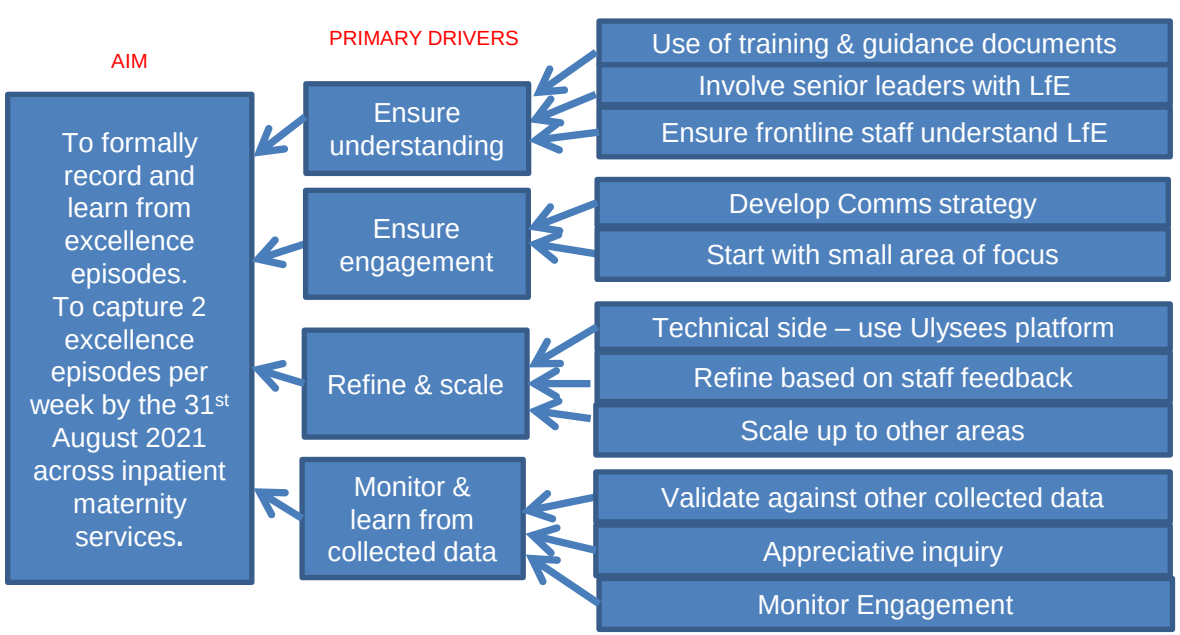
Discover:

- Staff feedback highlighted that safety improvement was **mainly reactive**, rather than proactive.
- Learning from Excellence (LfE) was implemented to ensure **better learning from what is going right.**

Dream:

- The aim was to **normalise** proactively learning from best practices, starting with the maternity unit.
- This unit was chosen because it had received one **of the highest inspection ratings in the Trust.**

Figure 1: Driver Diagram



Design: Using a QI approach, a driver diagram was developed (Fig.1). It was decided to focus on identifying episodes of excellence within case reviews **which already occurred**, rather than setting up additional meetings.

Feedback:

Positive feedback is nice to hear. It reminds staff that they do a good job **and after the last 18 months, I think staff need more praise**.

Receiving positive feedback was great, to see the spin round of **learning from what goes well (and) not always from what doesn’t.**

This **means a lot. I can’t stop grinning.** Really appreciate receiving this.

Destiny: We have received 16 episodes to date. The case reviews **were already identifying excellent practice**, but it was not being captured & fedback to staff. LfE reports have been **boosting morale**, as well as being used for **continuing professional development.**

Use of LfE is gradually being **scaled up** to more areas.

Moving from peripheral project to integrated governance: achieving System Sustainability in

Excellence Reporting

Why?

- Staff morale
- Patient safety
- Tonic to culture of incident reporting

Where?

- Pilot Secure Services
- Then Perinatal
- To whole Directorate

How?

- Started bottom up
- Then Senior Mgmt
- Resources allocated
- Marketing

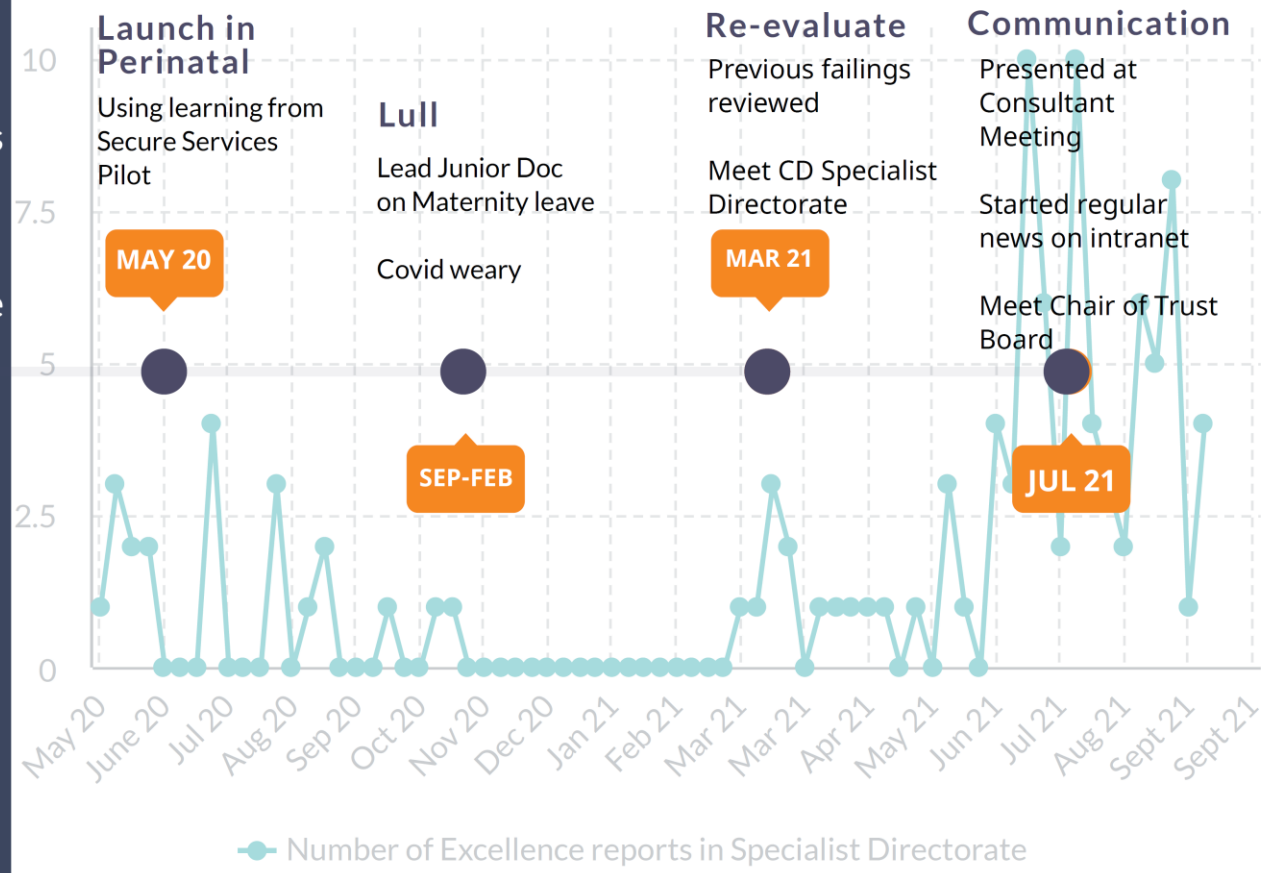
Dr Jessica Scott, CT3 Psychiatry;
Dr Jennifer Ledger CT3 Psychiatry;
Thomas Scobie, Business Administrator + QI Coordinator;
Dr Helen Smith, Consultant Forensic Psychiatrist.
Devon Partnership NHS Trust

Aim: For an Excellence Reporting system to be introduced & embedded into the Specialist Directorate at Devon Partnership NHS Trust so staff could as quickly & instinctively report excellence as they could an error.

Lots of enthusiasm about the potential...when it comes to logistics and sustaining the system, people's interest wanes.

As soon as staff get stretched it's the first thing to be abandoned; lack of time, lack of resources to sustain

We had to keep learning, keep reinventing.



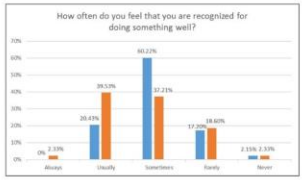
Learning From Excellence

Corinne Lizotte, RN; Lori Wood, RN; Tammy Lambert, RN; Tricia Fanjoy, RN; Rachelle Kleber, RN; Deb van Loon, RN; Aimee McFate, RN

" We can always choose to perceive things differently. We can focus on what's wrong in our life, or we can focus on what's right." -Marianne Williamson

WHAT'S THIS ALL ABOUT?

Learning from Excellence (LfE) is an approach to safety in healthcare developed by Dr. Adrian Plunkett that focuses on "what went well" as compared to our traditional reporting systems of focusing on failures to prevent recurrence



"Excellence is never an accident; it is the result of high intention, sincere effort, intelligent direction, skillful execution and the vision to see obstacles as opportunities."
-Anonymous

OUR TIMELINE

June 2019

-Survey to members of the ICN multidisciplinary team, asking how individuals like to be recognized and how they recognize others

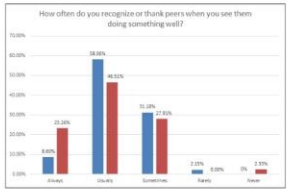
-A presentation about the concept of LfE was provided to staff

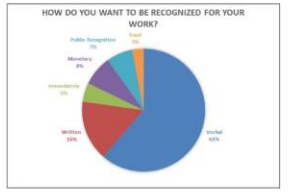
July 2019

-ICN Learning from Excellence Outlook e-mail account started and made available to staff to submit observations and recognition

February 2020

-Survey to staff to measure change in feedback and recognition practices, value of process





APPRECIATIVE INQUIRY

A method for reflection on a report

-What happened?
-What was it that made it happen?
-What were the challenges?
-How did it feel?
-How can we promote this excellence in practice?

LfE AIM: TO LEARN FROM WHAT GOES WELL IN HEALTHCARE

HOW DOES IT WORK?

-Email address is set up to receive feedback
-LfE member responds to all submissions, forwards reply to receiver and their supervisor
-LfE Committee meets monthly
-Review submissions and assign themes
-Choose one or two for appreciative inquiry

LfE AIM: TO BOOST MORALE THROUGH POSITIVE FEEDBACK

CELEBRATE JOY AT WORK

"...exceeded the expectations of a family experiencing a loss"

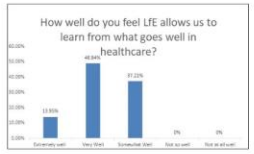
"...everyone worked as a team to admit unexpected triplets—you all rock!"

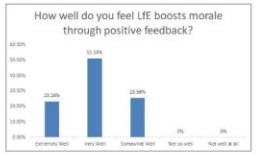
"I am in awe of the milk room team's work ethic and utmost attention to detail"

"...the folks on the carpentry and paint teams are nothing short of great"

OUTCOMES

-We have received 112 submissions
-Themes have included Patient Safety, Teamwork and a Willingness to Help
-Many examples of our peers "doing the right thing just because it's the right thing"
-Submissions have included multiple departments and disciplines





Children's Hospital at Dartmouth-Hitchcock

Learning from Excellence: A National Quality Improvement Team's Story

Authors: Jonathan O'Reilly, Senior Improvement Advisor, Elouise Johnstone, Senior Improvement Advisor, Healthcare Improvement Scotland

Introduction

GREATix is how we formally recognise excellence amongst our colleagues, provide positive feedback and say thank you.

Staff can nominate a colleague by scanning the QR code below and completing the small nomination form.

There have been 45 nominations submitted between September 2020 and August 2021.

Themes

Since July 2021 those who nominate are asked to select a theme to describe their nomination.

Theme categories are:

Leadership
2 nominations

Communication
5 nominations

Team working
9 nominations

Other:
Wellbeing

Link to report: https://bit.ly/2Vb8Pxw

Examples

'…shared the … collaborative project charter partially completed to help teams. This is a great idea and transferrable. Thanks.'

'Especially kind, understanding and with a very calm influence when things go a bit topsy turvy'

'…showed leadership and diligence when creating the … web pages and resources. Their hard work made us all look good'

Impact

'It's really made my week! Means a lot, especially in an area where I really don't feel I've done a good job so extra big thank you'

Positive feedback about excellence and recognising the contributions colleagues have made is now daily work.

Future

We plan to promote this approach through our 'Sharing Improvement Network' and other formal and informal networks, including a special 'Secret Santa Gift of Thanks' edition during December.

Implementation of an excellence reporting system (GREATix) in theatres.

Southern Health and Social Care Trust

laure.martin@southerntrust.hscni.net; greatix@southerntrust.hscni.net

Scottish Quality & Safety Fellowship

learning from excellence

Background

Learning from Excellence (LfE) is an innovation that focuses on capturing and learning from episodes of excellence in healthcare in an attempt to further improve the quality and safety of care we provide.

An excellence reporting system, GREATix, had been started in our theatres, from a desire to redress the balance of perceived negativity associated with incident investigations and learn from what was going well in our department. However, despite numerous examples of excellent practice, nominations were surprisingly infrequent (4/months).

Methodology

- Brainstorm sessions to agree on measures, driver diagrams and change ideas.
- Survey monkey to gauge thoughts from staff using or receiving GREATix.
- Weekly count of GREATix received and content entered into a database to analyse themes.
- 30 GREATix 'time to process' analysed after the 2 changes in reporting system (online form and App).

Process change

- Regular **feedback** presentations at the monthly patients safety meetings.
- Celebration **event** to thank staff for being 'GREAT'
- **Individual** contact to encourage reporting.
- Replacement of paper form by an **electronic form**.
- Introduction of an **App** to support the GREATix champions in processing each nomination.

Aim

To increase GREATix nominations to **8 a month by June 2020** to improve learning and enhance staff morale.

Results

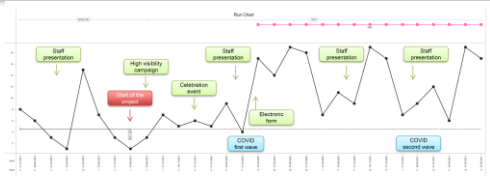


Fig 1. Number of GREATix nominated per month in theatres in SHSCT

- GREATix nominations are more frequent in theatres but are reliant on regular staff reminders at meetings, in newsletters or by individual contacts and have been affected at times of challenging working conditions (Fig 1).

Fig 2. Document sent to staff and management team that compiled all the GREATix sent in theatres, obstetric department and paediatric ward in 2020.

- All GREATix were collated into an electronic booklet and sent to staff (Fig 2).
- 'Team work', 'colleague support', 'leadership' and 'going above and beyond' are the most common themes.

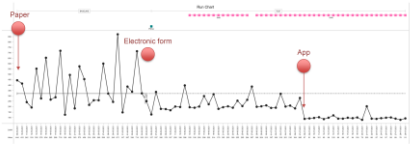
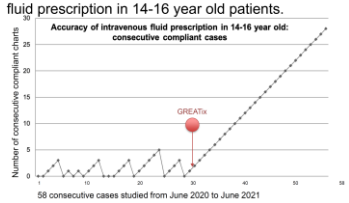


Fig 4. Time to process a GREATix nominations with paper form, electronic form and app.

- Reducing the time to process the forms (Fig 4) helps the champions to send the GREATix timely and allows a more efficiently use of their time.

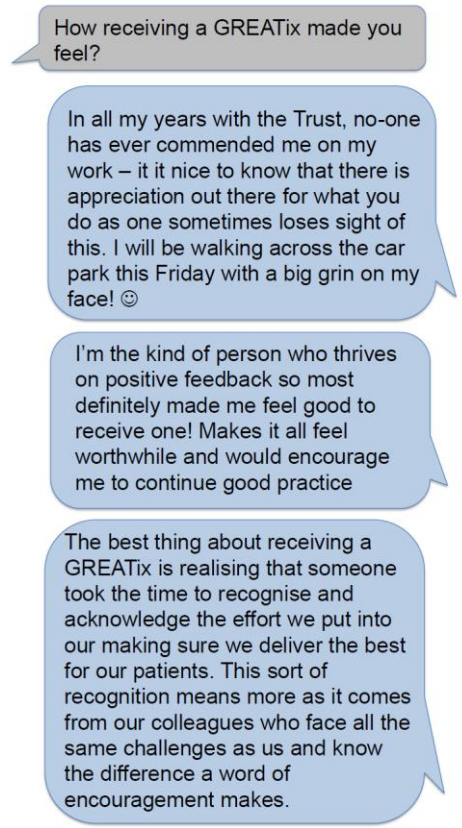
- All intravenous fluid prescription charts have been compliant after introducing GREATix (Fig 5) suggesting that **learning can be influenced by positive feedback**.

Fig 5. Use of excellence reporting (GREATix) as a tool to improve the compliance of the intravenous fluid prescription in 14-16 year old patients.



- Each GREATix nominations had a **positive impact on staff morale** (Fig 3).

Fig 3. Staff survey sent by text message that highlights the positive impact receiving a GREATix had on the staff morale and confidence.



Key learning

- **Recognition** is crucial to maintain staff morale and retention.
- **Electronic form** is easier to use but still not readily accessible for staff to nominate peers.
- Regular **reminder** for staff to nominate peers is necessary to maintain momentum.
- Processing the data received must be **less time** consuming to secure engagement from champions.

Next step

- Incorporate GREATix in the Trust **staff recognition strategy**.
- Include the **learnings** from GREATix in the 'Learning from experience' Trust reports to balance critical incidents and complaint forms.
- Development of a more **accessible** reporting system.
- Dedicated **support** staff to process the GREATix.
- Use of GREATix nomination as a **tool** for Quality Improvement projects: intravenous fluid prescription, sepsis 6 bundle, antibiotic stewardship.

References

Kelly N, Blake S, Plunkett A. Learning from excellence in healthcare: a new approach to incident reporting. *Arch Dis Child*. 2016;101:788–791

Zhang H. "How Do I Recognize Thee, Let Me Count the Ways". Thought Leadership Whitepaper, IBM Smarter Workforce Institute, 2015.

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@LaureMartin13

LEARNING FROM EXCELLENCE:

A qualitative, thematic analysis of staff-reported work-placed excellence from two NHS Trusts

H Ord, G Crossingham, F Hannon, D Viira, A Plunkett. University Hospital Plymouth NHS FT and Birmingham Women's and Children's NHS FT.

What we did:

We derived a TAXONOMY of EXCELLENCE by analysing 400 LfE reports from two centres.This built on work already conducted by the team at University Hospital Plymouth.

How we did it:

Each member of the team independently coded 200 consecutive reports from their local site (UHP and BWC), and identified themes using thematic analysis. We then compared and refined the list of themes identified in group meetings using an iterative approach to derive a TAXONOMY OF EXCELLENCE. Finally, we derived a list of over-arching themes.

What we found:

We identified 30 themes and FIVE OVER-ARCHING themes:

PRO-SOCIAL BEHAVIOURS including peer support, compassion

EXPERTISE & TECHNICAL SKILL including clinical expertise

POSITIVE WORK ETHIC including dedication and initiative

PERSONALISED PATIENT CARE including positive deviance & innovation

LEADERSHIP AND TEAMWORK including communication & adaptability

What does it all mean?

These five over-arching themes, and the associated taxonomy of excellence incorporate the behaviours, actions and processes that are recognised by frontline staff as exemplary in the delivery of healthcare.This taps into a previous un-accessed resource of staff-generated appreciative perceptions of what goes well in modern healthcare.

Potential applications of this data include utility in service design, education and staff-led quality improvement projects. Organisational support and recognition of this type of work, sends a message of staff support and an aspiration to deliver excellence in care, not just to avoid failure. This has potential to positively influence culture, staff engagement and morale.

POSTER SESSON ONE: Early Morning & Lunch Breaks

1.1 **YOKOTEN Sessions - Boundaryless sharing, learning, and celebrating excellence** Claire Knibb

1.2 **Paediatric GLEE (Greatix, Learning from Excellence Everywhere) Project** Maeve Murray

1.3 **Learning From Excellence: Improving the wellbeing of the scheme users AND providers** Emily Skinner

1.4 **Praise You Like I Should: Introduction of Learning from Excellence (LfE) to Temple Street PICU** Sean Casey

1.5 **Giving praise - is it an instant reward? Praise based intervention in a hospital theatre department** Róisín O'Sullivan

1.6 **Priming the pump of excellence reporting : What worked for us** Ifeyinwa amene

1.7 **I can’t stop smiling – Feedback from implementing LfE in a maternity department using a QI approach** Paryaneh Rostami

1.8 **Setting up an excellence system shouldn't be this hard**! Jessica Scott

1.9 **Learning from Excellence Implementation in the Children's Hospital at Dartmouth Hitchcock's ICN** Corinne Lizotte

1.10 **Learning from Excellence: A National Quality Improvement Team's Story** Jonathan O'Reilly

1.11 **Implementation of an excellence reporting system (GREATix) in theatres** Laure Martin

1.12 **Learning from Excellence: a Qualitative Thematic analysis of staff-reported work-placed excellence from 2 NHS Trusts** Helen Ord

09.15 **WELCOME**

09.30

A BETTER WORKFORCE CULTURE

Camilla Kingdon, Consultant Neonatologist and President RCPCH
Alex Gillespie, Associate Professor, department of Psychological and Behavioural Science, London School of Economics

10.30am break

10.45

SUPPORTING EACH OTHER

Dhruv Parekh, Consultant Intensivist, University Hospitals Birmingham
Hena Syed-Sabir, Psychologist, Birmingham Women's and Children's NHS FT

11.45am break

12.00

INSPIRATION AND JOY

Dr Glaucomflecken, comedian and Ophthalmologist
Frank Turner, musician

1.00pm break

13.30

PUTTING AI INTO PRACTICE

Margaret Moore, Co-founder and chair of the Institute of Coaching
Lindsey Godwin, Robert P. Stiller Chair of Management & the Academic Director of the Cooperrider Center for Appreciative Inquiry at Champlain College
The "TREX" team, Thames Valley Reporting Excellence Team

2.45pm break

15.00

BEING SAFER TOGETHER

Don Berwick, President Emeritus and Senior Fellow, Institute for Healthcare Improvement
Suzette Woodward, Patient Safety Advisor

16.30 **CLOSE**